

# Washington State Health Governance and the State Board of Health

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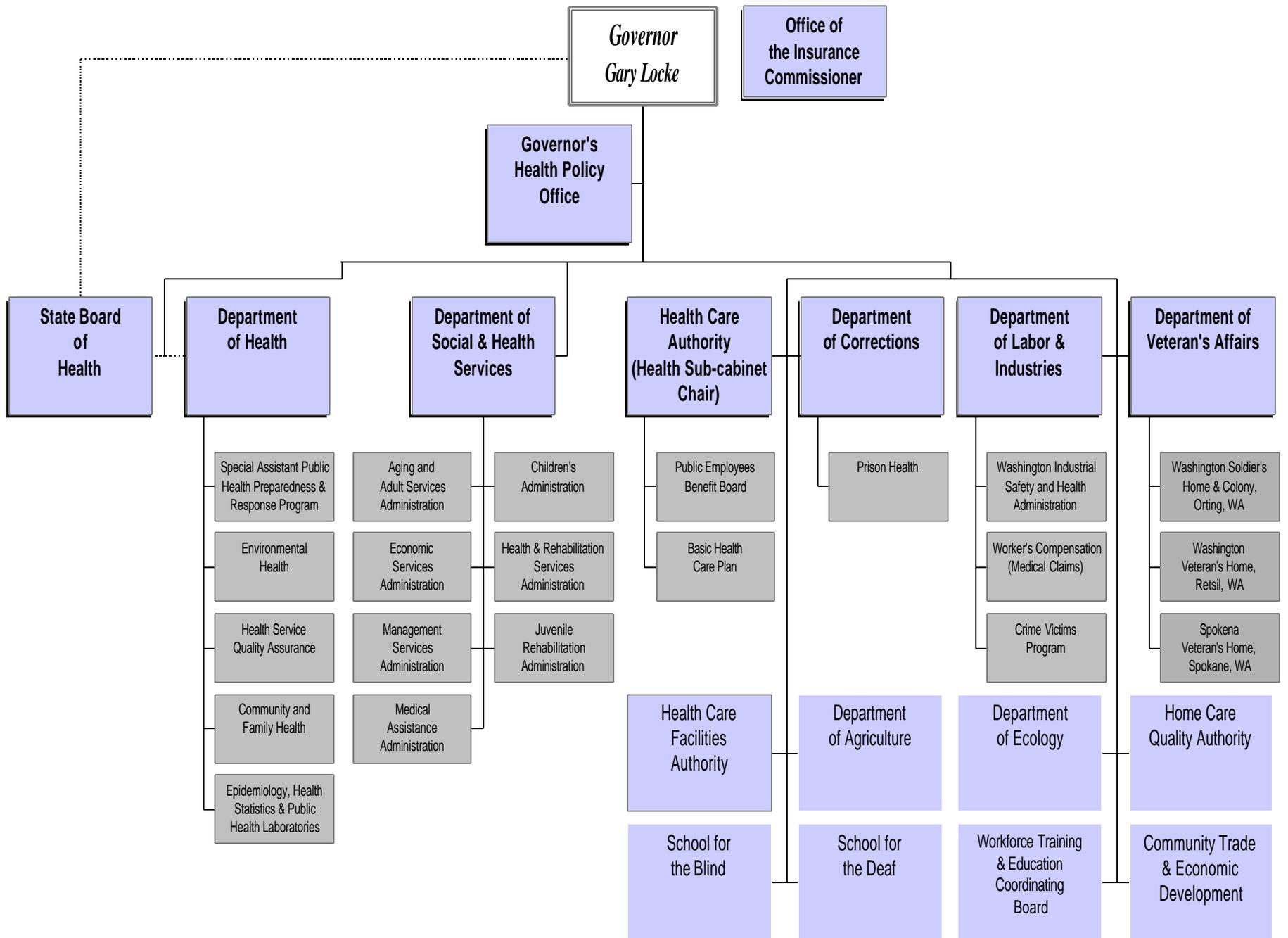
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# Washington Public Health Governance and the State Board of Health

- How are State Health Agencies Organized?
- How is Public Health Organized?
- What Does the State Board Do?
- How Does the State Board Work?
- How Might Washington's Board Be Improved?
- How Typical is Washington's Board?
- Closing Observations

# How are State Health Agencies Organized?

- Governor appoints the big health agency heads
- Ad hoc advisory committees, study commissions and task forces abound
- Insurance Commissioner is separately elected
- Several boards with term appointments
  - State Board of Health
  - Health Professional Licensing Boards



# How are State Health Agencies Organized?

- Like most states, no consistent organizational principles, but some tendencies:
  - 1970s: creation of a few, large “function” based agencies; “Sunset” for boards and commissions
  - 1980s: separation of some programs from “function” based agencies; continued “Sunset” for boards and commissions; but separate Department of Health, Health Care Authority, Health Services Commission, and stronger Board of Health created

# How are State Health Agencies Organized?

- 1980s: A flirtation with greater local autonomy
- 1990s: Open distrust of government, tax revolt & “government by initiative”
- 1990s: Continued separation of programs from “function” based agencies; some new interest in boards and commissions (study, advise and oversee); continued executive interest in sunset for boards and commissions; centralization of administrative control

# How is Public Health Organized?

## *Local Health Jurisdictions*

- 34 Local Health Jurisdictions (LHJs)
  - County departments,
  - Combined county departments,
  - City/County districts
- Each LHJ has a Board of Health
- Primarily city and county elected officials
- However, a few citizens, experts and hospital district members now permitted

# How is Public Health Organized?

## *Local Health Jurisdictions*

- Local boards set rules, budget, some fees & appoint local health officials
- LHJs enforce state rules and law
- Funding mix: federal fund share increasing, state fund share static and threatened, local fund share decreasing, local fees increasing
- More DSHS Medicaid funds to LHJs than state public health funds

# How is Public Health Organized?

## *The State Department of Health*

- Distributes some federal & state funds to LHJs
- Enforces state rules & laws; oversees LHJs
- Sets some rules & coordinates policy
- Plans & implements some programs
  - state lab., epi. & health statistics
  - Some child & family health programs
  - Some environmental health programs
  - Provider and some facility credentialing
  - Technical Assistance to LHJs (PHIP)

# How is Public Health Organized?

## *The State Board of Health*

- Governor appoints 9 members to 3 year terms
- Members typically serve 3 terms
- Board composition in law
  - 2 local board members (cities and counties suggest)
  - 1 local health officer (local health officers suggest)
  - 4 health and sanitation experts
  - 2 consumers
  - the Secretary of Health

# What Does the State Board of Health Do?

- Sets rules for
  - Environmental health (sanitation, vectors etc.)
  - Contagious disease (isolation, quarantine, HIV/AIDS and STDs etc.)
  - Children's health (pre-natal & newborn screening, immunizations, school health etc.)
  - Vital records
  - Health condition reporting standards
  - Transient accommodations

# What Does the State Board of Health Do?

- Suggests statewide health policy priorities through a *State Health Report*
  - Build public health infrastructure for preparedness
  - Change risky health behavior
  - Purchase better value; evidence-based health care
  - Maintain access to critical health services
  - Reduce disproportionate disease burdens on racial and ethnic minorities

# What Does the State Board of Health Do?

- Makes Policy Recommendations in *Board Priority Areas* such as
  - Emergency preparedness; infrastructure development
  - Environmental justice
  - Environmental health community engagement
  - Health workforce disparities
  - Children's health
  - Genetics, privacy and discrimination
  - Access to critical health services

# What Does the State Board of Health Do?

- Provides a Public Forum
  - Public meetings
  - “Open mike” (recent issues: cell phones and towers, school indoor air, surface water contamination)
  - All Board material on our web pages  
[www.doh.wa.gov/sboh](http://www.doh.wa.gov/sboh)
  - Accept web based testimony
  - Special forums, conferences, surveys

# How Does the Board Work?

- Board appoints Executive Director
- MOU with Dept. of Health for admin. support, additional staff, facilities etc.
- Board relies primarily on LHJ, state agency, citizen, private sector, and academic community input
- Close, constructive but sometimes “challenging” relationships with Department of Health, LHJs and others

# How Does the Board Work?

- Effectiveness depends on relationships with other state, local and private organizations and groups
- Board or Board staff are members of
  - Governor's Sub-cabinet on Health
  - Public Health Improvement Partnership
  - State Agency Medical Directors Group
  - Some 27 other governmental and community coalitions, partnerships etc.

# How Does the Board Work?

- Open process
- Wide collaboration
- Maximum Board member engagement
- Minimum of full Board meetings
- Sub-committees, work groups & delegation
- Maximum use of web-based communication
- Presence and persistence
- Media

# How Might Washington's Board Be Improved?

- More independent study & consensus building
- Greater public visibility
- Closer ties with local boards of health
- Closer ties with the legislature
- Greater role in state budgeting
- Board composition even more closely aligned with areas of responsibility

# How Typical Is Washington's Board?

- 34 state boards of health in 1990; 30 in 2002
- 4 were converted to other advisory councils
- 19 of the current 30 have regulatory authority
- Governor appoints members in 28 states
- Legislature advises or confirms in 14
- All state boards of health have term appointees
- 14 state boards have independent staff

# Closing Observations

- Good science, great people, time & persistence win
- Relationships are key: formal structure can enable
- A focused public health voice in Cabinet enables us
- Public health happens locally; a strong local voice in state policy is the cornerstone of our improvement
- Some ideas about efficiency and consistency have slowed improvement
- Health is bipartisan; we try to protect the truth

# Closing Observations

- Any governance structure will work better with clear missions in mind. Which are yours:
  - Promoting consistency?
  - Maximizing operational efficiency?
  - Engaging the public?
  - Developing consensus?
  - Building science into practice?
  - Promoting healthy habits?
  - Advocating for funds or policy?
  - Building confidence in governance decisions?