

# DOH Regional Offices

Strong Resiliency - Robust Infrastructure - Diverse Insights

# Feedback from LHJ's

Don't duplicate work

Respect current authority of LHO's

Don't come in and do our community work

Respect the work we do and don't attempt to supplant our role

There is a role at the state level to continue to support us and give us help when we ask

Capacity at the state to offer more assistance and meet our needs is welcome

Don't make random regions that we have to work within

There isn't a "gap" that needs filling between us and our communities

*We heard you!*

- ▶ Support expanded infrastructure within DOH to allow us to do our core work better and in ways that meet our partners where they are (and *not* doing their work)
- ▶ Support Local and Tribal public health in a way that responds to community health needs and strengthens the delivery of public health services
- ▶ Create additional leadership & support for our staff that work across the state (current offices in Richland, Spokane, Kent, Shoreline)
- ▶ Provide more robust support to our customers, including working across state agencies
- ▶ Have a diversity of voices at DOH
- ▶ Provide additional state capacity for the system by decentralizing the operations at DOH (state level)
- ▶ Ensure quicker responsiveness during emergencies

## Vision for DOH Regional Offices

# Myth Busters: DOH Regionalization

*These are myths & not true!*

DOH is centralizing LHJ's under DOH authority/oversight

DOH is taking authorities away from locals

Regions will be inflexible and lock locals into who they can work with and in between

Regional Liaisons and Regional Medical Officers will be working directly in communities and cutting out LHJ's

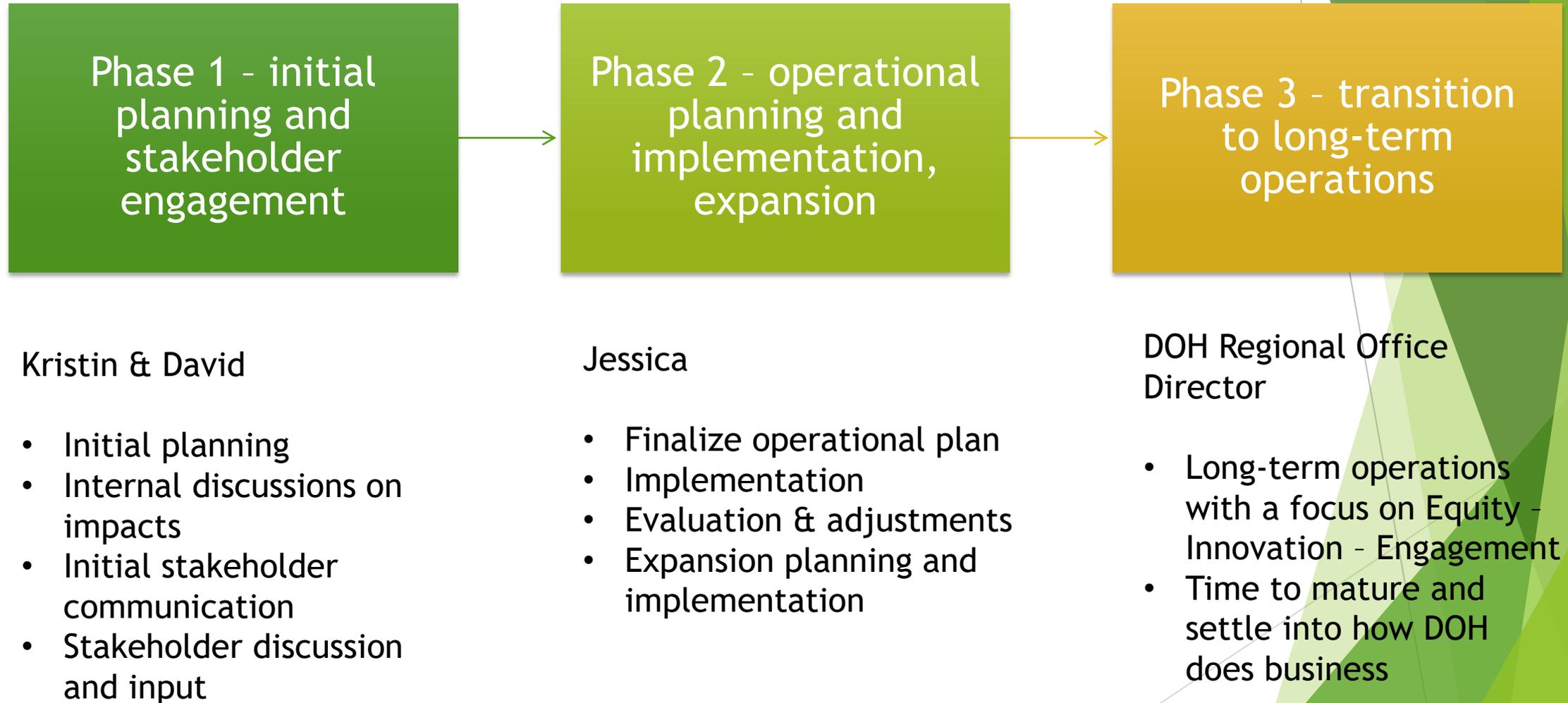
DOH wants to directly deliver services in communities in new ways

This is a first step in a plan to centralize the governmental public health system

# DOH Regional Office Planning



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# DOH Organizational Structure - Short -Term (Phase 2)

Clinical & Science Leadership,  
Regional Health Officers,  
Surveillance, Infectious  
Disease, Public Health Lab

Office of  
Health and  
Science

Chief of Staff

DOH Regional Office  
Implementation, Planning &  
Operational Oversight for  
Regional Offices  
(Phase 2)

Regional  
Medical  
Officers

Regional  
Coordinators

Administrative  
Support

Provides support for DOH Regional Offices

Programs &  
Divisions

Other  
Executive  
Offices

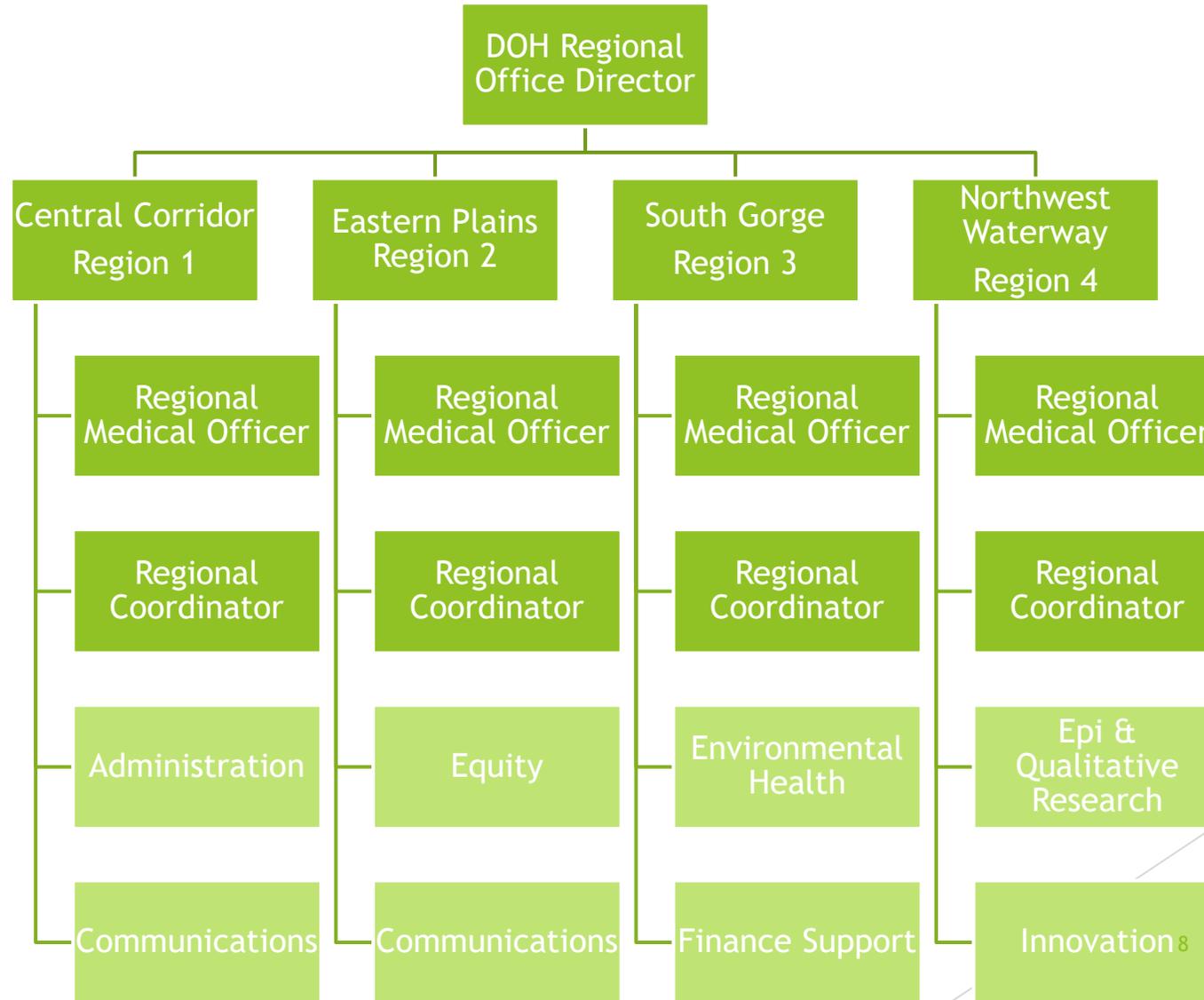
Operations and  
Support  
Services

Prevention &  
Community Health,  
Environmental Public  
Health, Health  
System Quality  
Assurance

Policy & Planning,  
Partnerships,  
Innovation &  
Technology, Response

Finance, HR, Facilities,  
Risk Management

# DOH Organizational Structure - Long -Term (Phase 3)



Regional Medical Officers - Matrix reporting to Office of Health and Science

Demonstrating how we may refocus current staffing to support regional offices - these are not new positions at DOH

- ▶ Provide input to agency activities and decisions, bringing diverse perspective and expertise to the conversation. Strengthen the knowledge and awareness of Washington needs and culture. Learning from the LHJ's and Tribes to understand needs and goals.
- ▶ Share context and issues that impact the regional areas as needed for policy development, strategic partnerships and agency operational work.
- ▶ Identify operational activities that connect to regional needs. Work with agency staff to foster connections, share resources and identify opportunities.
- ▶ Facilitate communication and connections within DOH that will support regional needs. Create a “one door” entry point for those that want it.
- ▶ Partner with the assigned regional medical officer to lead initiatives, facilitate meetings and plan work in support of regional work.
- ▶ Maintain and nurture relationships, facilitate cross collaboration within the agency. And across state agencies to support the public health system.
- ▶ Explore new opportunities, develop innovative strategies and build sustainable collaborations to support our agency priorities. Support funding, policy and strategic activity that will support our agency priorities.
- ▶ Support response operations

# Regional Coordinator Role

# Regional Medical Officer Role

Supports the Secretary of Health and the Chief Science Officer in advancing the priorities of the State of Washington and the Washington Department of Health in support of our state's public health system.

Stays informed about emerging science to support a strong scientific basis in support of emerging issue, emergencies, or other priority issues.

Provides evidence-based public health insights within their region and area of expertise including key response challenges during emergencies.

Represents the agency in regional forums, committees, and workgroups for a variety of public health issues.

Attends meetings, as appropriate, to better understand the diverse needs of a region and to build connections and relationships. Represents the state and resources that can be leveraged to support work.

Assists in the development of evidence-based public messaging and serves as a support for communication in their regional area, including during emergencies.

Provides regional coordination to agency public health programs to ensure effective linkages with private and public provider groups so that important changes in practice of medicine are communicated to providers.

This position may provide local health officer services, as needed, to regions or areas that need a back-up health officer due to emergent issue or absence. (Like DOH currently provides.)

# Regional Medical Officer Authorities

The proviso does not grant authorities beyond those that currently exist for DOH.

There has been no modification of local health officer authority

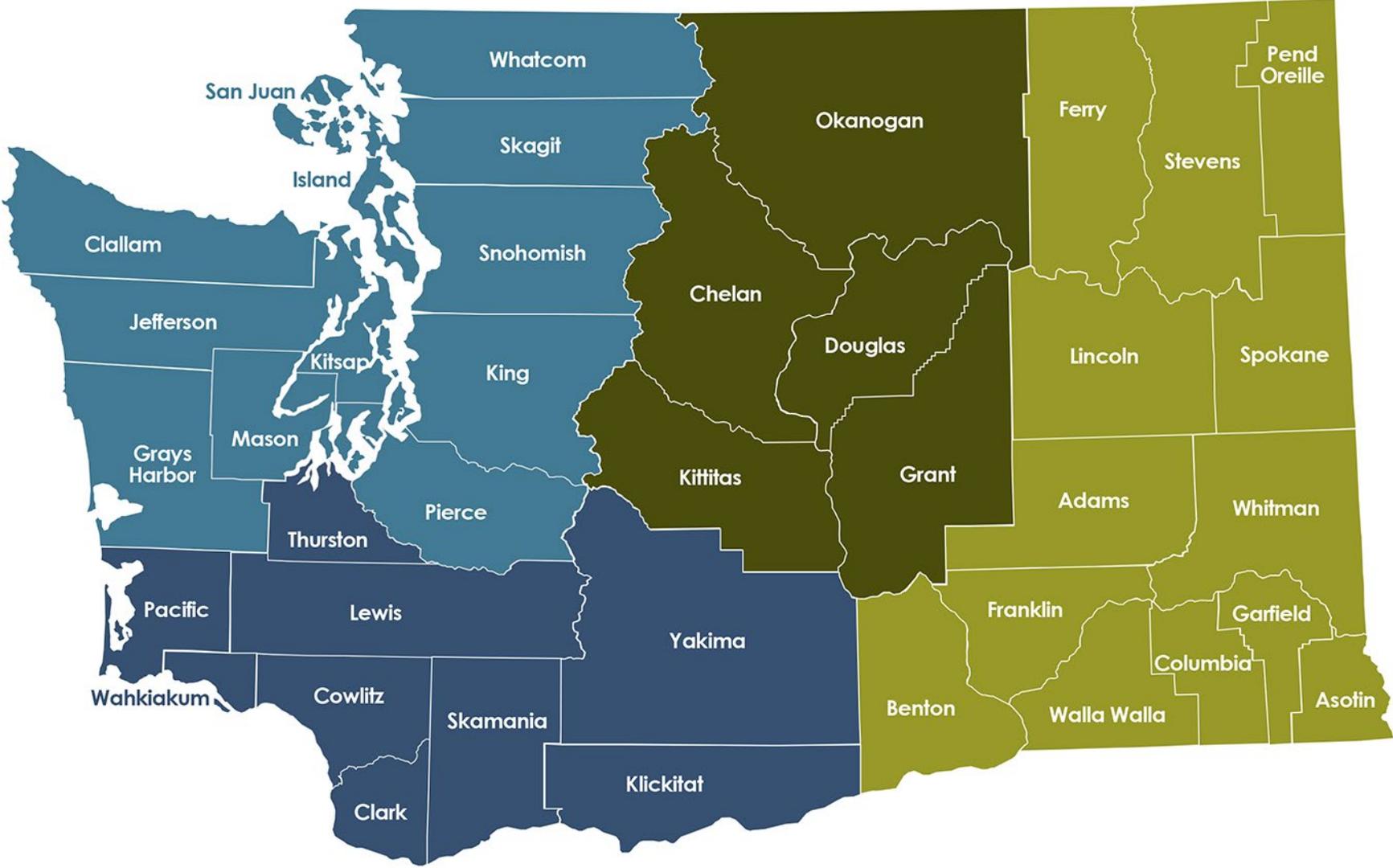
There is *no* intent to change or remove authority from Local Health Jurisdictions or local Health Officers

DOH intent *is* to have a robust team of medical/clinical experts to serve as leaders for all DOH activities and support our Local Health Jurisdictions, Tribes and other partners across the state.

- ▶ DOH will use the concept of regions to decentralize our current work
- ▶ We are splitting up the state into 4 operational areas for DOH functionality
- ▶ These areas will help us (DOH) develop an easy “entry” point for partners
- ▶ Size and boundaries aren’t aligned with something specific (there were way too many versions of Washington sliced and diced)
- ▶ They are not designed to be any type of “grouping” beyond a four-way split of the state
- ▶ They don’t have to be evenly distributed by population size, number of counties or commonalities
- ▶ The map you are about to see was designed by 1) interest by a few central WA counties to jump in, and 2) locations and ease of facilities for regional offices

## What are “Regions”?

# DOH Regional Offices Map



**Region 1**  
Central Corridor

**Region 2**  
Eastern Plains

**Region 3**  
South Gorge

**Region 4**  
Northwest Waterway

# Leveraging & Creating Broad Expertise and Experience for DOH

## ▶ Regional Coordinators

- ▶ Engagement
- ▶ Innovation
- ▶ Health promotion
- ▶ Leadership
- ▶ Equity
- ▶ Finance
- ▶ Workforce Development
- ▶ Diverse lived experience

## ▶ Regional Medical Officers

- ▶ Oral Health
- ▶ Behavioral Health
- ▶ Global health
- ▶ Chronic Health
- ▶ Preparedness
- ▶ Environmental Health
- ▶ Informatics

*These lists are not exhaustive, these are examples of expertise we could look for . . .*

# Dynamic & Deep Expertise Across DOH - Decentralized to Serve our Partners

- ▶ Flexibility to provide support and leadership within DOH from all regional offices
- ▶ No hard lines - our regional offices will be nimble to share resources and expertise
- ▶ No walls between regions - LHJ's aren't bound by these regions in their work
- ▶ Example: Thurston County - may sometimes be working on I-5 corridor activities with Pierce and King, and sometimes with Mason or Lewis County. We aren't interested in stopping those partnerships. We hope to bring expertise and experience from across our Regional Health Officers and Regional Coordinators when asked.
- ▶ Regional offices will be where and how partners "enter" DOH. Regional Liaisons and Regional Medical Officers will serve as the entry point for their areas. We hope this will grow into an opportunity to better coordinate behind the scenes and deliver comprehensive state services to LHJ's, tribes and other partners.

# Current DOH Offices Across Washington & Possible Modifications

- ▶ Northwest
  - ▶ Shoreline Public Health Lab
  - ▶ Kent Office (Recommend closing due to OFM space limitations and transition)
  - ▶ Downtown Seattle (Small Belltown Office)
  - ▶ New location (not in the urban corridor for the regional office, share with another agency?)
- ▶ South
  - ▶ Tumwater Office (eventually Vancouver option to share with DOT or another agency?)
- ▶ Central
  - ▶ No current office space (Wenatchee option to share with DOT, Ellensburg?)
- ▶ Eastern
  - ▶ Richland Office (Recommend assessing if we need this space)
  - ▶ Spokane Office (make this the eastern HQ)

# What Would a Regional Office Look Like?

- ▶ DOH is committed to a modern workplace with mobile work as our primary way of working.
- ▶ Our goal is that each of our offices will include: drop down space for individuals to work, shared space for collaborative work and conference room/break out room space for meetings.
- ▶ DOH is committed to strong technology in each location to bring people together virtually and ensure people have the technology tools to do their best work.
- ▶ Generally, they won't be big, we are committed to keeping our carbon footprint small, encouraging staff to go where the work happens and reduce commute time.
- ▶ We want you to be able to use the space too, with us and with your partners.

- ▶ David Bayne and Laura Blaske will continue to serve as a strategic partnership and liaison role for the system as a whole.
- ▶ Dr. Kwan-Gett and Dr. Lindquist won't be the only medical/science leadership state resource. There will be a few more people at DOH to support questions, consults, and discuss issues.
- ▶ There will be a regional liaison serving as a point of contact to assist with connecting across DOH and across state government.
- ▶ The Medical Officers and Regional Liaisons will want to learn about your needs and develop a relationship.
- ▶ Hopefully you will hear from them with resource options, recommendations, good ideas and most importantly with the question: how can I help you?

## What will Change for LHJ's?

# What Can LHJ's Ask For & Expect?

- ▶ Consults with Medical Officer or Regional Liaison - what do you need help with from DOH?
- ▶ Support and resource for convening the public health system in your area if needed
- ▶ A place to share feedback about working with DOH. Are you finding what you need?
- ▶ Assistance with unanticipated vacancies or workforce gaps
- ▶ A point of contact to bring resources and support within DOH together as needed (comms, ID, finance)
- ▶ Additional people that know and care about your communities and want to improve the health of people in Washington by making sure the state is doing all it can to fulfill its role.

# Feedback Welcome

- ▶ What concerns do you have with this vision and plan?
- ▶ What can someone in the Regional Medical Officer and/or Regional Liaison do to best serve you?
- ▶ What did you like that you heard?
- ▶ What's missing?



# Next steps:

- ▶ Following back with partners on any feedback & updates (*within the week*)
- ▶ Decision time: are we doing a pilot or jumping in with all 4? (*within the week*)
- ▶ Finalize position descriptions (*drafts done, ready to finalize based on feedback*)
- ▶ Finalize facilities planning (*part of DOH's bigger facilities planning process*)
- ▶ Develop innovative recruitment announcement for these positions (*end of Feb*)
  - ▶ One recruitment for both levels of positions
  - ▶ One pool for each level, assessing both qualifications and unique backgrounds
  - ▶ Fill positions while considering how to build out a team with different skills
- ▶ Solicit partner engagement in interviews/selection process
- ▶ Build on-boarding plan that sets these new hires up for success