

ALASKA

PUBLIC

HEALTH

IMPRVMNT



Traveling the Road to a New
Century in Public Health

From Alaska's Letter of Intent to Apply for a Turning Point Grant from the Robert Wood Johnson and W.K. Kellogg Foundations; March 27, 1997

Executive Summary

Alaska's public health system has been successful during this past century in protecting and promoting the health of our citizens. Public health activities such as population-based screening for infectious disease, providing immunizations, and assuring safe restaurant foods and clean drinking water, are primarily responsible for improved health status and increased longevity. The need for improvement in the public health system has been recognized for some time though. Discussions regarding system reform began during the last decade. These discussions took on more urgency during the health care reform debates of the early '90s, and have culminated in the implementation of a strategic process to improve Alaska's public health system.

Public health leaders in Alaska recognize the opportunities present in the many changes taking place today throughout our society. Examples of some of the issues that now compel Alaskans to examine and reform our public health system include: movement in the clinical care sector towards managed care; movement in the Native health care system towards increased self-determination; changes in the way businesses and governments are conducting business in the new information age; the movement towards smaller, more efficient government; and shifts in values that are reemphasizing personal responsibility and community involvement and control.

The Alaska Public Health Improvement Process began in December, 1996, and is focusing on developing partnerships to evaluate and revitalize the mission of public health in the state. The nexus of these partnerships will be a common vision of healthy Alaskans in healthy communities. This vision will be realized through the re-invention of the public health system. The role of public health in the lives of Alaskans, and in Alaska's communities, will be defined; a strategic process for assessing and addressing critical issues affecting the system will be implemented; the capacity required in the system to protect and promote the health of Alaskans will be identified; strategies for achieving needed capacity will be developed; the responsibilities of the different levels of government and other important partners will be determined; new relationships will be formed; and old relationships will be strengthened.

Partners in the statewide process include traditional public health sector organizations, as well as clinical health care providers and payers, business, consumers, academia, and the faith community. Participating local community partnerships will strengthen the statewide process by focusing the statewide partnership on the needs of communities and the value of local participation, responsibility, and control.

Alaska welcomes the opportunity to receive support from the foundations under the *Turning Point* initiative. There are unique opportunities and challenges present here that the foundations and other states will find engaging. For example, the Indian Health Service has played a strong role in Alaska's public health system during this past decade. There is currently a significant shift in responsibilities from federal to tribal control, as the 226 federally recognized tribes in Alaska continue to assert their self-determination rights to administer their own health care services. Another example is that, unlike most other states, Alaska has no HMO penetration. This situation presents a valuable opportunity to work with the clinical health care sector from the beginning of managed care system development to identify public health's role in managed care, and to redefine the clinical health care system's role in public health. Because of issues such as these, the public health community is committed to continuing this most important project.

Alaska Environmental Health Association

Peter Wallis, President [Fairbanks]

Private Health Care Providers

Jim Jordan, Executive Director, Alaska State Medical Association
[Anchorage]

Laraine Derr, Executive Director, Alaska State Hospital and Nursing Home Assn.
[Juneau]

Cheryl Kilgore, Executive Director, Interior Neighborhood Health Clinic (and
Assembly member on the Fairbanks North Star Borough Assembly)
[Fairbanks]

Gail McGuill, President, Alaska Nurses Association (and Director of Quality
Management with Columbia Alaska Regional Hospital) [Anchorage]

University of Alaska

Jerome Komisar, President, University of Alaska [Fairbanks]

Community-Based Non-Profit Health/Social Service Organization

Dennis McMillian, Executive Director, United Way of Anchorage [Anchorage]

Private Business

Response Pending. Pamela LaBolle invited, Alaska State Chamber of Commerce
[Juneau]

Mary Beth Whitehurst, Acting Executive Director, Alaska Cabaret, Hotel,
Restaurant, and Retailers Association [Anchorage]

Private Environmental Services Provider

William Ashton, Consultant, EcoSynergy [Anchorage]

Labor Union

Response Pending. Mano Frey invited, Alaska State AFL-CIO [Anchorage]

Education System

Carl Rose, Executive Director, Association of Alaska School Boards [Juneau]

Behavioral Health System

Jeff Jessee, Executive Director, Alaska Mental Health Trust Authority
[Anchorage]

Faith Community

Pastor Bill Allen. Ministerial Alliance, Inter-Faith Council, Evangelical Council
[Anchorage]

Consumers

Carmen Rosa Mallipudi, MPH, 4As employee and YWCA employee, member of
Alaska Health Education Consortium, reports on health issues for La Voz
(Anchorage-based Hispanic newspaper) [Anchorage]

Response Pending. Eric Jorgensen, Sierra Club Legal Defense Fund, invited.
Environmental Advocacy Group

**Alaska Public Health Improvement Process
Steering Committee**

**CONFIRMED MEMBERS¹
as of December 15, 1997**

Tribal Health Organizations

Anne Walker, Executive Director, Alaska Native Health Board [Anchorage]
Carolyn Crowder, President, Norton Sound Health Corporation (and current Chair
of the Tribal Health Directors) [Nome]

Tribal Government

Deborah Vo, Executive Director, Alaska Inter-Tribal Council [Anchorage]

Local Government

Kevin Ritchie, Executive Director, Alaska Municipal League [Juneau]

Local Health Departments

Elaine Christian, Director, MOA Department of Health & Human Services
[Anchorage]
Doreen Knodel, Director, North Slope Borough Department of Health & Social
Services [Barrow]

State Government

Karen Perdue, Commissioner, DHSS [Juneau]
Peter Nakamura, MD, MPH, Director, Division of Public Health [Juneau]
Michele Brown, Commissioner, DEC [Juneau]
Janice Adair, Director, Division of Environmental Health [Anchorage]

State Legislators

Senator Jim Duncan
Senator Johnny Ellis
Representative Con Bunde

Federal Government

David Schraer, MD, Acting Director, Alaska Area Native Health Service/IHS
[Anchorage]
Rick Albright, Director, Alaska Operations, Environmental Protection Agency
[Anchorage]
Major Danny Glover, Elmendorf AFB Chief of Public Health [Anchorage]

Alaska Public Health Association

Delisa Culpepper, President [Anchorage]

¹ In addition, there is a seat on the statewide steering committee for a representative from each community that organizes a local public health improvement partnership and implements a local public health improvement process.

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Alaska Public Health Improvement Process

Challenges & Opportunities

- ⌘ Lack of Clear Public Health Policy
- ⌘ Tribal Compacting
- ⌘ Government Downsizing
- ⌘ Federal Block Grant and Performance Partnership Proposals
- ⌘ Health Care Reform
- ⌘ Welfare Reform
- ⌘ Medicaid Reform
- ⌘ Changing Demographics
- ⌘ New Technologies & Public Health Threats



Alaska Public Health Improvement Process

Expected Outcomes

- Assessment of Alaska's Public Health System
- Identification of the Appropriate Alaska Public Health System Capacities and Infrastructure for the 21st Century
- Strategic Plan for Strengthening Alaska's Public Health System
- Development of Benchmarking and Performance Measurement System for the Alaska Public Health System
- Improved Public Health Performance
 - Increased coordination and collaboration of public health planning, decision-making, and service delivery
 - Strengthened relationships with public health system partners
 - Improved information-based decision-making
 - Improved accountability in the public health system
 - Clarification of the role of public health for the public



Turning Point:

Collaborating for a New Century in Public Health

An Initiative of the Robert Wood Johnson and W.K. Kellogg Foundations

Purpose: *“To transform and strengthen the public health infrastructure in the United States so that states, local communities, and their public health agencies may respond to the challenge to protect and improve the public’s health in the 21st Century.”*

Turning Point:

Collaborating for a New Century in Public Health

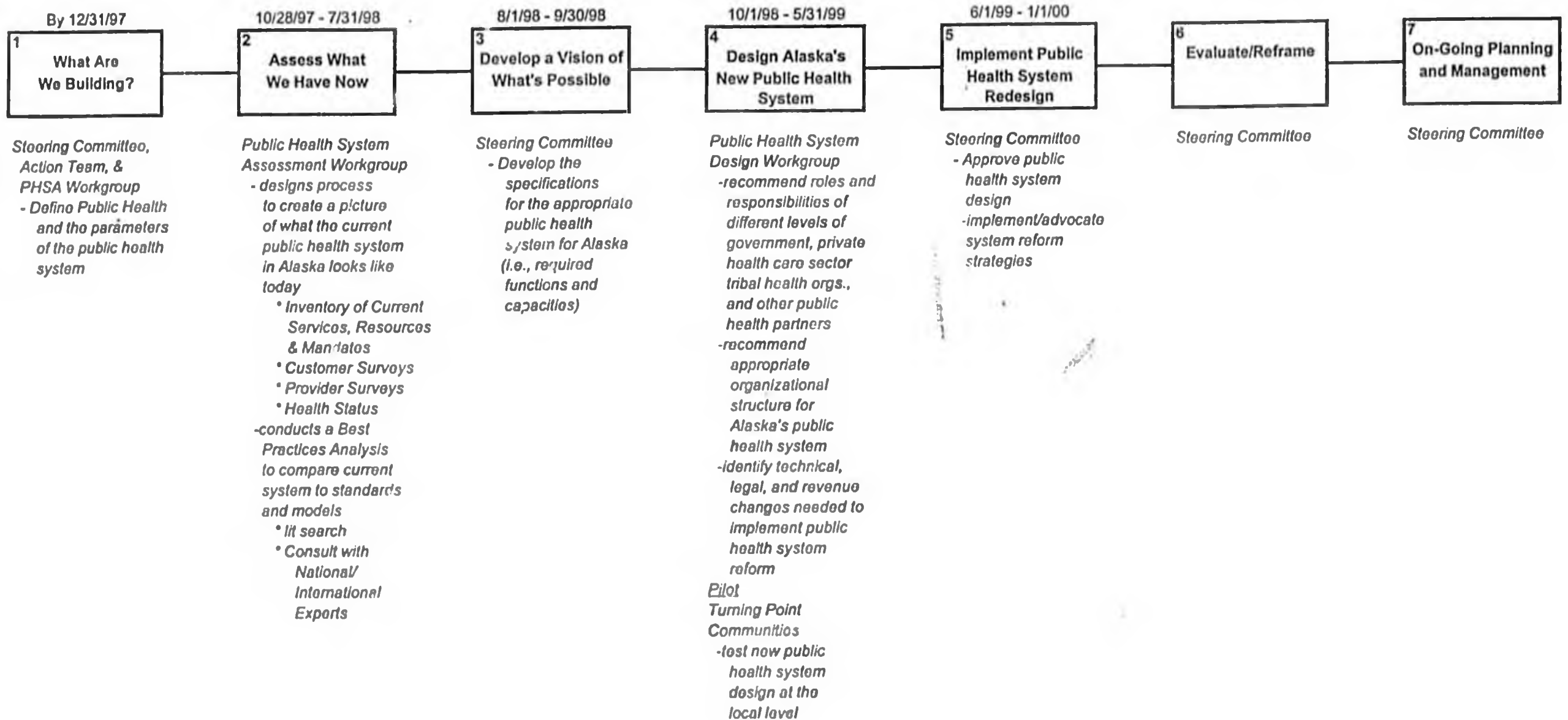
An Initiative of the Robert Wood Johnson and W.K. Kellogg Foundations

Foundations' Goals for State Grantees:

- Assess and redefine public health mission, roles, and responsibilities
- Define relationships with clinical health care sector and other community stakeholders
- Establish systematic ongoing collaboration among state and local health agencies, as well as other public health-related agencies
- Identify technical, organizational, legal, and revenue changes needed to strengthen public health's capacity to address challenges to community health
- Develop a public health improvement plan describing the infrastructure needed to improve population-based health
- Establish priorities for implementation and a timetable for achieving needed changes
- Identify a strategy for financing and maintaining proposed changes

Alaska Public Health Improvement Process

PROCESS FLOW CHART



Alaska Public Health Improvement Process

MANAGEMENT STRUCTURE

Alaska Public Health Improvement Process Steering Committee

- Role:** To assure that the project achieves intended outcomes by:
- 1) Assuring that the project has resources and support to get the work done;
 - 2) Creating a vision of the outcome that is realistic and supportable;
 - 3) Reviewing products from workgroups to:
 - a) assure supportability;
 - b) provide reality checks; and
 - c) maintain momentum; and
 - 4) Advocating for and implementing the final plan.

Planning Subcommittee of the Steering Committee

Role: Works with Action Team to plan Steering Committee meetings and address issues that require Steering Committee guidance during interims between quarterly meetings.

Public Health System Assessment Workgroup

Role: To provide the Steering Committee with information on the condition of Alaska's current public health system.

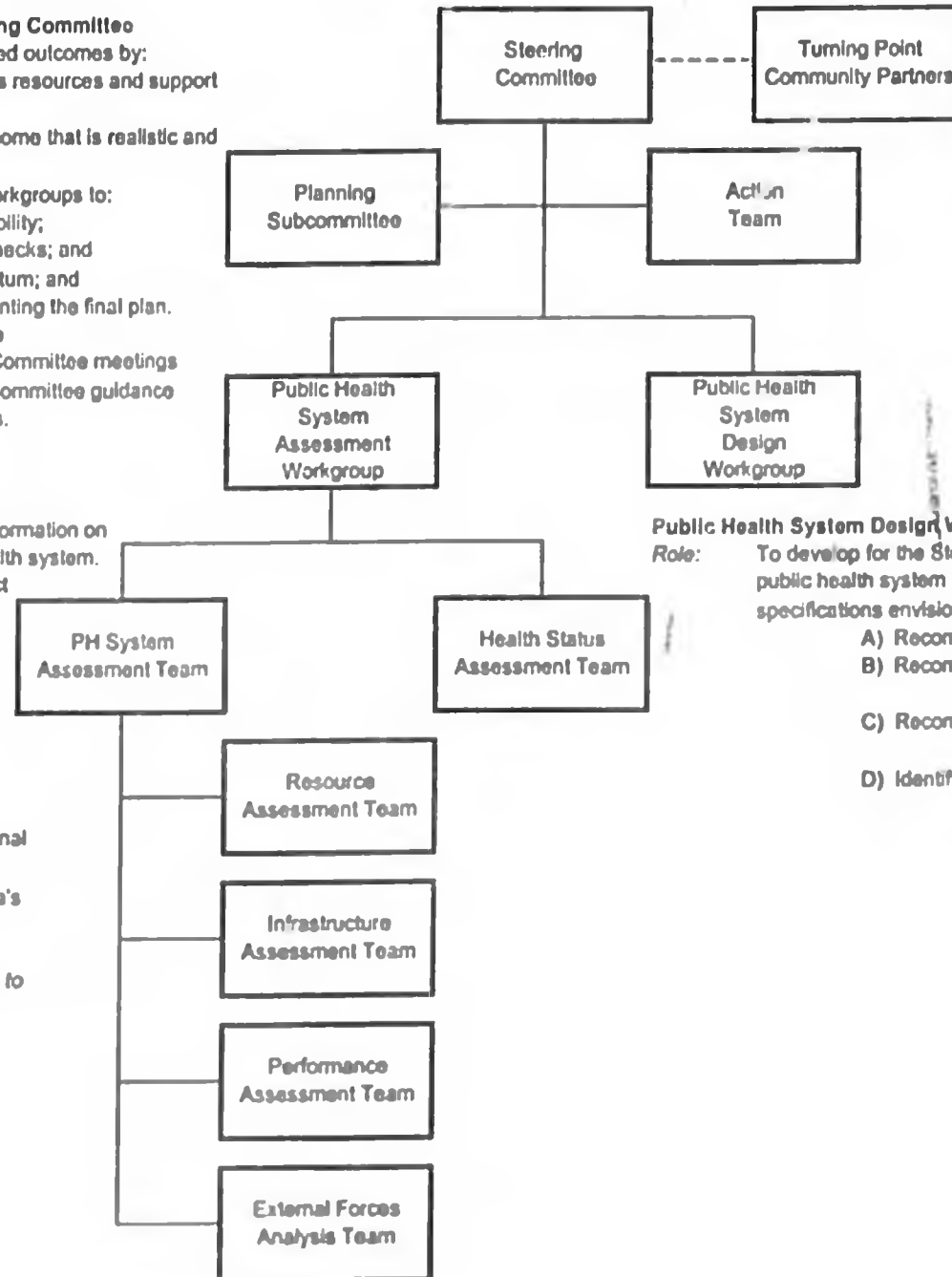
A) Define Assessment Process and Collect Information

- Inventory of current services, resources, and mandates
- Provider surveys
- Customer surveys
- Health status assessment

B) Conduct Best Practices Analysis

- lit search
- consult with national/international experts
- compare information on Alaska's system against models and standards

Note: Full workgroup provides oversight and guidance to smaller teams responsible for data collection.



Alaska Public Health Improvement Process Action Team

Role: Provide staff support to the Steering Committee; manage process support functions such as communications and marketing; and coordinate the work of the various workgroups.

Public Health System Design Workgroup

Role: To develop for the Steering Committee the design for a new public health system for Alaska that meets the system specifications envisioned by the Steering Committee.

- A) Recommend roles and responsibilities of different levels of government
- B) Recommend roles and responsibilities of private health care sector, tribal health organizations, and other public health system partners
- C) Recommend the appropriate organizational structure for Alaska's public health system
- D) Identify technical, legal, and revenue changes needed to implement public health system reform