Health of King County
Board of Health
January 15, 2015

Patty Hayes, RN, MN
Interim Director
Overview

• Key accomplishments
• Focus areas for the year ahead
• Challenges and opportunities
Framework for the Foundational Services: Large Metro Health Department

Across all Programs

- Assessment (surveillance and epidemiology)
- Emergency preparedness and response (all hazards)
- Communications
- Policy development and support
- Community partnership development
- Business competencies
Public Health

- Prevention: Provides core communicable and chronic disease services to reduce the leading causes of death and close disparity gaps in King County
- Jail Health Services: Provides constitutionally required health services to all King County inmates
- Environmental Health: Prevents disease through sanitation, safe food and water, proper disposal of wastes and toxics, and promoting safe and healthy environmental conditions
- Community Health Services: Provides maternal-child health, family planning, primary care, dental to high risk families and adults; regional access and outreach services
- Emergency Medical Services: Leads partnership with dispatch centers, paramedic providers, fire departments, and others to provide pre-hospital emergency care county-wide. Operates Medic One
- Policy, Assessment & Communications: Advances policies, partnerships and communications that protect and promote health, and collects data to assure evidence-based decision making
- Preparedness: Builds regional capacity for responding to public health emergencies
- Business Practices: Provides financial, contracting, compliance and human resource services
Some of our Accomplishments

• **Prevention division** – active outreach & new treatments reduced number of homeless individuals with TB

• **Prevention, Preparedness and Communications** – monitoring and coordinating on-going Ebola response

• **Jail Health Services** – training and creating continuous improvement

• **Community Health Services** – increasing partnerships for client benefit. Planned Parenthood, Community Health Centers, Cities, labor organizations and other non-profits

• **Board of Health** – Chair participates in the Foundational Public Health Services Policy Workgroup
Emergency Medical Services

• Cardiac arrest survival rate exceeds all past successes

62% survival rate

Average Cardiac Arrest Rate

Chicago, Detroit, Fresno, Houston, Los Angeles, Memphis, Miami, Milwaukee County, Minneapolis, New York, Rochester, MN, Rochester, NY, Salt Lake City, San Francisco, Tucson. 2011 data
Remote Area Medical Event

- Seattle/King County Clinic
  - 3,386 individuals received free dental, vision, and medical care
  - 75% had incomes below 200% of Federal Poverty level, over half identified as non-white
  - 184 Public Health Reserve Corps members provided over 1,500 volunteer hours over 4 days
Closing the gap in obesity – community-based prevention initiatives matter

Youth obesity (\%)  

Obesity declined by 17% between

CPPW begins

In non-CPPW school districts, obesity remained

Declines in Student Obesity Prevalence Associated with a Prevention Initiative — King County, Washington, 2012
Highline Medical Center has improved its offering of healthy meals offered in cafeterias at the Burien location. Since Highline is a part of the larger Franciscan Health System, the work is expanding to all eight Franciscan hospitals around the state: a great example of how work initiated through community transformation work can spread far beyond King County.
Affordable housing agencies in South King County have adopted smoke-free policies including Navos Housing (serving those with mental illness) and the Senior Housing Assistance Group.

And all public housing authorities in King County are now smoke-free!
Community Transformation Success

A farm-to-school program has been implemented in Auburn, Kent, and Renton School Districts with support from Washington State Department of Agriculture.

The districts have purchased over 50,000 pounds of Washington-grown produce, which has been offered to 33,200 students.
Multi-Division Departmental Response

• Contamination of a large public water system with E. coli
• Managed a large, complex boil water order on Mercer Island
• Led by Public Health Preparedness, involving Communicable Disease and Epidemiology, Environmental Health Food / Water programs, Communications team, and the Health Officer
• September 26 – October 8, 2014
• 62 permitted establishments
• 450 hours of staff time

Carole Coombs, right
EH Food Inspector
Photo courtesy Seattle Times
There is much to be done in 2015.
Focus Areas

Every division is working on these issue areas

**Focus Area 1:**
Work toward financial stability

**Focus Area 2:**
Create the capacity to protect the public from unexpected health risks

**Focus Area 3:**
Shape Public Health’s role in transforming health care systems

**Focus Area 4:**
Advance health and reduce inequities

**Focus Area 5:**
Build support for Public Health

**Focus Area 6:**
Develop a skilled, adaptive, and diverse workforce
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Focus Area 1

Work toward financial stability

• **Department: Financial Management Project**
  18 month initiative with Executive branch aimed at improving Public Health’s ability to monitor, report, and explain changes in its financial position.

• **Divisions: Variety of Projects**
  – Sustainability of clinic funding (CHS)
  – Basic Life Support Core Services (EMS)
  – Overhead Allocations (EMS)
  – Overall Efficiencies and Cost Reduction (EH)
Focus Area 2

Create the capacity to protect the public from unexpected health risks

- Disease outbreaks like Ebola / effective disease outbreak readiness
- Public Health Reserve Corp volunteer recruitment
- Toxic exposures (e.g. Wade’s gun range lead exposure)
- Vulnerable Populations Action Team (VPAT)
Focus Area 3

Shape Public Health’s role in transforming health care systems

– Enrollment (ACA) – Low income fare with Metro
– Familiar Faces
– Meridian Center for Health
– Accountable Community of Health development
– Communities Count & Community Health Needs Assessment
King County Interim Accountable Community of Health Leadership Council

Subcommittee relationship

King County 2015 ACH Design (draft)

Physical/Behavioral Health Integration

Familiar Faces (jail high users)

Medicaid / Medicare Dual Eligibles Demonstration

Housing-health partnership planning

Communities of Opportunity

Equity network partnership

Coordination relationship
Focus Area 4

Advance health and reduce inequities

– Healthy food community strategies
  • Healthy kids meals
  • SNAP program

– Partnership to Improve Community Health (PICH) Initiative:
  • Work with schools, childcares, community based organizations, and other community partners
  • Projects focus on tobacco, healthy food access, physical activity

– Local Hazardous Waste Management Program’s equity focus

– Best Starts for Kids
Focus Area 5

Build support for Public Health

– Maintain and build partnerships
– Participate in public policymaking
– Innovative communication strategies
– Vashon Marine Recovery Area
– Board of Health 2015 work plan
Focus Area 6

Develop a skilled, adaptive, and diverse workforce

– Anti-bias workshop
– Development of Lean culture
– Strengthening relationships with other agencies
  • Natural Resources & Parks
  • Community & Human Services
  • Metro
  • Permitting & Environmental Review
  • University of Washington
Challenges & Opportunities

• Sustainable funding

• Foundational Public Health Services – exploring how this model applies in King County

• Public Health’s role in system change

• Capacity to address issues that arise

• Continued work on enrollment and connections to service

• Data linkage between systems
Building a shared data system – a core component of Accountable Communities of Health

Cross sector data

Facilitate cross sector data sharing

Data management

Data analysis

Data dissemination

Data visualization