Essentials of Public Health Management

Third Edition

Edited by

L. Fleming Fallon, Jr., MD, DrPH, MBA

Professor of Public Health Bowling Green State University Bowling Green, Ohio

Eric J. Zgodzinski, MPH

Northwest Ohio Regional Public Health Coordinator and Director of Community Services Response and Preparedness Toledo-Lucas County Health Department Toledo, Ohio



World Headquarters

www.jblearning.com

Jones & Bartlett Learning 40 Tall Pine Drive Sudbury, MA 01776 978-443-5000 info@jblearning.com

Jones & Bartlett Learning Canada 6339 Ormindale Way Mississauga, Ontario L5V 1J2

Canada

Jones & Bartlett Learning International Barb House, Barb Mews London W6 7PA United Kingdom

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Dedication

To my family: Jennifer and Bryan—you have made life interesting. Marie—you have made it worthwhile. *LFF*

I want to thank my wife Susie for all her support, as well as Zoe and Megan for all the smiles that made the process worthwhile. *EJZ*



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Preface

Management books come and go. Different theories emerge, gain popularity, and then fade as they are replaced by alternative, emerging theories. The result is that textbooks on the subject of management become ever larger and more confusing. The third edition of *Essentials of Public Health Management* has decreased in length, but it has maintained the same easy-to-understand approach as the previous editions. Despite being shorter, we have increased the content through revision and judicious pruning of material.

The third edition contains new material. New chapters have been devoted to leadership (Chapter 2), public health performance standards (Chapter 16), continuous quality improvement (Chapter 17), accreditation (Chapter 18), social media (Chapter 21), and starting a board of health in the 21st century (Chapter 28). Additional material on public health law has been added (Chapter 27). All chapters have been revised to reflect current trends and developments in both public health and management.

Students, academics, practitioners, and other readers are all participants in the process of developing, presenting, sharing, and using the information contained in books. As is often the case, these participants have different agendas. Completeness is a virtue to some, but at the cost of increased length of text. Brevity is a virtue to others, but at the cost of omitting some subtleties and minor points. Almost all participants agree that accessibility and usefulness of the information in any book is an important attribute.

Practitioners often point out that time constraints are a reality. These people may note that they once read entire textbooks but now require a review of the essentials that is more brief. Students often complain that teachers present too much information or that teachers cannot convey the information. The reality may lie in students' lack of experience to guide

them in prioritizing the knowledge that is provided in classes. Their lack of perspective or experience hampers them from being able to differentiate the essentials from other material to form a more useful picture. Teachers emphasize the essentials but frequently augment them with additional illustrative material. The third edition of *Essentials of Public Health Management* continues to address these concerns.

The key word in the previous paragraphs is *essentials*. This was a guiding principle and foundation during the development of all three editions of this book. The senior author had previous experience teaching principles of management to resident physicians in occupational medicine. Both authors have real-world experience in situations requiring managerial expertise. In discussing this third edition, both agreed that their vision and approach to teaching principles of management in public health is sound and continues to gain acceptance.

The perspectives of practitioners and experts are frequently evident in presentations at professional meetings. Common venues are sessions devoted to best practices. Deciding to ask practitioners and experts to contribute chapters was another desired element of the final product.

This book is written by teachers, practitioners, and content experts for students, practitioners, and others interested in the operation and administration of public health agencies and organizations. While the chapter topics discuss theoretical models, they are focused on day-to-day responsibilities and realities. Supplemental resources are provided at the conclusion of each chapter. Here, relevant books and journal articles are listed as well as information on Internet websites. Contact information for organizations that are relevant to the topics of this book can be found in the appendix at the conclusion of the volume.

People often enter their professions with highly developed technical skills. This is the case in medicine as well as public and environmental health. As professionals achieve success, they are promoted, often into positions of leadership. In short, they assume managerial responsibilities. Frequently, these talented people lack formal training in management. Designing a vehicle that addresses such a need has been an ongoing goal of this project.

Case studies enable readers to focus on a topic and provide a context for discussion. Each chapter opens with a case study. Questions for reflection are posed. The case studies are resolved at the conclusion of each chapter.

The material presented within the chapter provides the basis for the suggested resolution to the case study. Case studies have been a standard item in the curriculum of business programs for many years. Students have endorsed case studies in written comments about their courses. All of the case studies in this edition contain new material.

A potential problem with contributed volumes is variation in the vocabulary and style of writing. The authors resolved to address and minimize or eliminate that problem in this book. The senior author has written a weekly newspaper column for the past 14 years, while the other author edits and approves public health operational documents on a daily basis. That experience has taught the importance of clearly communicating to a large audience with a variety of backgrounds and levels of education. Every chapter has been edited for consistency of grammar and presentation. The ideas and concepts of chapter contributors remain. If we have done our job well, the book reads as if a single person wrote it.

We want to thank all of the excellent people who have contributed chapters in this and the two previous editions. Without their dedication and effort, there would be no reason for writing a preface. We wish to thank the fine professionals at Jones & Bartlett Learning. Mike Brown has been a supporter of this project as well as our past editions. For that we thank him. We want to acknowledge Catie Heverling for her attention to detail and her rapid responses to our questions during this project.

We accept responsibility for errors that have eluded the sharp eyes of many reviewers. We also look forward to receiving any comments or suggestions about this book to improve future editions. We can be contacted at 234 Health Center, Bowling Green State University, Bowling Green, Ohio, 43403. Our hope is that this book may become a useful tool for all readers.

L. Fleming Fallon, Jr. Eric J. Zgodzinski



About the Editors

L. Fleming Fallon, Jr., MD, DrPH, MBA

L. Fleming Fallon is a Professor of Public Health at Bowling Green State University, Bowling Green, Ohio. He is a Codirector of the Northwest Ohio Consortium for Public Health, an accredited MPH degree program that is offered jointly by Bowling Green State University and the University of Toledo. He has many years of experience as a management consultant and has authored more than 440 papers, chapters, and books on a variety of topics, as well as making presentations throughout the world. For the past 16 years, Dr. Fallon has written a weekly newspaper column entitled *Health Thoughts*. He is presently serving as a member of the Wood County (Ohio) Board of Health.

Dr. Fallon is a physician with residency training in occupational and environmental medicine. He received a DrPH degree in environmental health science from the Columbia University School of Public Health, New York; his MD degree from St. Georges University School of Medicine, St. Georges, Grenada; and an MBA from the University of New Haven, Connecticut. He is a graduate of Colby College, Waterville, Maine. He holds a health officer license from New Jersey.

Eric J. Zgodzinski, MPH

Eric Zgodzinski is currently the Northwest Ohio Regional Public Health Coordinator and Director of Community Services Response and Preparedness for the Toledo-Lucas County Health Department. He has previously served as a Registered Sanitarian in a large, urban health agency. He has made many presentations on the subjects of food sanitation and bioterrorism preparedness. He is a member of the Toledo-Lucas County

xii ABOUT THE EDITORS

Metro Medical Response System committee and is active in the Ohio Environmental Health Association.

Mr. Zgodzinski received his MPH degree from the Northwest Ohio Consortium for Public Health and is a graduate of Thiel College, Greenville, Pennsylvania. He is an Adjunct Assistant Professor of Public Health at Bowling Green State University, Ohio.

About the Authors

Kaye Bender, RN, PhD

Kaye Bender is the President and Chief Executive Officer of the Public Health Accreditation Board in Alexandria, Virginia. Dr. Bender has over 26 years experience in public health, working at both the state and local levels within the Mississippi Department of Health. Her last position there was as Deputy State Health Officer. She served as the Dean of the School of Nursing and Associate Vice Chancellor for Nursing at the University of Mississippi Medical Center in Jackson, Mississippi.

Dr. Bender received a PhD from the University of Mississippi Medical Center, Jackson, and an MS from the University of Southern Mississippi, Hattiesburg. Dr. Bender has written Chapter 18.

Liza Corso, MPA

Liza Corso is the Acting Branch Chief for the Agency and Systems Improvement Branch of the Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia. Prior to joining the CDC, she worked for the National Association of County and City Health Officials, serving as the Program Manager for the development and initial implementation of the Mobilizing for Action through Planning and Partnerships (MAPP) process.

Ms. Corso received an MPA degree from the Maxwell School at Syracuse University, Rochester, New York, and a BA degree from the University of Richmond, Virginia. Ms. Corso has written Chapter 16.

Marla Davis, RN, MSN

Marla Davis is the Director for Community Health Improvement at Mid Coast Hospital in Brunswick, Maine, and immediate past chair of the Sagadahoc County Board of Health. She has worked in health care for over 40 years, including in clinical, administrative, and community health roles.

Ms. Davis received a BS degree in healthcare administration from St. Joseph's College, Standish, Maine, and her MSN degree from the University of Southern Maine, Portland. Ms. Davis has written Chapter 28.

Marie M. Fallon, EdD

Marie Fallon is the Chief Executive Officer of the National Association of Local Boards of Health, located in Bowling Green, Ohio. Formerly, she served as a Controller for the United Community Hospital, Grove City, Pennsylvania, and St. Jerome's Hospital, Batavia, New York. She is active in local, state, and national public health agencies and organizations.

Dr. Fallon received her EdD degree from Bowling Green State University, Ohio, and is a graduate of the State University of New York, Buffalo. Dr. Fallon has written Chapter 2.

Dennis Lenaway, PhD, MPH

Dennis Lenaway is a Senior Advisor to the Scientific Education and Professional Development Program Office, at the Office of Surveillance, Epidemiology, and Laboratory Support at the Centers for Disease Control and Prevention (CDC), in Atlanta, Georgia. His job duties are focused on the mission of strengthening and transforming public health. In previous assignments at the CDC, he directed the Office of Standards, Policy, and Emerging Issues in Practice and served as the Director for the Division of Public Health Systems Development and Research.

Dr. Lenaway received his PhD and MPH degrees from the School of Public Health and Community Medicine, University of Washington, Seattle. He is a graduate of the University of Colorado, Boulder. Dr. Lenaway has written Chapter 16.

William Riley, PhD

William Riley is the Associate Dean of the School of Public Health at the University of Minnesota, Minneapolis. He is the former CEO of Pacific Medical Center, Seattle, Washington, and Aspen Medical Group, Minneapolis, Minnesota. He is the author of 38 peer-reviewed articles and one book. He is an expert in quality control and evaluation as well as organizational planning and policy.

Dr. Riley received his PhD degree from the University of Minnesota, Minneapolis, and is a graduate of the University of Wisconsin, River Falls. Dr. Riley has written Chapter 17.

Louis Rowitz, PhD

Lou Rowitz is a Professor of Community Health Sciences at the University of Illinois (Chicago) School of Public Health. He is widely regarded as an expert in leadership in public health. He conducts research in public health systems and practice. He is interested in the future of public health.

Dr. Rowitz received his PhD and BS degrees from the University of Illinois, Urbana-Champaign. Dr. Rowitz has written Chapter 2.

Hugh Tilson, MD, MPH

Hugh Tilson is an Adjunct Professor of Public Health Leadership, Epidemiology, and Health Policy at the University of North Carolina School of Public Health, Chapel Hill, and an Adjunct Professor of Family and Community Medicine at the Duke University College of Medicine, Durham, North Carolina. He served as the President of the National Association of County and City Health Officials in 1976. He presently serves as the Health Officer for Sagadahoc County, Maine.

Dr. Tilson received his MD degree from Washington University, St. Louis, Missouri, and his DrPH degree from the Harvard School of Public Health, Boston, Massachusetts. Dr. Tilson has written Chapter 28.

Steven Trockman, MPH

Steve Trockman is the Director of the Southern Maine Regional Resource Center for Public Health Emergency Preparedness at Maine Medical Center in Portland. Prior to this, Steve served as Public Health Emergency Preparedness Coordinator with the Maine Department of Health and Human Services, Maine Center for Disease Control, Augusta.

Mr. Trockman received his MPH degree from Emory University, Atlanta, Georgia. He is a graduate of the University of Wisconsin, Madison. Mr. Trockman has written Chapter 28.

CONTRIBUTORS TO THE SECOND EDITION

The authors gratefully acknowledge the efforts of these contributors to the second edition of *Essentials of Public Health Management*. They are listed with their present positions.

Leslie Beitsch, MD, JD

Professor of Family Medicine and Rural Health Florida State University College of Medicine Tallahassee, FL

Pamela Butler, MPH

Health Commissioner Wood County Health Department Bowling Green, OH

Joseph Liszak, MBA

Chief Executive Officer Community Health Services Fremont, OH

Hans D. Schmalzried, PhD

Associate Professor of Public Health Bowling Green State University Bowling Green, OH

Susan K. Schmalzried, MA

Training and Development Specialist Lucas County Children's Services Toledo, OH