







GOVERNING BODY STATEWIDE

Foundational Public Health Services Assessment Report

Prepared By:

The Public Health System Improvement Office



dphhs.mt.gov/publichealth/buildinghealthysystems/index



HHSPHSDBuildingHealthySystems@mt.gov



Table of Contents

- 01 Message from Montana 21C
- 02 Foundational Public Health Services (FPHS)
- 03 Montana's FPHS assessment
- 04 Statewide Trends
- 05 FPHS Results by Foundational Capability
- 07 FPHS Results by Jurisdiction Size Classification
- 08 FPHS Strengths Among Jurisdictions
- 09 FPHS Strengths in Your Region
- 15 Next Steps
- 17 Appendix all responses





Message from Montana 21C: Strengthening Public Health Together



Montana 21C works to strengthen the public health system through the delivery of foundational public health services.

The foundation of Montana's public health system is the local and tribal health departments and resourceful public servants who are committed to the health and well-being of their fellow Montanans.

Montana 21C: Strengthening Public Health Together seeks to build a stronger and more agile public health system. We will do this by listening to local and tribal public health staff and the people they serve to create a shared vision of the system and to identify the resources needed to realize that vision.

We are starting by assessing our current system to understand the strengths and needs of local health departments. From that assessment, we will build consensus across Montana about what is needed to build a strong and agile public health system, and to align expectations with the resources needed for success. https://montanapublichealth21c.org/

How to join efforts or more information? Contact info@montanapublichealth21c.org

Montana 21C Benefits

- Increased Access to Resources
- Strengthening Capacity
- Workforce Development
- Better Coordination and Collaboration
- Advocacy and Policy Influence
- Improved Health Outcomes
- Elevate Health Across Montana





What are the Foundational Public Health Services?

The Public Health Accreditation Board (PHAB) contributes to the advancement of public health practice and system improvement to support people living their healthiest lives. PHAB defines the Foundational Public Health Services (FPHS) as the minimum package of public health capabilities and programs that no jurisdiction can be without. The FPHS framework was updated in 2022 to assure it reflects the evolving nature and modernization of governmental public health.

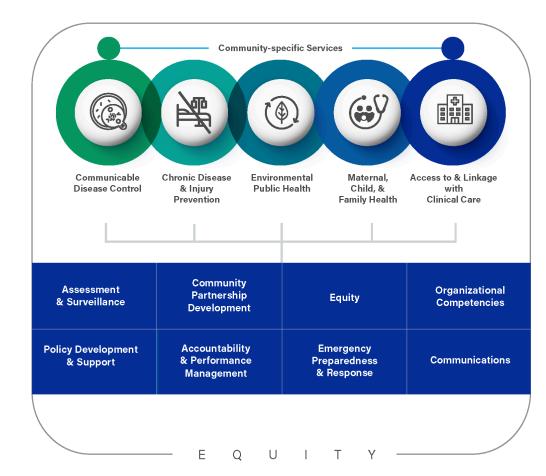
The FPHS framework outlines the unique responsibilities of governmental public health and can be used to explain the vital role of governmental public health in a thriving community; identify capacity and resource gaps; determine the cost for assuring foundational activities; and justify funding needs. However, to best serve their communities, health departments will provide additional services and may require additional capacity in different areas.

Local boards of health and governing bodies play a crucial role in Montana's public health system and support the delivery of the Foundational Public Health Services.

Foundational Public Health Services

Foundational Areas

Foundational Capabilities





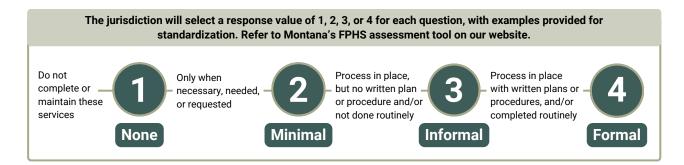




Montana's Foundational Public Health Services Assessment

The Montana Department of Public Health and Human Services Public Health System Improvement Office, in partnership with the Montana Public Health Institute and Confluence Public Health Alliance, conducted an assessment from June to November 2024 of all 60 local and tribal jurisdictions regarding the delivery of Foundational Public Health Services (FPHS).

This assessment comprised two key components: preliminary work focused on full-time equivalents (FTEs) and budgetary information, along with the FPHS assessment tool. This tool was developed by analyzing FPHS assessments from other states and PHAB's cost and capacity tool. The questions were then rephrased to align with Montana's public health system. In total, the assessment consisted of 134 questions, and at the conclusion, each health jurisdiction was asked to identify their top three strengths and areas for improvement.



Why was the survey completed?



01. Understand the delivery of Foundational Public Health Services across Montana.



02. Utilize the data to capitalize on strengths and address areas of need by collaborating with local and tribal jurisdictions and Montana 21C.

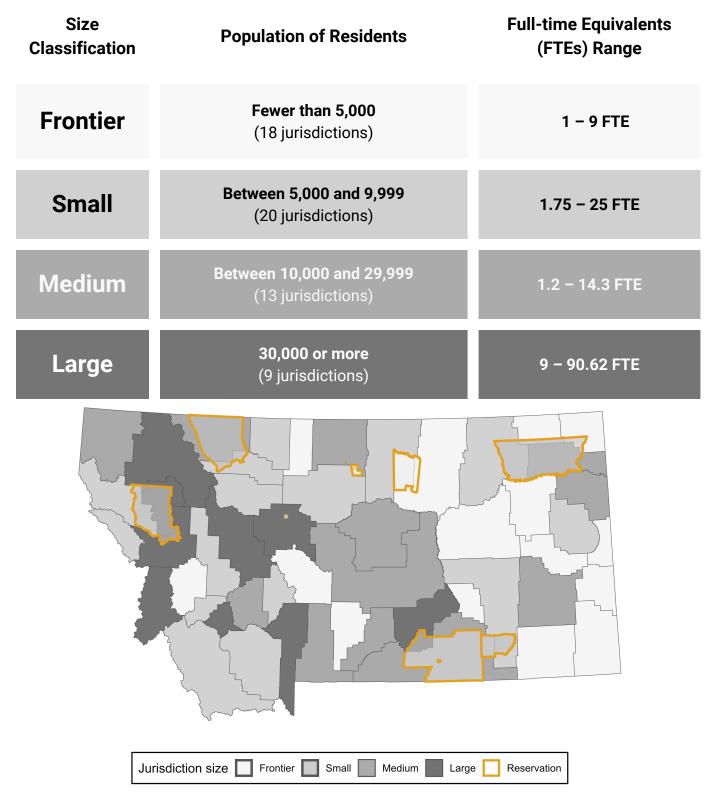


03. Effectively combine, allocate, or utilize our collective resources—such as talent, intelligence, funding, and more—to ensure that all health jurisdictions can deliver the Foundational Public Health Services they aspire to provide.





Statewide Patterns



FTE information was self-reported by jurisdictions in the FPHS assessment prework. Size classification based on the Association of Montana Public Health Officials (AMPHO) classifications using 2020 census data.

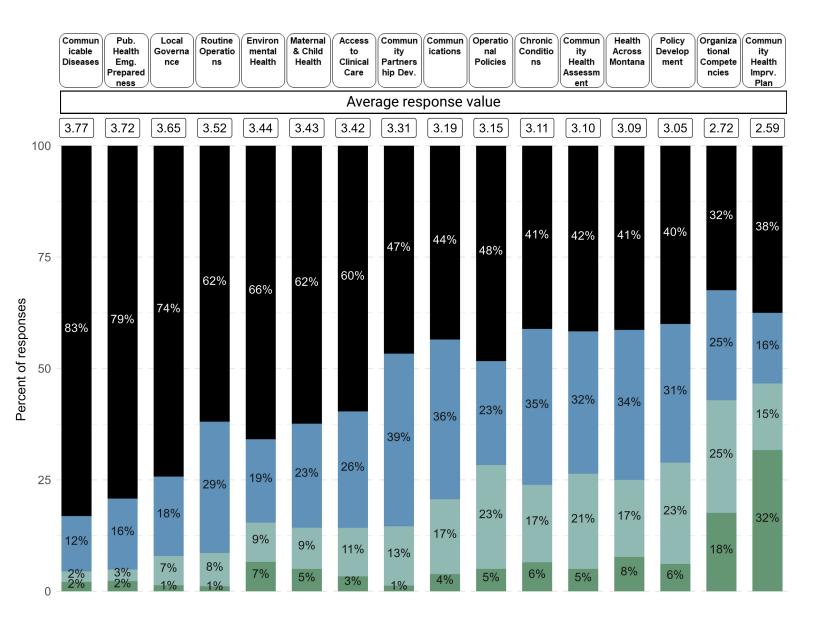




FPHS Results by Foundational Program and Capability

FPHS framework was used to categorize the assessment questions into the domains below. An average response score for each domain area was estimated based on response values from all jurisdictions in Montana.

Bars below the average response value illustrate the percent of responses that were a 1, 2, 3, or 4 within each domain area. The order of domains is from highest average score to the lowest.

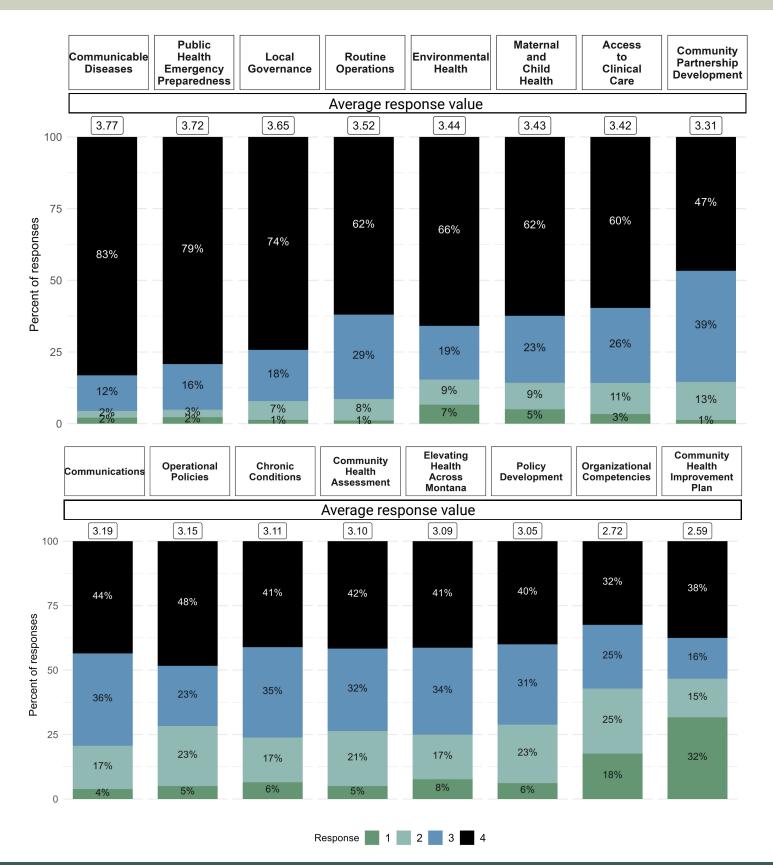


Response 1 2





FPHS Results by Foundational Program and Capability



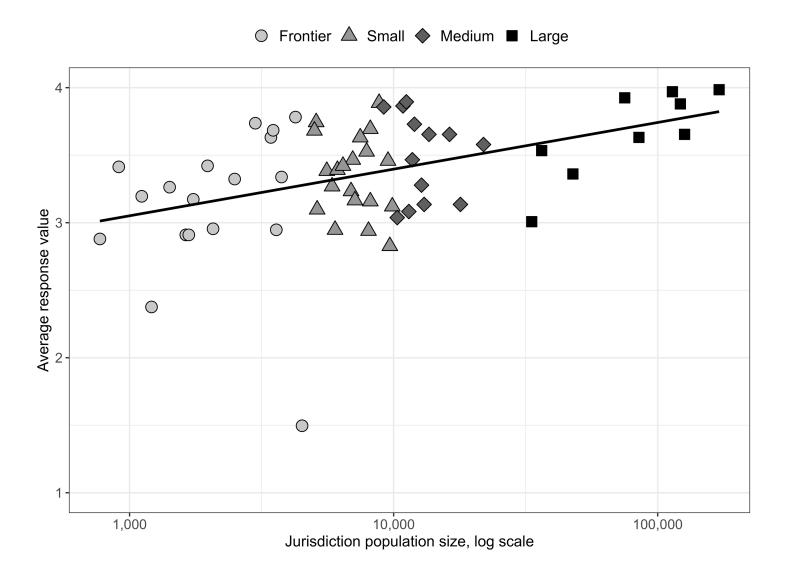




FPHS Results by Jurisdiction and Size Classification

To assess for potential patterns in response values by jurisdiction attributes, FPHS assessment response values were summarized by jurisdiction population and size classification.

The average response value was calculated for each jurisdiction and plotted by the jurisdiction's population size. Each jurisdiction is represented by a symbol that corresponds to its size classification (frontier, small, medium, large). A linear line of best fit indicates a positive correlation between jurisdiction population size and average response value.

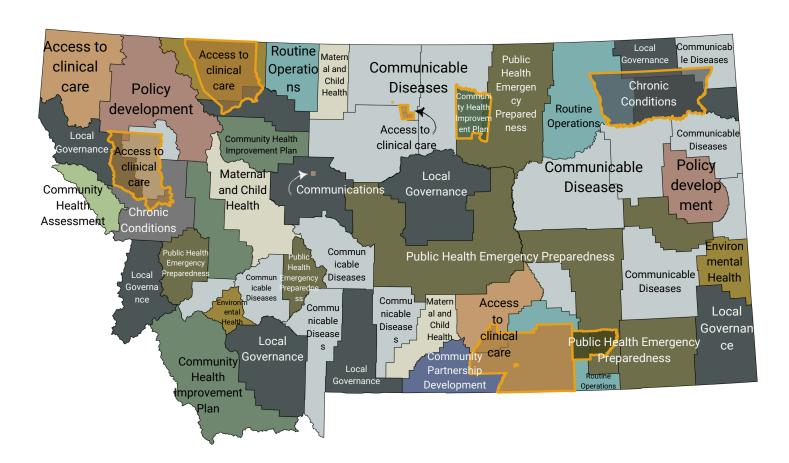






FPHS Strengths Among Jurisdictions

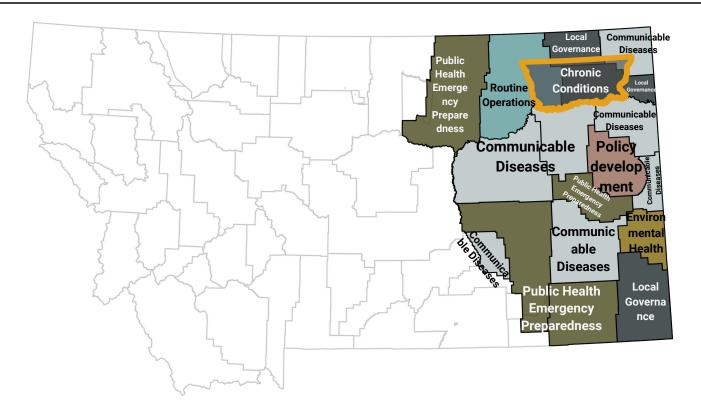
Response values within each foundational program and capability domain area were averaged by jurisdiction. One domain area with the highest average score for each jurisdiction is illustrated on the map below. Note that many jurisdictions had multiple domain areas with the same high average value, for those jurisdictions one domain was randomly selected for visualization.







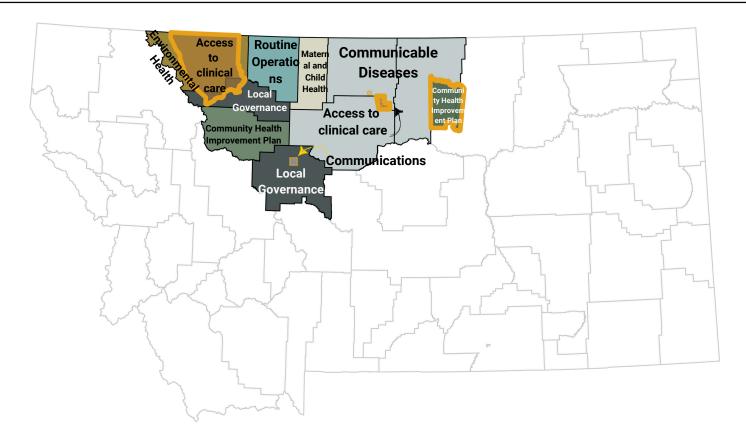
Local and tribal health jurisdictions were grouped into regions according to Montana Public Health Association criteria. As shown above, one domain area with the highest average score for each jurisdiction is illustrated on the map below, just for your region. Note that for jurisdictions with multiple domain areas with the same high average value, one domain was randomly selected for visualization.







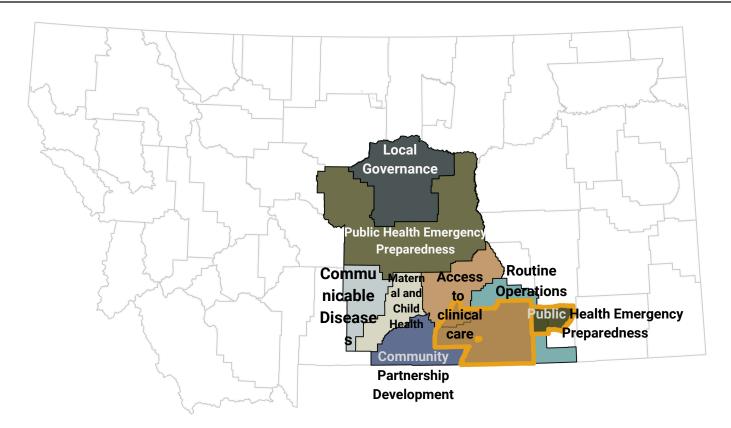
Local and tribal health jurisdictions were grouped into regions according to Montana Public Health Association criteria. As shown above, one domain area with the highest average score for each jurisdiction is illustrated on the map below, just for your region. Note that for jurisdictions with multiple domain areas with the same high average value, one domain was randomly selected for visualization.







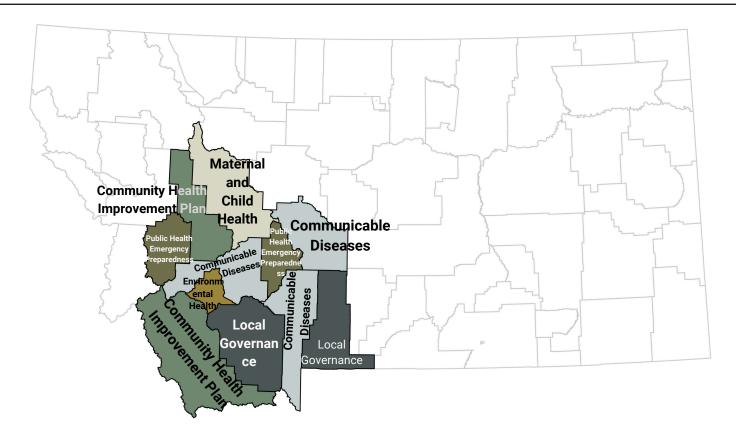
Local and tribal health jurisdictions were grouped into regions according to Montana Public Health Association criteria. As shown above, one domain area with the highest average score for each jurisdiction is illustrated on the map below, just for your region. Note that for jurisdictions with multiple domain areas with the same high average value, one domain was randomly selected for visualization.







Local and tribal health jurisdictions were grouped into regions according to Montana Public Health Association criteria. As shown above, one domain area with the highest average score for each jurisdiction is illustrated on the map below, just for your region. Note that for jurisdictions with multiple domain areas with the same high average value, one domain was randomly selected for visualization.







Local and tribal health jurisdictions were grouped into regions according to Montana Public Health Association criteria. As shown above, one domain area with the highest average score for each jurisdiction is illustrated on the map below, just for your region. Note that for jurisdictions with multiple domain areas with the same high average value, one domain was randomly selected for visualization.

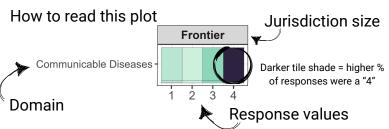


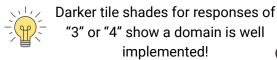




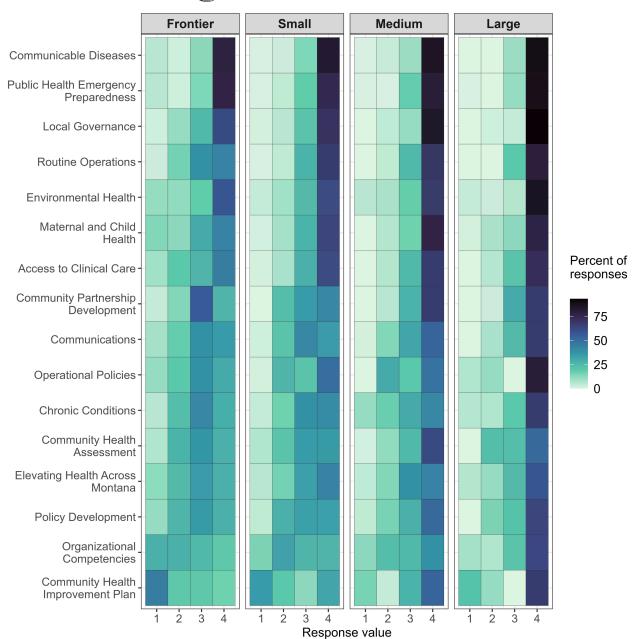
FPHS Results by Foundational Program and Capability & Grouped by Jurisdiction Size

This heatmap shows the distribution of response values (1 to 4) within each foundational program and capability domain area, grouped by jurisdiction size classification.





Darker tile shades for "1" or "2" indicate there is room for growth



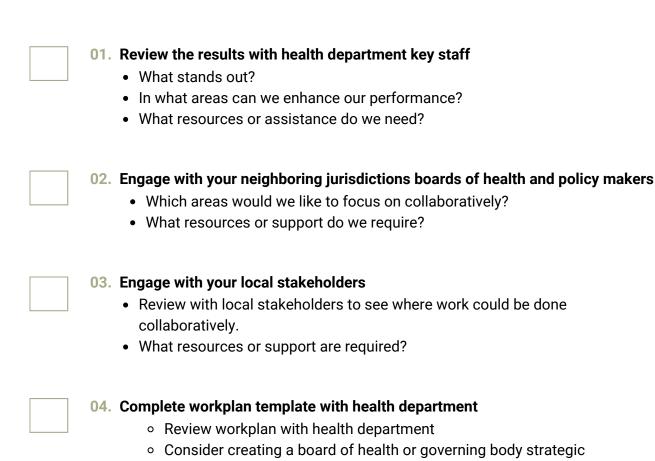




Next Steps

First, we want to acknowledge your hard work and thank you for taking the time to complete this assessment and review the report.

This report will serve as a valuable tool for your organization to track its impact and improvements over time. This section outlines your strategy for maintaining the positive progress achieved so far. By utilizing the FPHS assessment as a roadmap, we can strengthen Montana's public health system—making it more proactive, data-driven, and focused on enhancing outcomes for all. Together, we can bolster public health in Montana.



Send completed workplan to kpride@mt.gov or

meagan.gillespie@mt.gov

plan









Follow-up Questions

Please complete the following questions with your health department and send responses to kpride@mt.gov and Meagan.Gillespie@mt.gov.

How does the board of health/governing body plan to assist the health department improve?

What resources, TA, or anything else do you need to assist with the improving your jurisdictions delivery of FPHS?

Is there a specific domain or components of a domain you'd like to tackle, but you recognize there are larger challenges, such as staffing, time, or funding?

Are there opportunities to utilize resources across the state to support you in reaching your goals?





Appendix All Survey Responses

This section is organized by domain, and all questions within each domain. The order follows that of the assessment.

For each domain, an initial comparison of the average question response value in your jurisdiction is compared with the average value among similar sized jurisdictions and the Montana state average.

Below, each question appears on the vertical axis and the reported response value for your jurisdiction is compared with similar sized jurisdictions and the Montana state average. A brief description of each question is summarized on the vertical axis.

Community Health Assessment and Community Health Improvement Plan	18
Policy Development and Community Partnership Development	19
Communications	20
Organizational Competencies	21
Operational Policies and Routine Operations	22
Local governance and Elevating Health Across Montana	23
Chronic Conditions	24
Public Health Emergency Preparedness	25
Communicable Diseases	26
Environmental Health	27
Maternal and Child Health	29
Access to Clinical Care	30

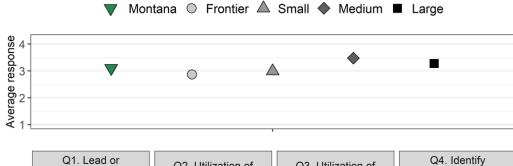
health concerns

patterns



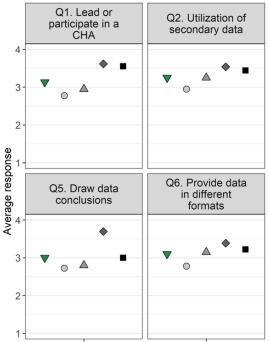


Community Health Assessment



Q3. Utilization of

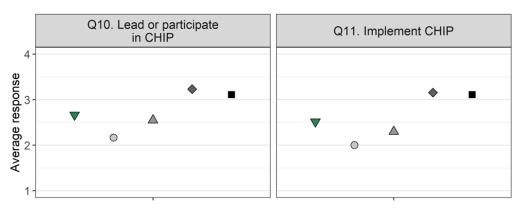
primary data



Community Health Improvement Plan Montana ○ Frontier ▲ Small ◆ Medium ■ Large

Questions









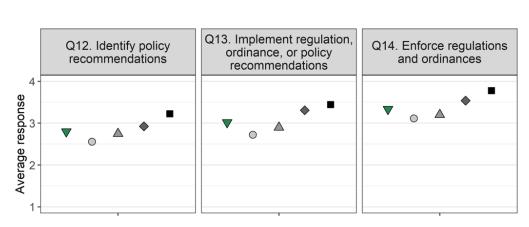
Policy Development

Domain

Montana Frontier Small Medium Large

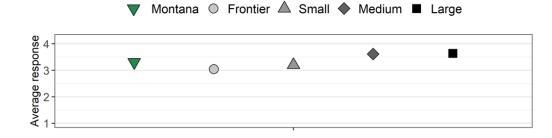
Small Medium Large

Questions

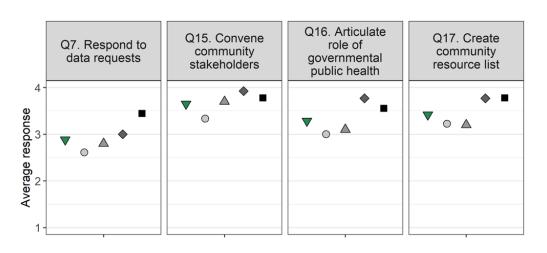


Communicty Partnership Development

Domain



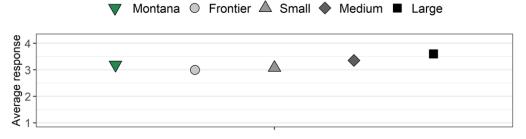
Questions

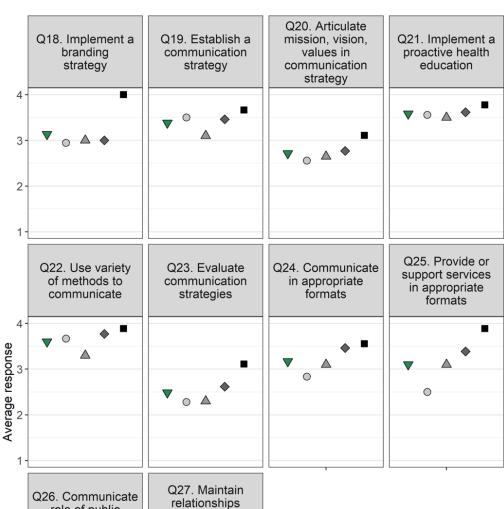


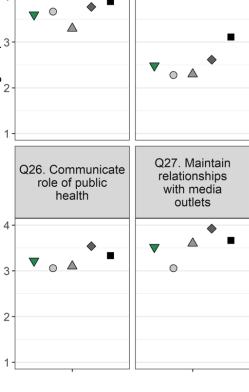


Communications



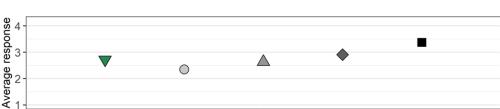




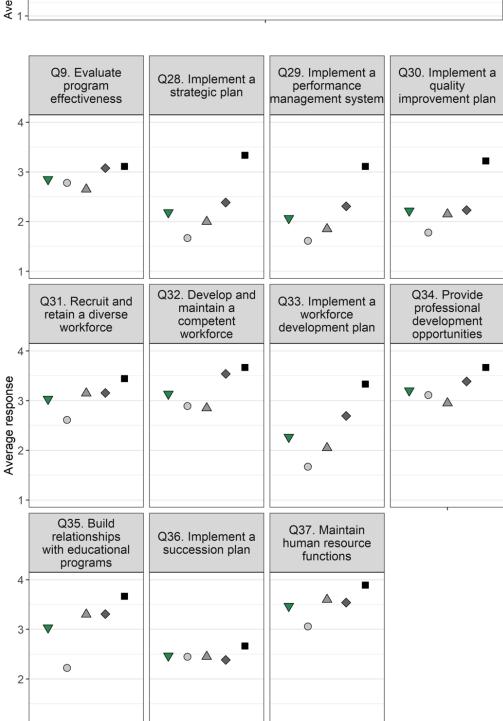




Organizational Competencies



Montana ○ Frontier △ Small ◆ Medium ■ Large



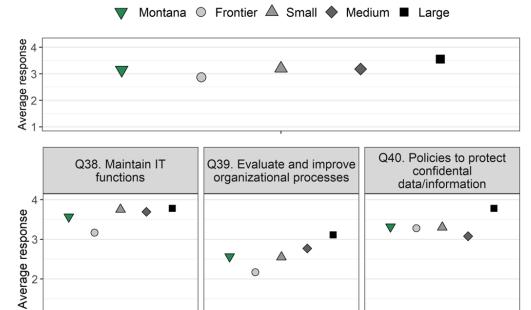




Operational Policies

Domain

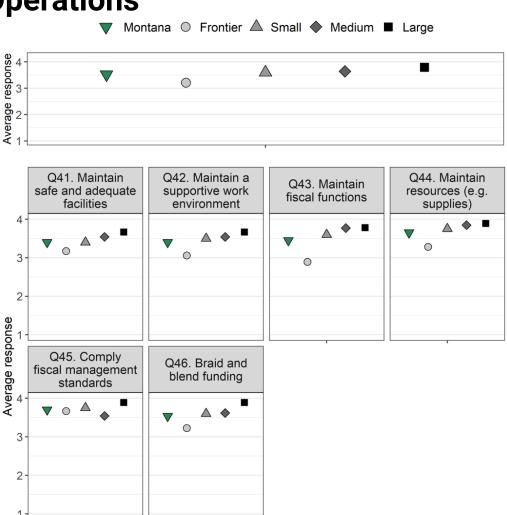
Questions



Routine Operations

Domain

(Juestions

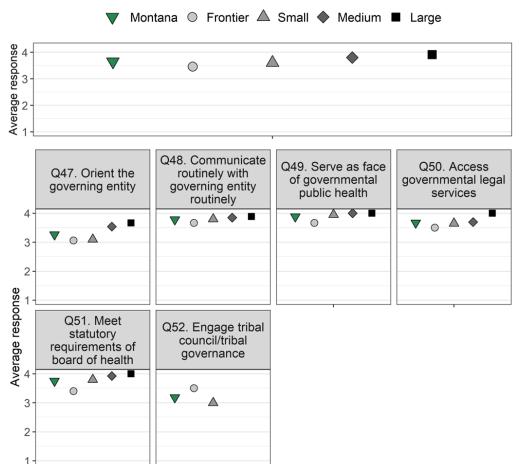




Local Governance

Domain

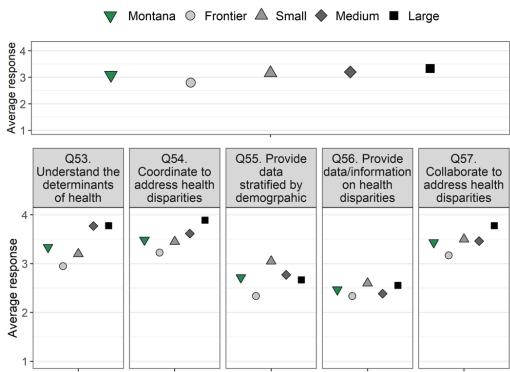
estions (



Elevating Health Across Montana

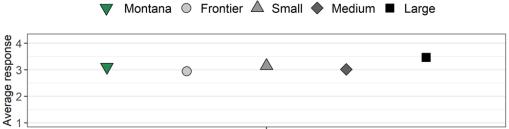
Domain

Questions

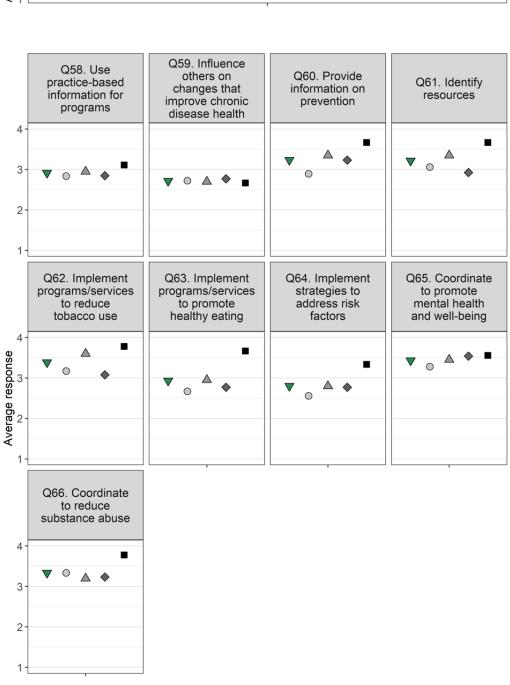




Chronic Conditions





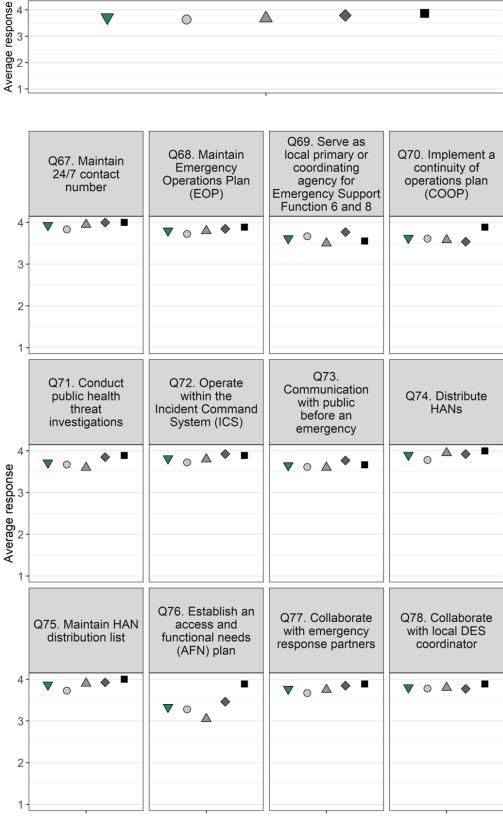




Public Health Emergency Preparedness



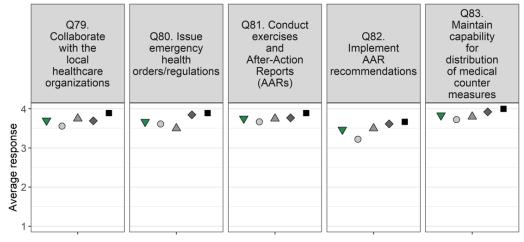
Montana ○ Frontier △ Small ◆ Medium ■ Large





Public Health Emergency Preparedness (Cont'd)

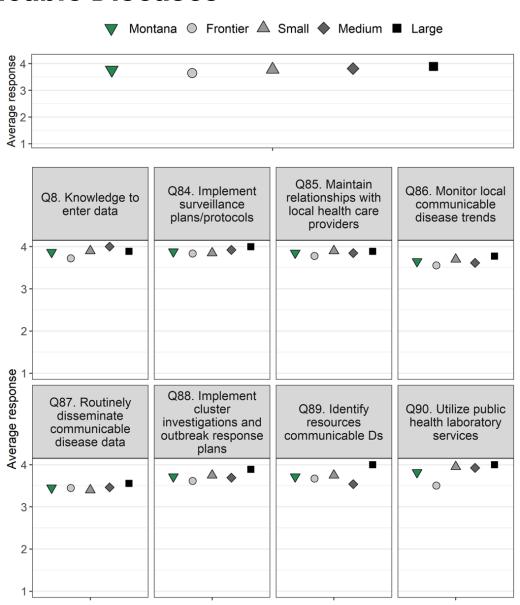
Questions



Communicable Diseases

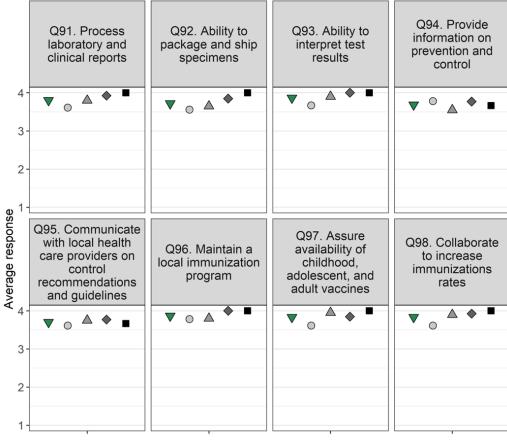
Domain

Questions





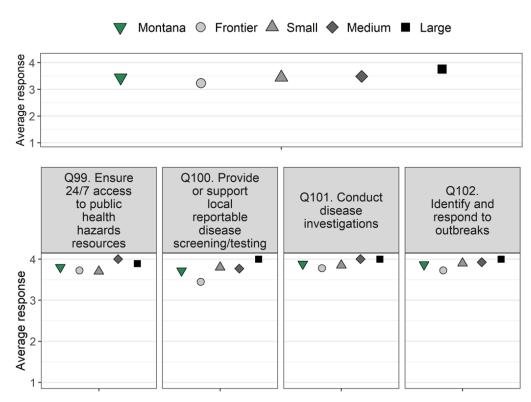
Communicable Diseases (Cont'd)



Environmental Health

Domain

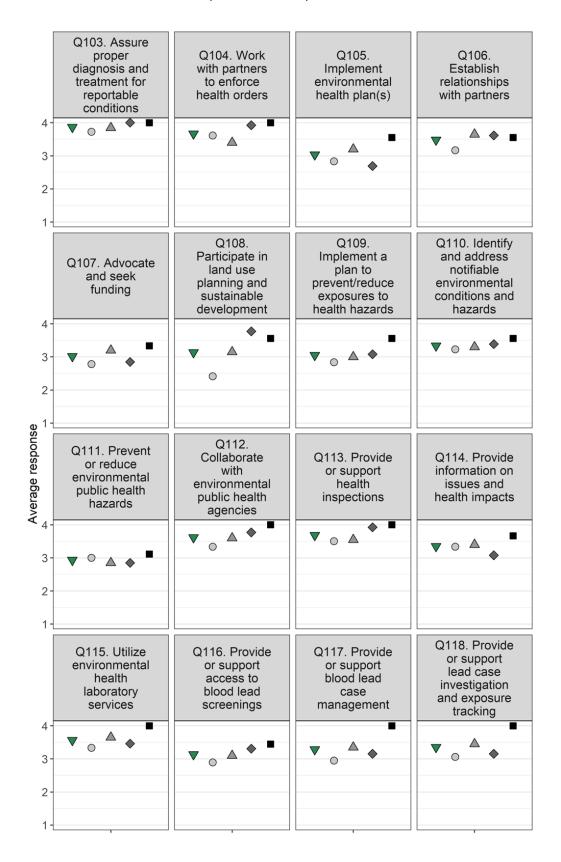
Questions







Environmental Health (Cont'd)

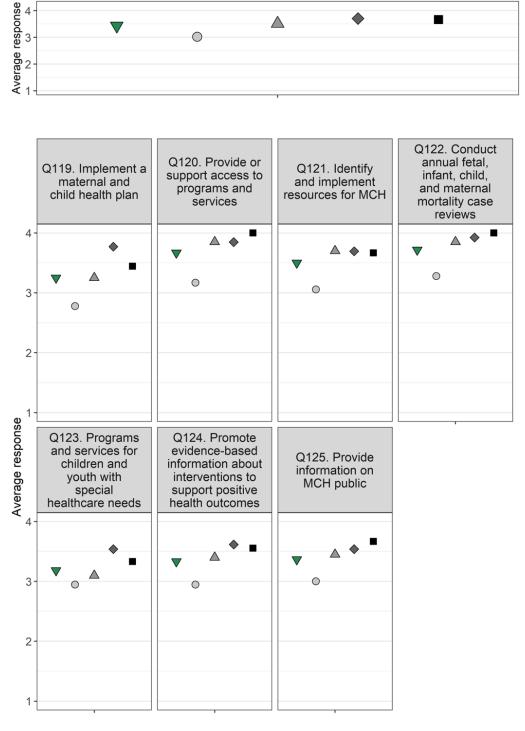




Maternal and Child Health

Montana ○ Frontier △ Small ◆ Medium ■ Large 0

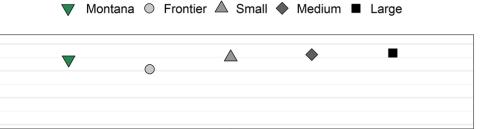


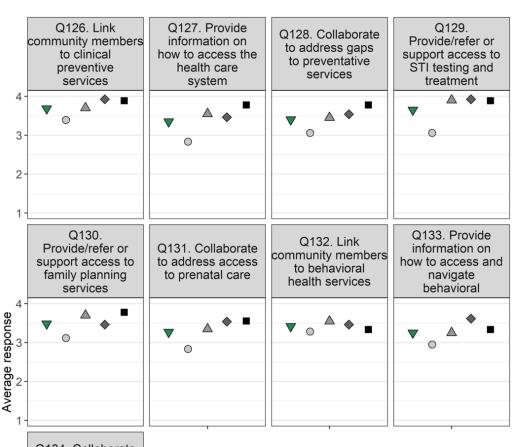


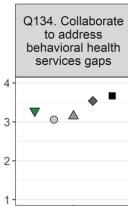


Access to Clinical Care

Average response











Citations and Terminology

Citations

- PHAB FPHS: https://phaboard.org/center-for-innovation/public-health-frameworks/the-foundational-public-health-services/?
- PHAB Workforce calculation: https://phaboard.org/center-for-innovation/workforce/

Terminology

- AMPHO Association of Montana Public Health Officials
- CD Communicable Disease
- · FPHS Foundational Public Health Services
- FTE Full-time equivalents
- HIPPA Health Insurance Portability and Accountability Act
- ICS Incident Command System
- MCH Maternal and Child Health
- PHAB Public Health Accreditation Board
- PHEP Public Health Emergency Preparedness
- PHSITF Health System Improvement Task Force
- 21C Twenty-first century