



Department of Health
2023-25 Regular Budget Session
Policy Level - SB - Increase Public Health Investments

Agency Recommendation Summary

The Department of Health (DOH) requests additional spending authority from the Foundational Public Health Services account (24B) in the 2023-25 Biennium to increase foundational public health services and to increase tobacco, vapor product, and nicotine control and prevention, and other substance abuse prevention and education provided to the residents of Washington state.

Fiscal Summary

Fiscal Summary <i>Dollars in Thousands</i>	Fiscal Years		Biennial	Fiscal Years		Biennial
	2024	2025	2023-25	2026	2027	2025-27
Staffing						
FTEs	0.0	0.0	0.0	0.0	0.0	0.0
Operating Expenditures						
Fund 24B - 1	\$20,665	\$20,665	\$41,330	\$8,101	\$8,101	\$16,202
Total Expenditures	\$20,665	\$20,665	\$41,330	\$8,101	\$8,101	\$16,202

Decision Package Description

Problem:

Current law requires that 50%, but not less than \$12 million per biennium, be allocated to support Foundational Public Health Services (FPHS) activities from the Foundational Public Health Services Account. Only \$2,788,000 for the 2021-23 biennium was allocated to support FPHS activities from this account. In addition to foundational public health services, revenue into this account is to be used to:

- fund tobacco, vapor product, and nicotine control and prevention, and other substance use prevention and education.
- support increased access and training of public health professionals at public health programs at accredited public institutions of higher education in Washington; and to
- fund enforcement by the state Liquor and Cannabis Board to prevent sales of vapor products to minors and related provisions for control of marketing and product safety.

Proposal:

During the 2019-21 Biennium there was \$9,899,867 of revenue that went unallocated, but under the current law for that time period, that funding was to be allocated exclusively to Foundational Public Health Services. Based on FY22 actual revenue, and FY23 revenue estimated in the June 2022 Revenue Forecast, there is \$20,706,394 from the 2021-23 Biennium to allocate to

Foundational Public Health Services

Tobacco, vapor product, and nicotine control and prevention, and other substance use prevention and education.

Increased access and training of public health professionals at public health programs at accredited public institutions of higher education in Washington.

Enforcement by the state Liquor and Cannabis Board to prevent sales of vapor products to minors and related provisions for control of marketing and product safety.

The June 2022 Revenue Forecast estimates revenue of \$18,624,000 per biennium into the Foundational Public Health Services Account.

Based on this, the Department of Health is recommending the following allocation increases for the 2023-25 Biennium:

- Foundational Public Health Services- \$34,643,000
- Tobacco Prevention- \$6,686,000
- Higher Education Access and Training- \$1,967,000
- Enforcement- \$3,146,000

This increased investment into the Foundational Public Health System will allow them to expand services to Washingtonians in their Foundational Programs and Foundational Capabilities. These include:

Foundational Programs

- Communicable Disease Control;
- Environmental Public Health Services;
- Chronic Disease and Injury Prevention;
- Maternal and Child Family Health;
- Access to Clinical Care; and
- Vital records (birth and death certificates).

Foundational Capabilities include:

- Assessment (disease surveillance and epidemiology) ;
- Emergency Preparedness and Response (all hazards) ;
- Communications;
- Policy Development and Support;
- Community Partnership Development; and
- Business Competencies.

Via the work of the FPHS Steering Committee, governmental public health system partners will be prioritizing projects before the end of 2022 for the \$12M dollar investment from the Foundation Public Health Services Account being requested with this decision package. The decision package will describe proposed allocations to go to all parts of the governmental public health system: tribes and tribal partners, local health jurisdictions, DOH and SBOH. Generally, it is anticipated that proposals will address:

Continuing to navigate the challenges of building the public health workforce across the system – recruitment, training, leadership development, retention (salaries, benefits), etc.

Making investments in modernized data and technology systems and the workforce to support system-wide governance models for these systems.

Gaps that continue to exist in areas of FPHS that have been prioritized for funding over time (CD, Environmental Public Health, Assessment), including catching up on the work that has been displaced by the COVID and monkeypox responses.

Growing investments in program areas of FPHS that have received initial funding (Maternal, Child and Family Health; Chronic Disease and Injury Prevention; Access to Clinical Care).

Growing investments to strengthen staffing and work in the areas of foundational capabilities like communications, community partnership development, policy development and support, emergency preparedness and response, and business competencies.

A continued approach of designing innovative service delivery models.

The funding provided for Tobacco Prevention programs would go through the Department of Health to regional partners to focus on commercial tobacco products, and other substance education and prevention activities related to tobacco.

Alternative:

If proposal is not funded, the department would not be able to access revenue.

Assumptions and Calculations

Expansion, Reduction, Elimination or Alteration of a current program or service:

There are no assumptions at this time, to be determined.

Detailed Assumptions and Calculations:

There are no assumptions at this time, to be determined.

Workforce Assumptions:

There are no assumptions at this time, to be determined.

Strategic and Performance Outcomes

Strategic Framework:

This request builds on and increases funding for governmental public health system work that intersects with all of the priorities outlined in DOH's Transformational Plan.

Health and wellness – Strengthening the foundational capabilities of communications, policy, assessment, and community and partner engagement will allow the system to deliver programs and initiatives in ways that promote resilience and close equity gaps.
 Health systems and workforce transformation – FPHS investments have been and will continue to be made/grown in data and technology infrastructure, as well as scaling up and training the public health workforce to meet needs now and into the future.
 Environmental health – FPHS investments have been and will continue to be made/grown in environmental health programs and capabilities, including in emerging bodies of work related to climate change and homelessness.
 Emergency response and resilience – This body of work is a foundational capability and the governmental public health system plays a central role in planning, exercising, and learning from public health emergencies.
 Global and One Health – FPHS investments have been and will continue to be made/grown in the components of the programs and infrastructure that support this work – laboratory and data technology, communications, and partnerships that support the programmatic work that comes together in the areas of communicable disease and environmental public health.

This request also intersects with all of the goal areas within the Governor's Results Washington:

Goal 1: World Class Education: Access & Success – Providing every Washingtonian a world-class education that prepares him or her for a healthy and productive life, including success in a job or career, in the community and as a lifelong learner.

Children need to be healthy in order to learn. Preventing diseases through immunization and safe food practices are two examples of the impact of the public health system in ensuring that children are ready to learn. In addition, lead testing to make sure water is safe to drink, and homes and schools are safe from contamination is an important public health strategy. The pandemic has further illustrated the need to prevent, track and minimize the spread of disease among students, teachers and staff and planning for maintaining a safe environment for all.

Goal 2: Prosperous Economy: Business Vitality – Washington is a great place to grow your business

The pandemic has clearly portrayed the essential need for and value of a viable public health system to support economic vitality. The public health system monitors and responds to communicable disease outbreaks and works to prevent chronic disease. The health of employees directly impacts the place where they work – employees that call in sick due to preventable illnesses impact the productivity of the business. Keeping employees healthy helps reduce healthcare expenditures for both the employee and business. Caring for sick children also impacts the productivity of business when workers/parents need to take time off to care for them.

Goal 3: Sustainable energy & a clean environment – Keep our land, water and air clean

The public health system is responsible for ensuring water is safe to drink and regulates all public drinking water systems in the state to ensure that people do not get sick. Climate change and homelessness are areas of work of growing urgency, and FPHS investments have been made and will be grown in testing service delivery models that can be expanded.

Goal 4: Healthy & Safe Communities – Safe People– Help keep people safe in their homes, on their jobs and in their communities

The public health system is responsible for monitoring and responding to communicable disease outbreaks. The ability to achieve this goal is dependent on the capacity and expertise across the state to respond to illness reports and take appropriate actions to control the spread of disease. During COVID, public health worked with multiple sectors to keep people safe. The public health system is also responsible for working with communities to respond to climate-related disasters like wildfires, flooding, or earthquakes, as well as to prepare for future emergencies. Additionally, public health uses data to highlight other safety issues, everything from falls to lead and mold in the home to gun violence, and works with communities to share information, plan solutions, and change policy as needed. It also takes into consideration the safety of those in communities who may not have homes or places of employment.

Goal 5: Efficient, effective and accountability government Transparency and Accountability – I know how my money is being spent.

A goal of FPHS work is to deliver core public health services to everyone in Washington State in a way that is efficient, effective, and equitable. The governmental public health system is always considering new service delivery models to make best use of expertise and technology; these models include core team models where ideas are tested with a smaller group of partners before expanding; shared service delivery models; centers of excellence models; and others. The system funds enterprise models (digital library access, on-call services, data systems) and when available, pursues federal match dollars for data system investments. Decisions about FPHS investments are made via a transparent concurrence model that is described in law (RCW 43.70.515). The allocation and outcome of these investments by the governmental public health system are described in an annual report. A Public Health Advisory Board has recently been established to evaluate and provide recommendations about FPHS investments.

Performance Outcomes:

The FPHS Steering Committee will be making decisions through the end of 2022 about what will be funded with the \$6M per year being requested through this decision package and specific performance outcomes will be better described at that time. Outcomes will generally fall into the following categories:

Workforce hiring and training – Number of staff hired, diversity of staff hired (demographics, position types), number of staff trained.

Purchases that allow for data system and technology modernization.

Process measures – Plans developed, governance structures developed, communication products created and number of platforms and languages, policies identified for change, communities engaged, cases investigated, inspections completed, data dashboards publicly displayed, inequities described, production of health improvement plans, etc.

Goals for improved health outcomes

Equity Impacts**Community outreach and engagement:**

Assuring that communities across Washington have equitable access to the foundational public health services is one of the drivers behind the design, funding request, and implementation of FPHS. One of the important objectives of this proposal is to deliver FPHS in the most equitable, effective and efficient manner possible for the funds available giving all communities a more equitable chance for a healthy future. As learned in the COVID response, and now in the monkeypox response, the ability to deliver FPHS programs equitably relies on strengthening the foundational capabilities, and this proposal will demonstrate additional investments in the areas of community partnership development, communications, policy development, as well as into growing and training a public health workforce that better reflects the communities it serves.

Disproportional Impact Considerations:

This proposal will also expand FPHS investments into critical program work related to homelessness, climate change, chronic disease, maternal and child health, and access to healthcare, all areas where health inequities exist. In addition, new service delivery models will continue to expand access to expertise and technology that were once inaccessible to many communities (e.g., nine rural eastern Washington counties now have access to epidemiology services that has been indispensable during the COVID19 response).

Target Populations or Communities:

Across the state, inequities in public health funding have been documented for decades. There are also inequities in the availability of core public health services in communities across the state. This puts many communities at higher risk of communicable disease, environmental health threats, preventable chronic diseases, and avoidable unhealthy births and childhoods. COVID demonstrated that communities of color/ethnic diversity were more heavily impacted by the pandemic, and this same pattern can be seen for health issues like maternal birth outcomes and exposures to the negative impacts of climate change.

Other Collateral Connections

Puget Sound Recovery:

Not applicable.

State Workforce Impacts:

Not applicable.

Intergovernmental:

This proposal will provide capacity to address critical public health problems in communities with inadequate resources.

Composed by the Foundational Public Health Steering Committee a collaboration of leaders from local health districts, tribal governments, the Washington State Board of Health, and DOH this proposal supports the Healthier Washington initiative and brings public health resources and knowledge to the planning/coordination groups. It also supports the work of the Department of Children, Youth and Families and the Office of the Superintendent of Public Instruction to ensure children are healthy and ready to learn. It supports the work of the Washington State Health Care Authority in preventing and controlling communicable diseases. It also supports the Department of Social and Health Services in behavioral and mental health planning and program implementation.

Stakeholder Response:

Depending on the direction from the Steering Committee, funding could be provided to tribal partners, county partners and/or community-based partners.

State Facilities Impacts:

Not applicable.

Changes from Current Law:

Not applicable.

Legal or Administrative Mandates:

Not applicable.

Reference Documents

[24B Analysis for FPHS Backup.xlsx](#)

[Increase Spending Authority from FPHS Account FinancialCalculator_2023-25_ver24.3.xlsm](#)

IT Addendum

Does this Decision Package include funding for any IT-related costs, including hardware, software, (including cloud-based services), contracts or IT staff?

No

Objects of Expenditure

Objects of Expenditure <i>Dollars in Thousands</i>	Fiscal Years		Biennial	Fiscal Years		Biennial
	2024	2025	2023-25	2026	2027	2025-27
Obj. C	\$3,343	\$3,343	\$6,686	\$1,583	\$1,583	\$3,166
Obj. N	\$17,322	\$17,322	\$34,644	\$6,518	\$6,518	\$13,036

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