



ANNUAL  
REPORT

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**2017**

STATE HEALTH  
IMPROVEMENT PLAN

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# INTRODUCTION

Washington's *State Health Improvement Plan (SHIP)* is a call to action to create a culture of health. This culture reduces barriers to good health and gives opportunities for healthy childhoods and healthy choices throughout life. The SHIP envisions a future where everyone is actively seeking health and everyone has a chance to live the healthiest possible life.

Washington's 2014-2018 SHIP was created with input from many sectors from across the state. The goals are designed to align and build on Washington's many health-related plans to improve residents' health.

This report:



**DESCRIBES** progress toward the goals identified in the SHIP

**HIGHLIGHTS** innovative local efforts to influence these goals

**OUTLINES** the long-term work of several statewide initiatives working to make a culture of health our new reality



# NEAR-TERM GOALS

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## 02

### PROGRESS

- 03 Improve nutrition, physical activity, and obesity rates
- 05 Improve access to care

# GOAL 1 —

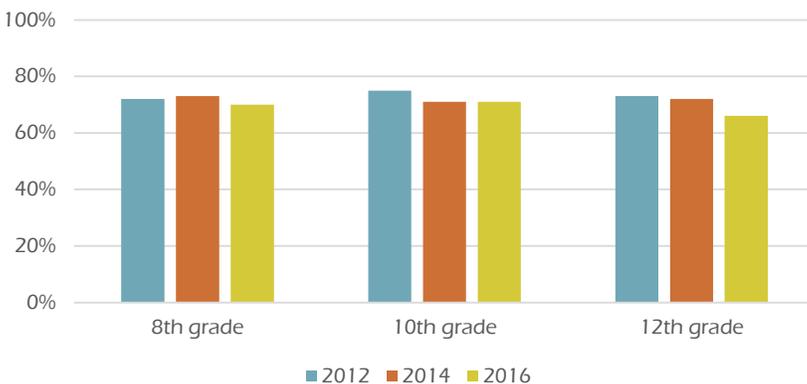
## IMPROVE NUTRITION, PHYSICAL ACTIVITY, AND OBESITY RATES

**Measure:** Proportion of middle and high school youth who have a healthy weight

Many coalitions and partnerships are working to achieve progress on this indicator. Results suggest that we need to do more to create a culture where teens across the state can get healthy food and be active. In parts of the state where progress is being made on this indicator, communities have found that many actions are required, by many people, in the places where children spend their time. Early learning settings, schools, and communities are working to improve healthy weight in children by supporting healthy eating, physical activity, and breastfeeding.

Community organizations, tribal governments, local, and state governments all provide funds and technical assistance to create and sustain local projects that improve nutrition and increase physical activity. One statewide initiative, *Healthiest Next Generation*, provides technical assistance for many projects. Adoption of multi-component physical activity programs is a successful example of their work with schools around the state. Multi-component physical activity programs include active recess, innovative physical education classes, staying active throughout the school day, before and after school programs, and staff health and wellness.

Percentage of Washington State students with healthy weight\*



\*Source: *Healthy Youth Survey*

## SMARTER, HEALTHIER LUNCHES ARE HERE TO STAY IN SPOKANE PUBLIC SCHOOLS



In just three years, the partnership between the Spokane Regional Health District, Washington State University Extension's *Food Sense*, Empire Health Foundation, and Spokane Public Schools transformed school lunches into healthier meals for 30,817 students. Meals now include scratch-made items using delicious, fresh, local ingredients. All cafeterias have salad bars, and students as young as five select their own fruits and vegetables. Healthy food is particularly important for the more than half (56.7%) of students who receive free and reduced-priced meals. This program started during the 2015-2016 school year, when ten elementary schools began offering healthier meals to 4,000 students. The next year, 14 additional elementary schools transitioned to scratch cooking. Currently, all 47 school cafeterias in the district offer fresh, local ingredients and scratch-made items.

### Successful Strategies

- Communicate new recipes using fresh, local foods to principals, teachers, and parents through home mailers, district website updates, and coupons to encourage them to try a featured entrée
- Involve students in taste testing new recipes and making school menu announcements
- Enhance the lunchroom atmosphere by adopting recess before lunch and engaging teachers in creating positive lunchroom environments
- Highlight the salad bar by having fresh, colorful vegetables and fruit in all schools

### Sustainability

Topics on behavioral economics and smarter lunchroom training were added as part of the scratch-cooking culinary academy trainings from 2015 to 2017. Partners also trained cafeteria managers on effective customer service, signage, and verbal promotions to increase student and staff selection of healthy options. Smarter lunchroom strategies are now part of the twice-yearly cafeteria quality reviews. Teachers' ratings of cafeteria staff friendliness, competence, knowledge, and qualifications have increased significantly over the last three years.



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## MANY APPROACHES TO REDUCE EARLY CHILDHOOD OBESITY

Grant County's *Healthy Beginnings Project* is addressing childhood obesity. Based on the nationally recognized *5-2-1-0 Let's Go Challenge*, the project aims to reduce obesity among children ages two through five by 10% by 2020. Data from well child visits will tell the story of the project's success. This community initiative is the work of the Columbia Basin Partnership for Health. It involves the Grant County Health District, three local health care organizations, a Head Start program, the local parks and recreation department, a farmer's market, and Columbia Basin Hospital.

Beginning in 2014, participating clinics gathered baseline data by tracking weights and measures of two- to five-year-olds during well child visits. Since then, clinicians added family education, counseling, and prescriptions for play to two- to five-year-olds at well child visits. The parks and recreation department's program guide identifies classes that qualify for the prescriptions for play. Local grants assist families with the cost.

Additional community efforts include the Farmer's Market SNAP Match program, nutrition classes for pregnant and postpartum women, a breastfeeding coalition, and a farm-to-table policy for food served in the local hospital cafeteria. The health district, a founding member of the project, convenes partners and provides community support. It gathers data on fitness, height, and weight at elementary and middle schools to evaluate this largely volunteer program.

The departments of transportation, agriculture, education, early learning, and health share and align strategies that impact this measure. Building sidewalks and [safe routes to school](#) is one successful collaboration across the state. Increasing students' opportunities to [walk and bike to school](#) through walking school buses, bike safety education, and walk or bike to school days is another partnership that improves students' level of physical activity.

# GOAL 2 —

## IMPROVE ACCESS TO CARE

**Measure:** Number of local health jurisdictions and tribes actively participating in Accountable Communities of Health

In nine regions around the state, **Accountable Communities of Health (ACHs)** bring together leaders from multiple sectors with a common interest in improving health and health equity. As ACHs better align resources and activities, they support individual wellness and a system that delivers care for the whole person.

The boundaries of the nine ACHs align with Washington’s Medicaid regional service areas. Public health professionals contribute to these diverse partnerships through topics such as health promotion, disease prevention, population data analysis, and community health improvement planning.

All 35 local health departments are actively participating with their regional ACH. Tribal nations are also participating in ACHs across the state.



- |                                 |                   |                        |
|---------------------------------|-------------------|------------------------|
| Olympic Community of Health     | Healthier Here    | Greater Columbia ACH   |
| Cascade Pacific Action Alliance | North Sound ACH   | Better Health Together |
| North Central ACH               | Pierce County ACH | Southwest ACH          |

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# LONG-TERM SHIFT AREAS

PROGRESS

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# 06

- Invest in the health and well-being of our youngest children and families 07
- Support development of healthy neighborhoods and communities 09
- Broaden health care to promote health outside the medical system 10



Far broader than the public health system, the SHIP'S three long-term shift areas involve many partners from schools, early learning, transportation, business, as well as the health care system and others. The following three long-term priority areas look upstream toward creating good health from the beginning.

## SHIFT AREA 1 —

### INVEST IN THE HEALTH AND WELL-BEING OF OUR YOUNGEST CHILDREN AND FAMILIES

This area seeks to ensure that families and communities build a strong foundation in children's early years for a lifetime of good health, educational success, and economic prosperity. The [Essentials for Childhood](#) initiative is working statewide to impact this area. This initiative is led by a 34-member steering committee including representatives from industry, health care, philanthropy, local and state government, tribal health organizations, non-profit organizations, health care, education, and academia. Members work together to raise awareness and promote social, emotional and relationship resources and supports for families. Two work groups are at work. One focuses on educating communities and stakeholders and the other works to improve systems that serve families to address trauma early, be more family centered, and avoid duplication of effort. Their goals are that children in every community get off to a good start with:

**Safety** — All children feel safe at home and in all of the places they go to live, learn, and play

**Stability** — Every child has a stable place to live, receives regular nutritious meals, and experiences consistency in family and caregiver relationships

**Nurturing** — Each child's parents, caregivers, and other close adults are able to sensitively and consistently respond to and meet the needs of the child

When children don't have these experiences, because of exposure to violence, untreated parental mental illness, or other chronic challenges that produce what is now known as *toxic stress*, they suffer—and we put our state's future wellbeing at risk. *Essentials for Childhood* helps ensure that families and communities build a strong foundation in early childhood for a lifetime of good health, educational success, and economic prosperity.

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## PROJECT CHILD SUCCESS



**Project Child Success** (PCS) is a grassroots initiative aimed at making Pierce County a child-centered community. Over 100 organizations and individuals have come together to achieve the vision that all children thrive in nurturing relationships and environments. The initiative focuses on building individual and community protective factors. PCS partners created easily-readable flyers and posters for a broad audience. These materials feature icons and definitions for the five protective factors: *Concrete Supports* (basic needs like food and shelter), *Know-ledge of Child Development* (understanding of how children learn and grow), *Social Connections* (someone to turn to for support), *Resilience* (the ability to bounce back when things are tough), *Social Emotional Competence of Children* (a way to understand and manage feelings). Across the county, partners grow protective factors by focusing on:

- **Connection** – gathering regularly to share, discuss, and dream
- **Learning** – educating everyone through shared professional development
- **Research and Data** – collecting and analyzing stories to learn about children and families
- **Innovation and Action** – working collectively on projects that directly impact children and families
- **Policy and Advocacy** – fighting for systems and policies that support children and families

### Examples of Actions

The initiative developed a way to honor nurturing relationships in real time by using simple, decorative buttons. When someone observes an adult giving nurturing attention to a child, they present them with a bright, pin-on button. This courageous act has happened 4,000 times and more buttons are being handed out every day. Both givers and receivers of the buttons find this simple acknowledgment deeply affirming.

For over a year, PCS has hosted *Child-Centered Community Conversations* – small groups of people convening to discuss one simple idea: ‘Let’s say you were scooped up and put in the most child-centered community in the universe. What do you see? What do you notice?’ Hundreds of ideas have been generated and are publicly available via a [data dashboard](#) on the [website](#). The community is now reviewing the data for themes and pulling out actionable ideas that can be implemented right now.

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## BEST STARTS FOR KIDS



In 2015, King County voters approved **Best Starts for Kids**, a groundbreaking initiative to invest in the health and well-being of their neighbors and communities. *Best Starts* is a comprehensive approach to child development, spanning a child’s life from prenatal development to young adulthood. It increases positive resources and opportunities that help kids grow up healthy and happy, decreases negative factors that may prevent kids from establishing a strong foundation in life, and intervenes early when kids and families need more support.

In 2017, *Best Starts* supported programs that addressed immediate health and nutrition needs, and engaged the most vulnerable parents and children, connecting them to additional needed services. Thanks to *Best Starts* funding, 13,039 home visits were completed and 4,650 children received supportive early intervention services. *Best Starts* funding prevented 4,200 people from experiencing homelessness. Ninety-four percent of those served (over 4,000 people) through *Best Starts* Youth and Family Homelessness Prevention Initiative were able to avoid homelessness and stay housed.

*Best Starts for Kids* also has a comprehensive strategy to support students’ physical, social, and emotional well-being at school. As part of this strategy, three new school-based health centers opened in 2017 – located in Bellevue, Renton, and Vashon Island – where students can meet with medical, dental, and mental-health providers at no cost. Additional investments include building and expanding school-based health centers to provide medical and mental-health services, expanding school-based mental-health screening and support, supporting trauma-informed and restorative practices in schools, and partnering with communities to expand after school and summer learning opportunities. Together, these investments provide a platform for students to achieve academically, and also grow into happy, healthy, thriving young people.

# SHIFT AREA 2 —

## SUPPORT DEVELOPMENT OF HEALTHY NEIGHBORHOODS AND COMMUNITIES

In this area, communities are working to promote positive social connections and support health-promoting behaviors.

The *Essentials for Childhood* initiative, detailed above, and Governor Inslee's *Healthiest Next Generation* initiative, are working statewide to support healthy neighborhoods and communities.

The *Healthiest Next Generation* initiative helps community organizations, businesses, tribes, state and local agencies, and other partners to collaboratively support children's health including providing funds and technical assistance. *Healthiest Next Generation* promotes statewide action based on community successes and the integration of health promotion into all environments where children spend their time - early learning settings, schools, and communities. Strategies focus on helping kids be active at least 60 minutes a day, making sure kids are fed healthy foods, and supporting breastfeeding-friendly places.

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## SAFE ROUTES TO SCHOOL SPOKANE



*Safe Routes to School Spokane* (SRTS) is a social marketing campaign designed to increase the number of elementary students walking and biking to school. The Spokane Regional Health District (SRHD) and Spokane Public Schools partner to implement the program with community members and organizations. The program is funded through a Washington State Department of Transportation Alternatives Program grant.

*Walking School Buses* are the main activity. Two adult volunteers, trained and background-checked, walk designated routes picking up children at their homes. In 2017, participation grew to involve five schools with 75 students on 16 walking school buses served by 95 volunteers.

Not only does this *Walking School Bus* program increase physical activity among students, it also improves student attendance. The program decreases parents' main barriers to letting their young children walk to school – traffic, crime, and violence. Students walk up to one mile to school along routes tailored to their school's safety needs including proximity to home, presence of sidewalks, speed of traffic, and hazard avoidance. Volunteers include neighborhood residents, church leaders, college students, firefighters, physicians, and medical school students.

Each participating school designates a staff person as the liaison, usually a crossing guard or assistant, who is trained to lead a SRTS team and coordinate the program. Liaisons are coached and supported by SRHD for two semesters, after which they run the program on their own with minimal support.

The Spokane/Coeur d'Alene chapter of Women in Transportation awarded *Safe Routes to School Spokane* the 2017 Project of the Year.



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## INCREASING ACCESS TO CARE TO IMPROVE STUDENT OUTCOMES

Beginning in 2015, Cascade Pacific Action Alliance (CPAA), an Accountable Community of Health, launched a *Youth Behavioral Health Coordination* pilot project. In school and health care settings, the project identifies children with mental health and chemical dependency challenges as early as possible and connects children to community-based interventions and treatment services. Care coordination among schools, primary care physicians and pediatricians, and behavioral health providers is key to the project's success. The four pilot sites (two rural, two urban) are located in Cowlitz, Mason, Thurston, and Wahkiakum counties. The pilots' goals are to improve school attendance and academic achievement by decreasing the number of school-aged youth with unmet mental and physical health needs. In the short term, the project measures behavioral health referrals, academic achievement, discipline incidents, and absences. Over the longer term, high school graduation rates and trends will be tracked through the Healthy Youth Survey. All four participating schools, during the 2016-2017 school year, increased access to behavioral health services by having a behavioral health clinician onsite to serve K-12 students. The project also connects students with additional outside resources, including primary care and social services. Over 130 students received behavioral health services. Qualitative data describe benefits like immediate access to behavioral health services, improvements in student attendance, connection to resources, reduced stigma, recognition of the importance of mental health, and clear improvements in several individual cases.

Schools received direct support from CPAA for project management, trauma-informed care training for educators, and supporting educational materials. In the four counties, this project brought together schools, educational services districts, health and human services, behavioral health organizations and agencies, and medical providers to fund and develop the project, now in its second and third years of implementation. Future work will focus on refining the model and tracking academic and clinical outcomes over time. The project is currently being evaluated by the *Center for Community Health and Evaluation (CCHE)*.

# SHIFT AREA 3 —

## BROADEN HEALTH CARE TO PROMOTE HEALTH OUTSIDE THE MEDICAL SYSTEM

In this area, social and environmental factors impacting health are addressed. Community health promotion and disease prevention strategies across people's lifespans are emphasized.

Washington is in the midst of a five-year Health Care Innovation Plan, called [Healthier Washington](#). This initiative seeks to raise quality of life by helping people have the best health they can regardless of their income, education, or background.

The long-term focus areas of the SHIP highlight the reality that the best way to improve health is to address what influences health from the very beginning. Good health follows when families and communities give opportunities for healthy starts and healthy choices. Partnerships like those described in this report are actively promoting good health in communities across our state, in the places where we live, learn, work, play, and worship. Washington is building a vital culture of health and a system of wellness.



**PUBLIC HEALTH**  
ALWAYS WORKING FOR A SAFER AND  
HEALTHIER WASHINGTON

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