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Survey on the Impact of the SFY'16 Budget Impasse Through the Third Quarter of SFY'16

Introduction

The Illinois Public Health Association distributed a survey to affiliated local health department administrators on April 1, 2016. The survey collected information to measure the impact of the budget impasse through changes in total FTEs, number of layoffs, number of employees required to take furlough days, reductions in the length of the work week for a full-time employee and changes in the number of hours that the health department is “open for business” each week, closure of any satellite offices, and the amount of money owed to the health department by all state agencies combined. The survey used July 12, 2015, the beginning of the current state fiscal year, as its baseline and asked about changes through or “as of” March 31, 2016, the end of the third quarter of the fiscal year. Data collection closed on April 15, 2016.

Response

Fifty-one affiliated local health departments responded to the survey. All seven of IDPH’s administrative regions are represented. The numbers from each region are: Chicago, 2; West Chicago, 6; Rockford, 5; Peoria, 12; Champaign, 7; Edwardsville, 11; and Marion, 8.

Analysis by Population Size

The respondents were grouped into four strata by population size. The 26 jurisdictions, each with a population less than 38,000,¹ were designated rural. The 12 jurisdictions with populations between 38,000 and 100,000 were designated small mid-sized. The seven jurisdictions with populations between 100,000 and 200,000 were considered large mid-sized. The six jurisdictions with populations above 200,000 were considered large. Roughly half of the respondents were rural, one-fourth were small mid-size, one-eighth were large mid-sized, and one-eighth were large.

Results

Overall Impact. Eighty percent (80%) of local health departments have been affected in some way by the fiscal impasse. Mid-sized health departments – those serving between 38,000 and 200,000 people were all affected. More than two-thirds (69%) of rural health departments and two-thirds (67%) of large health departments have been affected in some way.

¹ The county populations of multi-county health departments were averaged.

Health departments were considered to have been impacted if they reported any of the following: a change in workforce; lay-offs, furloughs, a reduction in the length of the work week, or a change in the number of hours that the health department is “open for business.”

Reduction in Workforce. By the end of the third quarter, there were 119.6 fewer FTEs working in these 51 health departments. This represents four percent of their total workforce. One-third of respondents reported no decrease in workforce.

Two-thirds of respondents did report a decrease in workforce. Sixteen health departments had lost between 0.1 and 10 percent of their workforce; nine health departments had lost between 10.1 and 15 percent of their workforce; seven had lost between 15.1 and 30 percent of their workforce, and two had lost between 30.1 and 35 percent.

Large mid-sized health departments reported the greatest reduction in the number of FTEs (a total of 44 FTEs, or 10% of their workforce), followed by small mid-size (30 FTEs, or 8% of their workforce), rural (38 FTEs, or 7% of their workforce) and large health departments (7 FTEs, or 1% of their workforce).

Layoffs. The responding health departments have laid-off 66 people since the beginning of the fiscal year. Two-thirds of the respondents have not had to lay off staff so far. Of the one-third of respondents who have laid-off staff, five have laid-off one employee; six have laid-off two or three, and six have laid-off between four and fourteen staff. Lay-offs do not include voluntary separations, retirements, or reassignments to vacant positions elsewhere in the health department.

When considered by population size, rural health departments had laid-off the greatest percentage² of their workforce (4.9%), followed by small mid-sized (4.0%), large mid-size (2.2%) and large health departments (1.1%).

Furloughs. Only two health departments reported that staff were being furloughed.

Reductions in the Work Week. We asked health departments to report the number of hours that a full-time employee was expected to work on July 1, 2015 and on March 31, 2016. Most (90%) had not reduced the length of a full-time work week. Five health departments had reduced the length of a full-time work week between four and 7.5 hours per week.

While only five health departments reported reductions in the definition of a full-time work week, four of the five were rural health departments; the other was a small mid-sized health department.

Reductions in Hours of Operation. Most (86%) health departments had not reduced the number of hours that they were “open for business.” Altogether, seven health departments had reduced the length of their operating week between four and 10 hours.

² Number of persons laid-off, divided by number of FTEs on July 1, 2015.

Similar to the pattern observed with reductions in the work week, five of the seven health departments that took this step were rural health departments; one was small mid-sized and one was large mid-sized.

Closure of satellite clinics or offices. Six of the 20 health departments that operated satellite offices had closed them by the end of March 2016.

Five rural health departments reported that they were operating satellite clinics; only one of these had closed. Six small mid-sized health departments were operating satellite clinics at the beginning of the year; four of these had closed. Four large mid-sized health departments were operating satellite clinics at the beginning of the year; none of these had closed. Five large health departments were operating satellite clinics at the beginning of the year; one of these had closed.

Money Owed. We asked local health departments to report the amount of money they were owed from any state government agency on March 31, 2016. We also asked them to report the total amount of their annual budget. Altogether, responding health departments are owed \$21.6 million by the State of Illinois. This represents 8.9 percent of these agencies' operating budgets for the current fiscal year.

Since the size of local health departments annual budgets can vary considerably, we also calculated the percent of their total budget that the State of Illinois owed to each local health department. Local health departments are owed between one and 45 percent of their current year budgets. More than one-third (35%) are owed between 5.1 and 10 percent of their budgets; most (46%) are owed between 10.1 and 25 percent of their budget; three are owed more than 25 percent of their budget.

Rural, small mid-sized, and large mid-sized health departments were owed an equal share of their total budgets, an average of 11 percent in each group. Large health departments were owed an average of 7.5 percent of their total budgets.

Summary

Reductions in workforce (through voluntary separations, retirements, or lay-offs) have been reported across the public health system in Illinois; large mid-sized health departments (those serving jurisdictions with 100,000 to 200,000 residents) experienced the largest reductions. The likelihood of layoffs decreased as population size increased. Rural health departments were also more likely to reduce the length of a full-time work week and reduce their hours of operation than larger health departments. A nearly equal proportion of total operating budgets is owed to rural and mid-sized health departments.