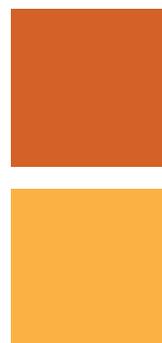
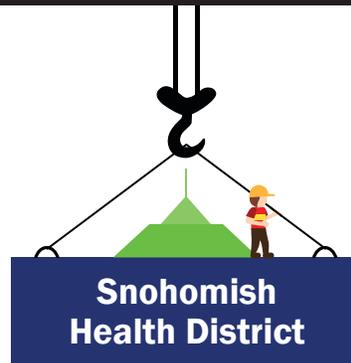
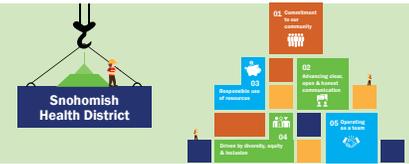




## Building for the Future



# Acknowledgements



## BOARD OF HEALTH MEMBERS

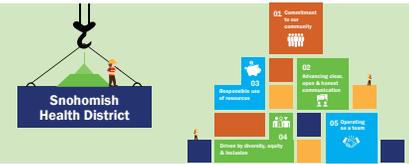
- **Stephanie Wright**, Chair, Snohomish County Councilmember \*
- **Adrienne Fraley-Monillas**, Vice Chair, Edmonds City Councilmember \*
- **Scott Bader**, Everett City Councilmember \*
- **Elisabeth Crawford**, Mukilteo City Councilmember
- **Megan Dunn**, Snohomish County Councilmember
- **Christine Frizzell**, Lynnwood City Councilmember
- **John Joplin**, Brier City Councilmember
- **Anji Jorstad**, Lake Stevens City Councilmember
- **Sam Low**, Snohomish County Councilmember
- **Kyoko Matsumoto Wright**, Mayor of Mountlake Terrace
- **Jared Mead**, Snohomish County Councilmember
- **Nate Nehring**, Snohomish County Councilmember \*
- **Dan Rankin**, Mayor of Darrington \*
- **Linda Redmon**, Snohomish City Councilmember
- **Jeff Vaughan**, Marysville City Councilmember

\* Budget Ad Hoc Committee

## HEALTH DISTRICT SUPPORT

- **Shawn Frederick**, Administrative Officer
- **Pam Aguilar**, Interim Deputy Administrative Officer
- **Sara Centanni**, Finance Manager
- **Sarah de Jong**, Executive Assistant
- **Katie Curtis**, Prevention Services Director
- **Ragina Gray**, Environmental Health Director
- **Tracey Kellogg**, Finance Manager
- **Lynn Ljungquist**, Graphic Designer
- **Rich Son**, Accountant
- **Carrie Parker**, Prevention Services Assistant Director
- **Heather Thomas**, Public & Government Affairs Manager

# Introduction



## HONORABLE BOARD OF HEALTH MEMBERS:

It is my pleasure to submit to you my budget for 2022.

We entered 2021 with a balanced budget, and plans for a more sustainable organization. The District continued its responsive efforts in close collaboration with local, regional, and state partners to control the spread and mitigate the impacts of COVID across Snohomish County.

The District's staff has worked tirelessly to deliver public health services to the residents of Snohomish County. Throughout the year the District has continued to provide testing, access to immunizations, working with our schools, and doing a host of case investigation, contact tracing, and technical assistance work to protect local communities. Additionally, the District has continued to perform those routine public health functions like access to vital records, prevention services, and environmental public health services.

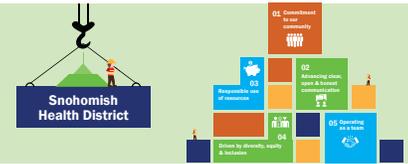
Even with a pandemic, public health's work doesn't stop. Here are some of the accomplishments achieved in spite of the significant strain of COVID-19 on our agency.

**Administration:** The division remains steadfast in securing the resources needed for Prevention Services and Environmental Health to conduct their vital work.

- In 2021, staff brought on board a Human Resources Information System (HRIS) to improve services to employees. HR is able to onboard new employees fully electronically which eliminated all paper. In addition, Employees are able to go through the Open Enrollment process 100% online which eliminated paper.
- In 2021 HR staff posted 58 recruitments (1 to multiple openings) within our Applicant Tracking System with an average time to hire of 38 days and hired 82 employees for the first 3 quarters with 68 of those employees for District COVID roles and 14 for permanent roles.
- The Rucker building saw the installation of its first vital records kiosks, allowing individuals requesting certain documents the ability to bypass the customer service counter entirely. The District also retrofit its customer service area, installing a vertical barrier allowing face to face customer service to resume.
- The Board of Health adopted several new policies improving transparency, clarity and structure in the district including Budget, Finance, Electronic Signature, Texting, and Electronic Fund Transfer Policies.
- Members of the Board and Staff continue to work with the Sound Foundation for Public Health as they continue their progress towards achieving 501 (C) 3 status and self-sufficiency.

**Environmental Health:** The Environmental Health division helps ensure the food, water, and environment of Snohomish County are safe from health threats such as disease, pollution, pests, and other hazards. In 2020, many of our basic activities were interrupted by the pandemic, and staff were called upon to assist with response efforts. With the COVID-19 response better secured and established, EH staff were able to regroup and return to regular duties in late 2020-early 2021. Restaurants and pools began opening back up to the public, and other activities that had taken a back seat during the height of the emergency were prioritized. An unexpected development boom kept our Land Use staff on overtime throughout the Spring and Summer. Solid waste complaints ticked up over the summer with their corresponding necessary enforcement actions. Staff provided guidance to camps in the county, and through the hard work of these facilities there were no camp related cases of COVID-19. Temporary food events, such as the Evergreen State Fair and other festivals and fairs throughout the county resumed in 2021. Staff were there to provide guidance and ensure safe food handling practices. With the resumption of in person learning in Snohomish County schools, the EH schools team was out inspecting school grounds to ensure the safety of students. The division said good-bye to its Assistant Director in April, 2021, and has been actively recruiting a replacement to help bring forth a new vision for the future of EH. EH programs also welcomed several new faces, including a Program Specialist in the Customer Service team, some Environmental Health Specialists and some customer service support staff.

# Introduction



District staff have made several notable accomplishments in the first three quarters of 2021, among them:

## Food Safety Program:

- Completed over 3,500 regular inspections of restaurants and temporary food vendors.
- Investigated over 360 food related complaints and 14 foodborne illnesses.
- Completed nearly 350 plan reviews of new restaurants or facilities undergoing remodels.

## Land Use Program:

- Reviewed over 500 new septic applications.
- Reviewed over 970 building clearances.
- Processed over 200 septic repair applications.

## Safe Environments Program:

- Investigated over 350 complaints about improperly stored or disposed of solid waste.
- Performed nearly 120 school health and safety inspections.
- Performed over 1,030 water recreation facility inspections.
- Completed 9 weeks of surveillance in partnership with DOH for West Nile Virus.

## Vital Records Program:

- Fulfilled orders for nearly 10,200 birth certificates and 19,000 death certificates.

**Prevention Services:** The Prevention Services Division is responsible for investigating communicable diseases, providing linkages to care for parents and children, responding to emergencies, and examining data to help staff and community partners make the best decisions for the residents of Snohomish County. As laid out in the 2020 budget, the Healthy Communities and Assessment teams have been integrated within Prevention Services. Some of the work accomplished in the Division include:

## Maternal and Child Health Program

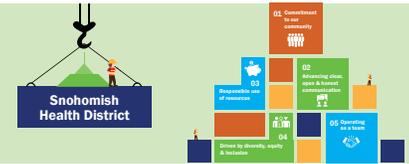
Access to Baby & Child Dentistry (ABCD) Program:

- Residents reached out 2,742 times with dental health information.
- 430 families from minority groups with a child less than 1 year old given an ABCD Information Letter and Low-cost Dental Resource List.
- Education given to 149 providers through The Tiny Bites ABCD newsletter.
- Provided ABCD information in English and Spanish to 330 to Elementary School parents and dropped off toothbrushes and Dentist Link resource provided through Arcora Foundation to Everett Gospel Mission shelter.

Vaccine-Preventable Disease (VPD) Program:

- Over 166,000 vaccines administered directly by SHD from the beginning of the vaccination campaign in December.
- Overseeing 154 clinics participating in the State's Vaccines For Children program to provide vaccines at no cost for eligible children by enrolling providers into the program, monitoring the clinics to ensure they are providing quality services, maintaining the quality of the vaccines, giving technical guidance on any issues arising in the clinics and guiding them through quality improvement projects. Completed 209 clinic supervision visits and follow up actions to support clinics in meeting regulatory requirements and improving through quality improvement projects.
- 1,043 providers trained or given technical assistance on VPD topics.

# Introduction



- Reached 396 residents with VPD educative information.
- Fulfilled 399 immunization records requests for our residents.
- Conducted 309 vaccine transfers with pending expiration dates to higher volume clinics thus avoiding vaccine wastage.

## Child Care Health Outreach Program (CCHOP):

- Successfully competed for and was granted a CDC Lead Prevention grant, a childhood developmental award by the Bezo's Foundation known as Vroom, a COVID-19 Vaccine communications grant, and an Innovative Practice Award by NACCHO for our Talent LMS class COVID-19 Class for Child Care Providers in Washington State.
- Technical Assistance on health and safety given 2,766 times to child care providers.
- Trained 1,238 Childcare Providers who completed 2,673 SHD health & safety courses as an upstream promotion strategy of healthy early childhood development.

## Children & Youth with Special Health Care Needs (CYSHCN) and Lead Prevention programs:

- Competed for and selected for the CDC Lead Poisoning Prevention Grant in collaboration with MCH's CCHOP.
- Served 141 children who have serious physical, behavioral or emotional conditions that require health and related services beyond those required by children generally with 1,192 services including 53 home visits, 834 follow-up calls including telehealth services and 91 medical home screenings.

## Trauma & Resilience (T&R) program – Neuroscience, Epigenetics, Adverse Childhood Experiences (ACEs) & Resilience - NEAR:

- Trained 223 residents through educational events.

## Communicable Disease Surveillance and Response, Sexually Transmitted Diseases, Viral Hepatitis Outreach

- Investigated 573 reportable communicable diseases.
- Investigated 3,393 sexually transmitted infections and provided testing and treatment for identified high-risk groups and those without a medical home.
- Investigated 559 chronic HCV infections and connected individuals with chronic hepatitis infection to low-barrier treatment partners.

## Tuberculosis and Refugee Health

- Treated 33 active TB patients, provided screening to 32 suspected/possible cases.
- Treated 25 patients/contacts who had Latent Tuberculosis Infection (thus preventing further active cases).
- Provided medical screening to 69 new arrival refugees.

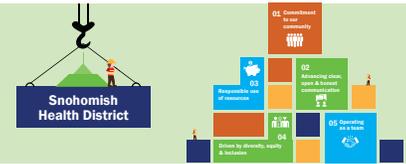
In 2021, the Washington State Legislation made significant investments in foundational public health services greatly increasing the capacity to deliver public health services to the residents of Washington State. We remain actively engaged in the process of securing sustainable funding for the citizens of Snohomish County.

This proposed budget represents investments in public health capacity based on what is known today related to sustainable FPHS funding in the current and projected in the next biennium.

Respectfully,

Shawn Frederick, MBA  
Administrative Officer

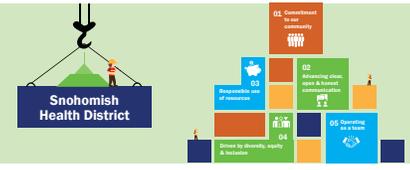
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# About The Snohomish Health District



The Snohomish Health District's mission is to spearhead efforts to protect, promote and advance the collective health of our community. It will continue to do this by focusing on activities that are grounded in a set of foundational public health services, which include:

- Communicable Diseases & Notifiable Conditions
- Chronic Diseases & Injuries
- Environmental Health
- Maternal, Child & Family Health
- Vital Records
- Ongoing, Critical Public Health Issues
- Access to Medical, Dental & Mental Health Care
- Building a Sustainable Organization

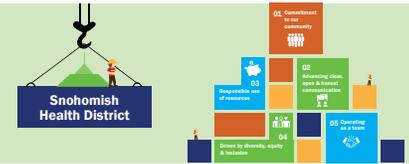
In Washington State, responsibility for public health protection is shared among the State Board of Health, Washington State Department of Health, and the 35 local health jurisdictions covering the 39 counties. Responsibility for governance of local public health boards is placed solely with counties.

The Snohomish Health District was created in 1959 as an independent special-purpose district responsible for public health in Snohomish County. We're separate from Snohomish County government, although it provides financial support and is an essential partner in many functions.

A 15-member Board of Health oversees all matters pertaining to the preservation of life and the health of the population, including policy and budget development. All five Snohomish County council members sit on the Board of Health, together with 10 city council members or mayors representing the cities and towns. Public meetings of the Board of Health are held monthly.

State law also requires each local board of health to appoint a licensed, experienced physician as the local health officer. Chris Spitters, MD, MPH, serves as the Health Officer for the Snohomish Health District. Shawn Frederick, MBA, serves as the Administrative Officer.

# Vision, Mission & Values



The 2020 Strategic Plan incorporated a new vision, mission and value statements as approved by the Board of Health.

## Vision Statement

By leading and partnering with our communities we create a resilient and healthy community throughout Snohomish County.

## Mission Statement

The Snohomish Health District spearheads efforts to protect, promote, and advance the collective health of our community.

## Values

### Commitment to our community:

Dedicated to those we serve and pursuing the common good. We engage our community and partners to help solve problems, share new ideas, and explore perspectives. Holding a very inclusive and broad view of the entire community and its needs, we focus our collective energy on producing positive benefits.

### Advancing clear, open and honest communication:

Prioritizing good communication with the Board of Health and the community is fundamental to the effective operation of the District. This includes speaking openly, practicing active listening and prioritizing timely internal and external communications, not only ad hoc, but also through formalized processes and channels. An environment that strives to be free of surprises, helps build trust and fosters teamwork across the organization and with the community.

### Responsible use of resources

We are deliberate stewards of the public resources with which we are entrusted. We commit to employing evidence-based strategies, careful deliberation and transparency of decisions. We demonstrate integrity through smart spending of time and money and establishing measurable and attainable expectations.

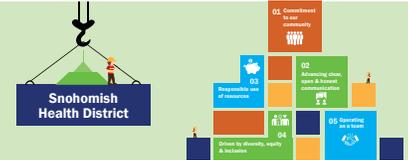
### Driven by diversity, equity and inclusion

We are open to different opinions and ideas, inclusive of everyone, and committed to understanding the inequities that are barriers to healthy lives and living. We adapt to changes in the community, its composition and demographics, its needs and concerns, and strive to provide services equitably. The organization celebrates and respects the uniqueness of cultures, communities and diverse ideas, and strives to reflect the community's demographics.

### Operating as a team

The District works as a team and is accountable to each other in improving the health of the community by taking pride and ownership in our work, meeting our agreed timelines and celebrating our successes. We trust and respect each other and can acknowledge our mistakes, and we individually and collectively strive to deliver quality services.

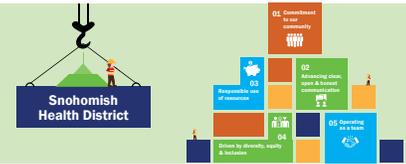
# Budget Overview



The Health District has been in the midst of transformation over the last several years. We have embarked on a series of efforts to examine and align strategies, evaluate programs and services in the context of foundational public health, and keep pace with the reformation of the healthcare system. It's both exciting and challenging, but still necessary work to ensure the District can provide sustainable services into the future.

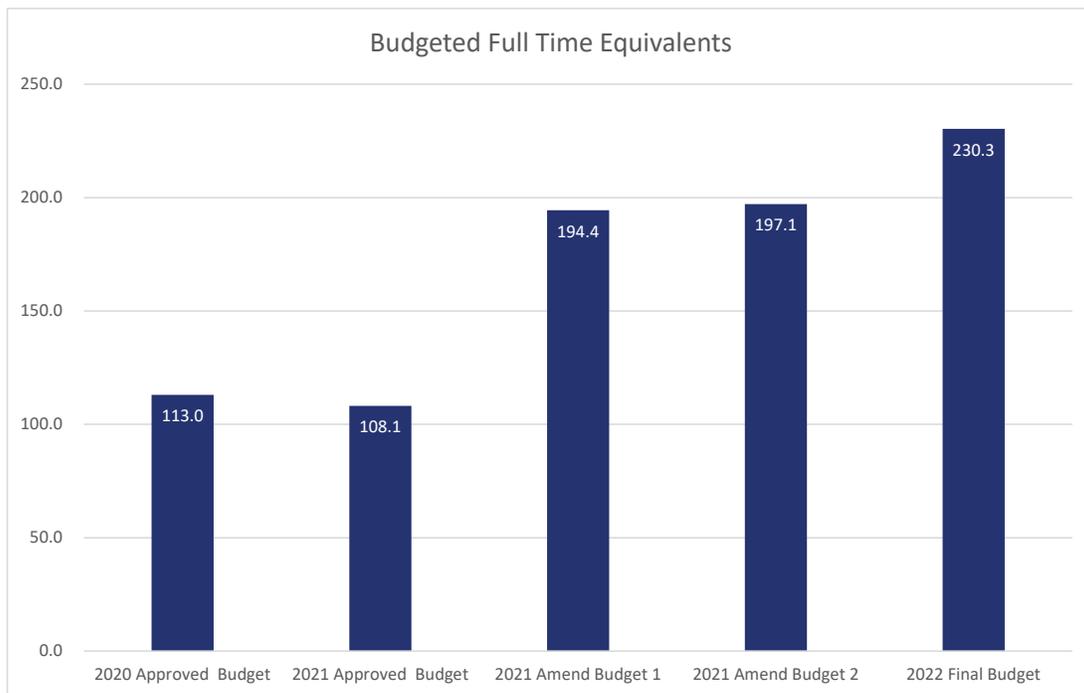
2022 FINAL BUDGET					
	Admin Services	Environmental Health	Prevention Services	Total	%
<b>Revenue:</b>					
Licenses & Permits	\$0	\$4,060,458	\$0	\$4,060,458	12.88%
Federal Grants	0	0	4,665,696	4,665,696	14.80%
COVID-19	0	0	10,771,702	10,771,702	34.16%
State Grants	3,433,292	508,716	274,897	4,216,905	13.37%
FPHS	0	1,179,820	1,974,889	3,154,709	10.00%
Intergovernmental Revenue	726,618	27,996	1,500,000	2,254,614	7.15%
Charges for Goods & Services	191,620	1,813,290	365,000	2,369,910	7.52%
Miscellaneous Revenues	40,000	0	0	40,000	0.13%
<b>Total Revenues before Reorganization</b>	<b>\$4,391,530</b>	<b>\$7,590,280</b>	<b>\$19,552,184</b>	<b>\$31,533,994</b>	<b>100.00%</b>
<b>Expenditures (Before OH Allocations)</b>					
<u>Labor:</u>					
Salaries & Benefits	<b>(\$2,766,016)</b>	<b>(\$6,331,377)</b>	<b>(\$12,896,155)</b>	<b>(\$21,993,548)</b>	<b>69.75%</b>
<u>Non-Labor:</u>					
Supplies	(\$36,500)	(\$128,896)	(\$151,370)	(\$316,766)	1.00%
Professional Services	(1,145,076)	(120,200)	(3,669,622)	(4,934,898)	15.65%
Communication	(83,876)	(28,620)	(27,584)	(140,080)	0.44%
Mileage & Travel	(12,525)	(55,450)	(130,950)	(198,925)	0.63%
Board of Health Per Diem	(10,380)	0	0	(10,380)	0.03%
Advertising	(87,360)	0	(961,200)	(1,048,560)	3.33%
Rents & Leases	(241,030)	(13,800)	(11,474)	(266,304)	0.84%
General Insurance	(180,009)	0	0	(180,009)	0.57%
Utilities	(75,540)	0	0	(75,540)	0.24%
Repairs & Maintenance	(550,955)	(31,865)	(16,800)	(599,620)	1.90%
Other Miscellaneous	(43,867)	(27,851)	(6,000)	(77,718)	0.25%
Dues & Memberships	(45,250)	(7,260)	(1,240)	(53,750)	0.17%
Subscriptions	(3,852)	(600)	(840)	(5,292)	0.02%
Printing & Binding	(1,660)	(11,650)	(23,264)	(36,574)	0.12%
Tuition & Registration	(23,050)	(55,450)	(69,000)	(147,500)	0.47%
Software Licences & Support	(324,879)	(412,650)	(235,501)	(973,030)	3.09%
Software Licences & Support - Board	(5,500)	0	0	(5,500)	0.02%
Capital	(470,000)	0	0	(470,000)	1.49%
Subtotal - Non-Labor	<b>(\$3,341,309)</b>	<b>(\$894,292)</b>	<b>(\$5,304,845)</b>	<b>(\$9,540,446)</b>	<b>30.25%</b>
<b>Total Expenditures Excluding Overhead</b>	<b>(\$6,107,325)</b>	<b>(\$7,225,669)</b>	<b>(\$18,201,000)</b>	<b>(\$31,533,994)</b>	<b>100.00%</b>
<b>Net Revenue</b>	<b>(\$1,715,795)</b>	<b>\$364,611</b>	<b>\$1,351,184</b>	<b>\$0</b>	

# Budget Overview



This budget includes the following assumptions:

- Incorporates increased medical and dental rates depending on the plan.
- No increase in 2022 vision rates.
- PERS employer rate updated to 10.07%.
- Adding 33.2 FTE (15.1 FTE in Prevention Services, 14.8 FTE in Environmental Health, and 3.3 FTE in Administration). The 2.7 FTE remaining difference between 2021 Budget Amendment 1 and 2022 Proposed Budget is incorporated into 2021 Budget Amendment 2.
- The indirect rate will fall from 47.1% to approximately 11% for 2022. This is due to the reallocation of many indirect staff to COVID-19 response duties.



The agency’s organizational chart, omitting current COVID-19 activities, is shown on the next page.

BOARD OF HEALTH

ADMINISTRATIVE OFFICER  
1.0 FTE

HEALTH OFFICER  
1.0 FTE

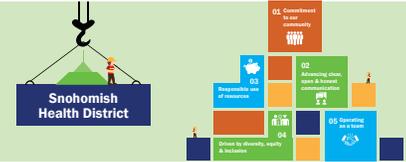


ADMINISTRATION			
TITLE	FTE	TITLE	FTE
<b>Deputy Administrative Officer</b>	<b>1.0</b>	<b>Executive Assistant</b>	<b>1.0</b>
Privacy and Public Records Officer	1.0	Administrative Assistant	1.0
Business Management Analyst	1.0	Program Specialist II	.90
<b>MAINTENANCE/FLEET</b>		<b>COMMUNICATIONS &amp; POLICY</b>	
Building & Fleet Maintenance Specialist	1.0	<b>Public &amp; Government Affairs Manager</b>	<b>1.0</b>
<b>FINANCE OFFICE</b>		Communications Coordinator	3.0
<b>Finance Manager</b>	<b>1.0</b>	Graphics Designer	2.0
<b>Accounting Supervisor</b>	<b>1.0</b>	Policy Analyst	1.0
Program Specialist II	2.0	Grants Coordinator	1.0
Accountant	1.0		
Purchasing Coordinator	1.0		
Payroll Analyst	1.0		
<b>HUMAN RESOURCES</b>			
Senior Human Resources Specialist	1.0		
Human Resources Specialist	1.0		

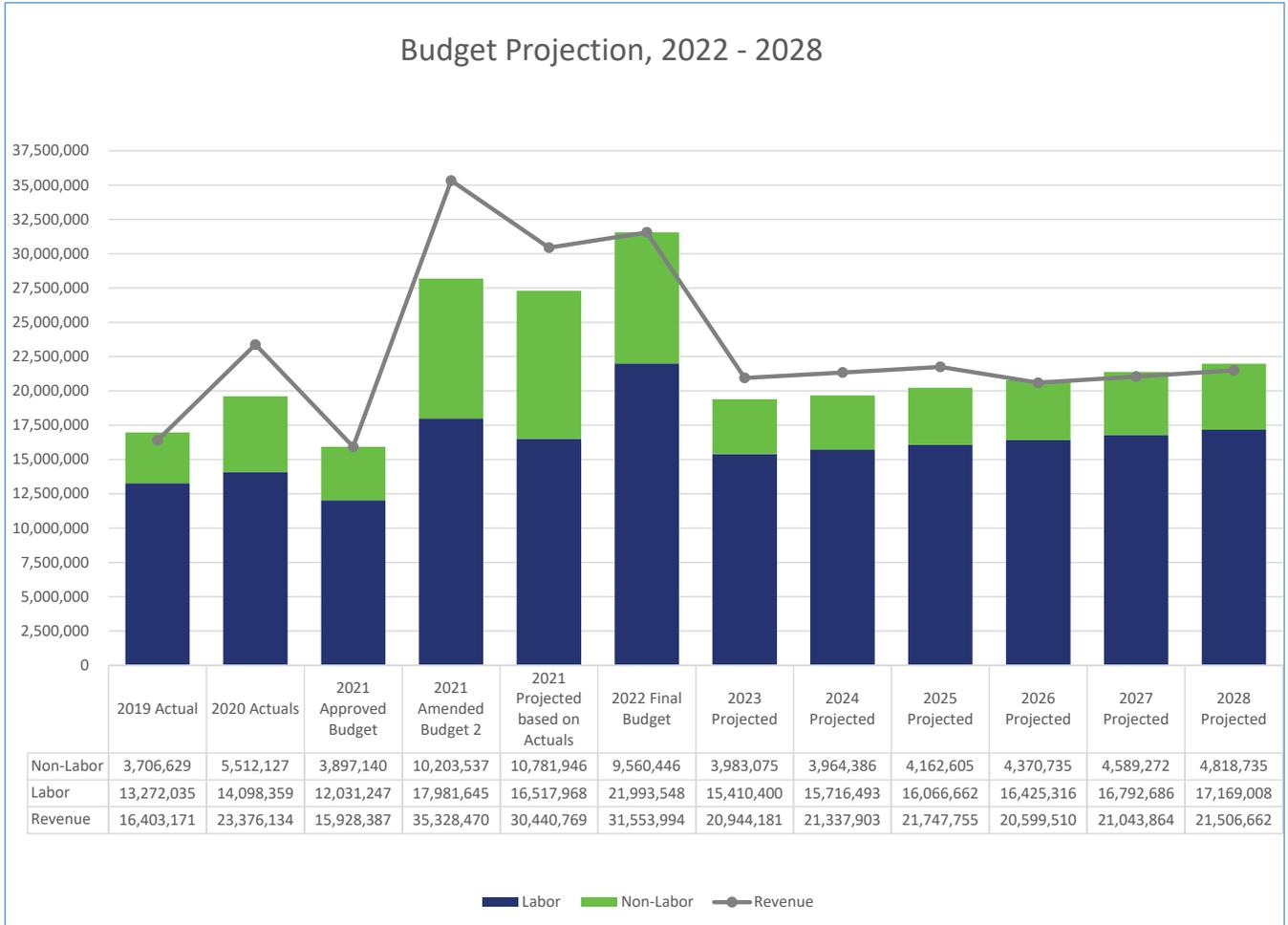
PREVENTION SERVICES			
Prevention Services Director 1.0 FTE			
TITLE	FTE	TITLE	FTE
Prevention Svcs Assistant Director	1.0	Prevention Svcs Assistant Director	1.0
<b>TUBERCULOSIS &amp; REFUGEE HEALTH</b>		<b>MATERNAL CHILD HEALTH/FIRST STEPS, VACCINE PREVENTABLE DISEASE</b>	
<b>TB &amp; Refugee Supervisor</b>	<b>1.0</b>	<b>MCH Supervisor</b>	<b>1.0</b>
Lead PHN	1.0	Public Health Nurse	5.8
Registered Nurse/PHN RHP	1.5	Vaccine Coordinator	1.0
Outreach Worker II	3.0	Environmental Health Specialist VII	.50
Public Health Nurse TB	3.0	Behavioral Health Specialist	1.0
Program Specialist II	1.0	Program Specialist II	1.0
Program Assistant II	1.0		
Disease Intervention Specialist	1.0	<b>HEALTHY COMMUNITIES</b>	
<b>STD/HIV</b>		<b>Healthy Communities Supervisor</b>	<b>1.0</b>
<b>STD/HIV Supervisor</b>	<b>1.0</b>	Healthy Community Specialist	4.6
Lead Disease Intervention Specialist	1.0	Health Educator	3.0
Disease Intervention Specialist STD/HIV	6.0	Health Equity Advisor	1.0
<b>HIV/STDs, VHO, CD SURVEILLANCE &amp; RESPONSE</b>		<b>ASSESSMENT</b>	
<b>CD/PHEPR Supervisor</b>	<b>1.0</b>	Lead Epidemiologist	1.0
Public Health Nurse	2.0	Epidemiologist II	2.0
Disease Intervention Specialist VHO	1.0	Epidemiologist I	1.0
Program Assistant II	1.0		
Emergency Management Specialist	3.0		

ENVIRONMENTAL HEALTH			
Environmental Health Director 1.0			
TITLE	FTE	TITLE	FTE
EH Assistant Director 1.0	1.0	EH Assistant Director 1.0	1.0
<b>Administrative Supervisor</b>	<b>1.0</b>	<b>FOOD SAFETY</b>	
Program Specialist II	2.0	<b>Environmental Health Supervisor</b>	<b>3.0</b>
Program Assistant II	8.0	Environmental Health Specialist III	3.0
<b>SAFE ENVIRONMENTS</b>		Environmental Health Specialist VII	15.0
<b>Environmental Health Supervisor</b>	<b>1.0</b>	Health Education Delivery Specialist	.25
Environmental Health Specialist III	1.0	Health Educator	.50
Environmental Health Specialist VII	8.0		
<b>LAND USE</b>			
<b>Environmental Health Supervisor</b>	<b>2.0</b>		
Environmental Health Specialist III	2.0		
Environmental Health Specialist VII	8.0		
Health Educator	1.0		
Program Specialist II (Permit Techs)	2.0		

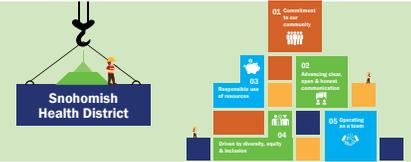
# Budget Overview



The following chart incorporates expenditure assumptions discussed previously as well as the expected effect of Environmental Health fee increases recently approved.

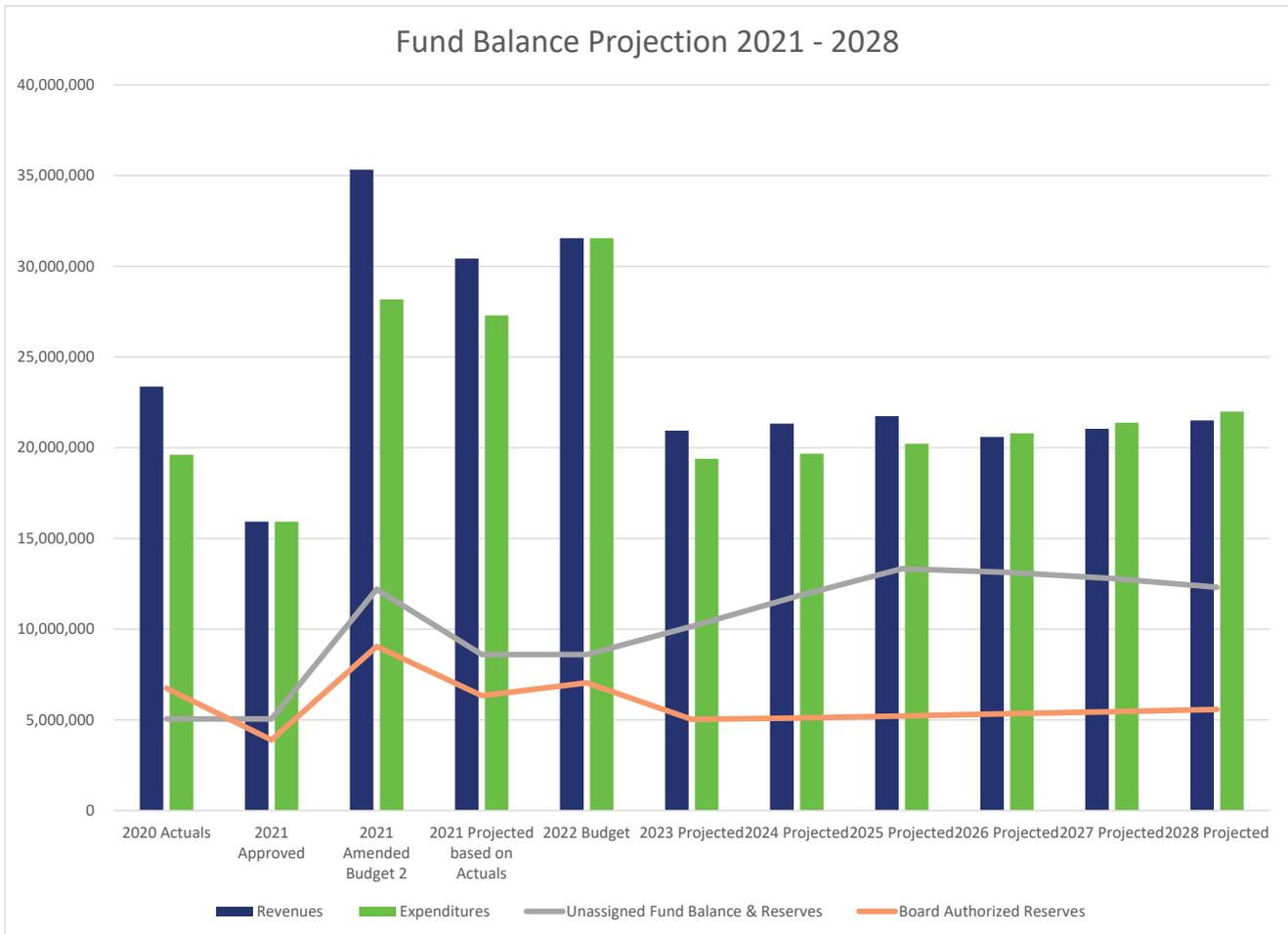


# Budget Overview

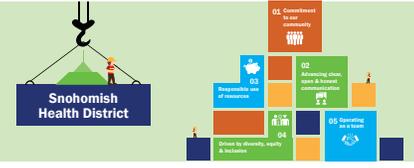


Projected revenues through 2028 are sufficient to cover projected expenditure increases. Effective July 2021, the State Legislature has approved increased Foundational Public Health Funding through the end of June 2023, and preliminary increases anticipated for FY24-25.

While 2022 through 2025 are fairly stable, due to unknown future legislation, securing new and sustainable funding sources is critical to the agency's long term financial stability. This includes revenues anticipated from the Sound Foundation for Public Health, as well as rental of unused space in the Rucker Building.

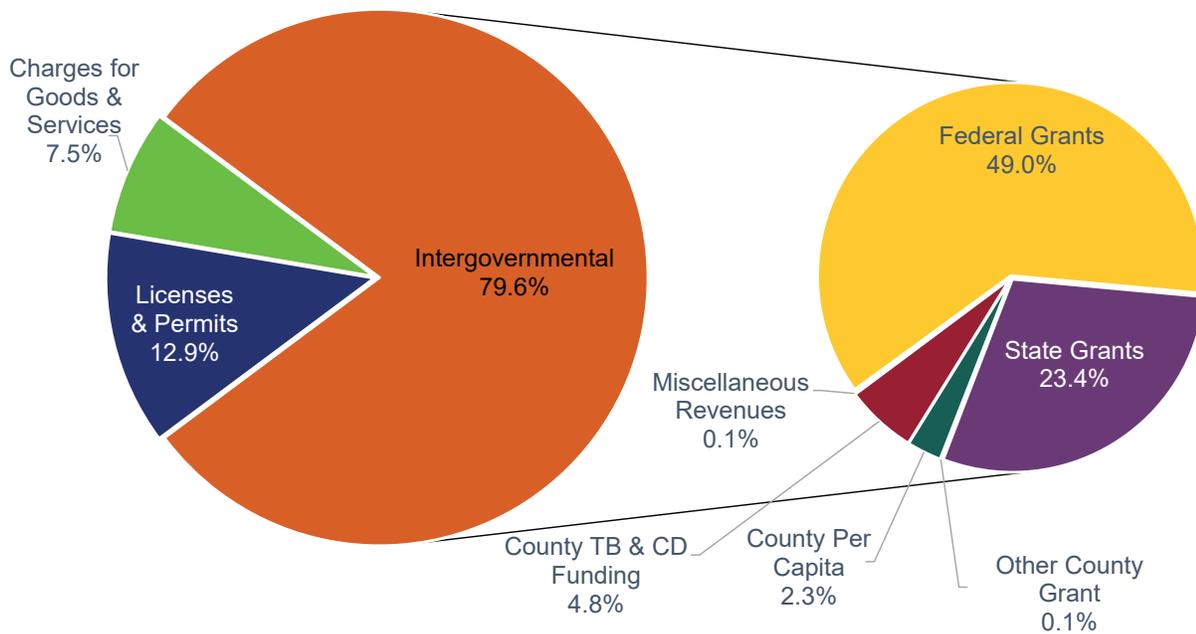


# Revenues

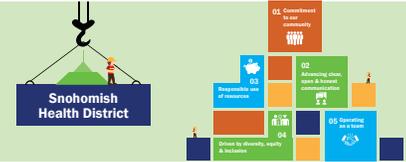


The agency relies heavily on roughly 80 percent of its funding coming from intergovernmental revenue (federal, state, county and city sources) to support public health services. More than two-thirds of the District's revenue is "restricted" or "categorical," which means the majority of the agency's funds can only be used for specific purposes.

2022 Budgeted Revenue By Source



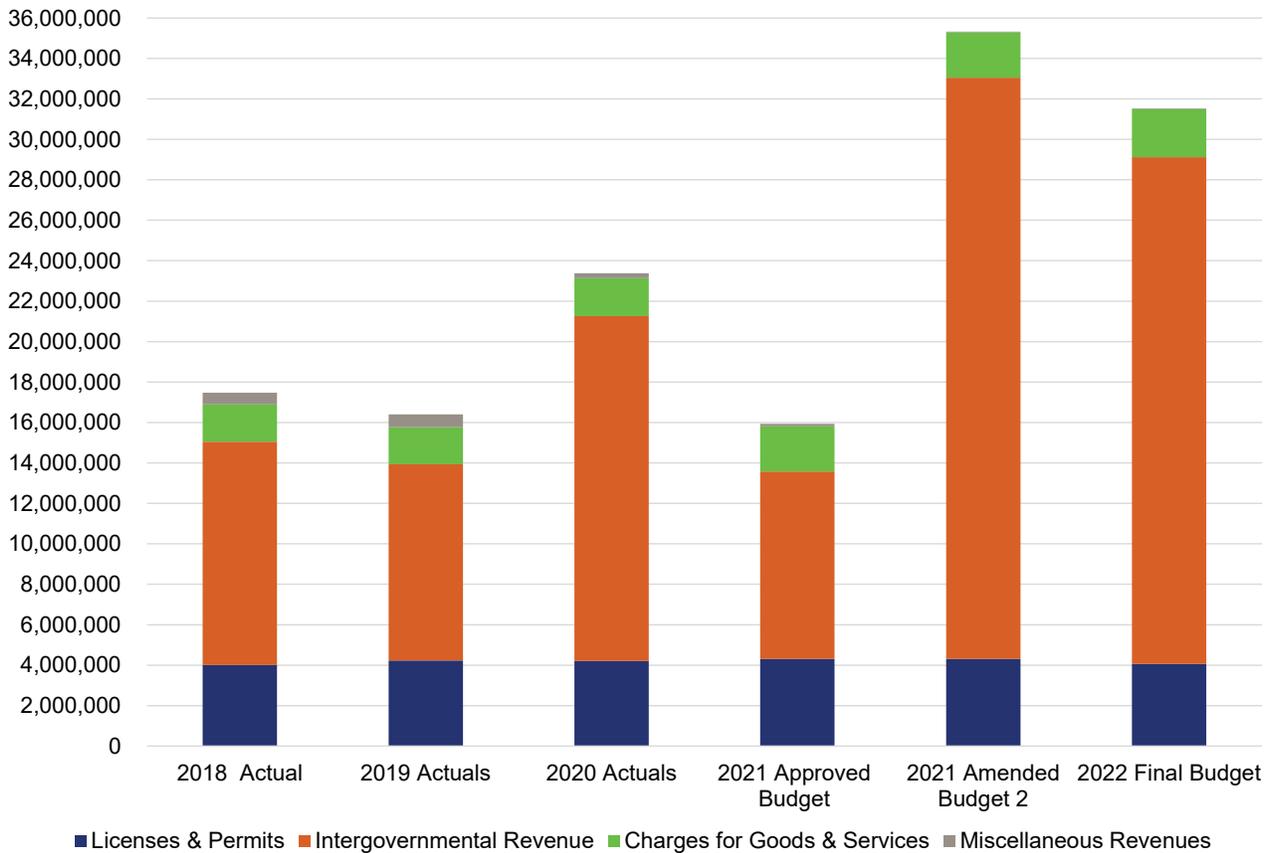
# Revenues



In addition to intergovernmental funds remaining static or declining, these funds are limited term, unpredictable, or fluctuating grants that limit the District’s ability to institute change. Grant funding, in particular, does not provide the District with the flexibility needed to begin delivering public health services through broader, more community-based mechanisms. The chart below depicts the District’s revenue by source for a five-year period.

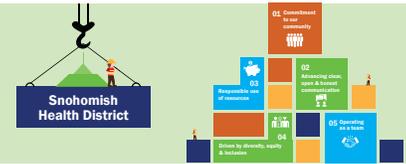
The 2021 Amended Budget reflects the influx of COVID-19 funding. Most of that funding is currently set to expire by the end of FY23. While we anticipate receiving extensions and additional dollars in 2022, nothing has been confirmed so this budget does not include those projections.

Revenue History by Source



District-generated revenues (licenses and permits; charges for services), along with Snohomish County funding and city per capita contributions, compose “local revenue.”

# Revenues



## Licenses and Permits

Our Environmental Health division collects license and permit fees from food vendors, public and semi-public swimming pools, on site septic systems, small public water systems, and solid waste disposal facilities. Fees cover the costs of administration and inspections to ensure safe and sanitary operations. This budget includes fee increases as approved by the Board of Health, effective November 10, 2021, and January 1, 2022.

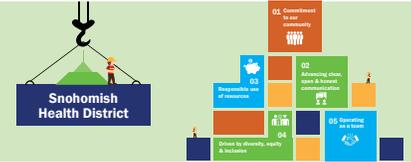
## Charges for Services

The District charges clients for some Communicable Disease-related services, including refugee health, vaccine-preventable disease, and tuberculosis monitoring services. Environmental Health charges include public/private water supplies, solid waste, liquid waste, and food safety program activities. The District also provides services related to solid and hazardous waste management to Snohomish County via a fee-for-services interlocal agreement. Tasks include monitoring and inspecting county and non-county facilities, responding to complaints and taking enforcement actions, educating and coordinating prevention activities, and providing performance reports on such activities.

## Miscellaneous Revenue

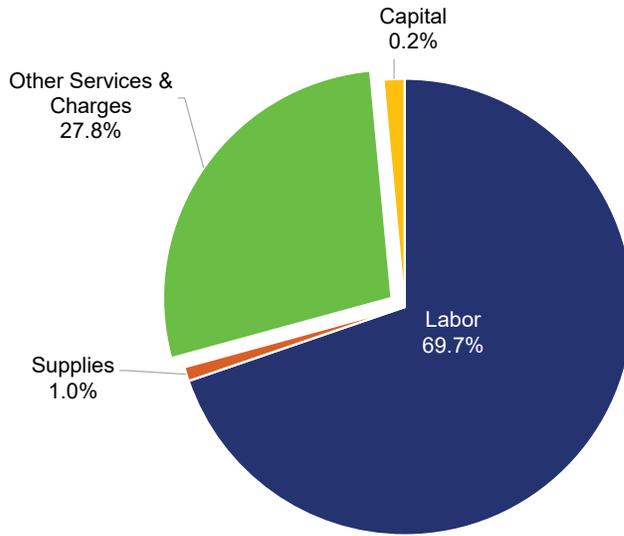
The District has leased a part of the Rucker Building to the General Services Administration on behalf of the Internal Revenue Service. The current lease expires November 30, 2022. The District also receives interest on investments made through the Snohomish County Treasurer’s Office, and non-governmental grants through the North Sound Accountable Communities of Health and the Kresge Foundation.

# Expenditures

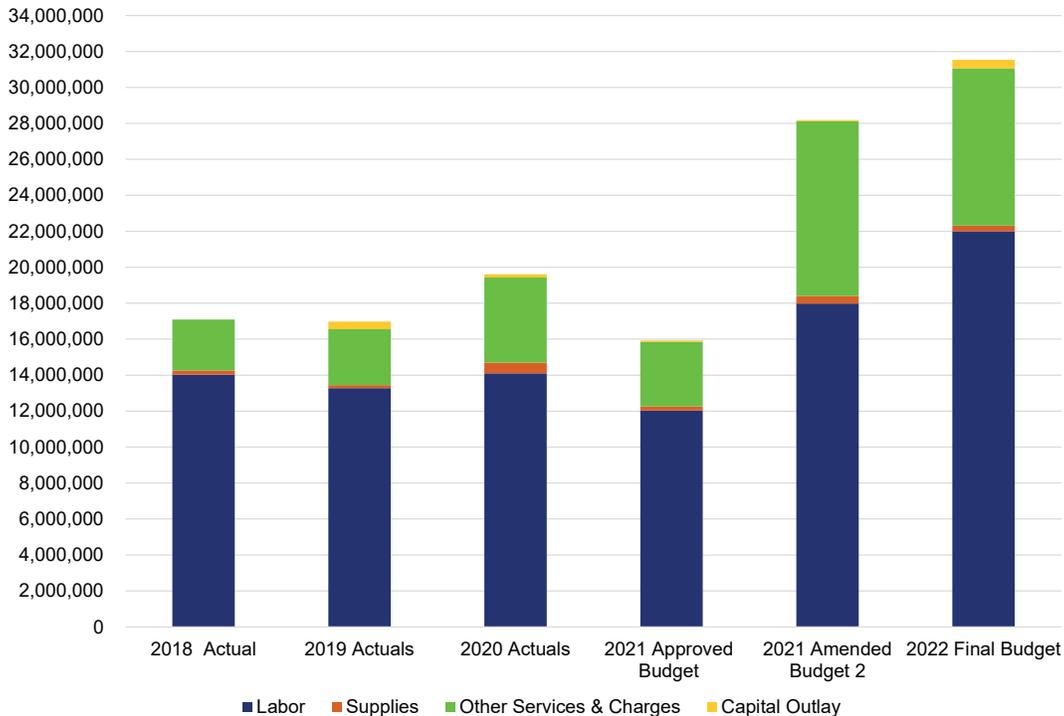


As a public service agency delivering services to clients, customers, and county residents, the majority of expenses the District incurs are personnel-related costs. The second largest expenditure type is Other Services and Charges, which includes costs associated with professional services and contracts (i.e., insurance, legal services, telephone and network systems, and utilities). Breakdowns of expenditures by type are shown in the charts below.

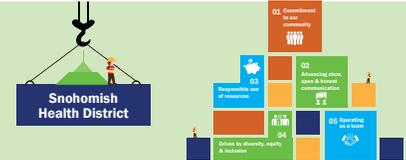
2022 Budgeted Expenditures by Type



Expenditure History by Type



# Division Budgets

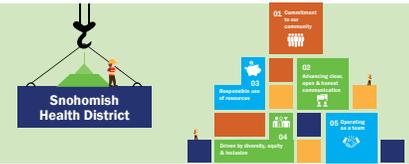


The table below provides an overview of revenues and expenditures by division. Additional details by division are included in the following pages.

## OPERATING BUDGET OVERVIEW

2022 FINAL BUDGET					
	Admin Services	Environmental Health	Prevention Services	Total	%
<b>Revenue:</b>					
Licenses & Permits	\$0	\$4,060,458	\$0	\$4,060,458	12.88%
Federal Grants	0	0	4,665,696	4,665,696	14.80%
COVID-19	0	0	10,771,702	10,771,702	34.16%
State Grants	3,433,292	508,716	274,897	4,216,905	13.37%
FPHS	0	1,179,820	1,974,889	3,154,709	10.00%
Intergovernmental Revenue	726,618	27,996	1,500,000	2,254,614	7.15%
Charges for Goods & Services	191,620	1,813,290	365,000	2,369,910	7.52%
Miscellaneous Revenues	40,000	0	0	40,000	0.13%
<b>Total Revenues before Reorganization</b>	<b>\$4,391,530</b>	<b>\$7,590,280</b>	<b>\$19,552,184</b>	<b>\$31,533,994</b>	<b>100.00%</b>
<b>Expenditures (Before OH Allocations)</b>					
<u>Labor:</u>					
Salaries & Benefits	<b>(\$2,766,016)</b>	<b>(\$6,331,377)</b>	<b>(\$12,896,155)</b>	<b>(\$21,993,548)</b>	<b>69.75%</b>
<u>Non-Labor:</u>					
Supplies	(\$36,500)	(\$128,896)	(\$151,370)	(\$316,766)	1.00%
Professional Services	(1,145,076)	(120,200)	(3,669,622)	(4,934,898)	15.65%
Communication	(83,876)	(28,620)	(27,584)	(140,080)	0.44%
Mileage & Travel	(12,525)	(55,450)	(130,950)	(198,925)	0.63%
Board of Health Per Diem	(10,380)	0	0	(10,380)	0.03%
Advertising	(87,360)	0	(961,200)	(1,048,560)	3.33%
Rents & Leases	(241,030)	(13,800)	(11,474)	(266,304)	0.84%
General Insurance	(180,009)	0	0	(180,009)	0.57%
Utilities	(75,540)	0	0	(75,540)	0.24%
Repairs & Maintenance	(550,955)	(31,865)	(16,800)	(599,620)	1.90%
Other Miscellaneous	(43,867)	(27,851)	(6,000)	(77,718)	0.25%
Dues & Memberships	(45,250)	(7,260)	(1,240)	(53,750)	0.17%
Subscriptions	(3,852)	(600)	(840)	(5,292)	0.02%
Printing & Binding	(1,660)	(11,650)	(23,264)	(36,574)	0.12%
Tuition & Registration	(23,050)	(55,450)	(69,000)	(147,500)	0.47%
Software Licences & Support	(324,879)	(412,650)	(235,501)	(973,030)	3.09%
Software Licences & Support - Board	(5,500)	0	0	(5,500)	0.02%
Capital	(470,000)	0	0	(470,000)	1.49%
Subtotal - Non-Labor	<b>(\$3,341,309)</b>	<b>(\$894,292)</b>	<b>(\$5,304,845)</b>	<b>(\$9,540,446)</b>	<b>30.25%</b>
<b>Total Expenditures Excluding Overhead</b>	<b>(\$6,107,325)</b>	<b>(\$7,225,669)</b>	<b>(\$18,201,000)</b>	<b>(\$31,533,994)</b>	<b>100.00%</b>
<b>Net Revenue</b>	<b>(\$1,715,795)</b>	<b>\$364,611</b>	<b>\$1,351,184</b>	<b>\$0</b>	

# Division Budgets



## ADMINISTRATION DIVISION

The Administration Division includes:

### Administration

Administration provides overall direction and management for District staff and operations, as well as support activities for the divisions. The health officer and administrative officer translate policy decisions by the Board of Health into program direction and operating guidelines for the divisions; provide leadership and management of agency financial, human, and physical resources; engage community partners, government and tribal organizations, and elected officials; and develop, implement, and monitor strategic, and operational plans. This budget includes the addition of a 1.0 FTE Deputy Administrative Officer and the reclassification of the Executive Assistant to include supervision of other administrative support positions in the Division.

### Communications and Outreach

The Communications and policy team supports agency initiatives through development and implementation of plans, strategies, and tools to effectively deliver public health information. The department also manages health-awareness campaigns, social media, website content, community outreach, and media relations. This group also supports the agency in the research, writing, and application of grants and overall grant performance coordination.

### Facilities and Fleet Management

Fleet costs such as fuel and repairs are charged directly to the program where the vehicle is assigned, and depreciation is included in the equipment-depreciation allocation. Staffing costs are allocated based on the number of staff per department.

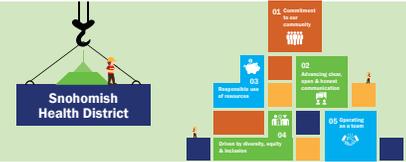
### Finance

Finance supports financial and business needs of the agency, which includes purchasing, accounting, payroll, internal audit services, monthly and annual financial reports, budgeting and financial analysis, and management. This budget includes a 1.0 FTE Accounts Payable Specialist and increases the Purchasing Coordinator from a 0.5 FTE to a 1.0 FTE.

### Human Resources

Human Resources provides agency-wide coordination, assistance, and guidance on employee management. The department administers federal, state, and agency-wide policies and procedures, Labor Relations Act mediations, labor negotiations, and bargaining agreement administration. The department also provides recruitment and retention initiatives, compensation and benefits administration, and training and professional development. This budget includes reclassifying the current Human Resources Manager position to a Senior Human Resources Specialist position. And reclassify the Human Resources Assistant position to a Human Resources Specialist. These changes are FTE neutral.

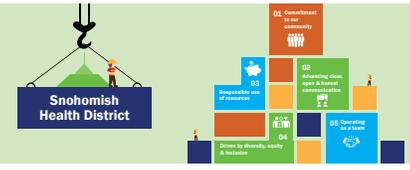
# Division Budgets



## ADMINISTRATION DIVISION

<b>2022 FINAL BUDGET</b>	
	<b>Admin Services</b>
<b>Revenue:</b>	
Licenses & Permits	\$0
Federal Grants	0
COVID-19	0
State Grants	3,433,292
FPHS	0
Intergovernmental Revenue	726,618
Charges for Goods & Services	191,620
Miscellaneous Revenues	40,000
<b>Total Revenues before Reorganization</b>	<b>4,391,530</b>
<b>Expenditures (Before OH Allocations)</b>	
<u>Labor:</u>	
Salaries & Benefits	<b>(2,766,016.00)</b>
<u>Non-Labor:</u>	
Supplies	(36,500.00)
Professional Services	(1,145,076)
Communication	(83,876)
Mileage & Travel	(12,525)
Board of Health Per Diem	(10,380)
Advertising	(87,360)
Rents & Leases	(241,030)
General Insurance	(180,009)
Utilities	(75,540)
Repairs & Maintenance	(550,955)
Other Miscellaneous	(43,867)
Dues & Memberships	(45,250)
Subscriptions	(3,852)
Printing & Binding	(1,660)
Tuition & Registration	(23,050)
Software Licences & Support	(324,879)
Software Licences & Support - Board	(5,500)
Capital	(470,000)
Subtotal - Non-Labor	<b>(\$3,341,309)</b>
<b>Total Expenditures Excluding Overhead</b>	<b>(\$6,107,325)</b>
<b>Net Revenue</b>	<b>(\$1,715,795)</b>

# Division Budgets



## ENVIRONMENTAL HEALTH DIVISION

The addition of Foundation for Public Health Funding for Environmental Public Health Services is a significant for the Environmental Health Division this year. Funds will be utilized for activities that are not typically fee supported, such as complaint investigation, technical assistance, food borne illness investigations, education and outreach and an expansion of our school program. Revenues in the 2021 budget reflect a minor fee increase, which largely covers the cost of living adjustment the Board of Health approved for staff members in 2021, and a significant increase in FPHS state provided funds. Additional FTE have been added to utilize the FPHS funds and provide significantly better service to our customers.

### Environmental Health Administration

This program tracks expenses related to the Environmental Health director position. It may also include some expenses that are not specific to an individual program (i.e., some legal costs).

### Drinking Water Program

**This program ensures safe drinking water is available to all proposed residences prior to construction.**

This program includes activities related to the review and approval of new individual water supplies. Most often, this is associated with development of vacant land where a public water source is not available.

### Food Safety Program

This program includes food safety activities. These activities are primarily plan review and inspections of permanent and temporary retail food establishments. It also includes all related complaint investigation and enforcement activities, and outreach efforts to Donated Food Distribution Organizations.

### Living Environment

This program is made up of a variety of projects including:

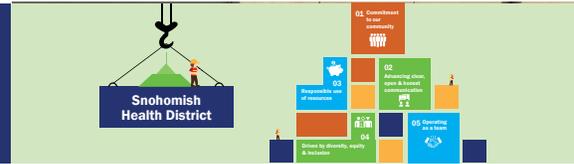
- **Camps**, primarily summer youth camps, that are permitted and inspected through SHD.
- **Pollution Prevention Assistance, formerly known as Local Source Control** is a program that works with businesses that produce hazardous and dangerous waste to provide technical assistance on the proper handling, disposal, and re-use of the waste products. Activities are funded by a contract with the Washington State Department of Ecology.
- **The School program** includes plan review for new or remodeled schools and the periodic inspection of all K-12 schools in Snohomish County. The primary funding source is fees based on inspection times.
- **Shell fish** and mussels are harvested, primarily in summer months, to be sent to a Washington State Department of Health laboratory for analysis for toxins. This program is funded by the State Department of Health (consolidated contract).
- **The Smoking in Public Places** program tracks time investigating complaints related to violation of smoking laws in public areas of buildings.
- **The Water Recreation Facilities** program includes plan review, permitting, and routine inspection of all public pools and spas. Most are municipal pools and those in health clubs, apartments, and condominiums.

### Onsite Sewage

This program includes all activities related to the design review, permitting and inspection of on site sewage (OSS) disposal systems. It includes the following activities:

- **Sanitary Survey and Technical Assistance.** This program performs sanitary surveys of small Group A water systems with 15 to 100 residential connections. It's a small program with 15 to 20 surveys per year. Technical assistance may also be provided to water system purveyors. Activities are funded by the State Department of

# Division Budgets



Health via consolidated contract.

- **Stillaguamish Pollution Identification and Correction Phase III.** This is a contract with the Snohomish Conservation District, in partnership with Snohomish County Surface Water Management, Stillaguamish Tribe, Washington Department of Health, Washington Department of Agriculture and others for some limited activities related to the Pollution Identification and Correction Program. This work dovetails with our new Onsite Septic Monitoring and Maintenance program, and involves outreach to landowners in specific sub-basins around proper care of their OSS systems.
- **OSS Monitoring and Maintenance.** Staff ensure that required Monitoring and Maintenance inspections are being performed and recorded for pre-existing Onsite Sewage systems.
- Staff also perform all activities related to permitting and inspecting repairs to OSS systems, and activities related to complaints and associated enforcement.

## Solid Waste

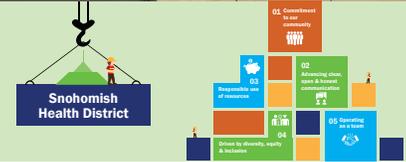
**Solid waste activities are associated with both solid waste handling facilities and complaints regarding improper storage or disposal of solid waste.**

- **The Solid Waste Facility program includes all activities associated with the** review, permitting, and inspection of solid waste handling facilities. These facilities include open and closed landfills, solid waste transfer stations, and recycling facilities. The program is funded by permits and a contract with Snohomish County Public Works.
- Enforcement activities for this program concern improper storage or disposal of solid waste. They can also include enforcement related to permitted facilities. It's funded by contracts with Snohomish County Public Works and the Washington State Department of Ecology (Local Solid Waste Funding Assistance).

## Vital Records

This program provides birth and certificates for anyone born in Washington State from 1907 to present, while death certificates are available for all deaths occurring in Everett from 1953 and the remainder of Snohomish County from 1960 to present. In January of 2021, Washington State becomes a closed records state, which means that people requesting a vital record will need to show proof of relationship to the person on the record.

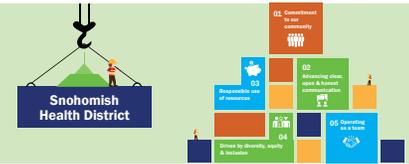
# Division Budgets



## ENVIRONMENTAL HEALTH DIVISION

2022 FINAL BUDGET	
	Environmental Health
<b>Revenue:</b>	
Licenses & Permits	\$4,060,458
Federal Grants	0
COVID-19	0
State Grants	508,716
FPHS	1,179,820
Intergovernmental Revenue	27,996
Charges for Goods & Services	1,813,290
Miscellaneous Revenues	0
<b>Total Revenues before Reorganization</b>	<b>7,590,280</b>
<b>Expenditures (Before OH Allocations)</b>	
<u>Labor:</u>	
Salaries & Benefits	<b>(6,331,377.00)</b>
<u>Non-Labor:</u>	
Supplies	(128,896.00)
Professional Services	(120,200)
Communication	(28,620)
Mileage & Travel	(55,450)
Board of Health Per Diem	0
Advertising	0
Rents & Leases	(13,800)
General Insurance	0
Utilities	0
Repairs & Maintenance	(31,865)
Other Miscellaneous	(27,851)
Dues & Memberships	(7,260)
Subscriptions	(600)
Printing & Binding	(11,650)
Tuition & Registration	(55,450)
Software Licences & Support	(412,650)
Software Licences & Support - Board	0
Capital	0
Subtotal - Non-Labor	<b>(\$894,292)</b>
<b>Total Expenditures Excluding Overhead</b>	<b>(\$7,225,669)</b>
<b>Net Revenue</b>	<b>\$364,611</b>

# Division Budgets



## PREVENTION SERVICES DIVISION

The 2022 budget reflects stable funding for most of our grants, with expanded funding due to recently approved Foundational Public Health Funding. Additional FTE have been added to utilize the FPHS funds to provide enhanced programming for the community.

### Assessment

The public health functions of community assessment, policy development, and assurance of service delivery are essential elements in achieving the objectives of health reform in Washington State (RCW 43.70.520). The program is responsible for providing detailed analysis of existing public health and health-related data and development of projects using scientific methods to capture and analyze data related to emerging issues and communicable disease.

### Access to Baby and Childhood Dentistry (ABCD)

The ABCD Program connects low-income families with dentists who know how to care for young children, focusing on prevention and avoiding tooth decay, as well as educating parents about how to take good care of their children's teeth.

### Child Care Health

Childcare Health Outreach Program – provides consultation, education and training on a variety of health, safety, and nutrition topics to childcare providers and preschools throughout Snohomish County. They are available to help promote healthy eating and active play in child care and early learning programs. Additionally, they offer on-site visits and consultations, online distance learning, and resources to help prevent illness.

### Communicable Disease Surveillance and Response

This program is mandated by WAC 247.101. It includes investigation of over 60 diseases and conditions that are reportable to public health, along with work to interrupt disease transmission, contain outbreaks, and alert the public and providers of disease risks.

### Healthy Communities

This is an integrated team of healthy communities specialists and a health educator focused on prevention of injuries and chronic diseases. Their work is focused on changing policies, community systems, and environments in the areas of opioid use, youth marijuana use, tobacco/vaping, suicide prevention, vaccine-preventable diseases, and healthy eating and active living.

### HIV/STD

HIV/STD prevention services include case and contact investigations, STD testing, and client vouchers for community provider testing and treatment.

### Maternal-Child Health

This program provides services to families in promotion of healthy parenting outcomes, mitigates adverse childhood experiences, and trains providers on universal developmental screening. It's funded with a Washington State Maternal-Child Health block grant and Medicaid Administrative Claiming funds.

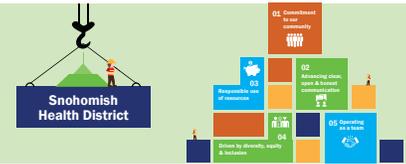
### Perinatal Hepatitis B

This program conducts activities to prevent perinatal hepatitis B infection in newborns and case management of infants born to hepatitis B-positive mothers.

### Population-Based Parent Child Health

Building on community partnerships, staff work with programs that support healthy parenting. This program is focused on population results rather than one-on-one services.

# Division Budgets



## Public Health Emergency Preparedness Response (PHEPR)

The PHEPR program is responsible for helping public health in Snohomish County and the four counties in Region 1 (Skagit, Whatcom, San Juan, and Island) prepare for and respond to public health emergencies, including disease outbreaks, storms, earthquakes, and other natural or manmade disasters. Staff maintains agency response plans, provides training and exercises to test the plans, and supports communications for public health and other healthcare partners throughout the region. Disease surveillance and response is a critical component of the PHEPR program and the District’s ability to protect the public from communicable diseases. The District also coordinates the local Medical Reserve Corps, a volunteer organization with surge capacity during an emergency.

## Refugee Health

This program offers a comprehensive health screening and referral to primary and specialty care for refugees. Care is initiated within 90 days of arrival in the U.S. This program is funded through the Department of Social and Health Services.

## Tuberculosis Control and Elimination

This program focuses on prompt evaluation, treatment, and case management of active TB cases. Staff perform contact investigations of individuals exposed to tuberculosis. It is mandated by WAC 247.170.

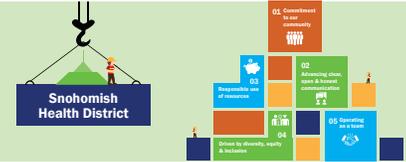
## Vaccine Preventable Diseases

Childhood immunizations are promoted through community and provider education and outreach in Snohomish County and other counties in Region 1 (Skagit, Whatcom, Island, San Juan). Activities are partially funded by a Washington State Department of Health contract.

## Viral Hepatitis Outreach

This program provides targeted counseling, testing, education, and referrals to people who have used or currently use injection drugs. Grant funds are used to focus on testing individuals in the jail setting.

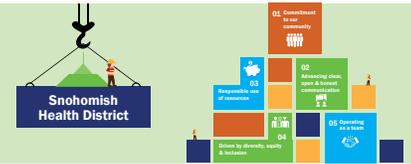
# Division Budgets



## PREVENTION SERVICES DIVISION

2022 FINAL BUDGET	
	Prevention Services
<b>Revenue:</b>	
Licenses & Permits	\$0
Federal Grants	4,665,696
COVID-19	10,771,702
State Grants	274,897
FPHS	1,974,889
Intergovernmental Revenue	1,500,000
Charges for Goods & Services	365,000
Miscellaneous Revenues	0
<b>Total Revenues before Reorganization</b>	<b>19,552,184</b>
<b>Expenditures (Before OH Allocations)</b>	
<u>Labor:</u>	
Salaries & Benefits	<b>(12,896,155)</b>
<u>Non-Labor:</u>	
Supplies	(151,370)
Professional Services	(3,669,622)
Communication	(27,584)
Mileage & Travel	(130,950)
Board of Health Per Diem	0
Advertising	(961,200)
Rents & Leases	(11,474)
General Insurance	0
Utilities	0
Repairs & Maintenance	(16,800)
Other Miscellaneous	(6,000)
Dues & Memberships	(1,240)
Subscriptions	(840)
Printing & Binding	(23,264)
Tuition & Registration	(69,000)
Software Licences & Support	(235,501)
Software Licences & Support - Board	0
Capital	0
<b>Subtotal - Non-Labor</b>	<b>(\$5,304,845)</b>
<b>Total Expenditures Excluding Overhead</b>	<b>(\$18,201,000)</b>
<b>Net Revenue</b>	<b>\$1,351,184</b>

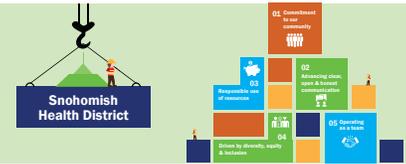
# Capital Request



The item below represents estimated costs associated with upgrading and replacing information technology equipment, and updating our fleet of obsolete vehicles. The Health District anticipates large remodeling expenses in 2022, but does not have estimates from the architectural team. Those planning efforts will be brought back to the Board for review and approval.

<b>2022 Capital Requests</b>	
Continued Updates to IT Switches & Servers	70,000
Replace Aging Fleet Vehicles	400,000
<b>Total Capital Requests</b>	<b>\$470,000</b>

# Non-Capital Request



As the District looks toward a more sustainable future, it needs to invest in both its headquarters and organizational capacity. The items below represent estimated costs for much-needed operations and maintenance work for the Rucker Building. Implementing a new electronic health record system is a critical need for data infrastructure reliability and client tracking.

<b>2022 Non-Capital Requests</b>	
<b>Large Repairs &amp; Maintenance Projects</b>	
Carpet Replacement	\$56,125
Infrastructure Repairs & Maintenance: water heaters, HVAC, electrical, etc.	50,137
Emergency Repairs Placeholder	15,000
Other Deferred Building Maintenance	120,637
<b>Subtotal - Large Repairs &amp; Maintenance Projects</b>	<b>\$241,899</b>
Records Digitization Project	\$200,000
Clinical Services Need Assessment	100,000
Envision Connect System Migration	250,000
New Financial System Implementation	60,000
Electronic Health Records Implementation	150,000
<b>Total Non-Capital Requests</b>	<b>\$1,001,899</b>

**SNOHOMISH HEALTH DISTRICT**  
3020 Rucker Ave, Suite 306  
Everett, WA 98201

**PUBLIC HEALTH**  
always working for a safer & healthier  
**SNOHOMISH COUNTY**