MEMORANDUM

Date: January 11, 2013

To: The Honorable Chairman and Members
Pima County Board of Supervisors

Chair and Members, Pima County Board of Health

Re: Reorganization of Medical and Health Services

The attached communication from Deputy County Administrator Jan Lesher describes the reorganization of Medical and Health Services, which has been approved and will be fully effective on July 1, 2013.

Pima County regularly evaluates not only the services we provide but the organizational structure by which the provision of these services is appropriately and efficiently managed. Increasing operational and regulatory challenges were, in part, the impetus for the County to assess the potential for strategic partnerships and to ultimately move forward with such initiatives. Kino Community Hospital, Pima Health Systems and Services, the County's Medicaid program, and Posada del Sol are all services that have successfully and efficiently transitioned out of the County's day-to-day management structure. Now is the appropriate time to modify the organizational structure to focus on the unique delivery requirements of public health and the oversight and coordination of what are now contractual operations with the private sector.

Ms. Lesher's communication fully describes the reorganization; but to summarize, of the 31 individuals who currently comprise the Department of Institutional Health:

- Four individuals are assigned to the Health Department as the Office of the Chief Medical Director;
- The nine individuals currently operating as the Office of the Behavioral Health Administrator are formalized as such;
- Two of the individuals within the Division of Health Research, Planning and Policy will be transferred to the Health Department to enhance the Health Policy Division within that department;
- Four of the individuals within the Division of Health Research, Planning and Policy, including the Assistant County Administrator for Health Policy, will form the Research and Planning Office reporting to the Deputy County Administrator for Medical and Health Services; and
The Department of Institutional Health will be eliminated, and the 12 remaining individuals will be transferred to the Health Department.

While work toward this consolidation will begin immediately, the reorganization will be incorporated into the Fiscal Year 2013/14 budget and will be fully effective July 1, 2013.

CHH/mjk

Attachment

c: Martin Willett, Chief Deputy County Administrator
   Jan Lesher, Deputy County Administrator for Medical and Health Services
   Hank Atha, Deputy County Administrator for Community and Economic Development
   John Bernal, Deputy County Administrator for Public Works
   Tom Burke, Director, Finance and Risk Management
   Robert Johnson, Budget Manager, Finance and Risk Management
MEMORANDUM

Date: January 8, 2013

To: C.H. Huckelberry
   County Administrator

From: Janet K. Lesher
   Deputy County Administrator
   Medical and Health Services

Re: Reorganization of Medical and Health Services

In the past, Pima County provided a broad array of services and programs under what is now known as Medical and Health Services. What was previously known as Pima County Integrated Health Care System (PCIHCS) included health service operations at the adult and juvenile detention centers, the Public Health Department, Pima Health System & Services, Posada del Sol, Pima Home Health and Kino Community Hospital. As recently as six (6) years ago, over 1,200 full time equivalent employees in Pima County health programs provided direct patient care, member services, contract management and oversight, in addition to public health services to juveniles and adults in the County’s correctional facilities, mothers and children, individuals with serious mental illness, elderly and disabled individuals, as well as performing emergency management and homeland security functions.

Pima County has regularly evaluated not only the services it provides but the organizational structure by which the provision of those services are appropriately and efficiently managed. The realization that each of these programs or entities were faced with a variety of increasing operational and regulatory challenges, was, in part, the impetus for the County to assess the potential for strategic partnerships and to ultimately move forward with such initiatives. Kino Community Hospital is leased to the University of Arizona and through a contractual relationship operates as the University of Arizona Medical Center – South Campus. Pima Health Systems & Services, the County’s Medicaid program, ceased the provision of services to members of the Arizona Health Care Cost Containment System (AHCCCS), Arizona Long Term Care System and Acute Programs. Posada del Sol was sold to a private company. The County contracts with a national vendor to provide medical and behavioral health services within adult and juvenile detention facilities. The last of these significant changes has come to fruition during this past year, and as a result, there are currently fewer than 400 employees in Medical and Health Services, the vast majority of whom are within the Pima County Public Health Department. Now is the appropriate time to review and modify the structure of the organization so that it can focus on the unique delivery requirements of public health and the oversight and coordination of what are now contractual operations with the private sector.
The Pima County Public Health Department is responsible for promoting and protecting the health of Pima County’s population by providing ten essential public health services. These services are:

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public health and personal health care workforce.
9. Evaluate effectiveness, accessibility and quality of personal and population-based health services.
10. Conduct research to identify new insights and innovative solutions to health problems.

Currently, responsibility for the provision of these public health services is managed within five (5) Divisions, which are:

1. Clinical and Nutritional Services
2. Community Health Services
3. Community Surveillance and Investigation
4. Pima Animal Care Center
5. Records and Administrative Services

On January 2, 2013, Dr. Francisco Garcia became the Director of the Health Department. Dr. Garcia was selected, in part, based on his background as a Public Health Administrator and a practicing physician. It is anticipated that as a physician and a community health leader, Dr. Garcia will be uniquely positioned to create public awareness about key public health issues, working toward improvements and systemic solutions. As other programs within Medical and Health Services decrease in size and scope, it is the Health Department that assumes responsibility for the key guiding principles of reduction of risk; uniform implementation and compliance with regulatory requirements, cost reduction and revenue maximization, standardization of financial and operational systems, and continuous quality enhancement. After Dr. Garcia has had an opportunity to work within the Department and fully understand the myriad of services currently offered, coupled with the additional
responsibilities that it is proposed be transferred from the Department of Institutional Health, it is possible that an internal reorganization will be proposed.

Department of Institutional Health

Established in January, 2002, the Division of Institutional Health was created in response to “the need to develop a centralized pool of expertise, under the Division of Institutional Health (DIH), formerly Medical Assistance, which can serve, over time, as the administrative oversight structure for the Pima County Integrated Health Care System (PCIHCS).” Over time the Division of Institutional Health became the Department of Institutional Health and its functions became:

1. Oversight of health care services operations at the Adult Detention Center and Juvenile Detention Center;
2. Provision of technical assistance, including operational reviews and management of business and finance operations, as directed by Pima County Administration;
3. Management of transition activities of the medical assistance unit and ongoing administration of Pima County’s mandated responsibilities, including Title 36; and
4. Coordination of corporate compliance activities for health care operations.

An initial focus of DIH efforts, transition of the correctional health services to a national vendor, has been accomplished. In addition, the goal of accreditation for the health services operation as compliant with nationally recognized standards has been accomplished. Accreditation by the National Commission on Correctional Health Care was achieved for PCADC and PCJCC in 2004.

The staff function of close collaboration with the courts to remain aligned to their performance standards for the provision of medical and behavioral health care should continue.

The functional areas of Health Research, Planning and Policy, the Office of the Chief Medical Director and the Office of the Behavioral Health Administrator are all budgeted within the Department of Institutional Health. Currently, thirty-one employees comprise the Department of Institutional Health.

Office of the Chief Medical Director

While Pima County has elected to contract with a private vendor to provide behavioral and medical services in both the Adult and Juvenile Detention Centers, the County remains responsible for the oversight and successful execution of the contracts. It is the Office of the Chief Medical Director that provides the administrative and clinical oversight. This
includes the regular auditing of the vendor to insure that nationally recognized clinical standards are being upheld in both the Adult and Juvenile Detention Centers. In addition, this Office provides clinical oversight for the Pima County Restoration to Competency Program, which has more than doubled in size in the past 18 months.

To provide for integration and collaboration of the Office of the Chief Medical Director with the Health Department, four (4) positions and the requisite budget associated with these positions will be transferred from DIH to the Health Department. These will include the Chief Medical Director, two nurses and a special staff assistant. The consolidation of the medical staff within the Health Department will allow Dr. Garcia to ensure, if not enhance, the provision of the vast array of community health services simply by realigning existing County personnel.

Office of the Behavioral Health Administrator

A 2006 review of the health services provided in Pima County noted, “the absence of a single point of accountability for behavioral health services.” In response to that concern and the construction of the voter approved Behavioral Health Pavilion and Crisis Response Center, the Office of the Behavioral Health Administrator was established. Areas of oversight or active involvement include:

- Pima County’s jail-based Restoration To Competency Program
- Pima County’s mandate to fund and administer involuntary commitment services (Title 36)
- Pima County’s Opiate Addiction Substance Abuse Treatment Program
- Behavioral Health initiatives and programming across Pima County
- Pima County’s behavioral health interface with the Criminal Justice system
- Behavioral Health service provision to detainees at the Pima County Adult Detention Complex
- Pima County’s US Department of Justice, 2nd Chance Re-Entry Grant
- Pima County’s US Department of Justice, Justice and Mental Health Collaboration Grant

A total of nine (9) positions and the concordant budget, which have been designated within the Department of Intuitional Health as the Office of the Behavioral Health, will formally become the Office of Behavioral Health. These are not new positions, but would simply be realigned within the Office of Behavioral Health and would include the Administrator, the Deputy Administrator, one administrative support position and the six positions that oversee the Restoration to Competency Program, including physicians and case managers and support personnel. The Behavioral Health Director will report to the Deputy County Administrator for Medical and Health Services, as it is not recommended
that this Office be moved to the Health Department at this time. While considerable synchronization will be required with the Health Department, the coordination needed with other Departments within Pima County can be more easily facilitated if direct access to the entities is possible.

Health Research, Planning and Policy

Historically, this unit of six (6) people has handled a wide array of projects including operational and financial evaluations, data compilation and analyses, preparation of Requests for Proposals, and various intergovernmental agreements. The staff has substantial knowledgeable of County administrative processes as well as the operational details associated with an array of services.

There are also staff positions within the Health Department dedicated to health policy. These individuals are currently developing a community health improvement plan, which is a prerequisite for public health accreditation, a goal of the Department.

It is important that Pima County have both the ability to analyze and develop for Board consideration health policy within the Health Department and personnel who, with a countywide focus, can collect data to assess and evaluate programs, fiscal accountability and outcomes. It is recommended, therefore, that two (2) of the positions currently assigned to the Health Research, Planning and Policy Division - a Program Coordinator and a Special Staff Assistant - be transferred to the Department of Health in order to create a more robust Health Policy Division within that Department.  The Assistant County Administrator and three of the members of that office - a Program Coordinator and two Special Staff Assistants - will become the Research and Planning Office under the direction of the Assistant County Administrator.  The Research and Planning Office will continue to be budgeted through Medical and Health Services but will provide information as well as planning, evaluation, and program development to integrate and mobilize community and County issues across departments.  The Research and Planning Office will research and analyze issues, collect and maintain data warehouses, establish tools to measure and monitor performance and outcomes and, through collaboration with a variety of stakeholders, report findings.  The Assistant County Administrator will report to the Deputy County Administrator for Medical and Health Services.

Office of Emergency Management and Homeland Security

No organizational changes are currently proposed to the Office of Emergency Management and Homeland Security.
Conclusion

The Medical and Health Services components of the County do not provide the same services they did just a few years ago. The services they do continue to provide, however, remain critical to the people of Pima County. Hard working, committed employees provide those services. By simply realigning positions, areas that need additional resources to protect our citizenry can receive them without increasing budgets and the total number of personnel.

As described above, of the thirty-one individuals who currently comprise the Department of Institutional Health:

A total of four (4) individuals are assigned to the Health Department as the Office of the Chief Medical Director;

The nine (9) individuals currently operating as the Office of the Behavioral Health Administrator are formalized as such;

Two (2) of the individuals within the Division of Health Research, Planning and Policy will be transferred to the Health Department to enhance the Health Policy Division within that Department;

Four (4) of the individuals within the Division of Health Research, Planning and Policy, including the Assistant County Administrator for Health Policy, form the Research and Planning Office; and

The Department of Institutional Health will be eliminated, and the twelve (12) remaining individuals will be transferred to the Health Department.

Currently the position of Division Director for Records and Administrative Services for the Department is vacant, and it would seem that expertise needed in areas such as budgets and contracts and organizational operations could be provided by personnel from DIH. Therefore, while no valuable County employee will lose his/her job, the actual number of positions required between the two entities (DIH and the Department of Health) can and will be decreased.

While work toward this consolidation can begin immediately, the reorganization will be incorporated into the County Administrator’s budget and, therefore, actualized July 1, 2013.

JKL:slg