

## 2020 Budget Request Form – Douglas County, KS

### Summary and Community Partner Overview

|                    |                                                  |
|--------------------|--------------------------------------------------|
| Community Partner: | <b>Lawrence-Douglas County Health Department</b> |
| 2020 Request       | \$824,116 <i>excluding health insurance</i>      |

|                 |                          |
|-----------------|--------------------------|
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#### Community Partner Overview:

|         |                                                                                                                      |
|---------|----------------------------------------------------------------------------------------------------------------------|
| Vision  | Together, day by day, building a healthy community                                                                   |
| Mission | To advance policies, practices and programs that promote health for all, prevent disease and protect the environment |
| Values  | Professionalism • Integrity • Compassion • Teamwork                                                                  |

The Lawrence-Douglas County Health Department was formed in 1942 as a sub-unit of Douglas County and the City of Lawrence. The Health Board and Health Department work to realize our vision by advancing policies, practices and programs that promote health for all, prevent disease and protect the environment. Becoming an accredited health department in May 2015 is a strong indicator that we are accomplishing our mission. Our programs are aimed at prevention and are shown to be cost-effective.

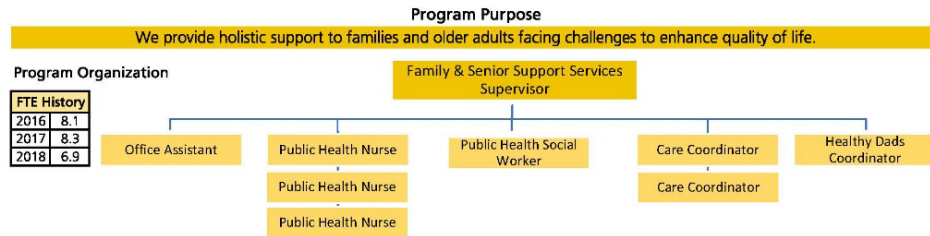
#### Current Issues

- In 2018 we completed our second community health plan (CHP) focused on the four issues of; physical activity and nutrition, poverty and jobs, behavioral health, and safe and affordable housing. The CHP strategies were developed to not only drive improvement in each focus area but to improve health equity.
- In 2018 the Health Department joined with Johnson, Wyandotte, Shawnee and Riley County Health Departments to purchase a second-generation electronic medical record (EMR). By purchasing as a pool we not only achieved economies of scale in the purchasing process but we expect to see similar benefits as our new EMR becomes operational. Our vendor is also providing revenue cycle management services and we are projecting an increase in fee revenue for 2020.
- We will be taking a recommendation to the Health Board in April 2019 to not fill our vacant Financial Director position and instead contract for accounting services. This will buffer us from employee recruitment, retainment and training demands as well as reduce our health insurance liability.
- At this time, we have still not heard from the Kansas Department for Children and Families whether they intend to continue funding our Healthy Dads program in State Fiscal Year (SFY) 2020. Currently, they fund the Health Department at \$185,900 annually. We expect to be able to continue this program if our budget requests to the City of Lawrence and Douglas County are funded. This service is offered at the Jail and is a popular program.
- We are working with Douglas County and behavioral health coalition partners to share data in order to understand system-wide performance and outcomes. Anticipating continued progress in this area we are including in this application a request for an additional analyst to support behavioral health analytics.

## 2020 Budget Request Form – Douglas County, KS

### Service Overview - Metrics and/or data that describe the service impact:

#### Family and Senior Support Services



**Program Description**

Family & Senior Support Services include working with young families in our Healthy Families program, fathers in our Healthy Dads program, and seniors in our Project LIVELY program. Healthy Families is an evidence based program to support parents facing multiple stressors in their lives. Public Health Workers meet with families regularly in their home to support them to have healthy children, healthy parent-child relationship and remain free from abuse and neglect. Additionally the Public Health Workers coach parents in their child's development, help them access health care, assist them with goal setting and link them to community services. The Healthy Dads program offers classes to help fathers build positive relationships with their children and the mother of their children. Project LIVELY (Life, Interest and Vigor Enter Later Years) promotes the health and independent living of older adults. Our goals are to educate individuals about available resources and connect them with the help they need to stay safely in their home and reduce premature nursing home placement. To accomplish this we collaborate with community partners to provide comprehensive care coordination and advocate for aging issues.



| Performance Indicators                                                |      |      |      |        |
|-----------------------------------------------------------------------|------|------|------|--------|
|                                                                       | 2016 | 2017 | 2018 | Target |
| % of children in Healthy Families program up-to-date on immunizations | 96%  | 94%  | 95%  | ≥ 90%  |
| % of child developmental screenings completed                         | 92%  | 93%  | 91%  | ≥ 90%  |
| % of Project LIVELY home visits completed                             | 96%  | 94%  | 98%  | ≥ 96%  |
| % of men completing Healthy Dads curriculum                           | NA   | 34%  | 42%  | > 50%  |



#### Notable Activities

- Healthy Families had a 21% increase in moms initiating breastfeeding. The increase went from 71% to 91% in 2018.
- Healthy Dads recruited and trained two participant fathers to become facilitators for the community class.
- Project LIVELY received a 100% client satisfaction survey result for the entire year.

#### Program Impact Story

Ethan began attending Healthy Dads classes in 2018. He was very motivated to learn the tools to have a successful relationship with his son and his ex-partner. Ethan had been estranged from his son because drugs had such a strong hold on him and he was in and out of jail. He was motivated to change his life as his son had been placed in the foster care system. He was referred to the Healthy Dads program by KVC. He excelled in the class and shared his challenges and experiences with the other dads in class which helped deepen the learning and conversation. He was determined to take the new tools he had learned from the Healthy Dads class and fight to get custody of his son. He was able to show KVC that he had completed the 10 week Healthy Dads class. During his participating in the class KVC granted him supervised visitation with his son. He eventually was granted full custody. He attributes a lot of that happening because of the lessons he learned in class and the positive, mentor relationship he developed with our fatherhood coordinator Jerry Marquez. Ethan brought his son in to Jerry's office to introduce him. When Jerry asked the son on a scale of one to ten how he felt about being with his dad, the son excitedly answered "100!" as he raised his fist in the air to

|      | Revenues  |        |           |       | Expenditures |
|------|-----------|--------|-----------|-------|--------------|
|      | Operating | Grants | Local tax | Other |              |
| 2018 | 16%       | 54%    | 30%       | 0%    | \$806,148    |

## 2020 Budget Request Form – Douglas County, KS

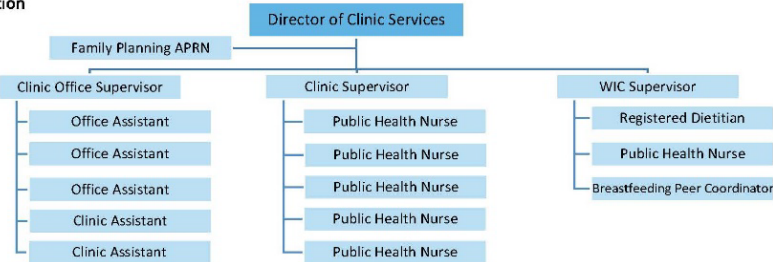
### Clinic Services

#### Program Purpose

We provide compassionate services to promote the health and well-being of our community.

#### Program Organization

| FTE History |      |
|-------------|------|
| 2016        | 16.3 |
| 2017        | 15.5 |
| 2018        | 16.6 |



#### Program Description

Our clinic emphasizes prevention and education serving over 10,000 clients each year with the following services: immunizations for all ages; women's health and family planning; sexually transmitted infection testing and treatment; and nutritional support and counseling for pregnant or nursing women and their children.



#### Performance Indicators

|                                                                       | 2016 | 2017 | 2018 | Target |
|-----------------------------------------------------------------------|------|------|------|--------|
| % of contraception users continuing with method beyond first 3 months | 73%  | 74%  | 65%  | ≥ 75%  |
| Tobacco cessation counseling rate                                     | 75%  | 80%  | 80%  | ≥ 80%  |
| Average clinic service time (minutes)                                 | 48   | 50   | 65   | <60    |
| % of WIC appointments within processing standards                     | 95%  | 93%  | 64%  | 100%   |

#### Notable Activities

- Converted to electronic benefits and program eligibility processing for our WIC supplemental nutrition program families.
- In collaboration with Johnson, Wyandotte, Shawnee and Riley County purchased a new electronic medical record software platform.
- Increased numbers of clients receiving the influenza vaccine.



#### Program Impact Story

This year the state of Kansas and LDCHD made debit cards available to their WIC families rather than checks. The results have been overwhelmingly positive. Families appreciate the ability to purchase the amount of food they need, the use of a debit card rather than numerous checks issued to each qualifying member and the use of a phone app which shows benefits. The WIC program has also created electronic options for clients who choose to email their diet questionnaires or missing documentation to the Health Department. This decreases paper files and the need for additional visits to the Health Department.

#### Revenues

|      | Operating | Grants | Local tax | Other | Expenditures |
|------|-----------|--------|-----------|-------|--------------|
| 2018 | 17%       | 41%    | 41%       | 1%    | \$1,591,073  |

# 2020 Budget Request Form – Douglas County, KS

## Epidemiology and Environmental Public Health



### Annual Financial Report - 2018 Epidemiology and Environmental Public Health

4/8/2019

#### Program Purpose

Through preventative and enforcement activities we ensure and safeguard healthy environments for all.

#### Program Organization

| FTE History |     |
|-------------|-----|
| 2016        | 4.5 |
| 2017        | 4.8 |
| 2018        | 5.9 |



#### Program Description

Epidemiology and environmental public health services enforce public health laws. These laws include Kansas communicable disease and child care licensing regulations. Enforcement of local city and county laws include the Douglas County Sanitary Code and City of Lawrence public pool and spa ordinance. We accomplish all of this through field inspections and investigations. Through public health preparedness activities we improve the capacity of staff, volunteers, community partners and individuals to respond to and recover from significant health incidents.



#### Performance Indicators

|                                                                                      | 2016 | 2017 | 2018 | Target |
|--------------------------------------------------------------------------------------|------|------|------|--------|
| Average number of days to complete real estate inspection                            | N/A  | 9    | 7    | ≤ 7    |
| % of childcare licensing surveys completed                                           | 96%  | 96%  | 97%  | ≥ 90%  |
| % of essential staff reached within 60 minutes of initiation of a notification drill | 100% | 100% | 100% | ≥ 91%  |

#### Notable Activities

- Assisted childcare provider compliance with new Federal finger printing requirements.
- Real estate septic system inspections increased by 31% from 2017-2018 (126 to 165).
- Health Department created an influenza surveillance website to monitor flu activity in Douglas County.



#### Program Impact Story

Following an increase in the number of calls to the Lawrence-Douglas County Health Department regarding bat exposure, epidemiology staff used a new tool through the Kansas Syndromic Surveillance Program to monitor patients concerned with bats reporting to the emergency department. The new tool allowed staff to track patient counts, number of rabies post-exposure prophylaxis administration treatments, and to compare current bat exposure numbers to historical numbers from previous years. Noticing that the number of people who sought care for bat exposure was indeed higher from previous years, staff implemented a public health education campaign for residents. The message was specifically designed around what to do if someone is exposed to a bat. The communications campaign had three parts: radio outreach to the public, social media outreach to the public, and a newsletter targeted to healthcare providers. Following completion of the campaign, the campaign was submitted to the CDC as a public health success story and was subsequently published on the CDC website.

#### Revenues

|      | Operating | Grants | Local tax | Other | Expenditures |
|------|-----------|--------|-----------|-------|--------------|
| 2018 | 41%       | 32%    | 27%       | 0%    | \$349,128    |

# 2020 Budget Request Form – Douglas County, KS

## Community Health

### Program Purpose

We work across the community to understand and address the root causes of health and to promote health as a human right for all.

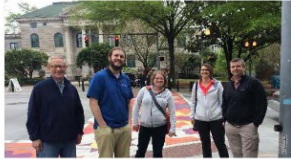
### Program Organization

| FTE History |     |
|-------------|-----|
| 2016        | 7.3 |
| 2017        | 6.5 |
| 2018        | 5.4 |



### Program Description

The Health Department's Community Health Program is responsible for monitoring the health status of the community to identify health determinants and health disparities in the population. We work to mobilize community partnerships to implement evidence-based strategies and evaluate impact of program outcomes to improve community health. Our targets are a reduction in chronic disease by modifying behaviors that influence health.



### Performance Indicators

| 2016 | 2017 | 2018 | Target |
|------|------|------|--------|
| 23   | 18   | 18   | ≥ 12   |

# of community or system change events

### Notable Activities

- Improved access to food and decreased use of tobacco - perinatal tobacco cessation programming at the LDCHD, food waste reduction audits at KU, youth engagement in anti-tobacco efforts, and Bert Nash adoption of Kansas Tobacco Guidelines for Behavioral Health. Douglas County adopted regulation to increase the age of tobacco to 21.
- Safe Routes To School (SRTS) work funded from two KDOT funding cycles was completed in cooperation with Public Works and the MPO.
- Updated the Community Health Plan (CHP) accompanied by the release of the first Health Equity Report focused on racial inequity in social determinants of health.



### Program Impact Story

In 2018 the development of the Community Health Plan (CHP) moved from the assessment and priority issue area selection reported in 2017 to the planning process to build out a 5-year plan for each of the following areas: Behavioral Health, Safe and Affordable Housing, Food Security & Healthy Built Environment, and Poverty & Jobs. The CHP was adopted on October 25<sup>th</sup> by the Board of Health. Most importantly each issue area is being convened by a designated organization and structured for continued plan implementation by a coalition of associations of organizations committed to adopted Goal of the issue area:

- Behavioral Health: Douglas County through the Behavioral Health Leadership Coalition (BHLC).
- Food Security & Healthy Built Environment: Live Well Douglas County.
- Safe & Affordable Housing: Lawrence-Douglas County Housing Authority through an association of organizations.
- Poverty and Jobs: Lawrence-Douglas County Health Department.

Oversight is provided by a newly chartered steering committee that is being seated in the first quarter of 2019 and will focus on cross issue area considerations and a lens to ensure that progress is made on health disparities. Modest internal re-organization was completed to support the LDCHD serving as a Community Health Strategist.

| Revenues |           |        |           |       | Expenditures |
|----------|-----------|--------|-----------|-------|--------------|
|          | Operating | Grants | Local tax | Other |              |
| 2018     | 0%        | 30%    | 70%       | 0%    | \$681,757    |

## 2020 Budget Request Form – Douglas County, KS

### Alignment to County Focus Areas and Collaboration:

|                    |                                                  |
|--------------------|--------------------------------------------------|
| Community Partner: | <b>Lawrence-Douglas County Health Department</b> |
|--------------------|--------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |
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| <b>Focus Area:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Public Health services |
| <p>The Lawrence-Douglas County Health Department serves as the steward of the Douglas County Community Health Plan and has structured itself to serve as community chief health strategist. In November 2018 the Health Board approved a new strategic plan for the organization that identifies the following strategic priorities.</p> <ul style="list-style-type: none"><li>• Provide data (internally and externally) to support decision making.</li><li>• Support adoption by public and private entities of policies aligned with the Douglas County Community Health Plan.</li><li>• Deliver our services, and address system gaps, to improve outcomes for those experiencing the greatest health inequity.</li><li>• Understand community barriers to good health and catalyze solutions.</li><li>• Build an infrastructure that supports work force development and effective systems for improvement.</li></ul> <p>The Lawrence-Douglas County Health Department has always operated under the principle that our vision and mission cannot be achieved in isolation. As a result, we partner with multiple organizations either individually or as part of a coalition. Examples include:</p> <p><b>Behavioral Health Leadership Coalition</b> – specifically supporting the work of prevention as a co-facilitator with DCCCA and data sharing and analytics as facilitator for the Data Sharing Collaborative and sponsor of the Healthier Together platform, <a href="https://dashboards.mysidewalk.com/healthiertogether">https://dashboards.mysidewalk.com/healthiertogether</a> which is an on-line tool for policymakers and the public to view interactive data visualizations focused on the community health plan which includes behavioral health.</p> <p><b>Success By Six (SB6)</b> - Multiple staff have served on the SB6 Board for well over a decade supporting the work of improving our local early childhood development system. The Health Department has received grant funds from SB6 for many years to support our intensive in-home case management program (Healthy Families) focusing on teen parents and the reduction of Adverse Childhood Experiences (ACES).</p> <p><b>Heartland Community Health Center (HCHC)</b> – For the past three years HCHC has staffed a physician care team within the Health Department. This partnership was initiated principally to improve care for women coming to the Health Department for women's health services who were at-risk for hypertension. Our findings were that several hundred women each year were being screened for high blood pressure, risk factors identified, and referrals made for follow up care. However, these referrals were not followed through on. Co-locating services and conducting warm handoffs has led to better care.</p> |                        |

## 2020 Budget Request Form – Douglas County, KS

**Douglas County Jail** – Our Healthy Dads Coordinator Jery Marquez conducts weekly education and skill building sessions at the Jail, Lawrence Community Shelter and the Health Department. This program has reached hundreds of fathers, many of them have limited engagement with their children. Through class participation fathers learn how to build positive supportive relationships with their children.

**Lawrence-Douglas County Fire Medical Department** – After years of responding multiple times each week, or in some cases each day, to calls from elder individuals with minor or non-medical issues. The Health Department now partners with Fire Medical to conduct follow up in home consultations by social workers in our Project LIVELY program. Our care coordinators have been able to connect many of these individuals with supportive services and have reduced the strain on the EMS responders producing better outcomes at lower cost.

**LiveWell Douglas County** – The Health Department was a founding organization of LiveWell over 10 years ago. Approximately six years ago the Health Department assumed some of the backbone support functions for the coalition. We serve as their fiscal agent, are a member of the executive committee, host the LiveWell Douglas County website, produce and distribute their newsletter and provide other ad hoc support.

## 2020 Budget Request Form – Douglas County, KS

double click on spreadsheet to open

[2020 Budget Request Detail](#)

calculated fields

| Community Partner:                     | Lawrence-Douglas County Health Department - Operating Fund |                  |                  |                           |                              |                           |
|----------------------------------------|------------------------------------------------------------|------------------|------------------|---------------------------|------------------------------|---------------------------|
|                                        | 2016<br>Actuals                                            | 2017<br>Actuals  | 2018<br>Actuals  | 2019<br>Adopted<br>Budget | 2019<br>Current<br>Estimates | 2020<br>Budget<br>Request |
| <b>Revenues:</b>                       |                                                            |                  |                  |                           |                              |                           |
| Unrestricted Fund Balance 1/1/xx       | 975,334                                                    | 1,185,497        | 1,117,658        | 1,224,769                 | 1,224,769                    | 1,191,713                 |
| Restricted                             | 43,493                                                     | 41,383           | 125,000          | 0                         | 0                            | 0                         |
| <b>Douglas County</b>                  | <b>824,116</b>                                             | <b>824,116</b>   | <b>824,116</b>   | <b>824,116</b>            | <b>824,116</b>               | <b>899,151</b>            |
| City of Lawrence                       | 671,402                                                    | 671,401          | 671,401          | 700,964                   | 700,964                      | 770,875                   |
| Fees                                   | 420,750                                                    | 464,437          | 376,106          | 462,000                   | 462,000                      | 540,364                   |
| Grants                                 | 2,055,331                                                  | 2,108,956        | 1,498,629        | 1,519,719                 | 1,427,219                    | 1,367,516                 |
| Other Revenue                          | 168,168                                                    | 181,527          | 194,990          | 177,672                   | 177,672                      | 192,618                   |
| Interest                               | 1,561                                                      | 1,723            | 1,879            | 1,600                     | 1,600                        | 1,800                     |
| <b>Total Revenues:</b>                 | <b>4,141,328</b>                                           | <b>4,252,160</b> | <b>3,567,121</b> | <b>3,686,071</b>          | <b>3,593,571</b>             | <b>3,772,324</b>          |
| <b>Total Revenues and Fund Balance</b> | <b>5,160,155</b>                                           | <b>5,479,040</b> | <b>4,809,779</b> | <b>4,910,840</b>          | <b>4,818,340</b>             | <b>4,964,037</b>          |
| <b>Expenditures:</b>                   |                                                            |                  |                  |                           |                              |                           |
| Salaries                               | 2,208,935                                                  | 2,186,354        | 2,182,837        | 2,196,321                 | 2,096,321                    | 2,255,620                 |
| Employee Benefits                      | 399,005                                                    | 391,743          | 389,101          | 411,262                   | 392,536                      | 432,753                   |
| Health Insurance (City's 40% share)    | 157,627                                                    | 178,810          | 163,451          | 177,061                   | 201,331                      | 221,464                   |
| Fees/Contractual Services              | 674,519                                                    | 703,204          | 655,263          | 659,738                   | 699,738                      | 623,240                   |
| Medical supplies                       | 23,266                                                     | 21,859           | 22,430           | 20,405                    | 20,405                       | 20,470                    |
| Pharmaceuticals                        | 156,886                                                    | 168,126          | 109,656          | 173,114                   | 168,126                      | 173,866                   |
| Office and Other Supplies              | 63,037                                                     | 63,286           | 52,272           | 48,170                    | 48,170                       | 44,912                    |
| Capital Equipment                      | 0                                                          | 0                | 0                | 0                         | 0                            | 0                         |
| To Board Designated Fund               | 200,000                                                    | 391,000          | 0                | 0                         | 0                            | 0                         |
| To Funded Depreciation Fund            | 50,000                                                     | 132,000          | 0                | 0                         | 0                            | 0                         |
| To Kay Kent Service Award Fund         | 0                                                          | 0                | 10,000           | 0                         | 0                            | 0                         |
| <b>Total Expenditures:</b>             | <b>3,933,275</b>                                           | <b>4,236,382</b> | <b>3,585,010</b> | <b>3,686,071</b>          | <b>3,626,627</b>             | <b>3,772,325</b>          |
| <b>Ending Fund Balance 12/31/xx</b>    | <b>1,226,880</b>                                           | <b>1,242,658</b> | <b>1,224,769</b> | <b>1,224,769</b>          | <b>1,191,713</b>             | <b>1,191,712</b>          |

9.10%

## 2020 Budget Request Form – Douglas County, KS

### Budget Request Analysis

Community Partner: **Lawrence-Douglas County Health Department**

#### Analysis of Revenue Sources:

Major Funding has historically been provided through the following sources

|                | <u>2018</u> | <u>2016-2018 average</u> | <u>Forecast</u>                                                                    |
|----------------|-------------|--------------------------|------------------------------------------------------------------------------------|
| Federal grants | 29%         | 35%                      | No significant change                                                              |
| County*        | 23%         | 21%                      | Potential for significant change                                                   |
| City           | 19%         | 17%                      | Potential for significant change                                                   |
| State grants   | 10%         | 9%                       | No significant change                                                              |
| Fees           | 11%         | 11%                      | Potential for growth with transition to outsourced billing through new EMR vendor. |

*\* Does not include funding for health insurance*

#### Analysis of beginning & ending fund balances, and dedicated or restricted cash reserves:

##### Operating Fund

The beginning 2019 cash balance is \$1,264,630 pending audit results. This represents a \$23,040 increase from the 2018 beginning balance. Based on current projections, our ending unrestricted cash balance is estimated at \$1,231,574. Based on net income from 2018, we were not able to transfer funds to the Funded Depreciation or Board Designated Reserve Funds. We did however a private recognition award from the Association of State and Territorial Health Officials in the amount of \$10,000 which was transferred to the Kay Kent Excellence in Public Health Service Award Fund.

##### Board Designated Reserve Fund

The beginning 2019 fund balance is \$1,751,808. This represents an \$7,470 increase from the 2018 beginning balance. As required by Health Board policy, this fund is restricted and requires Board approval prior to any expenditure. The current BDF policy calls for reserves in the amount of three months of operating expenses. We have met our 2019 reserve goal of \$921,518. This fund may be used for unanticipated expenditures such as disease outbreaks, reductions in grant funding received versus budgeted amounts or delays in receiving revenue. Severance liabilities may also be paid from this fund when an employee resigns or retires. The 2019 ending balance is projected to be \$1,759,000 based upon projected interest income. Neither the 2019 or 2020 budget includes a transfer into or from this fund.

## 2020 Budget Request Form – Douglas County, KS

### Funded Depreciation Fund

The 2019 beginning fund balance is \$253,907 representing a \$64,254 decrease from the 2018 beginning fund balance. This fund is used to replace worn out, obsolete and/or unserviceable equipment and significant expenses of approximately \$50,000 are projected for 2019 as we continue our transition to a new electronic medical record (EMR) and integration with MyResourceConnect . We are not budgeting a transfer to this fund from our operating fund for 2018 as we have transferred funds in prior years in anticipation of this EMR transition. We project a 2019 YE balance of \$201,000. Our fund goal is to maintain a minimum balance of \$150,000.

### Kay Kent Excellence in Public Health Service Award Fund

This fund was established in 2008 with monies originally received from the Kansas Health Foundation. This private philanthropy recognized the work of former Lawrence-Douglas County Health Department Director Kay Kent with a \$25,000 gift. Upon her retirement, the balance of this gift was converted into this fund and the current balance as of January 1, 2019 is \$27,724, an increase of \$9,559 from January 1, 2018. These funds are restricted and used for the purpose of providing a cash award annually to a deserving affiliate of the Health Department. This fund receives revenues from private sources such as interest, unspent employee flexible spending account balances and honorariums received from private funds. In 2018 we received a \$10,000 model practice award from the Association of State and Territorial Health Officials. The 2019 YE balance is projected to be \$27,200.

### Analysis of expenditure changes:

Discontinued by mutual consent a \$86,232 contract with Lawrence Community Shelter

New contracts for accounting and billing services \$94,000 combined. This is offset by a \$99,315 reduction in personnel and health insurance expense and \$71,550 in additional clinic revenue through use of 3<sup>rd</sup> party billing contract

The Health Department's 2019 Health Insurance payment to Douglas County for the 40% City of Lawrence portion was \$24,270 more than budgeted and \$37,880 than the 2018 payment. This budget request projects an additional increase for 2020 of \$20,133. This reflects and 2-year increase of \$58,013 or 35%.

## 2020 Budget Request Form – Douglas County, KS

### Supplemental Request for Additional Funding

(This is in addition to the 2020 Request amount on page 1)

|                    |                                           |          |
|--------------------|-------------------------------------------|----------|
| Community Partner: | Lawrence-Douglas County Health Department | \$75,035 |
|--------------------|-------------------------------------------|----------|

#### Purpose for additional revenue from County:

The proposed new analyst position would support population health analytics, specifically related to the on-going behavioral health work in the city and county. Douglas County residents have said through the passage of Proposition 1 and the selection of behavioral health as a concern area for the Community Health Plan (CHP) that it is an issue very important to them. Providing the data support for the concern areas of the CHP is integral to the work of the Informatics Team. Currently, there is one analyst and the Informatics Director providing data support to the CHP. This currently involves analysis, tracking of data, compilation, and keeping the Healthier Together platform updated. All of which allows the conveners to focus on planning and creating movement for progress on the concern areas without having to worry about the data needs. The work is manageable at this time, but the workload will increase as the Poverty/Jobs convener group begins to identify their data needs. This work supports the Informatics program purpose statement of “Turning data into information and information into actionable knowledge to improve health for all.”

The job duties of the proposed analyst would entail:

- Support implementation of the data warehouse: work includes supporting progress on the development and implementation of a proposed data warehouse for Douglas County, including assisting with development, providing technical assistance for agencies submitting data to the system, and assistance with developing a data governance structure.
- Lead for analytics related to the data warehouse: once data begins to be submitted to the data warehouse, staff will need to analyze the data to begin to answer the proposed research question of understanding a patient’s movement through the behavioral health system, including potential risk factors, vulnerabilities, and protective factors. This is work not currently being done by LDCHD staff but will need to be done once the data warehouse is complete.
- Substance Abuse Surveillance: this would include continued development of opioid surveillance, but also development of surveillance capacity for methamphetamine abuse, which local law enforcement says is actually a larger issue in Douglas County. We are not currently doing methamphetamine surveillance.
- Support for analyst sub-group, which includes members from the BHLC, but also Lawrence Community Shelter, Headquarters, and the Lawrence-Douglas County Housing Authority: work would include logistics of scheduling and hosting monthly meetings and could include any special projects that come from the work. Example: repeating the “Venn diagram” experiment for 2018, which attempts to identify de-identified shared patients in the behavioral health system.
- Support measurement/tracking of the metrics for the Community Health Plan, specifically the behavioral health portion of the plan, which would include identifying and analyzing data to support the strategic objectives of the plan.

## 2020 Budget Request Form – Douglas County, KS

- Analytical Support for myStrength app: LDCHD has committed to supporting county analytics for usage of the myStrength app, including how many users, how long they use the system, and from what agencies. Depth of analysis will depend on staff time and availability.
- Metrics and Analytics for the Crisis Campus: LDCHD is sponsoring an MPH/PhD student to provide a framework for qualitative evaluation of the ICT team at LMH Health. If we did not have the student, we would have passed on supporting this. A similar evaluation and tracking will likely be needed for the Crisis Campus once completed. This would require development of success metrics, tracking of metrics, and development of a framework for evaluation. This is work not currently being done by LDCHD staff. It is likely that we would not have the bandwidth to support this without an additional analyst.
- Support additional population health analytics, including Community Health Assessment (which is required to be annually updated), Health Equity Report (we have committed to updating annually), Healthier Together platform (which requires on-going maintenance).

The Kansas Department of Health and Environment (KDHE) has recently received an influx of Federal grants targeted towards opioid prevention, treatment, and recovery and they are anticipating additional funds. Health Departments are often targeted as sub-recipients, of which Douglas County would be eligible, but only if we have the bandwidth to complete the work associated with the work plans. Other behavioral health agencies besides the health department have opportunities for grants, which are increasingly requiring the usage of population health data, the social determinants of health, or a health equity lens (all areas in which LDCHD is considered a subject matter expert). For example, DCCCA has recently applied for a binge drinking and marijuana use prevention grant, which required the use of population health data and an identified epidemiologist. LDCHD has agreed to fill this role, but if the grant is received, it will further thin the time currently available and being given to other projects.

### Impact if supplemental request is not funded:

Without the additional funds to support another analyst, the capacity of LDCHD to support behavioral health analytics will be limited. Some of the work identified above will continue to be done, because they are key to the strategic vision of the health department (example: supporting measurements and metrics of the behavioral health plank of the Community Health Plan). However, the work may be done in a diminished capacity directly related to the bandwidth of our staff (example: limited analytics provided for myStrength app).

Other work may not be done at all as we may not be able to justify completion of the work with limited capacity (example: assisting with metrics and analytics for the crisis campus). For example, in Fall 2018, two opioid surveillance grants were released by KDHE. The local health department was required to be the lead grant writer. In a decision made in conjunction with the Data Sharing Sub-group of the BHLC, Douglas County only applied for one of them. It was decided we could not meet the associated deliverables of the second grant. More recently, we passed on a Kresge Foundation grant targeted towards the social determinants of health and housing. Despite having several potential projects for the grant, it was decided that there was not the bandwidth to meet the short turnaround time of the deadline. This could have potentially been mitigated by an additional analyst who could have pulled some work from the Informatics Director's plate allowing them time to assist with grant writing.

In the immediate future, there are some pieces of work that LDCHD has committed to supporting that we are not currently doing, but will be soon. Once this work begins, it will even further tax and stretch the work load of the current population health analyst and the

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Informatics Director. One, LDCHD will receive a localized data set of the Behavioral Risk Factor Surveillance System (BRFSS), which includes oversampled demographics. The ability to quickly begin to analyze this dataset is fundamental and critical to the health equity work that is currently being done throughout the county. Two, LDCHD is attempting to create a localized version of the HOPE Index, which is a nationally developed index for providing population-based data to identify and monitor progress toward achieving health equity. To our knowledge, the tool has never been replicated at the local level and we would like to be at the forefront of this work. The analysis required by BRFSS and the HOPE Index will be a priority and might move current work, such as substance abuse surveillance, to the bottom of the list in order to complete these two projects. The addition of a new analyst will allow for this work to be completed in a timely manner without anything moving off the current work and project list.

Finally, without someone dedicated to providing analytical support from the behavioral health perspective, the county could miss key opportunities for improvement or identified successes within the behavioral health field that are readily apparent to someone working with the data day in and day out.