

ND SACCHO

ND State Association of City and County Health Officials (ND SACCHO) – Improving Local Public Health Units

Local Public Health Units across North Dakota have worked collaboratively together for many years. In August 2010, this relationship was formalized through a Joint Powers Agreement to form the ND SACCHO, a state association for ND Local Public Health Units. SACCHOs have been formed in many states across the nation to streamline communication between state and local public health agencies, and to stay apprised of national public health initiatives such as continuous quality improvement and public health accreditation.

The purpose of ND SACCHO is to improve coordination of local public health department efforts across the state, enhance consistent messaging and education, improve training and advocacy and share best practices.

ND SACCHO is governed by a ten member Executive Committee with representatives from local public health units, the State Health Department and the North Dakota Association of Counties. There are many challenges that local public health units face today and the overall goal of the association is to provide a collegial environment with the tools and resources necessary to enhance the provision of quality public health programs and the **Ten Essential Public Health Services**. *More on page 2.*



~ ND SACCHO Members ~
Local Public Health Administrators

North Dakota Public Health Accreditation Beta Test Site

In 2009, Central Valley Health District (CVHD) was one of 13 local health departments (of 145 applicants) in the nation selected to participate as a beta test site for the public health accreditation process.

More info to come in the next issue.



North Dakota Local Public Health 2009-2010 Highlights

July 1, 2009 - June 30, 2010

- Over 130,000 seasonal flu vaccinations Fall 2009 – Spring 2010; over 180,000 H1N1 shots administered statewide (with private health partners)
- Women Screened for Breast and Cervical Cancer - 3,220
- 100% Smoke-free ND communities, covering all workers, including bar employees: West Fargo, Fargo, Grand Forks, Napoleon, Bismarck*, and Devils Lake
- Flood Response Support through partnership with other State and local agencies
- Public Health Home Visits - thousands of client visits; School Nurse - Public Health Nurses provide as many school screenings as funding allows
- Car seat checks completed - 86; car seats screened - 1,340
- Number of WIC participants receiving benefits: 13,500 monthly
- Food Establishment Inspections - 6,864 (includes ND Department of Health Food and Lodging Division totals); On-site Sewer Inspections - 1,181
- Four local public health units piloting the Regional Public Health Network
- Maternal Child Health Services: newborn home visits and injury prevention activities for moms and children
- Family Planning Services: 14,761 services provided to men and women statewide
*pending - currently referred by City Commission

Ten For ND Striving for Better Health in our Communities

(See Pg. 2 for Essential Services)

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TEN ESSENTIAL SERVICES OF PUBLIC HEALTH

~This is What We Strive To Do~

1. Monitor

Monitor community health status to identify public health issues.

2. Investigate

Diagnose and investigate health concerns and health hazards in the community.

3. Inform

Inform, educate, and empower people about health issues.

4. Mobilize

Mobilize community partners to identify and solve health concerns.

5. Plan

Develop policies and plans that support individual and community health efforts.

6. Enforce

Enforce public health laws and regulations that protect health and ensure safety.

7. Link

Link people to health services.

8. Assure

Assure a competent public health workforce.

9. Evaluate

Evaluate effectiveness, accessibility, and quality of personal and population-based health services.

10. Research

Research for new insights and innovative solutions to health issues.

(National Essential Public Health Services)



Legislative Priorities Affecting Local Public Health

Local public health departments are major players in aid allocation to the local public health department's total 2010 budget. This funding is the only investment

Local State Aid

Local public health is crucial for preventative health. An investment in public health results in \$6.20 savings for every \$1.00 spent in ND.

An increase of at least \$1,275,000* in State Aid is needed to maintain existing levels of services for Family Health, Public Health Home Visits, and Environmental Health Programs for the 2011-2013 biennium. (* Includes funding for retirement and health insurance premium expense increases for local public health units.)

Only local and state general funding sources allow local flexibility in expenditures.

Family Health

North Dakota is one of only a few states that do not invest in school nurse programs. Local Public Health Departments provide limited health screenings to children in schools. More funding will:

1. Increase nurses who provide essential health services to children and youth.
2. Address increasing numbers of students with chronic health conditions that require management.
3. Restore nutrition, carseat, dental, school screening, and newborn follow-up services.

Federal family health funding to local public health in fiscal year 2011 was cut by \$57,959.00.



North Dakota Local Public Health Health State Aid

in ND in providing community based services. State s represent only five percent of each funding agency’s ent in public health from the state general health fund.

Environmental Health

Local State Aid dollars support environmental health services to address priorities such as:

- Food facility inspections
- Radon
- West Nile Virus
- Swimming pool and spa inspections
- Tanning and tattoo facility inspections
- Addressing public health nuisances
- On-site Sewer inspections

Federal funding has not been available. Without state investment, many North Dakota citizens will not be protected from dangerous preventable illnesses and diseases.

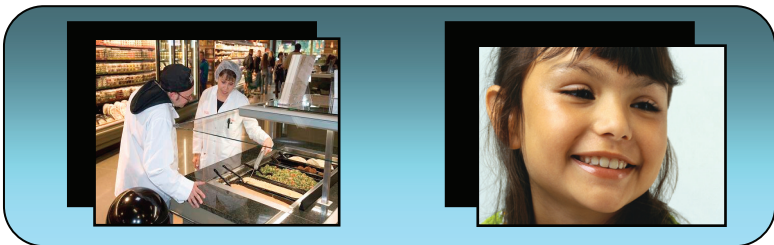
Public Health Home Visits

Public health nurses provide home visits and assistance by:

- monitoring medications,
- providing health assessments,
- performing foot care services,
- conducting case management and referrals for other services.

The estimated monthly cost for nursing home care is \$4,500 in comparison to the cost of in-home services, at \$130 per month.

There is considerable economic and social value in caring for a person in their home as long as possible.



“71 Percent of Americans favor an increased investment in disease prevention.”

-Greenberg Quinlan Rosner Research and Public Opinion Strategies 2009

Five Keys For You

Policymakers take action

- 1. Conversation**
Talk with your health department leaders about how you are addressing the ten basics of public health now.
- 2. Assessment**
Take part in an assessment of your health department’s capacity using the national voluntary public health accreditation standards.
- 3. Vision**
Work with your health department to create a strategic plan that incorporates the ten essential services of public health.
- 4. Improvement**
Support your health department’s quality improvement efforts so that there are processes in place to meet your vision.
- 5. Be a Voice**
Resources for public health often take a back seat to easier-to-see but less critical priorities. Be a voice for prevention - talk with your constituents about how public health ensures your community’s health and future.

