

State of Alaska FY2011 Governor's Operating Budget

Department of Health and Social Services Public Health Results Delivery Unit Budget Summary

Public Health Results Delivery Unit

Contribution to Department's Mission

Protect and promote the health of Alaskans.

Core Services

- Prevent and control epidemics and the spread of infectious disease.
- Prevent and control injuries.
- Prevent and control chronic disease and disabilities.
- Respond to public health emergencies, disasters and terrorist attack.
- Assure access to early preventative services and quality health care.
- Protect against environmental hazards impacting human health.
- Manage and administer public health programs and services effectively and efficiently.
- Death investigation and medical examination to determine identity of deceased and cause of death.

Results at a Glance

(Additional performance information is available on the web at <http://omb.alaska.gov/results.>)

END RESULT A: Healthy people in healthy communities.

- The rate of TB was unchanged between 2007 and 2008.
- Alaska's chlamydia rate decreased from 725 to 718 or less than 1% decrease in 2008, and increased from 675 to 725 or 7.41% in 2007 per 100,000 population. Alaska ranked second in the nation for chlamydia rates in 2007.
- Coronary Heart Disease (CHD) rate is below the target for each year since 2004 which is 120 deaths per 100,000 population.
- Cancer rate declined from 2000 through 2005, with a slight increase subsequently. Cancer is still the Number 1 killer in Alaska.
- The 2007 death rate caused by unintentional injuries was 57.3 per 100,000 population, above the 50/100,000 target and representing a nearly 10% increase from the 2006 rate. The rate dropped by 12% from 2002 to 2006.

Status of Strategies to Achieve End Result

- In 2007, 90% of persons with tuberculosis (TB) completed adequate treatment; this was in line with prior year performance. This was below the target rate of 95% primarily due to some difficult cases.
- 99.6% of Alaskans diagnosed with Chlamydia in calendar year 2008 received adequate treatment, exceeding the 98% target.
- There has been a 51% decline in youth smoking over 12 years, bringing the 2007 prevalence rate of 18% within 1 percentage point of the 17% target.
- Alaska has exceeded target since mandatory seatbelt law took effect in 2006.
- In 2007, there was a significant decrease in the knowledge of folic acid benefits.
- In FY09, the state is on track to meet licensure survey timelines.
- Target exceeded - in FY09 29% of all DPH staff received preparedness training.
- In FY08 100% certification has been maintained for heavy metals; PCB and Pesticides validation is on hold.

Key RDU Challenges

As the Division of Public Health (DPH) works to protect and promote the health of Alaskans, challenges abound in the general categories of preventing chronic disease and promoting good health, fighting infectious disease, preventing injuries, improving outcomes for children and protecting vulnerable Alaskans. In each of these categories, progress will continue through the right mix of necessary investments in the division's programs, expanded partnerships with the entire public health community and the recruitment and retention of expert, dedicated staff.

More specifically, the fight against chronic diseases is critical: three of every five deaths in Alaska are linked to chronic diseases. The primary risk factors for such diseases are obesity, poor diet, lack of exercise and tobacco use. As federal funding shrinks for disease prevention and health promotion programs – and with little commitment of state general fund dollars to these programs to date – a major challenge for the division is to continue its work to prevent chronic diseases and promote good health through better education efforts, especially the important fight to reverse or at least slow

Alaska's growing and alarming rates of overweight and obesity. This makes sense financially because investments in a healthier Alaska now will save healthcare dollars in the years to come. Another major challenge is the fight against infectious disease, with new diseases discovered all the time and old scourges still lingering. Alaska must remain prepared for the threat of avian influenza while continuing to battle long-familiar diseases such as tuberculosis. Alaska's role as a transportation and tourism crossroads exacerbates the challenge as people from around the world come to our state. In addition, there is an urgent and ever-present need in the division to assure an adequate public health nursing workforce around the state. These nurses are the "foot soldiers" of Alaska's public health system and deliver critical services in every corner of Alaska.

Other challenges for the Division of Public Health include:

- Continuing to build on progress made by reducing adult and youth smoking in Alaska; efforts must continue to lessen the negative impact of tobacco on all Alaskans.
- Working within the division and with health partners around the state to increase the number of children who are fully immunized.
- Continuing to build a comprehensive system for the screening and diagnosis of autism; delays in diagnosis and needed interventions can result in large medical and education costs, as well as lost productivity for individuals and families.
- Identifying workforce development issues – including lower, non-competitive salaries when compared with similar agencies – and implementing new strategies for improving recruitment, retention and support for qualified staff at all levels statewide.
- Providing accurate and timely advice to Alaskans regarding fish consumption and protecting the fishing industry by dispelling misconceptions about chemical contaminants in Alaska seafood.
- Supporting the Alaska Health Care Commission to serve as the state health planning and coordinating body, and to provide recommendations for and foster the development of a comprehensive statewide health care policy and a strategy for improving the health of Alaskans.

Significant Changes in Results to be Delivered in FY2011

No significant changes to be delivered in FY11.

Updated Status for Results to be Delivered in FY10

Through its Obesity Prevention and Control program and with requested funding, DPH for the first time will tackle the epidemic of childhood obesity in Alaska in a comprehensive manner based on the successful tobacco control model.

Status Update: State funding for obesity was not included in the final FY10 budget; however, a federal earmark of \$463.2 was received. With federal funding the state obesity prevention and control program staff serve on task forces, work with the Department of Education and Early Development and school districts, employers and community coalitions. This collaboration will result in 1) a School Wellness Institute (October, 2009), 2) the provision of technical assistance about evidence-based practices to school districts implementing wellness policies, 3) presentations at six statewide conferences, 4) training and technical assistance to worksites, 5) promotion of healthy eating and physical activity through the lifespan by participation in multiple committees and coalitions on topics from breastfeeding to biking to work, 6) publication of *The Burden of Obesity in Alaska*, 7) expansion of the body mass index project to a new school district, and 8) integrating obesity prevention and control efforts into other Section of Chronic Disease Prevention and Health Promotion programs.

The new Fairbanks virology lab is scheduled to begin operations in January 2009. Move-in was to begin in December 2008. With requested funding for FY2010, the new lab will be fully operational and properly staffed.

Status Update: Fairbanks virology lab opened in January 2009 as scheduled and is fully staffed and operational. The Fairbanks virology lab has been an integral part of the response efforts to the H1N1 flu virus.

Health Planning and Infrastructure, currently housed in the DPH, will be relocated to Health Care Services in FY2010.

Status Update: The Health Planning and Infrastructure section successfully transferred from the Division of Public Health (DPH) to Health Care Services (HCS) on 7/1/09. Public Health does provide some minimal level of accounting support to Health Care Services while they are actively recruiting for their own accountant, but it is anticipated this final function will fully transition to Health Care Services during FY10. The DPH accountant will help train the HCS accountant to take over critical reporting functions.

The Health Facility Survey program, currently housed in the Certification and Licensing component, will relocate to Health Care Services in FY2010.

Status Update: The health facility surveyors and associated support costs successfully transitioned to Health Care Services on 7/1/09. Public Health advised Health Care Services on managing this critical state function and will continue to act in an advisory role until no longer needed.

Major RDU Accomplishments in 2009

As the result of an initiative led by DPH and DHSS staff, Alaska finished No. 1 in the national President's Fitness Challenge: nearly 3,000 Alaskans went to a website, signed up to exercise at least 5 times a week and followed through. The governor in July was presented a national award by U.S. Health and Human Services Secretary Mike Leavitt.

Reported a greatly reduced percentage of adult smokers in Alaska. Based on 2007 Behavioral Risk Factor Surveillance System (BRFSS) data, the percentage of adult smokers has declined by one-fifth since 1996 to 21.5 percent, a statistically significant decrease. This represents more than 27,000 fewer smokers and is expected to result in almost 8,000 fewer tobacco-related deaths and \$300 million in averted medical costs.

Provided new and much faster emergency ethylene glycol testing for hospitals to determine if Alaskans have consumed anti-freeze or are suffering only from alcohol poisoning. This offers round-the-clock emergency support for Alaska hospitals and decreases the time to treat affected patients. Prior to this service, such tests had to be flown to Seattle, often delaying appropriate treatment by several days. So far this testing has saved the state nearly \$1 million in unneeded treatment costs. Additionally, because of the much faster diagnosis at least one patient was saved from having an unnecessary kidney transplant.

The Breast and Cervical Health Check Program continued its lifesaving work. Since its inception, the program has provided nearly 77,000 cancer screenings to nearly 36,000 individual women who are medically underserved. Of those women, 232 cases of breast cancer, more than 30 cases of cervical cancer and nearly 1,900 pre-cancerous conditions have been diagnosed.

Fielded more than 10,000 calls to the Alaska Poison Control System and gave critical advice to Alaskans and their health providers.

Established 48 new Kids Don't Float life-jacket loaner sites, bringing the total to 514 active sites statewide.

Distributed 1,896 new smoke alarms to 13 communities in Alaska.

Public Health Nurses provided 110,234 health care visits to 66,220 patients (including 35,101 children), administered 114 newborn hearing screenings, gave 83,625 doses of vaccine, administered and read 17,066 tests for tuberculosis and screened 15,242 people for evidence of domestic violence.

Continued statewide efforts to raise public awareness of the need to help teens engage in healthy relationships and avoid the life-limiting challenges posed by unintended pregnancy, sexually-transmitted infections, relationship violence and sexual coercion. These efforts included airing of television and radio PSAs and conducting trainings aimed at helping clinicians and other professionals working with youth to develop counseling and education skills.

The Background Check program processed more than 37,000 applications since implementation in March 2006 and protected vulnerable Alaskans by disqualifying over 900 individuals from becoming service providers because of barring criminal conditions. In FY2008 alone, approximately 400 people were disqualified from working with vulnerable Alaskans.

Maintained licensure and inspection for over 750 residential child, assisted living and health care facilities in Alaska.

In collaboration with Department of Education and Early Development, trained over 130 childcare providers to improve physical activity and nutrition for preschool children and families in Juneau, Anchorage, Fairbanks, Nome, Mat-Su and Homer.

Investigated an outbreak of *Campylobacter* infection in collaboration with the Department of Environmental Conservation. More than 60 individuals with laboratory-confirmed illness were identified and several required hospitalization. Disease

notification, treatment, and prevention strategies were communicated to residents and health care providers throughout Alaska via health alert messaging, an Epidemiology Bulletin, and the media.

Investigated an outbreak of adenovirus 14 that sickened more than 40 people in communities on Prince of Wales Island. Disease notification and prevention strategies were communicated to Prince of Wales Island residents and health care providers.

In partnership with the Alaska Department of Natural Resources, began development of procedures to assess the health impacts of proposed large-scale natural resource development projects. Participated on an interagency workgroup to develop a health impact assessment for the Red Dog mine expansion, excerpts of which will appear in the Supplemental Environmental Impact Statement for the project.

Implemented VacTrAK, a secure Internet-based Immunization Information System and a companion Disease Surveillance Management System.

Published 28 Epidemiology Bulletins to inform health care providers and the public of important investigations, concerns, or alerts regarding health issues.

The Section of Epidemiology responded to 194 after-hours calls through the emergency phone number; all were responded to within 10 minutes.

Continued adding to the number of public health statistics reports that are published on the Bureau of Vital Statistics website. Detailed information on injury deaths, leading causes of death, chronic disease deaths, infant mortality, birth rates, causes of death, and health profiles is readily available at: <http://www.hss.state.ak.us/dph/bvs/data/default.htm>.

With legislative support, received significant funding for essential EMS equipment and vehicles under the Alaska Code Blue project – 35 rural communities received new equipment.

The State Medical Examiner's Office completed 238 autopsies in FY08.

The Preparedness Program opened its emergency operations center in February 2008 to respond to children suffering from Respiratory Syncytial Virus in the Yukon-Kuskokwim Delta area. The team coordinated operations and resource requests. Ultimately, 17 children were medevaced from Bethel for treatment, and dozens more were treated locally. There were no deaths and no children had to be transported out of state for treatment.

Mass dispensing clinic exercises were held in Valdez, Fairbanks, Delta Junction, Pelican, Kodiak, Nome, Bethel and Juneau. These exercises, where thousands of people responded to simulated or actual dispensing of vaccines, were developed to test Alaska's capability to distribute mass prophylaxis and to organize citizen preparedness and participation.

Contact Information

Contact: Betsy Jensvold, Budget Manager
Phone: (907) 465-1629
Fax: (907) 465-1850
E-mail: betsy.jensvold@alaska.gov

**Public Health
RDU Financial Summary by Component**

All dollars shown in thousands

	FY2009 Actuals				FY2010 Management Plan				FY2011 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Formula Expenditures												
None.												
Non-Formula Expenditures												
Injury Prev/EMS	1,560.0	3,159.9	544.9	5,264.8	1,083.8	1,936.3	1,076.4	4,096.5	1,083.8	1,936.3	1,076.4	4,096.5
Nursing	16,007.7	1,969.5	4,674.8	22,652.0	18,375.2	3,107.1	5,448.8	26,931.1	21,345.7	5,107.1	1,448.8	27,901.6
Women, Children and Family Health	1,044.6	5,153.6	1,699.8	7,898.0	1,991.1	6,570.8	1,686.3	10,248.2	2,340.0	6,571.9	1,288.5	10,200.4
Public Health Admin Svcs	1,395.8	1,739.1	87.5	3,222.4	673.9	1,279.2	257.1	2,210.2	676.0	1,281.3	257.1	2,214.4
Preparedness Program	0.0	0.0	0.0	0.0	0.0	5,371.9	0.0	5,371.9	0.0	5,371.9	0.0	5,371.9
Certification and Licensing	2,015.7	1,955.2	939.1	4,910.0	1,140.0	2,637.6	1,699.4	5,477.0	1,140.0	2,637.6	1,699.4	5,477.0
Health Planning & Infrastructure	238.5	1,798.3	542.6	2,579.4	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Chronic Disease Prev/Hlth Promo	1,297.3	3,905.2	298.1	5,500.6	778.3	5,880.6	1,523.9	8,182.8	778.3	5,881.9	1,523.9	8,184.1
Epidemiology	1,536.8	6,553.4	1,013.6	9,103.8	2,216.2	7,733.5	759.7	10,709.4	2,220.1	7,883.4	760.1	10,863.6
Community Health Grants	4,510.9	0.0	0.0	4,510.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Bureau of Vital Statistics	20.2	173.8	2,058.0	2,252.0	89.0	327.3	2,262.9	2,679.2	89.0	327.3	2,262.9	2,679.2
Emergency Medical Svcs Grants	2,062.1	0.0	0.0	2,062.1	2,820.6	0.0	0.0	2,820.6	2,820.6	0.0	0.0	2,820.6
State Medical Examiner	2,124.4	0.0	6.5	2,130.9	2,223.4	11.0	10.0	2,244.4	2,529.6	11.0	10.0	2,550.6
Public Health Laboratories	4,158.1	1,354.2	244.8	5,757.1	4,271.3	1,661.7	689.6	6,622.6	4,271.3	1,661.7	689.6	6,622.6
Tobacco	0.0	0.0	6,474.9	6,474.9	0.0	0.0	7,413.3	7,413.3	0.0	0.0	7,813.3	7,813.3

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All dollars shown in thousands

	FY2009 Actuals				FY2010 Management Plan				FY2011 Governor			
	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds	General Funds	Federal Funds	Other Funds	Total Funds
Prevention and Control												
Totals	37,972.1	27,762.2	18,584.6	84,318.9	35,662.8	36,517.0	22,827.4	95,007.2	39,294.4	38,671.4	18,830.0	96,795.8

Public Health
Summary of RDU Budget Changes by Component
From FY2010 Management Plan to FY2011 Governor

All dollars shown in thousands

	<u>General Funds</u>	<u>Federal Funds</u>	<u>Other Funds</u>	<u>Total Funds</u>
FY2010 Management Plan	35,662.8	36,517.0	22,827.4	95,007.2
Adjustments which will continue current level of service:				
-Nursing	1,970.5	2,000.0	0.0	3,970.5
-Women, Children and Family Health	348.9	1.1	-472.8	-122.8
-Public Health Admin Svcs	2.1	2.1	0.0	4.2
-Chronic Disease Prev/Hlth Promo	0.0	1.3	0.0	1.3
-Epidemiology	3.9	5.9	0.4	10.2
-State Medical Examiner	6.2	0.0	0.0	6.2
Proposed budget decreases:				
-Nursing	0.0	0.0	-4,000.0	-4,000.0
Proposed budget increases:				
-Nursing	1,000.0	0.0	0.0	1,000.0
-Women, Children and Family Health	0.0	0.0	75.0	75.0
-Epidemiology	0.0	144.0	0.0	144.0
-State Medical Examiner	300.0	0.0	0.0	300.0
-Tobacco Prevention and Control	0.0	0.0	400.0	400.0
FY2011 Governor	39,294.4	38,671.4	18,830.0	96,795.8