

**Agency:** 303 Department of Health  
**Decision Package Code/Title:** R6 One Health Initiative for WA State  
**Budget Period:** 2015-17  
**Budget Level:** PL -Performance Level

**Recommendation Summary Text:**

This funding request creates capacity for the One Health Steering Committee to effectively implement One Health in Washington State. Successful implementation of One Health Initiatives will allow Washington State to bring environmental, veterinary, and human health practitioners together to address infectious pathogens, toxic hazards, and chronic disease risks in order to achieve optimal public health outcomes.

**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	199,000	199,000
<b>Total Cost</b>		<b>0</b>	<b>199,000</b>	<b>199,000</b>
<b>Staffing</b>		<b><u>FY 2016</u></b>	<b><u>FY 2017</u></b>	<b><u>Annual Avg</u></b>
FTEs		<b>0.0</b>	<b>1.5</b>	<b>0.8</b>

**Package Description:**

One Health is a multidisciplinary approach that recognizes the relationship between human health, animal health and environmental health. Seventy percent of the world’s emerging and re-emerging human infections originate in animals. These diseases are referred to as zoonotic diseases. Current zoonotic diseases of concern in Washington State include West Nile virus disease, Lyme disease, relapsing fever and other tick-borne diseases, diseases caused by two pathogenic fungi (Cryptococcus gattii and Coccidioides immitis), Salmonella, E. coli, Q fever, Hantavirus, Tularemia, and others.

The Department of Health (department) currently convenes a One Health steering committee functioning primarily as a strategic group to emphasize the implementation of new and ongoing efforts associated with transdisciplinary activities. The committee, made up of internal staff and external partners, provides overarching direction to foster communication, collaboration, education, training, technological advancements and research among agencies, clinicians, industry and academia as well as increased awareness between key partners and practitioners about One Health. Efforts to apply One Health to public health practice have been limited. Previously recognized barriers to the implementation of a One Health approach include limited integration of action plans, limited engagement of agencies, and divisional structures.

This proposal creates capacity for the One Health Steering Committee to more effectively implement One Health in Washington State. Specifically, resources are requested to lead and coordinate these efforts at the department, staff the steering committee, and work with partners to develop agreements and joint operational plans. It also creates capacity for an epidemiologist to assist in the integration of activities between human, animal, and environmental health, especially field operations.

Funding the One Health initiatives will allow Washington State to bring environmental, veterinary, and human health practitioners together to address infectious pathogens, toxic hazards, and chronic disease risks. Successful public health interventions require the cooperation of the human, veterinary, and environmental health communities. Each outbreak of zoonotic disease, and many other public health problems, can benefit from a collaborative One Health approach. By promoting collaboration and integration, Washington will achieve optimal health outcomes for both people and animals.

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Program Contact: Zoonotic Disease Section Manager, Wayne Clifford, (360) 236-3181

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

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

Investment in One Health will allow Washington State to develop a strategic plan for One Health Stewardship in Washington. This plan will include efforts to: assess statewide activities and gaps; develop and acquire data and processes for surveillance and analysis; and establish monitoring systems to measure reporting requirement compliance.

The expected performance outcome is increased disease prevention. The World Health Organization and World Bank both recognize the global economic and human cost of pandemic disease. One Health is the model that is used to reduce outbreaks of disease and improve and protect the global economy. [http://siteresources.worldbank.org/INTARD/Resources/PPP\\_Web.pdf](http://siteresources.worldbank.org/INTARD/Resources/PPP_Web.pdf)

### **Performance Measure Detail**

#### **Activity: A005 – Protect Community Environmental Health**

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

Goal 1: Protect everyone in Washington from communicable diseases and other health threats.

#### ***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 4: Healthy and Safe Communities.

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

One Health has become more important in recent years because of changes in the interactions among humans, animals and the environment. For example, population growth has caused more people to live in close contact with wild and domestic animals, providing more opportunities for diseases to pass between animals and people. Also, disruptions in environmental conditions and habitats as a result of changing climate and land use practices such as deforestation and intensive farming have provided new opportunities for diseases to pass to animals.

One Health steering committee partners, stakeholders, and other agencies affected by this proposal include:

University of Washington

WSU College of Veterinary Medicine

Washington State Department of Fish and Wildlife  
Washington State Department of Agriculture  
Washington State Veterinary Medical Association  
University of Washington  
Office of the Governor  
Kulshan Veterinary Hospital

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

The other alternative considered was status quo. This alternative was rejected because resource limitations do not allow Washington State to most effectively implement One Health.

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

Not funding this package will result in status quo.

***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?***

N/A

**Expenditure and revenue calculations and assumptions:**

**Revenue:**

None

**Expenditures:**

Beginning in fiscal year (FY) 17 and ongoing, funding is requested for 1.5 FTE and \$199,000. This funding amount includes:

- 1.0 FTE Health Services Consultant 3 to lead and coordinate the One Health efforts, staff the One Health Steering Committee, and work with partners to develop agreements and joint operational plans.
- 0.5 FTE Epidemiologist 2 to coordinate operational efforts between the Office of Communicable Disease and Environmental Public Health, and assist in the design and logistics of epidemiological fieldwork.
- Travel costs for One Health Steering Committee members to participate in quarterly in-person meetings.
- Meeting costs for an antimicrobial workgroup, including travel for one in-person meeting and three webinars.
- Meeting costs for a surveillance workgroup, including travel for one in-person meeting and three webinars.

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

All costs are ongoing.

<u>Object Detail</u>	<u>FY 2016</u>	<u>FY 2017</u>	<u>Total</u>
A Salaries and Wages		128,000	128,000
B Employee Benefits		39,000	39,000
C Personal Service Contracts		0	0
E Goods and Services		18,000	18,000
G Travel		11,000	11,000
J Capital Outlays			0
T Intra-Agency Reimbursements		3,000	3,000
<b>Total Objects</b>	<b>0</b>	<b>199,000</b>	<b>199,000</b>