

**Foundational Capabilities/Programs – Inclusions/Exclusions  
FY19 LPHA Local Government Investment Data Collection**

Step #2 of the FY19 LPHA Local Government Investment Data Collection requires LPHAs to break out their total county general and county other funds public health investment (minus exclusions) in the following categories:

- Communicable Disease Control
- Environmental Health
- Prevention & Health Promotion
- Access to Clinical Preventive Services
- Emergency Preparedness & Response
- Cross-cutting Strategic Development and Leadership
- Administrative and Other Indirect Costs

Key Definitions:

**County General Funds** = Funds that come from the county general fund budget.

**County Other Funds** = Generally, these are funds that the county generates through collection of fees, insurance reimbursement or other means. Grants from outside funders are NOT considered County Other Funds.

**In-Kind Support** = These are non-cash contributions. These are costs that are covered by the LPHA/County as in-kind and do not appear in the LPHA's account systems and reports. Contribution amounts should be based on the fair market value of the contributions. (Example: LPHA uses a county-owned or leased building but is not charged rent either directly or through indirect costs)

The table below can be used as a guide for determining how to assign costs among the various categories. The total amount for each category should be reported in the online tool for Step #2. Once you complete Step #1 of online reporting, the email contact provided in Step #1 will receive a link to a second form that allows you to report the breakout across the program, capability, strategic development/leadership and administrative categories.

*Whenever possible, expenditures should be reported in the first five categories in the table below. However, if there are cross-cutting expenditures related to foundational capabilities/programs that cannot be assigned to one of the first five categories, then either the Cross-Cutting Strategic Development & Leadership or Administrative & Indirect Costs categories should be used. **Expenditures should only be reported once in the tool.***

*The goal is to capture, to the extent possible, the true costs for each area, including direct and indirect costs. **Please report actual expenditures, NOT budgeted amounts.***

*Because this reporting requires programmatic as well as decisions about categories to which to assign costs, the LPH Administrator and Fiscal Staff are strongly encouraged to work together in completing the data collection tool.*

	<b>Communicable Disease Control</b>	<b>Prevention &amp; Health Promotion</b>	<b>Environmental Health</b>	<b>Access to Clinical Preventive Services</b>	<b>Emergency Preparedness &amp; Response</b>	<b>Cross-Cutting Strategic Development &amp; Leadership</b>	<b>Administrative and Other Indirect Costs</b>
<b>Included</b>	<p>Note: If there are specific questions about whether or not a cost is included, please refer to the Communicable Disease Control section of the <a href="#">Public Health Modernization Manual</a> (September 2017) to determine if the function/activity/deliverable funded is described in the manual.</p> <p>Communicable disease surveillance, investigation, intervention and control, response evaluation.</p> <p>Tuberculosis, sexually transmitted infections, HIV, food-borne illness</p> <p>School law work</p> <p>Immunization clinics to provide medical countermeasures during a public health emergency (public health emergency as defined by <a href="#">ORS 433.442</a>)</p> <p>Syringe exchange program</p> <p>Personal protective equipment to support population health communicable disease work (e.g. fit testing for CD staff)</p>	<p>Note: If there are specific questions about whether or not a cost is included, please refer to the Prevention &amp; Health Promotion section of the <a href="#">Public Health Modernization Manual</a> (September 2017) to determine if the function/activity/deliverable funded is described in the manual.</p> <p>Population health work focused on social, emotional and physical health and safety.</p> <p>Programs that use policy, systems, environmental change strategies to address root causes of poor health outcomes (such as educational attainment, housing, transportation, community supports).</p> <p>Programs that address contributors to chronic disease from a population health perspective such as poor nutrition, inadequate physical activity, substance use disorders, tobacco use, mental health, oral health, intentional and unintentional injuries.</p> <p>Tobacco prevention and education</p> <p>Prescription drug overdose prevention</p> <p>Maternal and child health programs, including Babies First! and Nurse-Family Partnership</p> <p>Teen pregnancy prevention</p> <p>Population-based oral health work</p> <p>Sustainable relationships for community health</p>	<p>Note: If there are specific questions about whether or not a cost is included, please refer to the Environmental Health section of the <a href="#">Public Health Modernization Manual</a> (September 2017) to determine if the function/activity/deliverable funded is described in the manual.</p> <p>Identification and prevention of environmental health hazards</p> <p>Mandated regulatory inspections (food, pool, lodging, drinking water systems)</p> <p>Promotion of land use planning</p> <p>Health impact assessments</p> <p>Brownfields</p> <p>Climate and health</p> <p>Lead poisoning prevention</p> <p>Domestic well safety</p> <p>Transportation/Land Use Planning</p>	<p>Note: If there are specific questions about whether or not a cost is included, please refer to the Access to Clinical Preventive Services section of the <a href="#">Public Health Modernization Manual</a> (September 2017) to determine if the function/activity/deliverable funded is described in the manual.</p> <p>Assurance of access to cost-effective clinical care</p> <p>Assurance of access to effective vaccination programs</p> <p>Assurance access to effective tuberculosis treatment programs</p> <p>Assurance access to effective preventable disease screening programs</p> <p>Reproductive health community participation and assurance of access</p>	<p>Note: If there are specific questions about whether or not a cost is included, please refer to the Emergency Preparedness &amp; Response section of the <a href="#">Public Health Modernization Manual</a> (September 2017) to determine if the function/activity/deliverable funded is described in the manual.</p> <p>Preparation for emergencies</p> <p>Response to emergencies</p> <p>Coordination and communication before and during an emergency</p> <p>Cities readiness initiative</p> <p>Public health emergency preparedness</p>	<p>This category should capture any costs that support overall infrastructure for foundational capabilities not otherwise captured in the other categories.</p> <p>In addition, sometimes an expenditure crosses more than one of the following:</p> <ul style="list-style-type: none"> <li>• Communicable disease control</li> <li>• Prevention &amp; health promotion</li> <li>• Environmental health</li> <li>• Access to clinical preventive services</li> <li>• Emergency preparedness &amp; response</li> </ul> <p>OR when the expenditure is specific to supporting foundational capabilities that cross multiple program areas, this category should be used.</p> <p>Note: If there are specific questions about whether or not a cost is included, please refer to the Leadership and Organizational Competencies, Health Equity and Cultural Responsiveness, Community Partnership Development, Assessment and Epidemiology, Policy and Planning and Communications sections of the <a href="#">Public Health Modernization Manual</a> (September 2017) to determine if the function/activity/deliverable funded is described in the manual.</p> <p>Example of expenditures that may be reported in this category:</p> <ul style="list-style-type: none"> <li>• Public health administrator time on efforts that are cross-cutting</li> <li>• Public health officer time on efforts that are cross-cutting.</li> </ul>	<p>This category should capture overhead costs, not otherwise reported in the other categories. These may include:</p> <ul style="list-style-type: none"> <li>• Rent</li> <li>• Utilities</li> <li>• Information Technology</li> <li>• Human Resources</li> <li>• Accounting services</li> <li>• Facilities</li> <li>• Maintenance</li> <li>• Administrative support, not otherwise reported in the other categories</li> <li>• Indirect charges assessed by county government that cannot be assigned to another category</li> </ul>

	Communicable Disease Control	Prevention & Health Promotion	Environmental Health	Access to Clinical Preventive Services	Emergency Preparedness & Response	Cross-Cutting Strategic Development & Leadership	Administrative and Other Indirect Costs
		WIC Programs  Early Learning Partnership Work				<ul style="list-style-type: none"> <li>• Support for public health accreditation</li> <li>• Support for community health assessments</li> <li>• Support for community health improvement plans</li> <li>• Vital records</li> <li>• Quality improvement</li> <li>• Support for health equity and cultural responsiveness work</li> <li>• Support for community partnership development</li> <li>• Communications support</li> </ul>	
<b>Excluded</b>	Anything reported in the other five areas outlined in this table  Provision of Ryan White case management or similar services  Immunization clinics, including costs associated with providing immunizations at targeted community events, except when done as medical counter measures during a public health emergency as defined by ORS 433.442.	Anything reported in the other five areas outlined in this table  Individual dental services	Anything reported in the other five areas outlined in this table.	Anything reported in the other five areas outlined in this table.  Reproductive health client services  Direct client services, including those direct services provided through a school-based health center	Anything reported in the other five areas outlined in this table.		Anything reported in the other five areas outlined in this table.
<b>Additional Exclusion</b>	<ul style="list-style-type: none"> <li>• Medical examiner</li> <li>• Mental health services and addiction treatment</li> <li>• Provision of emergency medical services</li> <li>• Refugee resettlement screening</li> <li>• Animal control/shelter</li> <li>• Primary care services</li> <li>• Occupational health services</li> <li>• Clinical support</li> <li>• Corrections health, including jail nurse</li> <li>• Oregon Health Plan outreach and enrollment</li> </ul>						