The background of the slide is a solid red color. In the center, there is a large, faint, circular seal of Rutgers University. The seal features a sunburst in the center, surrounded by a ring of text that reads "RUTGERS UNIVERSITY" and "THE STATE UNIVERSITY OF NEW JERSEY".

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OF NEW JERSEY

Comparing and Learning from Other States

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Two Parts

- Comparative Analysis
- Interviews for Mini-Case Stories

Comparison States:

Connecticut

Kentucky

Maryland

Massachusetts

Minnesota

New York

Oregon

Washington

	CT	KY	MD	MA	MN	NY	OR	WA	NJ
Pop. est.	3.56 mill	4.47 mill	6.05 mill	6.89 mill	5.64 mill	19.45 mill	4.22 mill	7.61 mill	8.88 mill
Pop. Dens. (pop/sq-mile)	736	113	623	883.65	71	413	44	115	1208
Age <5 yrs old	5.1%	6.1%	6%	5.2%	6.2%	5.8%	5.4%	6%	5.8%
Age >65 yrs old	17.7%	16.8%	15.9%	17.0%	16.3%	16.9%	18.2%	15.9%	16.6%
Med HH Income	\$78,444	\$50,589	\$84,805	\$81,215	\$71,306	\$68,486	\$62,818	\$73,775	\$82,545
Under poverty	10.0%	16.3%	9.0%	9.4%	9.0%	13.0%	11.4%	9.8%	9.2%
Race/ethnicity									
Non-Hispanic White	65.9%	84.1%	50%	71.1%	79.1%	55.3%	75.1%	67.5%	54.6%
Black	12.2%	8.5%	31.1%	9.0%	7.0%	17.6%	2.2%	4.4%	15.1%
Hispanic	16.9%	3.9%	10.6%	12.4%	5.6%	19.3%	13.4%	13.0%	20.9%
Asian	5.0%	1.6%	6.7%	7.2%	5.2%	9.0%	4.9%	9.6%	10.0%
Native Am/Alaska/H I	0.7%	0.4%	0.7%	0.6%	1.5%	1.1%	2.3%	2.7%	0.7%

Public Health Services

- Called “Foundational Services” “Basic Services” or “Core Services,” the lists range from 5 to 12
- Commonalities among the comparison states are **environmental health, communicable disease prevention** and some kind of **general population health assurance, tracking and/or assessment.**
- All of the services provided by any of the comparison states appear in the New Jersey public health practice standards.

Table 4. Public Health Funding and Workforce*

Local appropriation median percentage	CT	KY	MD	MA	MN	NY	WA	OR	NJ
2019	\$ 0.16	\$0.22	\$ 0.37	\$ 0.02	\$ 0.13	\$ 0.05	\$ 0.05	\$ 0.30	\$ 0.06
2016	\$ 0.12	\$ 0.11	\$ 0.54	\$ 0.03	\$ 0.09	\$ 0.02	\$ 0.07	\$ 0.13	\$ 0.06
2013	\$ 0.13	\$ 0.17	\$ 0.54	\$ 0.02	\$ 0.08	\$ 0.10	\$ 0.11	\$ 0.11	\$ 0.04

State appropriation median percentage	CT	KY	MD	MA	MN	NY	WA	OR	NJ
2019	\$ 0.03	\$ 0.13	\$ 0.96	\$ 0.00	\$ 0.14	\$ 0.25	\$ 0.04	\$ 0.05	\$ 0.002
2016	\$ 0.03	\$ 0.12	\$ 0.92		\$ 0.09	\$ 0.09	\$ 0.08	\$ 0.10	
2013	\$ 0.06	\$ 0.31	\$ 1.42		\$ 0.15	\$ 0.21	\$ 0.21	\$ 0.21	\$ 0.000

Total revenue median percentage	CT	KY	MD	MA	MN	NY	WA	OR	NJ
2019	\$ 0.28	\$ 0.73	\$ 2.66	\$ 0.02	\$ 0.40	\$ 0.23	\$ 0.30	\$ 0.72	\$ 0.08
2016	\$ 0.19	\$ 0.61	\$ 2.48	\$ 0.03	\$ 0.45	\$ 0.18	\$ 0.38	\$ 0.50	\$ 0.07
2013	\$ 0.25	\$ 0.71	\$ 2.77	\$ 0.02	\$ 0.36	\$ 0.48	\$ 0.39	\$ 0.55	\$ 0.07

Estimated size of LHD workforce (avg.) per 10,000 people	CT	KY	MD	MA	MN	NY	WA	OR	NJ
2019	0.281	0.12	2.664	0.022	0.404	0.233	0.304	0.716	0.075
2016	0.190	0.11	2.484	0.031	0.454	0.177	0.378	0.503	0.068
2013	0.246	0.15	2.773	0.015	0.364	0.478	0.395	0.552	0.075

*Sources: TFAH, 2019; NACCHO, 2013, 2016



Public Health
Prevent. Promote. Protect.

MARYLAND LOCAL HEALTH DEPARTMENTS PROTECT AND PROMOTE HEALTH

MARYLAND LOCAL HEALTH DEPARTMENTS

promote, protect and improve the health and well-being of Maryland residents and serve as the Chief Health Strategists in their communities



HEALTH DEPARTMENT FUNDING
SUPPORTS THE
LOCAL ECONOMY

15%

of local health department funding is contracted out to residents and local businesses

THE STATS

Maryland's **24** local health departments (LHDs) offer a wide range of evidence-based public health services to thousands of county and city residents, businesses, community groups and facilities every day.

Numbers represent services provided by all or most LHDs and keep to their communities between

JULY 2017 – JUNE 2018
(Fiscal Year 2018)



BEHAVIORAL HEALTH

- ✓ Connect children and adults to mental health and substance use services
- ✓ Offer addiction recovery services
- ✓ Provide drug prevention and education programs
- ✓ Identify and address behavioral health service and treatment gaps in the community
- ✓ Investigate complaints about local behavioral health and substance use treatment services
- ✓ Complete case reviews for behavioral health treatment and support services
- ✓ Assist with housing placements for individuals with severe mental illness

609,092

**BEHAVIORAL HEALTH
TREATMENT, CRISIS
SERVICES, CASE
MANAGEMENT AND
CARE SUPPORT
SERVICES PROVIDED**

1,985

**BEHAVIORAL HEALTH
TRAININGS AND
OUTREACH EVENTS FOR
PUBLIC AND PARTNERS**



Establishing the State Action for Public Health Excellence (SAPHE) Program

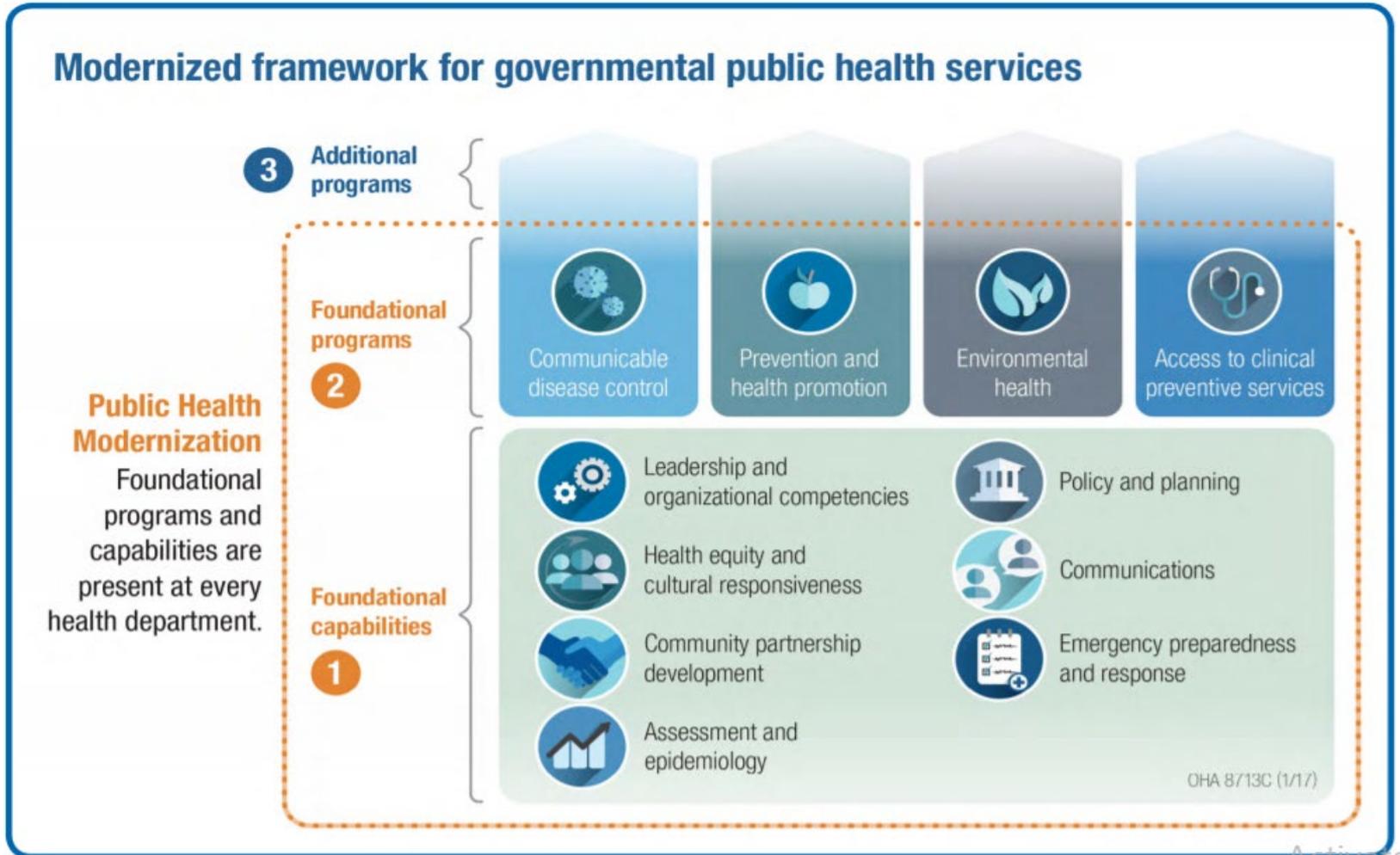
Please Co-Sponsor HD2682/SD922 by Representatives Kane and Garlick & Senator Lewis

HD2682/SD922 will advance the goals identified by the Special Commission on Local and Regional Public Health by:

1. Ensuring that all members of the local public health workforce have access to essential training. Directs the Department of Public Health to hold the Foundations of Public Health Course free of charge at least four times a year in geographically diverse areas of the state.
2. Creating an incentive grant program to support more effective and efficient delivery of services by increasing sharing across municipalities. Creates the SAPHE Program, a grant program that incentivizes health departments to adopt best practices including workforce standards, data reporting, and sharing of services across municipalities to increase capacity and ability to meet statutory requirements.
3. Moving Massachusetts toward national standards for a 21st century public health system. Directs the Special Commission on Local and Regional Public Health to determine and assess a foundational standard for local public health services in Massachusetts in alignment with national standards.



Oregon Modernized framework diagram



Quotes from Other States

If we want to make public health governance effective, we have to invest in it.

A State Public Health Representative

“Public health works behind the scenes to prevent public health disasters from happening so most people don’t see what public health is doing.

A State Public Health Representative

Comparative Analysis: Key Findings and Messages

- ***Identify Core, Basic or Foundational Services and Assess Needs/Gaps***
- ***Focus on a Priority Outcome***
- ***Secure Stable Unrestricted Funding for LHDs***
- ***Form Collaborations***
- ***Increase Public Awareness and Support for Local Public Health***



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