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Potential Department of Health Requests to Office of Financial Management and Governor

Community Engagement in Health

Funding Community-Based Organizations & Engagement

This funding supports transparent community engagement opportunities to advance public health equity priorities and outcomes and improve the state public health system, including support for the Community Collaborative and community-rooted organizations, including Urban Indian and tribal organizations.

Community-Led Health Equity Zones

The initiative features geographically-based health equity zones – places where people face social, environmental, and low-resource conditions that negatively impact their health. The zones are selected by a statewide community advisory council; after being selected, each zone will implement community-driven decision-making processes to identify pressing health concerns and develop projects that address the unique needs of the zone. There are three Health Equity Zones in process, this initiative would establish three additional zones.

Health Education

Be Well Washington

Be Well Washington uses an intergenerational approach to influence behaviors across key dimensions of health for all Washingtonians. This funding will support a social marketing campaign focusing on the four pillars that science tells us will both improve the Healthspan and extend the Lifespan of Washingtonians:

- Emotional Wellbeing
- Social Connection
- Movement/Physical Activity
- Nourishment

Watch Me Grow Washington Expansion

Watch Me Grow Washington communicates key health and safety information, immunization information, and well-child visit reminders to families with children ages birth to six years. This continued funding will expand the digital platform and ensure that information is provided in the top five spoken languages in the state, as well as expanding services to include families with children up to age 19.



Encouraging Food Entrepreneurship

Retail food sales are currently regulated by the LHJs.; this makes starting a permitted food business complex and confusing as inspection authority sits with WSDA staff without retail food inspection experience. This request will transfer the regulatory authority for Cottage Food from Washington State Department of Agriculture to the Local Health Jurisdictions; this will streamline the retail food industry regulatory structure for entrepreneurs. It will also allow for a contract with a consultant to review and address inequities in food grading programs in Seattle-King and Tacoma-Pierce that are significantly impacting operators who are not native English speaking or prepare culturally diverse foods; this review and report could lead to standardizing programs to reduce bias and better protect public health.

Workforce

Expand The Behavioral Health Workforce

HB 1724 required DOH to recommend policy changes to remove licensure barriers for Behavioral Health professions.

Community Health Worker Training

This supports community-led health equity initiatives including Community Health Worker training modernization efforts.

Continue Support to Birth Equity Project

The Washington State Department of Health Birth Equity Project seeks to address and reduce the racism faced by birth workers and families of Black/African American, African immigrant, and American Indian/Alaska Native communities in our state. Continued funding would help DOH continue strategic investments in community-based birth worker organizations working to improve birth outcomes in BIPOC communities.

Health Access

Adult Vaccines

The department is seeking funding to support staffing and the purchase of additional adult vaccine for an enhanced, comprehensive state Adult Vaccine Program (AVP), that is aligned with the 2020 National Adult Immunization Program and 2021-2025 Vaccines National Strategic Plan recommendations. Aligning the department's Adult Vaccine Program with national recommendations and priorities ensures the greatest chance of success. The enhanced program focuses on three components: 1) Infrastructure, 2) Access and 3) Demand. This program would serve approximately 500,000 uninsured adults 19--64 (6% of the state's population) at no cost to the resident.



Response

Epidemiology Prevention and Response to Communicable Diseases in Schools and Correctional Facilities

WA State Administrative Code requires schools to report all communicable diseases and notifiable conditions to public health but there is no designated school epidemiologist at WADOH to ensure that schools are aware of reporting requirements and have access to the information and data systems needed to adhere to the WAC and prevent, respond to, and mitigate communicable disease in schools.

Similarly, there is no designated corrections epidemiologist at WADOH accountable for ensuring that correctional facilities are aware of communicable disease reporting requirements and have access to the information and data systems needed to prevent, respond to, and mitigate communicable disease alongside public health agencies. This proposal is to fund 2.0 FTEs to do this work.

Expand Homelessness Response

This request will provide resources for contracted services and goods to address homelessness that serve people and communities directly. Examples: ADA shower trailers, portable toilets, handwashing, laundry, and clean up/waste disposal services.