



Department of Health
2021-23 Regular Budget Session
Policy Level - P5 - Sustain Child Profile Health System

Agency Recommendation Summary

The Department of Health (DOH) requests funds to maintain the state’s Child Profile Health Promotion System which delivers critical health messages to parents, well-child visit and immunization information and reminders, and other important public health information. In December 2020, DOH will submit a report as required by legislature to highlight areas where costs may be decreased and/or other revenue sources can be identified in future biennia. This request will sustain this one-of-a-kind public health system for an additional fiscal year to allow legislature to use the report to inform a long-term sustenance plan and provide the agency time for implementation (General Fund-State).

Fiscal Summary

Fiscal Summary <i>Dollars in Thousands</i>	Fiscal Years		Biennial	Fiscal Years		Biennial
	2022	2023	2021-23	2024	2025	2023-25
Staffing						
FTEs	0.0	0.0	0.0	0.0	0.0	0.0
Operating Expenditures						
Fund 001 - 1	\$1,000	\$0	\$1,000	\$0	\$0	\$0
Total Expenditures	\$1,000	\$0	\$1,000	\$0	\$0	\$0

Decision Package Description

Problem

In the 2020 legislative session, DOH submitted a similar request to sustain its Child Profile Health Promotion System. In that request, DOH highlighted how the federal grant historically used to sustain this program – the Core Immunization Grant – remained relatively unchanged since fiscal year 2010, while the activities charged to the grant have grown. Some of the cost increases were the result of typical inflationary factors such as cost of living adjustments, but in other cases, additional core immunization activities have added maintenance and operations costs. This combination of stagnant grant revenue and increasing core expenditures left no ability to continue the use of the Core Grant to support the Child Profile Health Promotion System.

Legislature provided one-time funding in fiscal year 2021 (\$1,000,000 General Fund-State) with the additional requirement for the department to review its processes for efficiencies and possible technological advances to reduce costs. DOH must submit a report of its findings by December 15, 2020. The finding and recommendations in this report will provide additional program and funding considerations.

This proposal seeks an appropriation from the state’s general fund to allow DOH to continue sending critical health messages to parents, well-child visit and immunization information and reminders, and other important public health information while legislature uses the report to inform a long-term solution to sustain the program and the agency implements the selected plan.

Background:

The Child Profile Health Promotion System is Washington State’s centralized system to communicate key health and safety information, immunization information, and well-child visit reminders to families with children ages birth to six years old. Information is mailed to families in English and Spanish (families may also request the information to come via email instead of U.S. mail). DOH uses the address information from its Immunization Information System (IIS) and the agency’s Center for Health Statistics (birth/death records, etc.) to send mailings to families about two weeks in advance of the time their child should be receiving a well-child visit from their primary care provider. A family will receive a total of 17 mailings for their child until they reach six years old. The frequency of mailings a family will receive are at birth, one month, three months, six months, nine months, 12 months, 15 months, 18 months, two years, 2-1/2 years, three years, 3-1/2 years, four years, 4-1/2 years, five years, 5-1/2 years, and six years.

For 21 years, the system has been the primary method for DOH to deliver important health information to Washington State families – reaching 98 percent of families with children aged birth to six years (nearly 500,000 families a year) – and is the only system like it in the country.

This comprehensive system is designed to influence health behaviors on multiple levels. It provides parents/guardians information relevant to their child’s health and developmental stage, with the goal of educating parents on the critical decisions they make about their child’s health. It also drives interaction between parents/guardians and healthcare providers, providing a leverage point for questions, concerns, and

recommendations. The system also reaches every parent with a child at the age of six and under, thus it creates a community of parents in Washington State who receive consistent, evidence-based messaging on how to help their children reach their full health potential. Regular evaluations of the mailings show that parents find the information useful; they look to the mailings and DOH as trusted sources of health information; and the messages either reinforce current parenting decisions or help change their knowledge, attitude, and behavior.

Multiple key partners throughout the State of Washington also use this system to deliver key health and safety information to this population. The following is a current list of partners who include material or guide the messaging in the mailings :

- Seattle Children's Hospital;
- Washington State Health Care Authority (HCA);
- Department of Social and Health Services (DSHS)
- Department of Children, Youth, and Families (DCYF);
- Washington Dental Service/Arcora Foundation;
- Washington State Dairy Products Commission;
- Guaranteed Education Tuition (GET) Program;
- Washington Poison Center; and
- DOH, Division of Environmental Public Health.

While the Child Profile Health Promotion System is not considered "core immunization" work, DOH had historically been able to cover 50 percent of the system's costs through the Centers for Disease Control and Prevention's (CDC) Core Immunization Grant. Since this system supports the state's Medicaid program, it is eligible for Medicaid financial participation to cover 50 percent of Medicaid-eligible costs. Thus, the other half of the system's costs are covered by a combination of state general funds (25 percent) and the Title XIX Medicaid (25 percent) grant.

In addition to its historical use, during times of pandemic or other public health crises, the Child Profile System can be used to disseminate relevant and accurate information regarding health risks and prevention strategies for children.

If this proposal is not supported, the agency will face the following alternatives:

- Discontinuation of the Child Profile Health Promotion System. This option, in itself, will create a cost to shut down the system, discontinue the mailings, end established contracts and partnerships, and reduce staffing costs. More importantly, parents will no longer receive health and safety messages and immunization and well-child visit reminders; or
- Distribute the communications primarily by e-mail and reduce physical mailings to once per year to maintain accurate address data. Currently, the hard copy mailing system is an opt-out system and the e-mail distribution system is opt-in. DOH does not currently have sufficient e-mail address data to e-mail every family with a child aged birth to six years. It will take considerable additional resources (both funding and time) for the department to move to such a system.

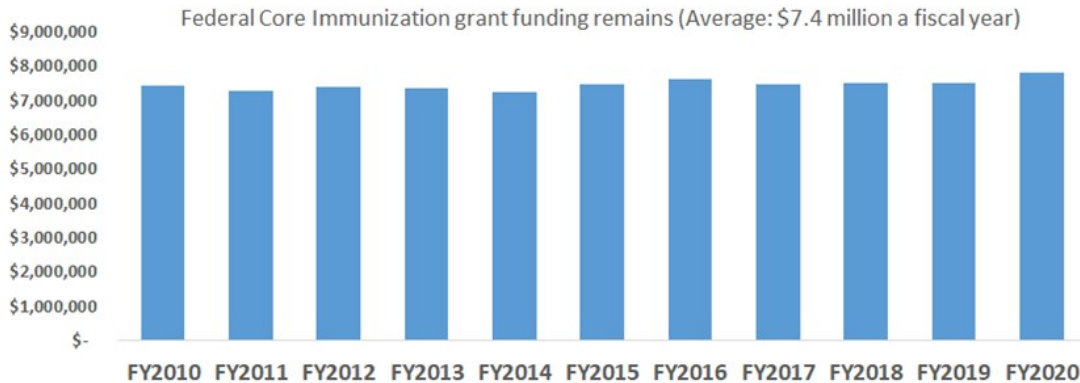
Assumptions and Calculations

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

This request does not expand or alter the existing Child Profile Health Promotion System. It seeks to sustain the existing system in structure and volume.

Detailed Assumptions and Calculations:

As noted earlier, the Core Immunization Grant has remained relatively unchanged since fiscal year 2010, while the activities charged to the grant have grown.



The \$1 million annual investment requested in this proposal seeks to replace the funding previously covered through the Core Immunization Grant.

Workforce Assumptions:

Not applicable

How is your proposal impacting equity in the state?

In 2016, a Seattle-based research firm - PRR - conducted a mixed-method evaluation to understand how parents who receive the Child Profile Health Promotion mailings have changed their behavior or been influenced by the materials. One of the key findings in their surveys indicated parents of Hispanic, Latino, or Spanish origin were more likely to:

- Want more information and read the materials from the Child Health Promotion mailings carefully;
- Report they wanted more vaccine safety information;
- Report reading the materials in the Child Profile mailings carefully;
- Report learning about vaccines, immunizations, and child behavioral issues from the materials in the Child Profile mailings;
- Report the materials in the Child Profile mailings were helpful;
- Report that they keep vaccine and immunization information to refer to later; and
- Report the materials in the Child Profile mailings reinforced their parenting decisions.

The Child Profile Health Promotion System is clearly a source of information communities of color rely upon to inform their healthcare decisions. The referenced report is provided as a supporting document.

Strategic and Performance Outcomes

Strategic Framework:

This request supports the Governor's Results Washington Goal: Healthy and Safe Communities, specifically the goals of Reducing Infant Mortality and Ensuring Access to Quality Healthcare. The messages in the mailings give parents safety and injury prevention information directly related to reducing infant mortality. Example messages include:

- Sudden Infant Death Syndrome (SIDS) prevention and safe sleep;
- Shaken Baby Syndrome and child abuse prevention;
- Drowning, burns/scalds, poisoning, choking, falls prevention;
- Product recalls;
- Firearm safety;
- Motor vehicle, pedestrian, and bike safety; and
- Learning Cardiopulmonary Resuscitation (CPR) and calling 911.

The messages in the mailings also refer parents to trusted resources and referrals, including how to find a healthcare provider.

This request supports the agency's strategic plan goals of Public Safety, Healthiest Next Generation, and Healthy Living, Healthy Aging.

Performance Outcomes:

The messages in the mailings cover many public safety topics, including environmental health issues, such as lead testing, pesticides, and air quality. Parents also receive messages on how to give babies a planned, healthy start in life; growth and developmental milestones, including resources and referrals; the importance of immunizations; nutrition and physical activity; promoting safe, stable, nurturing relationships and environments, including preventing and mitigating adverse childhood experiences; and reducing the use of tobacco, e-cigarettes/vaping devices, and marijuana. Parents receive messages on how to reduce and prevent violence and firearm injuries and deaths and promoting behavioral health and preventing mental illness.

Parents consistently report high readership of the materials in the Child Profile Health Promotion mailings. The information collected from parent surveys over the past years demonstrate how the program promotes the following positive outcomes. Parents have reported the program materials:

- **Are useful and easy to understand**

Previous surveys reported on comprehension (96 to 98 percent said the materials were easy to understand) and overall usefulness of the materials (80 percent). Most respondents who previously got the materials for another child in their household still found the information useful (76 to 89 percent);

- **Are helpful by providing important reminders**

The surveys show that the various types of materials in the Child Profile Health Promotion mailings (letters, brochures, charts, etc.) are good reminders for parents. About 60 percent of parents over the last 10 years said the letters remind them to take their child in for immunization and well-child visits. Between the 1999 and 2002 surveys, 68 percent to 80 percent said the materials answered questions about parenting;

- **Motivate them to change their behaviors**

Parents were asked if they intend to change their behavior based on the information in the Child Profile Health Promotion mailings. In 2002, 41 percent of parents who got the survey in the introductory packet said they would change their behavior; 33 percent of parents who got the survey in a later mailing said they had changed their behavior.

Other Collateral Connections

State Workforce Impacts:

Not applicable

Intergovernmental:

Several state agencies benefit from the Child Profile Health Promotion System and the messages sent to families, including HCA, DSHS, and DCYF. Stabilization and expansion of the system will allow continued coordination between these agencies and DOH in message development and outreach to families with young children.

State Facilities Impacts:

Not applicable

Changes from Current Law:

Not applicable

Puget Sound Recovery:

Not applicable

Legal or Administrative Mandates:

Not applicable

Stakeholder Response:

Non-governmental stakeholders include:

- Seattle Children’s Hospital– support anticipated
- Washington Poison Center – support anticipated
- Washington State Dairy Products Commission – support anticipated
- Washington Dental Service/Arcora Foundation – support anticipated
- Guaranteed Education Tuition program – support anticipated
- WithinReach – support anticipated
- Scientific Technologies Corporation – support anticipated

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
	2022	2023	2021-23	2024	2025	2023-25
Obj. A	\$217	\$0	\$217	\$0	\$0	\$0
Obj. B	\$84	\$0	\$84	\$0	\$0	\$0
Obj. C	\$23	\$0	\$23	\$0	\$0	\$0
Obj. E	\$640	\$0	\$640	\$0	\$0	\$0
Obj. N	\$12	\$0	\$12	\$0	\$0	\$0
Obj. T	\$24	\$0	\$24	\$0	\$0	\$0

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