

Strengthening Public Health

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Executive Summary

This policy brief describes the recommendations created by the Strengthening Public Health Workgroup (SPHW). During the integration of the Snohomish Health District into Snohomish County government, the Integrated Policy Group approved the creation of a workgroup focused on identifying measures that could be taken within the next three years to strengthen public health across Snohomish County. The SPHW included representation from multiple County departments, the former Health District, and several advisory bodies associated with public health. Between November of 2022 and April of 2023 the group met multiple times and, through a series of facilitated discussions, created six recommendations.

Key Points

- The Integration Policy Group directed a workgroup form to identify measures that could be taken by Snohomish County to strengthen public health within the next three years.
- A facilitated workgroup met twice monthly. Each represented agency provided at least one briefing to the group and each session included time dedicated to developing recommendations.
- The workgroup developed six recommendations, which include resources identified to support the accomplishment of these recommendations.

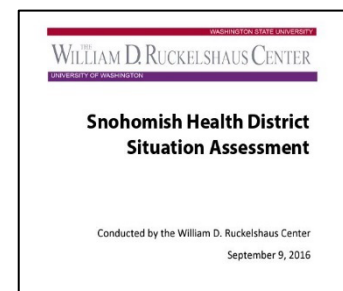
Context

On June 8, 2022, the Snohomish County Council unanimously approved the integration of the Snohomish Health District (SHD) into Snohomish County government (Snohomish County Council, 2022). This decision followed years of discussion on this topic, further informed by two formal reports (the Ruckelshaus and Gossett reports in 2016 and 2017, respectively) and the after-action report created by Snohomish County to assess its response to the COVID-19 pandemic.

The County established January 1, 2023, as the target date for integration, and the County and SHD created a transition strategy that included a policy group, a core group, and several functional workgroups. That strategy recognized the need to have one workgroup dedicated to looking beyond the integration and identifying recommendations to strengthen public health during the first three years following the integration.

The Strengthening Public Health Workgroup (SPHW) formed to develop those recommendations. Facilitated by the Snohomish County Executive's Office, the SPHW included representatives from each Executive department that shared overlapping authorities with the Health District. Human Services, Emergency Management, the Office of Social Justice, and Planning & Development Services all contributed representatives. In addition, the SPHW enjoyed the participation of representatives from the Public Health Advisory Council (PHAC), the Health District's Community Equity & Advisory Board (CEAB), and the Sound Foundation for Public Health. Finally, the Health District's entire leadership team participated.

Between October of 2022 and March of 2023, the SPHW met ten times. Each meeting consisted of a presentation, followed by a facilitated discussion focused on developing recommendations based on the presentation's content. By agreement, the group did not create a formal charter; however, at its initial meeting all the participants agreed to ground rules regarding the intent of the workgroup, its scope, the timeline/meeting frequency, and the decision-making process. The facilitator created a Teams site, which housed agendas and meeting minutes. This allowed workgroup members to share documents and review material from prior meetings. At the conclusion of their work, SPHW members also received multiple opportunities to review the recommendations.



Actions and Recommendations

The Strengthening Public Health Workgroup established a *shared goal* to Strengthen Public Health in Snohomish County within the *timeframe* of 2023 through 2025. We met multiple times; the date and focus of each meeting* are listed here:

- October 19, 2022 – Kick-off meeting to establish the foundation of the workgroup
- November 2, 2022 – Community Health Assessment/Community Health Improvement Plan
- November 16, 2022 – Human Services
- December 21, 2022 – Planning & Development Services
- January 11, 2023 – Emergency Management/Preparedness
- February 1, 2023 – Diversity, Equity, and Inclusion
- February 15, 2023 – Health District’s existing strategic plan
- March 1, 2023 – Initial full review of draft recommendations
- March 10, 2023 – Separate, partial review of draft recommendations with Health Department
- March 22, 2023 – Second full review of draft recommendations

*Two separate meetings (March 10 and April 7, 2023) were held with Health Department staff

Recommendation: Create and manage a centralized place for information sharing and dissemination for specific County-led planning efforts

- By the end of 2023, direct the creation of a committee to identify the planning efforts (comprehensive plan update, community health assessment, etc.) that leverage the same data sources (e.g., the housing report).
- By the end of 2023, identify the agency that will create and manage the information sharing hub.
- By the end of 2024, establish by policy the use of data collection plans as a best practice and direct the creation of one centralized location (such as a Teams site) to house these data collection plans. This would allow departments to have a shared place to provide input while minimizing the number of in-person meetings.
- Resources needed: Staff support from business analysts in Operational Excellence.

Recommendation: Enhance the Health Department’s informatics and epidemiologic analytic capacity

- Through the 2024 and 2025 budget processes, increase staffing to support epidemiology and informatics.
 - The Health Department remains understaffed in this area, which makes it very difficult to identify emerging trends in our residents’ health.
 - Adding to this overall capacity will help us to improve our data collection and analytics to better serve our BIPOC and RIM communities – this will be important for us in our equity commitments and closing disparity gaps that exist.
 - The lack of epidemiology and data analytics staff also inhibits the Health Department’s ability to provide quality input to other departmental planning efforts.
 - This program should include significant GIS support.
- Resources needed: Six permanent FTEs for the Health Department – One (1) lead epidemiologist; two (2) epidemiologist IIs; two (2) GIS analysts; one (1) application support analyst.

Recommendation: Complete a comprehensive “Gold Standard” evaluation of the Health Department

- By the end of 2023, submit an RFI to contract with an outside entity to use established standards** as a benchmark to assess the Health Department’s standards, operations, and capacity as a governmental public health department.
 - The study should include a review and assessment using the public health accreditation standards and measures for local and state public health departments.
 - The assessment and gap analysis should include both state and national standards for foundational public health services and capabilities.
 - The consultant should provide an assessment and comparison analysis of other local public health agencies serving similar populations and size to Snohomish County – this is both within WA State and outside of our state.
 - This evaluation must include an equity inclusion review around standards, practices, and capacity to engage in such work, which may necessitate a second RFI.
 - This evaluation must include a applied epidemiology capacity assessment utilizing the draft [CSTE Framework for Improving Applied Epidemiology during Public Health Transformation](#).
 - The study should include suggestions for the improvement of customer service in the regulatory environment. Suggestions should include strategies of education and behavior change within the regulatory framework where possible.
 - The workgroup recognizes that implementing the results of the study will almost certainly fall outside of the timeframe for its work; however, the workgroup believes this study should be completed before 2025.
- Resources needed: One project position (project manager) for the Health Department; contract services for assessment, review, and implementation planning.

** Examples include the standards for public health accreditation, foundational public health activities, and CSTE.

Recommendation: Initiate direct delivery of STI clinical services and immunization direct services via fixed and/or mobile facilities

- By the end of 2024, through community and partner engagement identify opportunities and costs to establish direct services.
 - Opportunities were identified to work in coordination with Human Services to reach systemically excluded community members who face transportation issues and/or are already enrolled in another program.
 - Direct delivery of service is a stated priority of the County Executive.
 - Opportunities exist with school districts to improve pediatric immunization rates.
- Resources needed: In future budgets, funding will be necessary for the Health Department to sustain ongoing clinical and direct services.

Recommendation: Improve the synchronization of disaster preparedness efforts

- By June 30, 2023, the Health Department, Human Services, and DEM will meet to review all plans that directly pertain to the public health aspect of disaster preparedness, response, and recovery, and identify where the Health Department has responsibility (either by Department or Emergency Support Function (ESF) 8) in plans that are the responsibility of DEM and review all Health Department plans that may have aspects that fall under the purview of Human Services or DEM.
 - There is a need to review and revise the expectations of a Health Department’s (versus a Health District’s) response to a disaster.
 - Health Department Public Health Preparedness Program (PHEP) staff currently focus on very critical planning efforts (medical countermeasures, mass vaccinations, etc.) that will require support from other County departments.
 - There is a need to ensure each department’s roles and responsibilities are clearly defined in the Comprehensive Emergency Management Plan.
- Resources needed: Two additional permanent FTEs for the Health Department – One (1) program manager; one (1) emergency management specialist

Recommendation: Take immediate measures to address the needs of Snohomish County's systemically excluded communities

- By the end of 2023, develop and implement policies that afford financial incentives that reduce the barriers to accessing the input of historically excluded community members.
- By June of 2023, begin the creation and maintenance of a calendar of community events, which can be used by the Health Department (and others) to schedule events that build trust in marginalized communities.
- By the end of 2024, identify adequate resources to ensure language access services are available to all residents who need them.
- Use the Health Department's Language Access Assessment and Recommendations Report to inform resources needed
- By September 2024, host a "Come Meet Your County" community outreach event to showcase who we are and how we serve the community.
 - Invite our community groups, hold activities for kids/youth/elders.
 - Build in follow-up and on-going connection opportunities; what and when; post event (post card, newsletter, etc.).
- Increase diversity on our community boards and commissions.
 - Intentional support and training about boards and commissions.
 - Work with the Office of Social Justice to develop an equity review tool to guide in reviewing current health department policies and inform the creation of new health department policies.
- Resources needed: One permanent FTE for the Health Department – One (1) diversity/equity/inclusion (DEI) manager.

Opinion

"Every member of the group brought added value – from a willingness to admit their biases to incredible insights from their various backgrounds to their willingness to compromise to achieve consensus on the recommendations. It was truly a pleasure to work with this amazing group of people."

Limitations

We intentionally limited the size of the group, striving to achieve a balance between appropriate representation and remaining nimble enough to identify recommendations in a timely manner. This meant that we had to rely on a sample from each group to provide input. We also limited ourselves to entities within Snohomish County. The SPHW was very aware that there were other agencies, standards, etc. that could inform actions to take within the next three years. While one of our recommendations reflect the need for introducing some of these external sources, we limited this work to the input provided by the partners identified to be part of the SPHW.

Reference

Snohomish County Council. (2022, June 8). General Legislative Session Meeting Minutes. Everett, WA: Snohomish County.

