Establishing a Uniform Chart of Accounts for Public Health Agencies

APHA 2017 Annual Meeting November 2017 Atlanta, GA

Betty Bekemeier, PhD, MPH, RN, FAAN Principal Investigator, PHAST University of Washington Funded by RWJF #73270



Presenter Disclosures

Betty Bekemeier

I have no financial support or conflict of interest to report



Introduction

Developing a Uniform Chart of Accounts (COA) for Public Health Agencies



 Project funded for 2 years by the RWJF



- PHAST in collaboration with practice partners a developed uniform COA
- Practice partners created reports of their revenues and expenditures using uniform COA

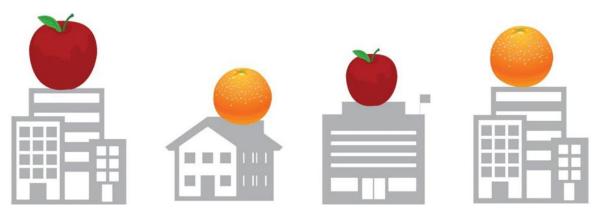


 Process was examined with participant feedback on validity of results and feasibility of widespread adoption of a uniform COA



Motivation

- What is a Chart of Accounts?
 - "A chart of accounts is a classification structure for an accounting system that systematically organizes the agency's financial data."
 D. Ross, PH Uniform COA Project (2015)
- Why a *Uniform* Chart of Accounts?
 - Make comparisons across space and time
 - Understand the cost of PH services and how they relate to health outcomes
 - Help demonstrate value of PH services to secure funding



Development of Uniform COA



- Draft COA developed by the Public Health Informatics Institute as part of the "Public Health Uniform Chart of Accounts Crosswalk Project"
- Collaborative refinement of draft COA with the help of practice partners using an iterative process
 - \circ Group conference calls
 - \circ Individual calls/conversations
 - \circ Online surveys



Framework for Uniform COA

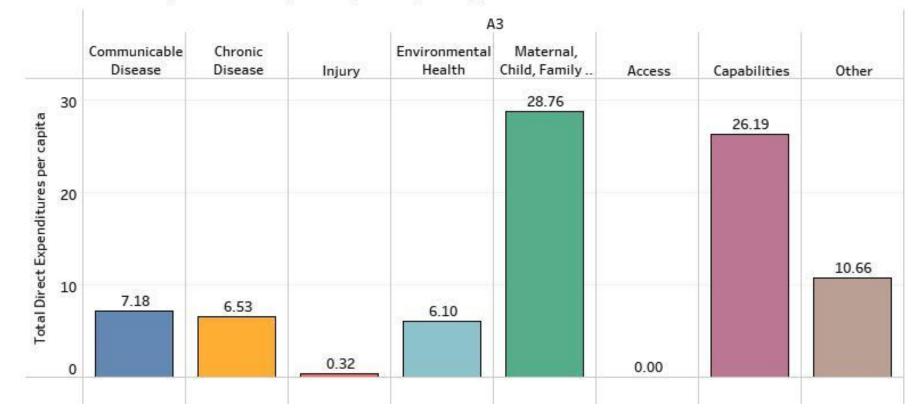
				nent and/or Comm is "above the line"					
Foundational Areas	Communicable Disease Control	Chronic Disease and Injury Prevention	Environmental Public Health	Maternal, Child, and Family Health	Access to and Linkage with Clinical Care				
FOUNDATIONAL PUBLIC HEALTH SERVICES	 Assessment (including Surveillance; Epidemiology; and Laboratory Capacity) All Hazards Preparedness/Response Policy Development/Support Communications Community Partnership Development Organizational Competencies (including Leadership/Governance; Health Equity; Accountability/Performance Management; Quality Improvement; Information Technology; Human Resources; Financial Management; and Legal) 								

Structure of Uniform COA

Program	Communicable Disease	Chronic Disease	Injury Prevention	Environmental Health	Maternal-Child & Family Health	Access & Linkage	Capabilities	All Other Activities
Areas	HIV	Tobacco	Falls	Food safety	Family planning	Health care licensing	Assessment	Other healthcare
Major 🛁	STD	Cancer	Motor vehicle	Water	Newborn screening	Eligibility determination	All hazards preparedness & response	Other social services
Programs	ТВ	Obesity	Firearms	Air	Coordination of services	Building health care capacity	Policy development & support	
	Hepatitis	Cardiovascular	Occupational injury	Sewerage	Direct services	Other access & linkage activities	Communications	
	Immunization	Asthma	Intentional injuries	Vector borne	Supplemental nutrition		Community partnerships development	
	Communicable disease epidemiology	Diabetes	Unintentional injuries	Solid waste	Population-based maternal-child health		Organizational competencies	
	Other communicable disease activities	Other chronic disease activities	Substance abuse	Lead	Other maternal-child & family activities			
			Other injury activities	Fish & shell fish				
				Toxic substance assessment				
				Other environmental health activities		DL	IAST	- Ar
							h Activities & Services	

Per Capita Spending, by Program Area

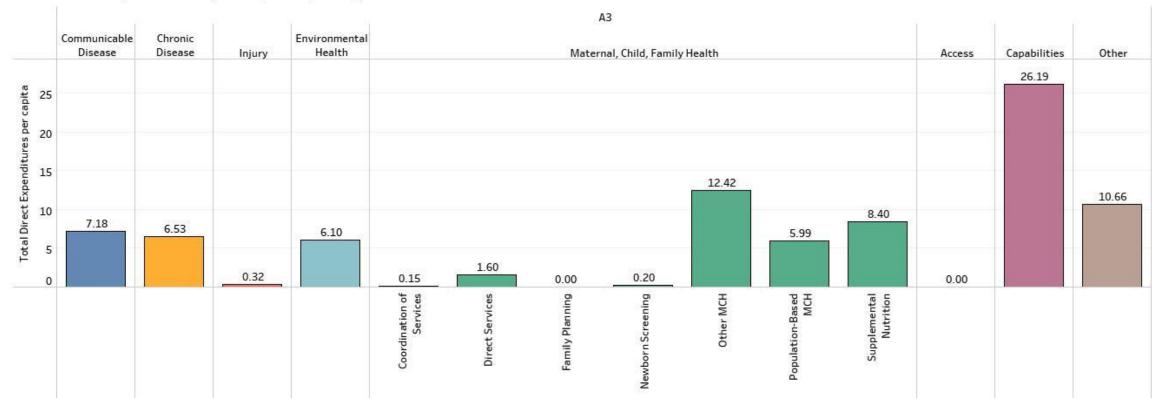
Total Direct Expenditures per capita by Program Area





Per Capita Spending, by Major Program

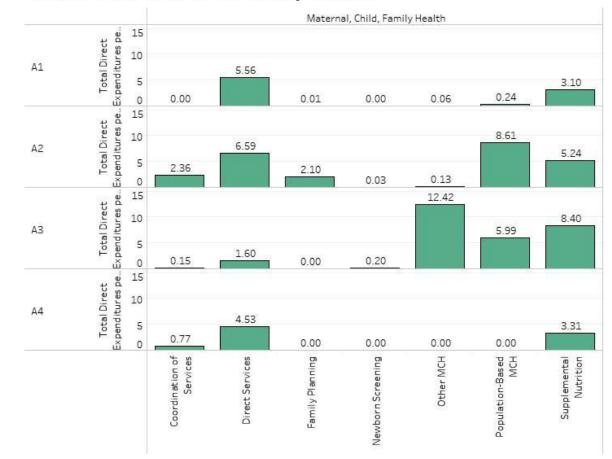
Total Direct Expenditures per capita by Program Area





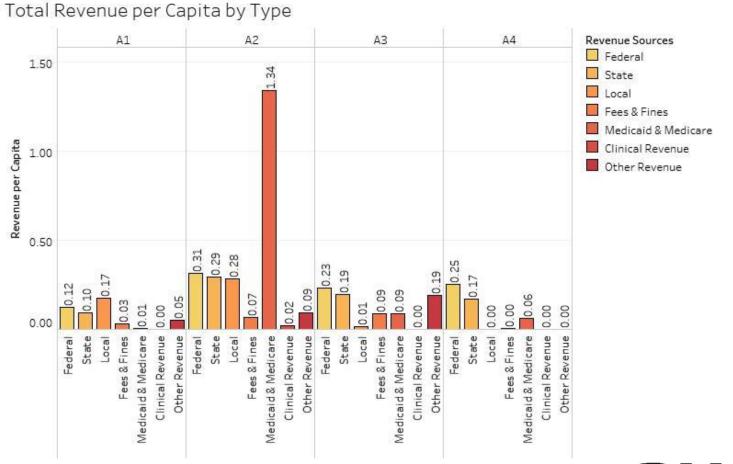
Comparison of Spending across LHDs

Total Direct Expenditures per capita for Major Programs within Maternal, Child, Family Health





Comparison of Revenue Sources across LHDs

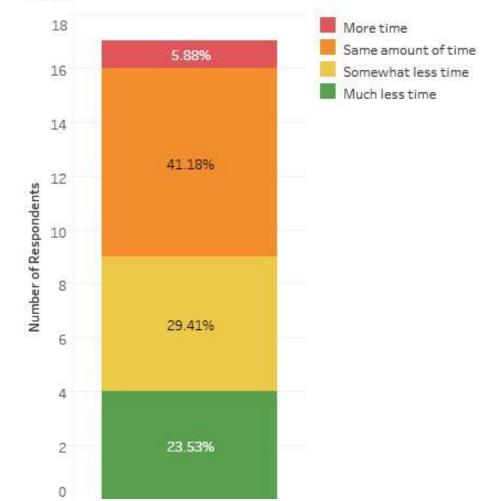




Time to Complete Crosswalk

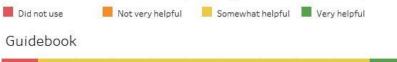
- Median time participants needed for LHDs to complete crosswalk: 28 hours
- 53% of participants estimate they would need less time to complete a crosswalk the second time around

How long would you estimate it would take to complete the crosswalk compared to this first time?



Resources to Complete Crosswalk

Guidebook and one-onone consultations with PHAST were considered most helpful We are interested in understanding how helpful the following materials and resources were in completing the crosswalk process:





One-on-one consultations with PHAST staff

			35.29%			5.8	8%		23.53%	8				35.29%				
0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
								Numbe	r of Resp	ondents								

Group conference calls



Agency-focused introduction to crosswalk



Value of a Uniform COA

For Planning

- "The information was interesting in that for the first time ever I was able to grab and look at immunizations and know exactly what it costs us."
- "[...] The trend from year to year could be really informative, and we think it could help us with our internal control [...] helping us determine where we could see the areas of needs. Changes in spending year over year could also give us early indications that would help us align our resources with those trends."
- "We can see how it might be helpful for programs to use in terms of prioritizing, strategic planning, seeking funding. [W]e can see the potential for the information to be helpful internally for planning purposes."



Value of a Uniform COA

For Advocacy

- "[...] I would think at a local level [it would be] easier to share that data, to have an impact on your budget folks, your legislature."
- "[W]e are very enthused, and it would definitely be part of what we would build into our strategic plan and our interaction with our legislatures to show comparisons and data and how we stand."



Thank you!

For more information visit <u>www.phastdata.org</u> or contact us via email at <u>phast@uw.edu</u>

