On the Cutting Edge: Testing the Implementation of a Foundational Public Health System in a Rural, Decentralized State

Kansas Association of Local Health Departments (KALHD)

In Kansas, an effort is underway to transform and modernize the state’s public health system to be more locally connected and consistently provide quality services in all communities. This vision will be achieved through the implementation of a service delivery model for providing the foundational public health services (FPHS). The FPHS is a suite of skills, programs, and activities that must be available in health departments for the public health system to work anywhere and for which costs could be estimated. The aim is to standardize the way local health departments (LHDs) throughout Kansas deliver public health services within their jurisdictions, while allowing flexibility to respond to the needs of residents through individualized services.

The Kansas Association of Local Health Departments (KALHD), together with members of the Kansas Public Health Systems Group (in particular, the Kansas Health Institutes and the Community Engagement Institute at Wichita State University), have implemented preliminary activities to research the FPHS and develop the Kansas FPHS model, a
version of the FPHS tailored to their state. With funding from the Public Health National Center for Innovations (PHNCI), they conducted additional activities to identify and develop structures to support adoption of the Kansas FPHS model and facilitate public health modernization. KALHD received funding and support for this project from the Robert Wood Johnson Foundation (RWJF) through the PHNCI Public Health Innovations Implementation Grant Program.

Background

In Kansas, governmental public health services are organized and delivered through a decentralized structure. LHDs are locally led, operating independently from one another and independently from state government. With 100 LHDs across this largely rural state, access to public health services is inequitable; according to public health organizations within the state, some LHDs are struggling to serve their communities.

Recognizing this challenge, the Kansas Public Health Systems Group (PHSG) has been exploring options for proactively modernizing the public health system in Kansas since 2015 through the implementation of the foundational public health services (FPHS) (see Box 1). Members of the PHSG include KALHD, Kansas Department of Health and Environment, Kansas Environmental Health Association, Kansas Health Institute, Kansas Hospital Association, Kansas Public Health Association, Kansas State University, University of Kansas, and Wichita State University.

KALHD’s membership consists of 94 of the 100 LHDs in Kansas. The health departments vary in the number of people served, number of full-time employees, and budget, which creates disparities in the services each is able to provide. With a range of health issues and health department sizes and services in this rural, decentralized state, implementation of the FPHS provides an opportunity for all Kansans to receive a core package of services regardless of their county of residence. KALHD aims to create a long-term systems change effort and considers the implementation of the Kansas FPHS model to be a component of broader, statewide transformation.

Several preliminary activities support this project. In 2015, KALHD adopted a vision statement that endorsed the use of the FPHS to facilitate the modernization of the public health system in Kansas. Following that, the PHSG launched a project called The Future of Public Health in Kansas to support statewide public health modernization. Then, the Council on the Future of Public Health in Kansas was formed to advise PHSG in developing the state’s strategy for implementing the FPHS. Additional activities and background work conducted by PHSG and their partners prior to PHNCI funding include:

- **Reviewed relevant FPHS literature.** A literature review identified how other states have implemented the FPHS. This research identified eight other states using the FPHS: Colorado, Kentucky, North Carolina, North Dakota, Ohio, Oregon, Texas, and Washington. The research resulted in a technical report that includes a crosswalk of implementation activities, adaptations made, and legislation enacted to support FPHS adoption.

- **Developed the Kansas FPHS model.** Based on the results of the literature review and additional research, the Kansas FPHS model was developed. A technical report provides a detailed definition of the Kansas FPHS model, including a description of foundational areas, foundational capabilities, and their components.

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**Box 1. Foundational Public Health Services (FPHS).**

The FPHS was developed by the Public Health Leadership Forum and is currently housed within PHNCI. The FPHS is a minimum package of services comprised of cross-cutting skills, activities, and programs that must be available in health departments for the public health system to work anywhere and for which costs could be estimated. To learn more about the FPHS, visit: [https://phnci.org/fphs](https://phnci.org/fphs)
• **Conducted a statewide capacity assessment.** The capacity assessment was conducted to assess all LHDs in Kansas and measure capacity throughout the state to implement the Kansas FPHS model.

• **Completed a fiscal assessment.** PHSG worked with a contractor to estimate the full costs associated with implementing the Kansas FPHS model.

### Testing the Kansas Foundational Public Health Services (FPHS) Model

The preliminary background activities conducted by PHSG helped to set the stage for testing the implementation of the Kansas FPHS model and broader public health modernization in Kansas. The project is comprised of several activities described below.

**Review of state public health policies and laws.** A staff member from the Kansas Health Institute conducted a review of Kansas policies, regulations, and laws relevant to public health and the FPHS. The goal of the review was to identify specific requirements in Kansas law that provide authority to carry out the Kansas FPHS model, as well as potential policy and legal barriers that might affect implementation. The review identified that specific public health programs and activities (i.e., FPHS Foundational Areas) were well accounted for, but that public health skills and capacities (i.e., FPHS Foundational Capabilities) were not.

**State modernization roadmap.** KALHD and their partners developed a high-level logic model detailing the steps required to implement the Kansas FPHS model and defining short-, mid-, and long-term goals for modernization. This logic model served as the first draft of the state modernization roadmap and was used by LHDs during the pilot phase of the project (described below). Local pilot sites provided feedback on the logic model, which KALHD and their partners have used to inform the final version of the state modernization roadmap. Published as a report, this is intended for use by all LHDs to facilitate statewide implementation of the Kansas FPHS model. The report describes pathways for adoption, including information on financing and performance measures; milestones; adaptive challenges (e.g., leadership, trust, engagement, and cultivation of multi-sectoral partnerships); recommendations; and information on cross-jurisdictional sharing to assist small, rural LHDs with implementation.

**Performance management system.** A performance management system was developed for tracking and identifying the appropriate performance measures for LHDs related to adoption of the Kansas FPHS model. The performance management system is comprised of a conceptual model that defines performance standards, performance measures, and reporting requirements for LHDs implementing the Kansas FPHS model. During the pilot phase of the project, LHDs tested and provided input on the performance measures. For example, they considered if the performance measures were accurately measuring the FPHS component, if the measures were clear, if additional clarity was needed, and the appropriateness of the allotted timeframe.

**Local FPHS pilot.** KALHD and their partners conducted a local FPHS pilot, which allowed them to test approaches for and feasibility of local implementation of the Kansas FPHS model in preparation for statewide adoption. Four LHDs were selected by KALHD through a Request for Proposals (RFP) process to serve as a single pilot site. The LHDs used the logic model, described above, to assess the feasibility of implementing the Kansas FPHS model, understanding that they would not be able to complete full implementation in the short time period allotted. They also pilot tested selected components of the performance management system, described above. For each component, the pilot team members described their current capacity to deliver the service, additional capacity needed, resources needed to obtain additional capacity, the extent to which the component could be delivered by either an individual health department or a shared model, and general opportunities and challenges. Feedback from the local pilot has been used to revise and refine both the state modernization roadmap and the performance management system, in addition to informing the development of a local implementation manual that will be distributed across the state.
Implementation Experiences

Implementation experiences and lessons learned from the Kansas FPHS model project are described below.

Understanding of public health and the FPHS in Kansas. One of KALHD’s primary organizational objectives is to educate the public and policy makers about public health by sharing information about alternative governance and service delivery models, such as cross-jurisdictional sharing. Cross-jurisdictional sharing seeks to increase effectiveness and efficiency by pooling resources with other jurisdictions or cross-sector partners in order to provide the FPHS across Kansas to make a larger impact on health. KALHD routinely engages in workshops, conference sessions, and other public events to engage with local Boards of Health and other officials to increase their awareness and understanding of public health issues.

Importance of partnerships. KALHD is a small organization supported by two full-time employees. In order to implement the project activities, KALHD has worked closely with the PHSG, most notably the Kansas Health Institute and Wichita State University. Through this process, KALHD has strengthened their relationships with these organizations. KALHD also noted that their organizational capacity to implement the project's activities has increased substantially as a result of these partnerships.

Recruitment of sites to participate in the pilot. Prior to beginning the local pilot component of the project, KALHD held discussions with multiple LHD administrators who expressed interest in participating. However, KALHD received only one response to the initial RFP release. KALHD conducted outreach to various LHD administrators to determine their reasons for not applying to participate in the pilot; they learned that LHDs were concerned about the application and pilot test timelines. Additionally, they had not yet discussed the Kansas FPHS model with their county commissioners or Boards of Health, so they did not feel comfortable asking them for a letter of support. While this challenge led to delays in the pilot phase of the project, KALHD ultimately recirculated the RFP and selected a four-county group to complete the local pilot as a single site. KALHD noted that obtaining a letter of support was not as big of a barrier as the LHDs had anticipated.

LHDs’ knowledge and support for the FPHS. For several years, prior to the body of work supported by PHNCI, KALHD leadership have discussed and shared information regarding the Kansas FPHS model with LHD administrators throughout the state. Despite ongoing communication, a recent annual survey fielded by the Kansas Department of Health and Environment found that approximately one quarter of LHD administrators felt they needed additional information before deciding whether they supported statewide implementation of the Kansas FPHS model. KALHD staff anticipate that the resources developed through this project will provide realistic and practical information on how LHDs, particularly smaller or rural LHDs, can successfully implement the Kansas FPHS model.

Support from county commissioners and Boards of Health for the FPHS. To encourage engagement and interest among county commissioners and Boards of Health in the Kansas FPHS model, KALHD convened a meeting that brought together such members from each LHD that was part of the local pilot component. The meeting provided additional information about the Kansas FPHS model and facilitated conversations about challenges and gaps in the state’s public health system. KALHD is incorporating information gathered from the meeting into the implementation plans for the Kansas FPHS model. This meeting was integral to the success of the pilot component of the project, according to KALHD leadership.

Considerations for Replication, Adaption, and Adoption

This project has resulted in valuable information and materials that can be used to support broader replication of the Kansas FPHS model. KALHD leadership emphasized the importance of engaging and garnering support from local governing boards early in the process. As the state works to navigate large-scale systems change, local governing
boards will need to consider how to work across jurisdictions to share resources and information about the Kansas FPHS model – securing support early on will make it easier for localities to implement. Additionally, KALHD leadership stressed the importance of convening county commissioners and Boards of Health during the pilot phase to encourage engagement. KALHD leadership recommended that others seeking to adapt and implement the FPHS do the same, as the conversations that took place during the meeting, as well as the having the opportunity to provide additional information about the FPHS to the meeting participants, was invaluable.

KALHD and their partners are developing materials to help other LHDs in the state adopt the Kansas FPHS model. Beyond Kansas, KALHD leadership have indicated that the materials and resources developed through this project will be made available to support other states interested in adopting the FPHS. These products are described below.

Results

The ultimate goal of the Kansas FPHS project is to support LHDs throughout the state as they move toward implementing the Kansas FPHS model. This project is one piece of a larger, lasting effort to modernize the state’s public health system. KALHD leadership expect that modernization efforts in the state will continue to generate results over the long term.

Through this project, the following has been achieved: completed the review of state public health policies and laws; created a high-level logic model to support a pilot; completed a review of the 109 FPHS components; reviewed and tested the FPHS performance measures; integrated feedback from the pilot site to develop the FPHS roadmap; and educated and engaged local governance about public health and the FPHS.

Final products from this project include:

- **State modernization roadmap.** This is a report that summarizes the results of the Kansas FPHS project, describes pathways forward for statewide implementation, discusses financing and governance options, shares challenges and recommendations, and provides information to support cross-jurisdictional sharing.

- **Local implementation manual.** This manual is being developed to provide information to guide other LHDs in implementing the FPHS. Counties will be able to use it to determine key decision makers, decision points, and other critical factors when replicating the model. It will outline what is needed (e.g., partnerships, communications, or data information management) and possible next steps.

- **FPHS performance management system.** This is a conceptual model that identifies and describes performance standards, performance measures, and reporting requirements that can be adopted by LHDs in Kansas.

- **Legal and policy review.** This is a report documenting Kansas’s policies, regulations, and laws relevant to public health and the FPHS, which aimed to determine authority for and barriers to carrying out the FPHS.

Next Steps

KALHD and its partners have laid the foundation for continued efforts to implement the Kansas FPHS model in other jurisdictions throughout the state and to contribute to the long-term effort to modernizing the public health system.
in Kansas. KALHD fully anticipates the need to continue implementing the Kansas FPHS model once funding from this grant is no longer available. KALHD plans on taking the following actions to sustain their project:

- **Continue to build and refine resources to support the Kansas FPHS model.** KALHD will continue to refine the statewide roadmap, implementation plan, and performance management system that were developed through these projects. These resources are crucial for supporting successful implementation of the FPHS throughout the state.

- **Generate support and buy-in for the FPHS.** Gathering and maintaining support for the FPHS and the changes it will bring to Kansas will be an ongoing task, according to KALHD leadership. The public health organizations in Kansas that have supported this project will continue to conduct activities designed to generate additional support and buy-in for the FPHS.

- **Advocate for statute change.** KALHD has indicated that advocacy activities may be necessary in the future to support implementation of the Kansas FPHS model. KALHD is prepared to advocate for public health statute changes in Kansas, if needed, depending on future changes in statewide resources and support for public health modernization.

- **Share findings from the pilot project.** The dissemination of lessons learned will help to maintain information sharing and transparency related to the FPHS. KALHD leadership plan to continue to present information on the Kansas FPHS model and findings from the project at appropriate conferences and meetings.

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For More Information about the “On the Cutting Edge: Testing the Implementation of a Foundational Public Health System in a Rural, Decentralized State” Project:

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