California: Engaging the Public Health System in Collaborative Governance

With support from the Association of State and Territorial Health Officials (ASTHO), the National Association of County and City Health Officials (NACCHO), and the Centers for Disease Control and Prevention (CDC), NORC at the University of Chicago is compiling a series of promising practice reports highlighting successful practices in public health coordination on the state and local levels.

CALIFORNIA’S PUBLIC HEALTH SYSTEM
The public health system in California consists of the California Department of Public Health (CDPH) and 61 local health departments (LHDs). Within this decentralized public health system, 58 independent county health departments and 3 independent city health departments set their own budgets, establish taxes and fees for public health, and issue public health orders without state approval. Coordination between CDPH and the LHDs occurs primarily at the health officer level, between the state health officer and local health officers from each jurisdiction; however, CDPH also coordinates with program staff at the LHDs. Some programs have structured methods for coordination, while others engage in informal communication and coordination.

The California Conference of Local Health Officers (CCLHO) helps to facilitate communication among local health officers, as well as between the locals and the state health officer. CCLHO’s membership includes the state’s 61 local health officers. CCLHO was originally established by statute in 1947 to advise CDPH on all matters pertaining to public health and it continues to serve as a structured venue for the state to gather feedback from LHDs and to

NPHII HIGHLIGHTS
Three California health departments—the California Department of Public Health, the Los Angeles County Department of Public Health, and the County of San Diego Health and Human Services Agency’s Public Health Services—received cooperative agreements through the National Public Health Improvement Initiative (NPHII). They have used these funds to:

- Provide technical assistance to local health departments (LHDs) related to performance management, quality improvement (QI), and preparation for national accreditation. This includes hosting webinars and a summit.
- Develop a California Performance Improvement Management Network website as a repository of tools on QI, performance improvement, and accreditation.
- Work with the California Conference of Local Health Officers to help LHDs understand the impact on public health of meaningful use requirements of the Electronic Health Record (EHR) Incentive Program.
engage in discussion on health-related topics, including policy development and legislative and regulatory review. To support this interaction, CCLHO is staffed by CDPH employees who report to the state health officer. The state health officer meets monthly with the CCLHO Executive Committee, which consists of a subset of local health officers, and he also holds monthly meetings with the CCLHO Board of Directors. To foster communication among local health officers, CCLHO convenes semiannually. There are also five CCLHO Committees that meet regularly to consider issues in chronic disease, communicable disease, emergency preparedness, environmental health, and health information and data. Committee members include select local health officers as well as CDPH staff; thus, CDPH may also work closely with the Committees on certain issues.

Dr. Wilma Wooten, San Diego County’s health officer and CCLHO President, commented that “the state and locals have a good relationship—at least from my perspective—the relationship there is strong.” As the primary venue of communication between the state and local levels, CCLHO’s structure has enabled a productive and beneficial relationship between LHDs and CDPH. In turn, CDPH is committed to providing support to and coordination with California’s LHDs.

**National Public Health Improvement Initiative (NPHII) Funding**

With funding from the Centers for Disease Control and Prevention (CDC), through the National Public Health Improvement Initiative (NPHII), three of California’s public health departments—CDPH, Los Angeles County Department of Public Health (LACDPH), and the County of San Diego Health and Human Services Agency’s Public Health Services (PHS)—have collaborated to strengthen the public health system by focusing on quality improvement (QI) and performance management activities. The ultimate goal of these efforts is to improve the delivery and impact of public health services. Prior to receiving funds, CDPH had been engaged in strategic planning for performance management; the funding has enabled CDPH to work with LHDs in these areas as well. Similarly, Dr. Wooten explained that performance management is a key component of San Diego PHS’s operations; the NPHII grant has allowed the health department to “enhance what we were doing already.”

To support LHDs that are not direct recipients of NPHII funds, CDPH has dedicated a portion of their cooperative agreement dollars to educate and inform local public health staff about QI and performance management. They also plan to provide technical assistance to LHDs that ranges from onsite interaction to online training webinars. LACDPH is also using some NPHII to support QI and performance management within the Long Beach Department of Health and the Pasadena Public Health Department’s jurisdictions—two independent health departments that serve cities located within LA County.

NPHII funds from CDPH, LACDPH, and San Diego PHS are also supporting preparation for national, voluntary accreditation throughout California. CDPH has engaged in planning for development of a strategic plan, a prerequisite for national accreditation. CDPH has also supported LHDs in accreditation preparation activities, for example, by providing guidance and support for community health improvement plans and health assessments. To coordinate the NPHII-funded activities, CDPH, LACDPH, and San Diego PHS hold regular biweekly calls. The collaborative accomplishments of the three NPHII-funded health departments are described below.

**Accomplishments**

To advance accreditation-preparation activities, NPHII funds are being used to host the Performance Management, Quality Improvement and Public Health Accreditation Summit in May 2012. The summit is jointly hosted by CDPH, LACDPH, and PHS; CCLHO has also engaged in planning efforts. The summit will provide education, guidance, and practical training to the 61 local health departments in California—while understanding that health departments may have different levels of preparation. Emily Peach, Performance Improvement Manager at LACDPH, explained that the summit is the “main starting point to coordinate accreditation at the
state level.” In addition, the summit precedes a semiannual CCLHO meeting that will focus on the three accreditation prerequisites—the community health assessment, health improvement plan, and strategic plan.

CDPH, LACDPH, and PHS are also jointly contributing NPHII funds for development of a California Performance Improvement Management Network website. Once completed, the website will be a central repository of tools for LHDs, including documents and templates for QI, performance improvement, and accreditation. CDPH plans to use the website to share information about accreditation and tools that come out of the summit, and the website may also host sample QI plans or other planning resources. To plan the website, a subset of LHD representatives and other stakeholders convenes biweekly. Continuous communication has helped to ensure that progress is made on the initiative. Since the website is not yet up and running, the stakeholder group has implemented a listserv through which relevant QI and performance management documents are shared. Ms. Peach explained that the “sharing of information and open communication has been really helpful… [and] has led us to creative ideas we may not have thought of individually.”

In addition to the summit and the Performance Improvement Management Network website, CDPH uses funding to engage in outreach activities through CCLHO and CCLHO’s Committees. In particular, funds are being directed towards reviewing the meaningful use requirements of the Electronic Health Record (EHR) Incentive Program in order to understand the impact on public health. CDPH has partnered with CCLHO’s Health Information and Data Committee to communicate about meaningful use measures, provide assistance, respond to frequently asked questions, and provide training to LHDs. CDPH anticipates that funds will also be used to review the impact of processes and technology on the flow of data between the state and local level.

CHALLENGES, LESSONS, AND OPPORTUNITIES

Strategic planning initiatives for public health have been underway within CDPH since 2007. NPHII funds have enabled CDPH, as well as LACDPH and PHS, to extend these strategic planning efforts by incorporating performance management and QI activities, and to use resources to provide training and outreach to LHDs. Outlined below are several considerations learned in the California experience.

**Improving state-local communication.** Dr. Linette Scott, CDPH’s Deputy Director for Health Information and Strategic Planning, said that their NPHII-funded activities have influenced and supported state-local communication. CDPH has leveraged existing communication mechanisms, primarily through CCLHO, to ensure “bidirectional interaction” and coordination. Ms. Peach explained, for example, that she contacted CDPH and quickly obtained information regarding LHDs who were developing community health assessments and health improvement plans, which helped LACDPH to develop those documents. Thus, funding has provided a mechanism for “opened communication…so we could get more efficient in getting connected to resources, and finding out other health departments who are doing the same things we are, so we’re not reinventing the wheel,” according to Ms. Peach. She continued, “That’s been great—we didn’t have that before. Now we can get real information.”

**Increasing interaction among local health departments.** In addition to improved state-local interaction, LACDPH and San Diego PHS have increased communication with neighboring LHDs as a result of NPHII. For example, although LACDPH does not have jurisdiction in Long Beach and Pasadena, the health department shares funds and coordinates QI with them as well as activities to build infrastructure to prepare for accreditation. In addition, the city health departments may coordinate activities and communicate with LACDPH for specific public health programs.
Ensuring that a culture shift occurs along with funding. The NPHII resources have helped to further a culture shift towards performance management and QI in California. However, while the resources required for the transformation to occur are available now, organizational change takes time. As Dr. Scott explained, "The grant resources move along quickly, but the amount of time it takes for it to move in a large organization and state—I’m not sure they will match." Another challenge in this arena is that the original amount of the NPHII funding has been reduced, which, according to Dr. Scott, "makes it very hard to put the infrastructure in place to do organizational change, which…was the intent of the NPHII grant."

Preparing for accreditation. While the health departments originally focused funds on performance management and QI, activities around these efforts have naturally extended to activities for accreditation preparation. Even beyond the NPHII program, the state health officer is committed to preparing for and engaging in accreditation. NPHII has enhanced CDPH’s ability to show their support and commitment to accreditation, according to Dr. Scott.

Providing training when necessary. CDPH has supported training for health department staff through NPHII funds. Approximately 30 staff participated in an informatics training that covered business processes and changes required to support meaningful use and accreditation within CDPH. Dr. Scott commented that the training was successful in that it helped staff to learn more about other CDPH programs, outside of health informatics, since it included staff from across CDPH. The health department is now exploring how a similar training model can be used for QI and performance management within CDPH. Similarly, LHDs appreciate the training that will be provided through the May 2012 summit. Dr. Edward Moreno, Fresno County’s health officer, commented that “making those types of trainings available to local jurisdictions is really appreciated.”

Conclusion
California’s public health system has historically worked cooperatively between the state and local levels. Through CCLHO, LHDs communicate with the state regarding important public health issues. NPHII funds have been used to further enhance this state-local relationship by enabling CDPH to coordinate performance management and QI activities. Although three separate health departments received individual cooperative agreements—CDPH, LACDPH, and San Diego PHS—they have united in their efforts to support LHDs by providing resources for education, training, and outreach to prepare them for national accreditation.

FOR MORE INFORMATION
California Conference of Local Health Officers (CCLHO):
- www.cdph.ca.gov/programs/CCLHO

State and Local Public Health Departments in California:
- California Department of Public Health: www.cdph.ca.gov/
- County of San Diego Health and Human Services Agency’s Public Health Services (PHS): www.sdcounty.ca.gov/hhsa/programs/phs
- Los Angeles County Department of Public Health: www.lapublichealth.org

Performance Management, Quality Improvement and Public Health Department Accreditation Summit:
- www.cdph.ca.gov/data/informatics/Pages/QISummitMay2012.aspx

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