

Public Health Infrastructure Policy Statement

POSITION:

The Association of State and Territorial Health Officials (ASTHO) recognizes robust governmental public health infrastructure is essential to improving health outcomes. State and territorial health agencies with a strong public health infrastructure ensure that every community has the public health workforce, services, and systems needed to promote and protect optimal health for all.ⁱ Enabling states and territories to strengthen their public health infrastructure through sustainable and flexible funding, development, and implementation of appropriate levels of public health services, and use of a set practice of standards creates a strong public health system for all.

BACKGROUND:

Public health infrastructure can be defined as a qualified workforce, effective workforce development and training, strong administrative readiness, up-to-date data and information systems, community partnerships, application of ethical standards, prudent planning and financial management, consistent equitable program and policy practice, and effective public health foundational capabilities to support essential public health services.ⁱⁱ Public health infrastructure is the foundation for providing the ten essential public health servicesⁱⁱⁱ and supporting the foundational areas of communicable and chronic disease protection, injury prevention, environmental health, maternal, child and family health, and access to clinical care.^{iv} While a strong public health infrastructure depends on collaboration among many organizations, state and territorial health agencies play a vital role in the nation's public health system.^v

Establishing public health standard practices, such as Public Health Accreditation, may lead to high effectiveness in public health practice and more efficiencies across the public health system. .^{vi} Although all state and territorial health agencies may not fully adopt the national model, accreditation standards and a minimum level of public health infrastructure may be important to encourage a more concentrated effort to improving public health infrastructure. Eighty-five percent of nationally accredited health departments agree that the accreditation process strengthens relationships to partners and nearly 70% of agencies believe the process to achieve accreditation improved evidence-based practices.^{vii}

Chronic underfunding of public health before the COVID-19 pandemic resulted in staffing levels that were insufficient for maintaining foundational public health services. Currently, the United States spends an estimated \$3.6 trillion annually on health. However, less than three percent of that health spending is in public health and prevention.^{viii} In 2022, through the American Rescue Plan Act, the Centers for Disease Control and Prevention awarded \$4.5 billion in grant funding over five years, through fiscal year 2027, to 107 public health departments, including all 50 states, five territories, three freely associated states, and Washington D.C. to support workforce recruitment and retention, as well as to strengthen foundational public health capabilities. While this important investment will help public health improve infrastructure through 2027, public health infrastructure must be maintained through sustainable funding for the long term.

Summary of Recommendations:

- Invest in public health infrastructure by providing sustainable, flexible, and disease agnostic funding to strengthen state and territorial health agencies.
- Support governmental health and the public health system by encouraging an acceptable minimum level of public health infrastructure.
- Increase the adoption of public health standards, such as Public Health Accreditation framework, strong strategic planning, and performance improvement practices.

RECOMMENDATIONS/EVIDENCE BASE:

1. **Invest in public health infrastructure by providing sustainable, flexible, and disease agnostic funding to strengthen state and territorial health agencies' abilities to enhance core capabilities and to deliver the essential public health services.**
 - a. Support increased and sustainable funding to support public health infrastructure.
 - b. Encourage innovation in governmental public health to respond to present and future public health needs in a dynamic and efficient manner.
 - c. Support flexible funding opportunities to enable public health jurisdictions to braid and layer dollars leading to improvements in public health infrastructure to meet the diverse and specific needs of communities they serve.
 - i. Allocate funding specifically aimed at enhancing core capabilities provided by state and territorial health agencies, such as assessment, policy development, preparedness and response, community partnership, communications, health equity, accountability, and performance management frameworks.
 - ii. Invest in technological advancements and data integration tools to streamline health information systems across agencies and organizations.
 - iii. Support workforce development initiatives by providing resources for training, recruitment, and retention of qualified public health professionals.
 - iv. Upgrade and modernize physical infrastructure such as laboratories, clinics, and health facilities to meet standards and accommodate evolving demands.
 - v. Allocate funding toward community-based programs and aimed at health education, promotion, and outreach to address specific health disparities.
 - vi. Support research endeavors and innovation, fostering the development of new technologies and interventions to tackle emerging health challenges.
 - vii. Develop flexible funding models that allow for adaptability to changing needs and emergencies, enabling allocation of resources where they are required.
 - viii. Establish monitoring and evaluation to track the effectiveness of programs and initiatives, ensuring accountability and continuous improvement.

2. **Support governmental health and the public health system by encouraging an acceptable level of state and territorial public health infrastructure.**
 - a. Support workforce recruitment, retention, and training practices to create a diverse and thriving public health workforce, succession planning approaches, and career development.
 - b. Provide standard access to, and use of, data and information systems, following accepted roadmaps for modernization.
 - c. Apply regular public health planning practices to discourage reactive approaches and to encourage appropriate assessment, policy development, and assurance.
 - d. Instill community partnership development standards in public health practices.
 - e. Apply ethical standards, prudent planning and financial management, and consistent equitable program and policy practice to all public health actions.

3. **Increase the adoption of public health standards, planning, and continuous quality improvement as a guide for state and territorial public health practice.**
 - a. Work to encourage an increased adoption of public health standards, such as the Public Health Accreditation framework.
 - b. Establish a routine state health assessment, state health improvement plan, and strategic plan with improvement targets, alignment with public health system transformation, organization goals, strategies, and objectives to strengthen the organization to better serve its communities.

- c. Develop a comprehensive workforce driven planning approach to align with organizational goals.
- d. Advance a performance management system and frameworks to support leadership decision-making and to institutionalize and grow performance management capacity.
- e. Develop core competencies in quality improvement to enhance state and territorial health agency organizational competencies, capabilities, and capacity.
- f. Educate governing entities and communities on public health accreditation standards, as a model, and the reported added value to agencies and communities.

POLICY APPROVAL HISTORY

Performance Improvement and Accreditation Policy Committee Approval: December 20, 2023

Board of Directors Approval: February 25, 2024

Policy Expires: February 28, 2027

ASTHO membership supported the development of this policy, which was subsequently approved by the ASTHO Board of Directors. Be advised that the statements are approved as a general framework on the issue at a point in time. Any given state or territorial health official must interpret the issue within the current context of his/her jurisdiction and therefore may not adhere to all aspects of this Policy Statement.

Copyright © 2024 ASTHO

ⁱ <https://www.cdc.gov/infrastructure/phig/program-overview.html>

ⁱⁱ <https://health.gov/healthypeople/objectives-and-data/browse-objectives/public-health-infrastructure>

ⁱⁱⁱ <https://www.cdc.gov/publichealthgateway/publichealthservices/essentialhealthservices.html>

^{iv} <https://phaboard.org/center-for-innovation/public-health-frameworks/the-foundational-public-health-services/?p=transformation/fphs>

^v <https://health.gov/healthypeople/objectives-and-data/browse-objectives/public-health-infrastructure>

^{vi} <https://www.cdc.gov/mmwr/volumes/65/wr/mm6531a3.htm#:~:text=The%20overwhelming%20majority%20of%20survey,health%20department%20document%20capacity%20to>

^{vii} <https://www.cdc.gov/publichealthgateway/accreditation/benefits.html>

^{viii} <https://www.tfah.org/report-details/publichealthfunding2020/>