

State of Washington  
Decision Package

FINAL

Agency: **303 Department of Health**  
Decision Package Code/Title: **R0 Healthiest Next Generation**  
Budget Period: **2015-17**  
Budget Level: **PL-Performance Level**

**Recommendation Summary Text:**

This package provides ongoing funding for the Department of Health in partnership with the Department of Early Learning, and the Office of Superintendent of Public Instruction, to continue implementation of proven and broad comprehensive strategies in early learning settings, schools and communities across Washington State to support children's health.

**Fiscal Detail**

<b>Operating Expenditures</b>	<b><u>FY 2016</u></b>	<b><u>FY 2017</u></b>	<b><u>Total</u></b>
001-1 General Fund-State	0	451,000	451,000
<b>Total Cost</b>	<b>0</b>	<b>451,000</b>	<b>451,000</b>

**Package Description:**

The Governor and many state and local partners want the next generation to be the healthiest ever. Many experts believe the current generation of children in our country may have shorter lives than their parents, for the first time in our nation's history. The initial goal of the Healthiest Next Generation (HNG) initiative was to help our children maintain a healthy weight, enjoy active lives and eat well and started as collaboration between Department of Health (DOH), Department of Early Learning (DEL) and the Office of the Superintendent of Public Instruction (OSPI). The legislature provided funding to support staff in all three agencies in fiscal year (FY) 2015. Successes in the work and discussions with stakeholders are prompting requests to use the HNG umbrella to frame additional priority children's health issues we partner to address. Funding was provided in the 2015-17 budget to continue the DOH HNG coordinator work; however, no such funding was provided for coordinators at OSPI and DEL. Without ongoing funding for all three agencies, the "health in all environments" approach cannot be sustained and we will lose momentum and partner support.

Outside of the home, children spend the majority of their time in schools and often early learning settings. Their health is not only influenced by the practices and policies within these environments, but their performance in schools and early learning settings is impeded or enhanced by their health. The focus of OSPI and DEL is not health. Those agencies rely on the DOH to take the lead. However, DOH does not have the influence over early learning and schools that these agencies do. Working together, the cross-agency team can influence health policy and practice in early learning settings and schools that can improve health for all children in Washington. According to the Trust for America's Health and the Robert Wood Johnson Foundation, a five percent drop in body mass index in Washington State could save \$5 billion in healthcare costs in 10 years and \$14 billion in 20 years.

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## **Narrative Justification and Impact Statement:**

### ***What specific performance outcomes does the agency expect?***

This initiative is changing to a more comprehensive umbrella to frame important children's health issues that we collaborate on to address, including (but not limited to) tobacco and marijuana prevention, immunizations, and suicide prevention, and is supported by stakeholders.

#### **Initiative Focus Areas:**

Strategies to create early learning settings, schools and communities that promote healthful choices are currently centered on these areas:

- Physical activity: Helping children be active at least 60 minutes a day.
- Healthful eating: Making sure children are well-fed and fed well, including having water to drink.
- Breastfeeding: Supporting breastfeeding-friendly places.

And are proposed to expand and include:

- Tobacco and marijuana prevention
- Immunizations
- Suicide prevention

## **Performance Measure Detail**

### **Activity: A002 - Prevent Chronic Disease**

### ***Is this DP essential to implement a strategy identified in the agency's strategic plan?***

Yes. This decision package supports the following in the DOH Strategic Plan goals and objectives:

Goal 2: Prevent illness and injury and promote ongoing wellness across the lifespan for everyone in Washington.

Objective 3: Support healthy weight in children and adults.

Goal 5: Ensure core business services are efficient, innovative and transparent.

Objective 1: Develop and initiate appropriate policies and legislation to support our goals and objectives.

### ***Does this DP provide essential support to one or more of the Governor's Results Washington priorities?***

The following sections of the Governor's Results Washington are affected by this request:

Goal 1: World Class Education

Goal 4: Healthy and Safe Communities

Goal 5: Efficient, Effective and Accountable Government

### ***What are the other important connections or impacts related to this proposal?***

Part of the vision of the HNG initiative is to improve health equity by recommending statewide changes that improve health for all children in Washington. The initiative has a strong partnership with the Governor's Interagency Council on Health Disparities. As a result of this partnership, the

Governor's Interagency Council on Health Disparities developed a guidance document to promote equity in state policies, plans, programs, budgets, rules, grants, contracts and solicitation documents.

***What alternatives were explored by the agency and why was this alternative chosen?***

DOH identified one time federal funding to continue this work at DEL and OSPI through December 2015, and those agencies have identified internal funding to continue this work through June 2016. There is no sustainable funding available for DEL and OSPI to continue this work beyond fiscal year (FY) 2016, nor for DOH beyond FY 2017, so general fund state is requested to be ongoing.

***What are the consequences of not funding this package?***

Funding has been provided in the 2015-17 budget to continue the DOH HNG coordinator work; however, no funding was provided for coordinators at OSPI and DEL. Without ongoing funding for all three agencies, the "health in all environments" approach cannot be sustained and we will lose momentum and partner support. Funding for the HNG is the only state-funded investment in childhood obesity prevention. Partners are invested and interested in making changes to support health in schools and early learning; those changes will not happen without the staffing support in those state agencies. Not funding this request will significantly impact our ability to engage public and private stakeholders, preventing or significantly slowing implementation of recommendations presented by HNG partners.

***What is the relationship, if any, to the state capital budget?***

N/A

***What changes would be required to existing statutes, rules, or contracts, in order to implement the change?***

Prospective policy alternatives from statewide recommendations may require additional rulemaking and legislation.

**Expenditure and revenue calculations and assumptions:**

**Revenue:**

None

**Expenditures:**

Beginning in FY 2017, the department will enter into interagency agreements with OSPI and DEL. One-time funding is required to implement health and physical standards and update child care WACs to meet national standards. WAC requirements are implemented through DEL systems which will require software updates after new rules are adopted. Ongoing funding is required to support ongoing staff.

- OSPI – requires one-time funding of \$75,000 for professional development to implement health and physical standards and \$147,000 ongoing to support staff coordination efforts. (FY 2017 – \$222,000)
- DEL – requires one-time funding of \$80,000 to update child care WACs to meet national standards around nutrition and physical activity and \$149,000 ongoing to support staff coordination efforts. (FY 2017 – \$229,000)

Beginning in FY 2018, and ongoing, total cost per year are \$419,000 which includes \$123,000 for DOH, \$149,000 for DEL, and \$147,000 for OSPI.

***Which costs and functions are one-time? Which are ongoing? What are the budget impacts in future biennia?***

Beginning in FY 2017, one-time costs are \$155,000. Ongoing costs total \$419,000 per year which includes funding for DOH, DEL, and OSPI.

<b><u>Object Detail</u></b>	<b><u>FY 2016</u></b>	<b><u>FY 2017</u></b>	<b><u>Total</u></b>
A Salaries and Wages			
B Employee Benefits			
C Personal Service Contracts			
E Goods and Services			
N Grants		451,000	451,000
G Travel			
J Capital Outlays			
T Intra-Agency Reimbursements			
<b>Total Objects</b>	<b>0</b>	<b>451,000</b>	<b>451,000</b>