

Additional Meeting

Materials

BOARD OF HEALTH

March 20, 2025

Public Health – Seattle & King County Workforce Recruitment and Wellbeing

Report to the
King County Board of Health

March 20, 2025

Recruiting & Hiring Improvement Project Purpose:

Create a more
efficient, equitable
and **consistent**
Department of
Public Health hiring
and recruitment
process.




Strategic Alignment

- Contribute to goals of Public Health 2024-2029 Strategic Plan (see right)
- Make progress on goals of Racism is a Public Health Crisis/ERSJ Workforce & Workplace Racial Equity 2023-2024 goal area plan:
 - Recruitment process standardization
 - Equity in recruitment
 - Passive candidate engagement

EXECUTIVE SUMMARY ACKNOWLEDGEMENTS ABOUT US VISION, MISSION, & VALUES **PRIORITY AREAS** IMPLEMENTATION & NEXT STEPS APPENDICES

Climate & Health | Health & Well-being | Information & Innovation | Partnerships | **Workforce & Infrastructure**

Workforce & Infrastructure

GOAL: Support a racially just workforce and learning culture workplace that is reflective of the communities we serve and centers racial justice, equity, and well-being. 

Objective 1: By 2026, staff in the lowest 20 percent of Public Health's salary ranges are supported by active employee development plans to further their professional learning and career goals.

Objective 2: By 2029, implement all the goals and objectives of Public Health's Workforce Wellbeing Action Plan.

Objective 3: By 2029, all new hires and promotions in the top 20 percent of Public Health's salary ranges reflect 2040 King County projected workforce demographics, to the extent consistent with federal and state law.


Objective 4: By 2029, all staff have increased their knowledge, skills, and practice of racial justice, health equity, disability access and inclusion well-being, and belonging principles and actions.

Actions:

1. Invest in lower salaried employees through active employee development plans and employer supports to develop knowledge, skills, and practices.
2. Finalize, sustain, and implement the Public Health Workforce Wellbeing Action Plan, revising and updating in 2025 and beyond.
3. Develop, sustain and implement anti-racist workforce recruitment and eliminate barriers to high-salary employment opportunities for Black, Indigenous, and people of color, and immigrant populations.
4. Develop an anti-racist and health equity training plan for all current and new employees and provide opportunities to support department culture change, such as through affinity groups.

Measures:

- Percent of employees reporting high employee engagement scores
- Percent of employees in the lowest 20% of the salary range with an employee development plan
- Ratio of all new hires and promotions in the highest salary ranges (top 20% of the salary range or salary range 65 and higher) to 2040 projected workforce demographics
- Percent of employees trained on racial justice, health equity, well-being and belonging, and participating in affinity groups



Public Health Camp attendees listen to a presentation at the Medical Examiner's Office, 2023.

Project Objectives



Efficiency Improvement

Identify and remove inefficiencies in the recruitment and hiring process to save time for recruiters, hiring managers, and candidates.



Increase Workforce Diversity

Increase workforce diversity through equitable hiring practices and attracting a more diverse candidate pool.



Hiring Manager Experience Enrichment

Enrich the experience of hiring managers by providing education, clear communication and setting expectations about the hiring process.

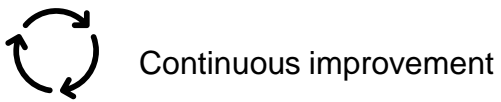
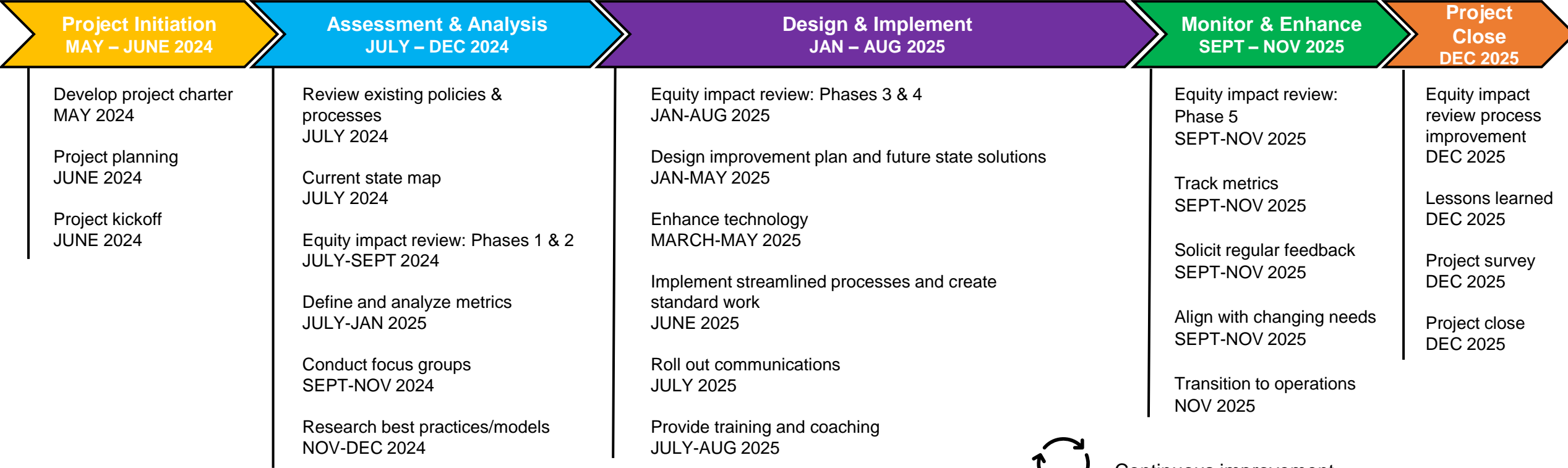


Technology Enhancement

Identify and implement technology enhancements within NEOGOV system and better utilize data analytics tools to support data-driven decision making.

Project Timeline

PROJECT MANAGEMENT



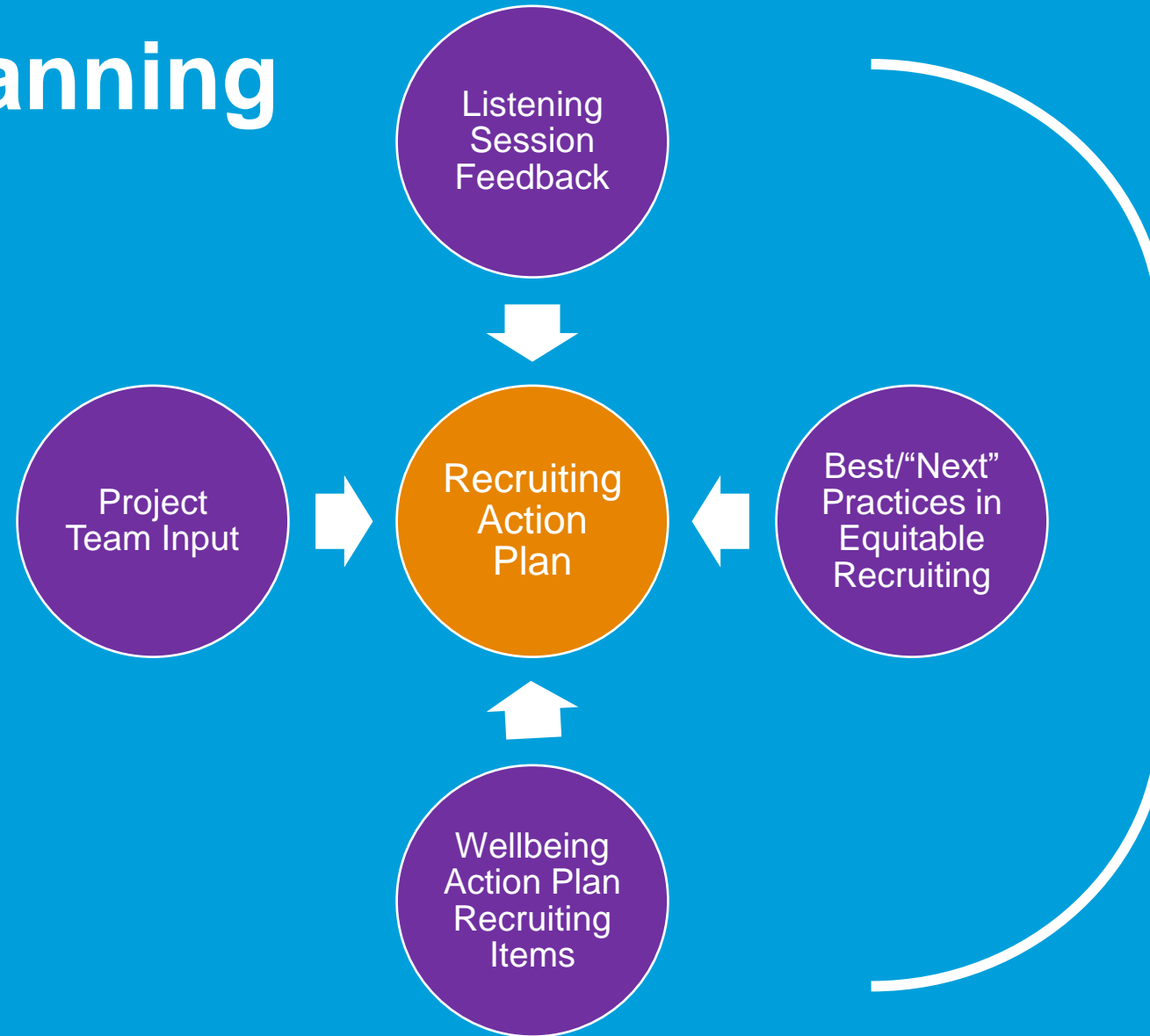
CHANGE MANAGEMENT



Board of Health

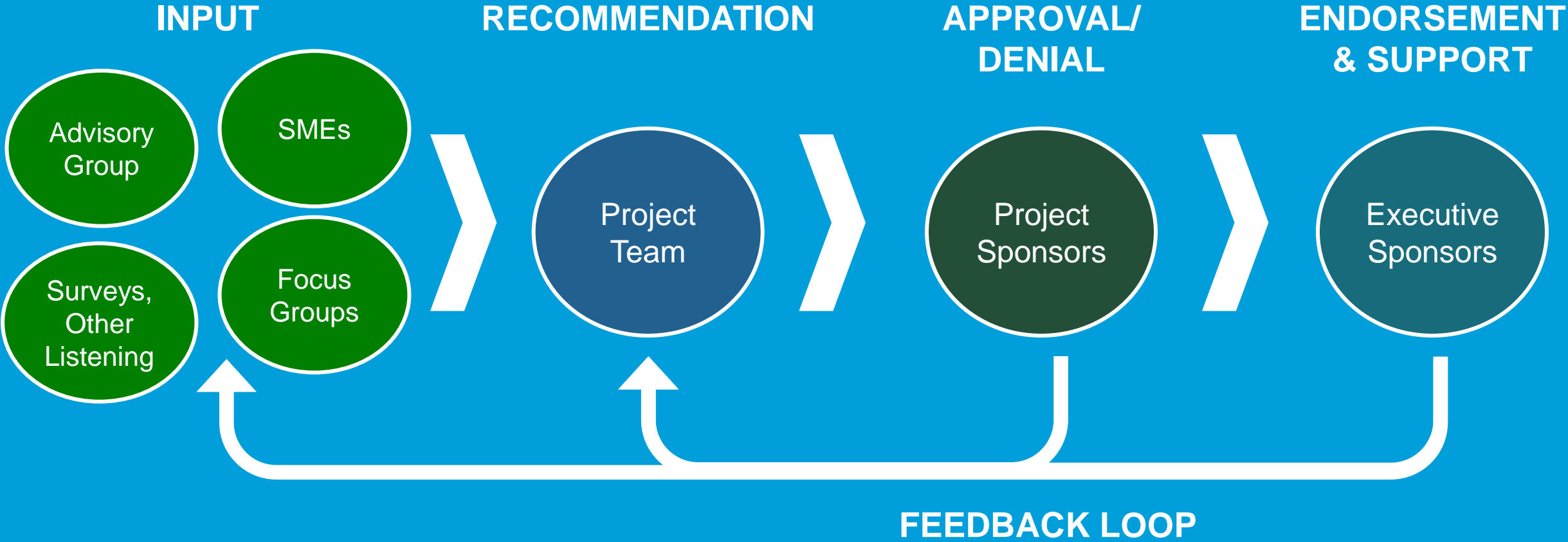
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Action Planning



- Assessing feasibility (cost, resourcing, what’s in PHSKC HR purview)
- Aligning to scope of project
- Prioritizing work

Feedback Loop



Success Metrics

Increasing equity in hiring practices and sourcing of diverse candidates to make progress on workforce diversity and equity goals including:

- Reduce the time-to-hire for vacant positions across PHSKC divisions
- Progress to ratio of new hires/promotions in the top 20% of salary ranges reflecting 2040 workforce demographic data
- Reduction in recruitment drop-off rate for BIPOC candidates
- Increase BIPOC representation relative to the communities we serve

SMART goals under development. Additional metrics to be developed as data and processes are further explored.

WELLBEING INITIATIVE

Strategic Goal:

Support a racially just workforce and learning culture workplace that is reflective of the communities we serve and centers racial justice, equity, and wellbeing.

Steve's keyboard must be broken.
He keeps hitting the escape key,
but he's still at work.



WHY WELLBEING

"we feel pressured to take on more, perform at high levels, praised for that work but the true cost is hidden (or not) in burnout"

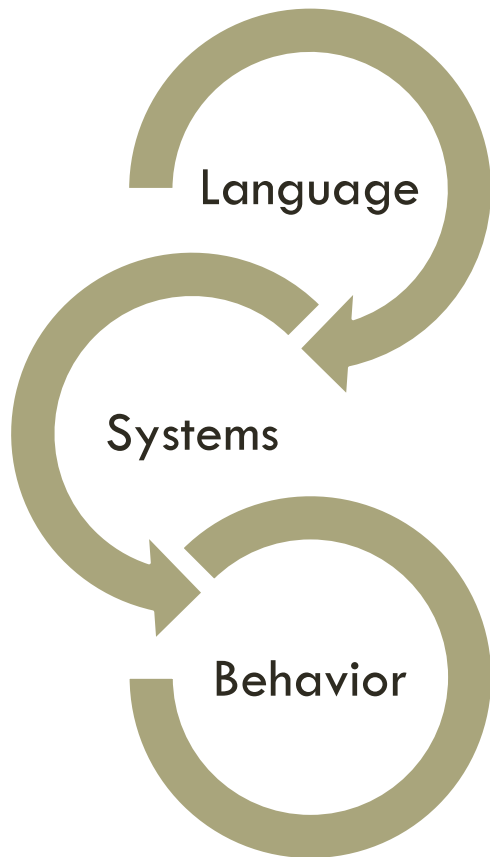
69% less likely to actively search for a new job

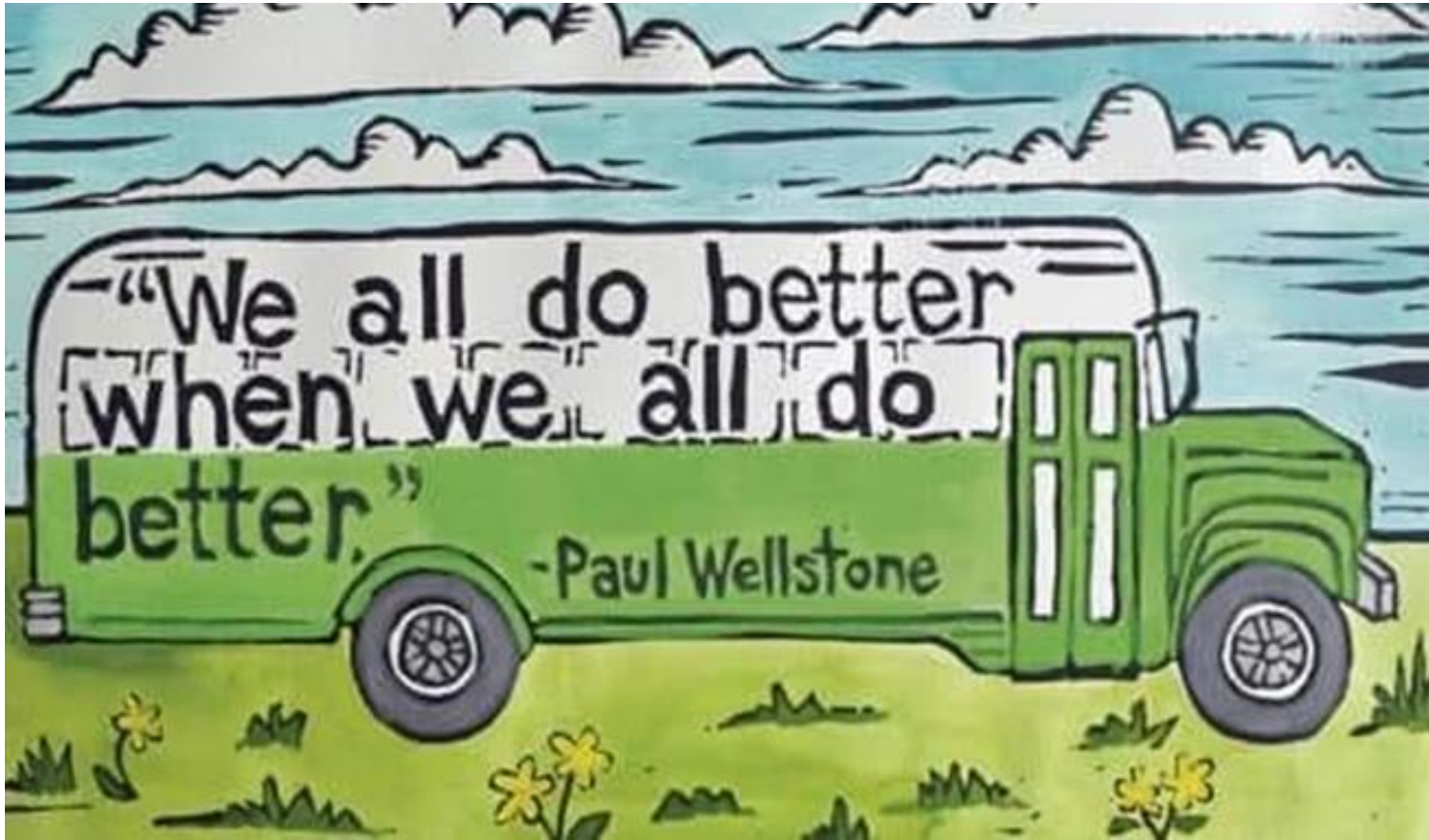
71% less likely to report experiencing a lot of burnout

36% more likely to be thriving in their overall lives

3x more likely to be engaged at work

HOW DO WE CHANGE CULTURE?





A CULTURE WHERE PEOPLE:

experience belonging

have positive relationships

contribute meaningfully

create and innovate

practice reflection

continuously learn

SYSTEMS CHANGE ACTIONS

We will align and balance workloads.

We will standardize hiring practices.

We will foster racial equity and belonging.

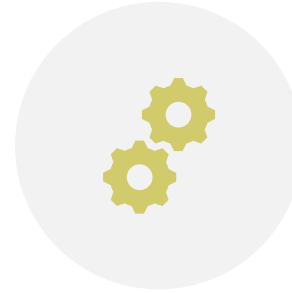
We will include racial and disability equity.

We will all change and grow.

Leaders will change their practices.



Consistent Implementation
of Policy



Optimizing Remote Work
Practices



Optimizing Schedule
Flexibility



Right Sizing Workloads

OPERATIONALIZING WELLBEING

We will all...



PRACTICE
COMPASSION



EXPRESS OUR
NEEDS



MAKE TIME TO
CONNECT

People Leaders will...



Lead with
compassion



Set realistic
expectations



Trust employees

Discussion

Questions?
Contact:
KCBOHAdmin@kingcounty.gov





Board of Health

PUBLIC HEALTH OPPORTUNITIES THROUGH NEIGHBORHOOD-LEVEL PARTNERSHIPS



THE U DISTRICT
PARTNERSHIP

March 20, 2025

Thought & Operational Partners





Seattle's University District



U District Partnership

- **Place Management Organization**
- **Business Improvement Area**
- **501(c)3 Nonprofit**
- **Established 2015 (*Greater U District Chamber of Commerce 1914 - 2014*)**



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UDP Programs

- Advocacy & Economic Development
- Placemaking & Public Realm
- Marketing & Events
- Cleaning & Safety
- Homeless Outreach

REACH fosters community health and safety through outreach, relationship building, healing interventions and systems advocacy for people who experience homelessness and use drugs.



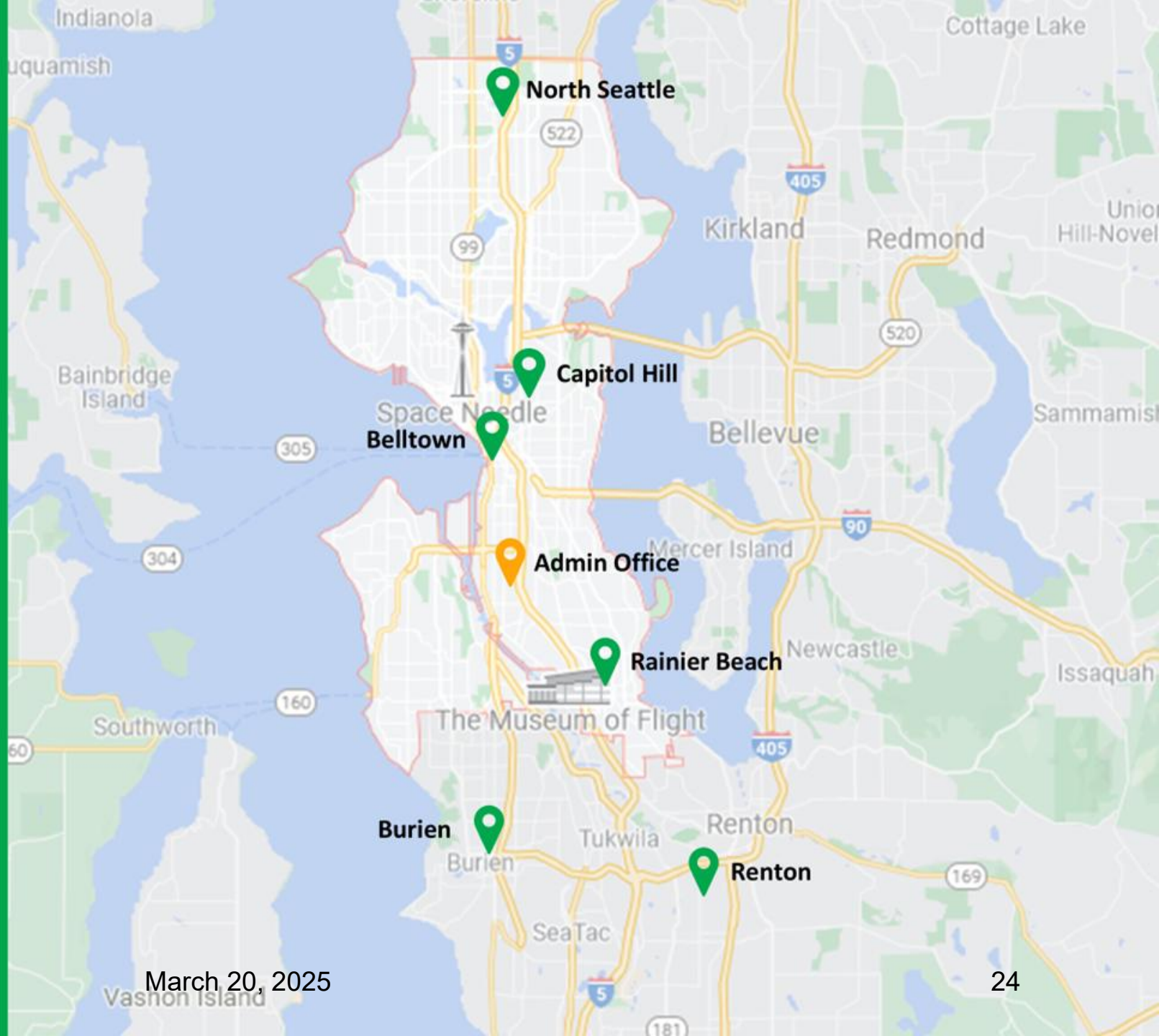
REACH

forging trust.
fostering change.

SERVICE AREA

REACH operates outside in the field, and in six hubs throughout King County.

With a fleet of more than 50 vehicles, our teams are well equipped to meet clients in the field.



EVERGREEN TREATMENT SERVICES



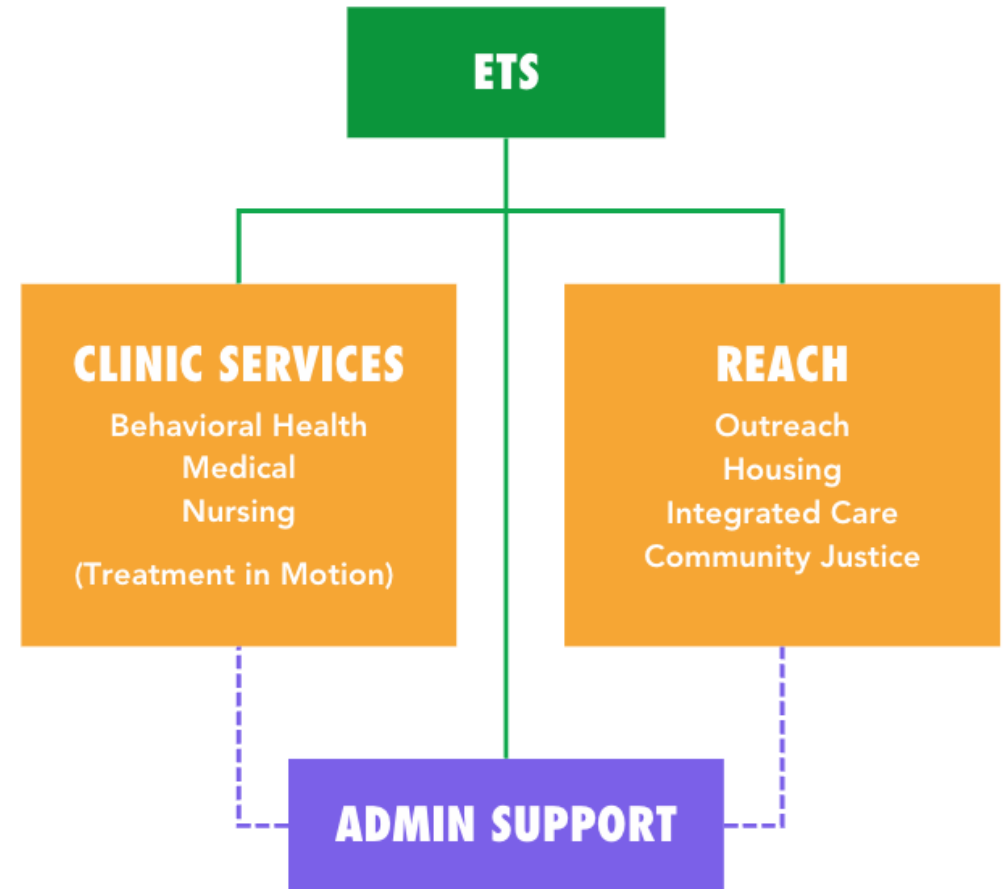
ETS carries out this work through two service divisions:

CLINIC SERVICES

Provides support services to people diagnosed with opioid use disorders (OUD) at three service locations: Seattle, Renton, and Olympia.

REACH

Provides support services to people living outside or unstably housed through four service domains: Outreach, Housing, Integrated Care, and Community Justice.





Purpose Dignity Action (PDA) plants seeds for a world rooted in community and care instead of punishment and neglect.

We activate responses to public health and safety rooted in **systems coordination** and a **care-based framework.**



Our Work



MODEL

The country's first pre-book jail diversion program, now in 80+ communities in US and abroad.



MODEL

Multi-partner response to encampments born of the COVID-19 pandemic.

Person-centered, trauma-informed alternative to sweeps. Evolved into statewide ROW ERP.



PROGRAM

Intensive case management + emergency lodging for rapid and sustained stability. JustCARE provider.

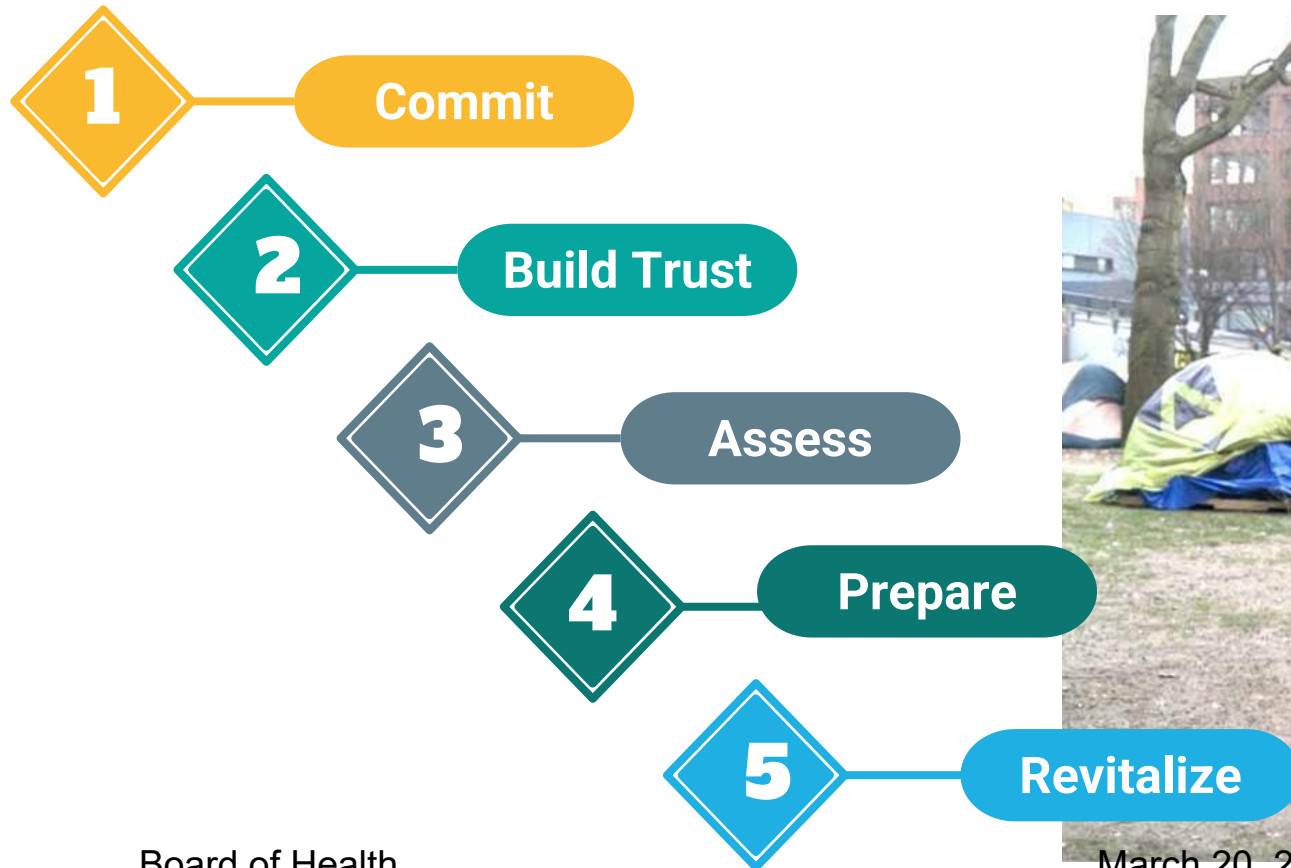


PROJECT

Hyperlocal "hot spot" based nonviolent de-escalation and referral to specialty care teams.



Outreach, intensive case management + emergency lodging. Staffed to respond to **what people & communities need** for a **sustainable resolution**.



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Cross-disciplinary care teams to address complex needs

- ▶ Neighborhood Coordinators
- ▶ Outreach Field Team
- ▶ Behavioral Health Support
- ▶ On-site Health Care
- ▶ Trained De-Escalators
- ▶ Legal Coordination
- ▶ Housing Navigation



Homelessness and Behavioral Health Issues in the University District

- A tradition of youth homelessness on the Ave, neighborhood services geared toward youth
- Spike in mental health and substance use issues in 2015 to present, no services for new population
- Influx of unhoused people during the pandemic
- Economic pressures of growth increasing
- Growing friction between people experiencing behavioral health issues and other community members
- **NEEDED NEW APPROACHES**



NEIGHBORHOOD COLLABORATION MODEL

WHAT IS IT?

The Neighborhood Collaboration Model is a team-based approach to address homelessness and public safety concerns in Seattle from a place-based neighborhood perspective.

OUR GOAL

Create health and safety for all community members while problem solving for critical street issues.



Why Neighborhood Partner Collaborations?

- Focus on high-impact individuals
- Engage community in problem solving and align priorities
- Increase understanding and ownership of community problems
- Effective service response
- Reduce friction in the community
- Overall increase in community health, safety, and perceptions



RESPONSIBILITIES

- Project management
- Case conferencing

RESPONSIBILITIES

- Place-based outdoor management & de-escalation
- Engaging & referral services



RESPONSIBILITIES

- Engagement and assessment of needs
- Expert service match and coordination
- Basic Services such as IDs, income assistance,
- Community education

Community Resources



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University District 2021 - 2023



Helped **208 people** move inside

68 people moved inside to permanent housing

140 additional people moved inside to shelter or temporary housing



University District 2024

REACH spent **nearly 1,800 hours** serving U-District clients.



Engaged nearly **370 unique people**

1 in 3 are BIPOC

1 in 4 are women

1 in 4 were previously engaged by REACH in U-District before 2024

REACH engaged each person **7-8 times** on average



Helped **58 people** move inside

20 people moved inside to permanent housing

38 additional people moved inside to shelter or temporary housing



Connected people to resources

Engaged **over 120 people** around substance use; **13 people** accessed treatment

Engaged **nearly 70 people** around mental health needs; **15 people** accessed mental health services

Supported **40 people** with obtaining IDs / documentation, signing up for benefits such as Medicaid or SNAP, etc.

CASE STUDY 1: Rosie's Place - Building Community Investment

UDistrict



CASE STUDY 2: King County ROW Encampment Resolution Program

- Partnership between CoLEAD, REACH, WSDOT, Washington State Patrol, KCRHA, supportive housing providers
- 22 encampments resolved, 12 in 2024
- 523 people moved inside, or 91% of people living in encampments
- 73% of people remain inside to date

[Seattle Times: Washington found a better way to remove homeless encampments.](#)

[will it stick?](#)

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Jean Darsie Place, a ROW-funded Permanent Supportive Housing (PSH) building in the U District.

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CASE STUDY 3: Neighborhood Case Conferencing

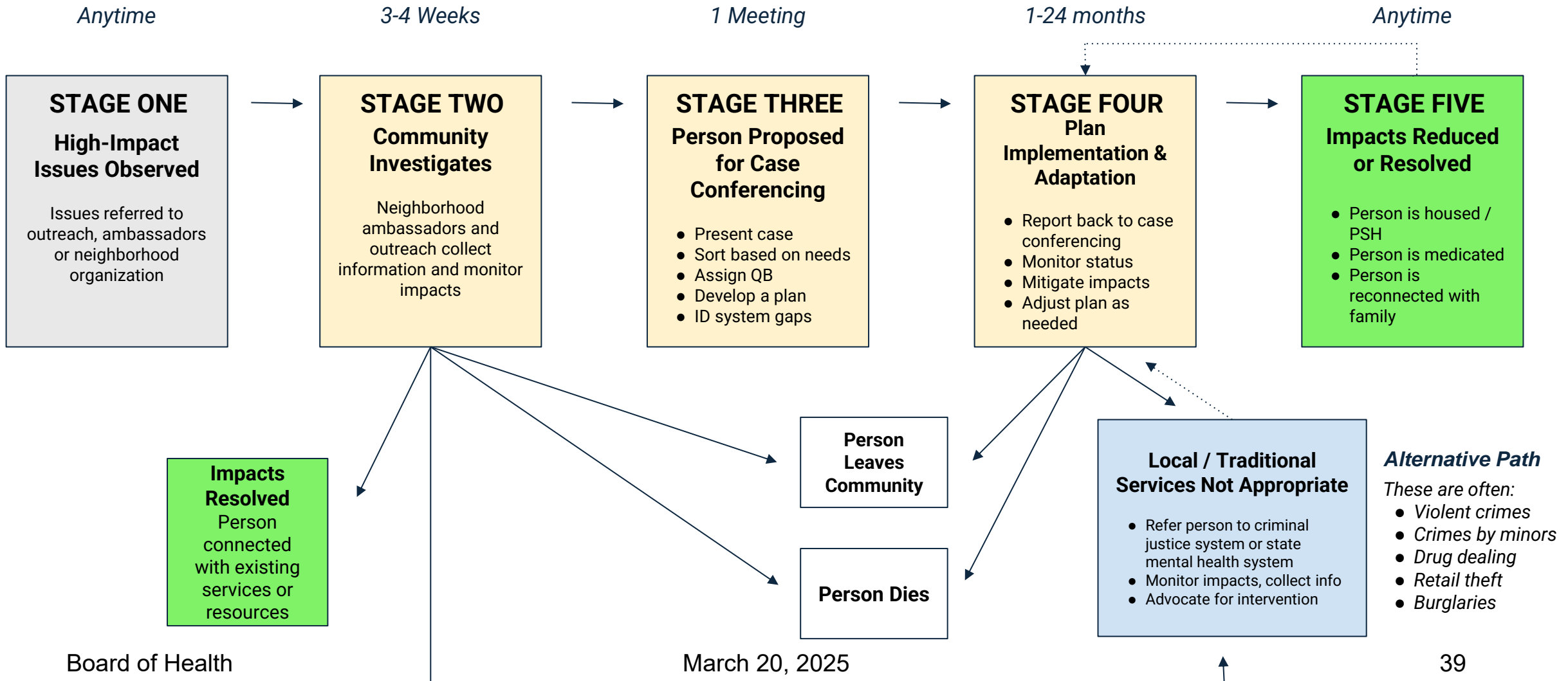
NAME (SEX)	S.R. (Male)
ALIAS	–
APPROX AGE (DOB)	27-28 (Unknown)
TIME IN THE U DISTRICT	4+ Years
HOMELESS INDICATORS?	Yes
SUBSTANCE USE INDICATORS?	Yes, see notes
MENTAL HEALTH INDICATORS?	Yes
PROGRAM ENGAGEMENT?	REACH: Working with REACH to get into permanent supportive housing LEAD: Accepted into LEAD a few years ago
CASE MANAGERS / POINT OF CONTACT	REACH, Family Member



- *Mental health issues, but practices martial arts and scares people on the sidewalk*
- *LEAD is working on housing spot, had turned down previous because too far out of comfort zone, medication mgmt, basic needs*
- *Board of Health*
- *Regular drug use*

Issue Identification, Case Conferencing & Resolution

Using community-informed case conferencing to drive planning and interventions that reduce impacts



Future Opportunities

1. Community feels **invested in solutions**
2. Relationships help **problem solve and prioritize**
3. Systems work together to be more **effective**
4. Long term goals to **build healthy, resilient communities**



Questions?

Contact:

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2025 State Legislative Session Update

King County Board of Health

March 20, 2025

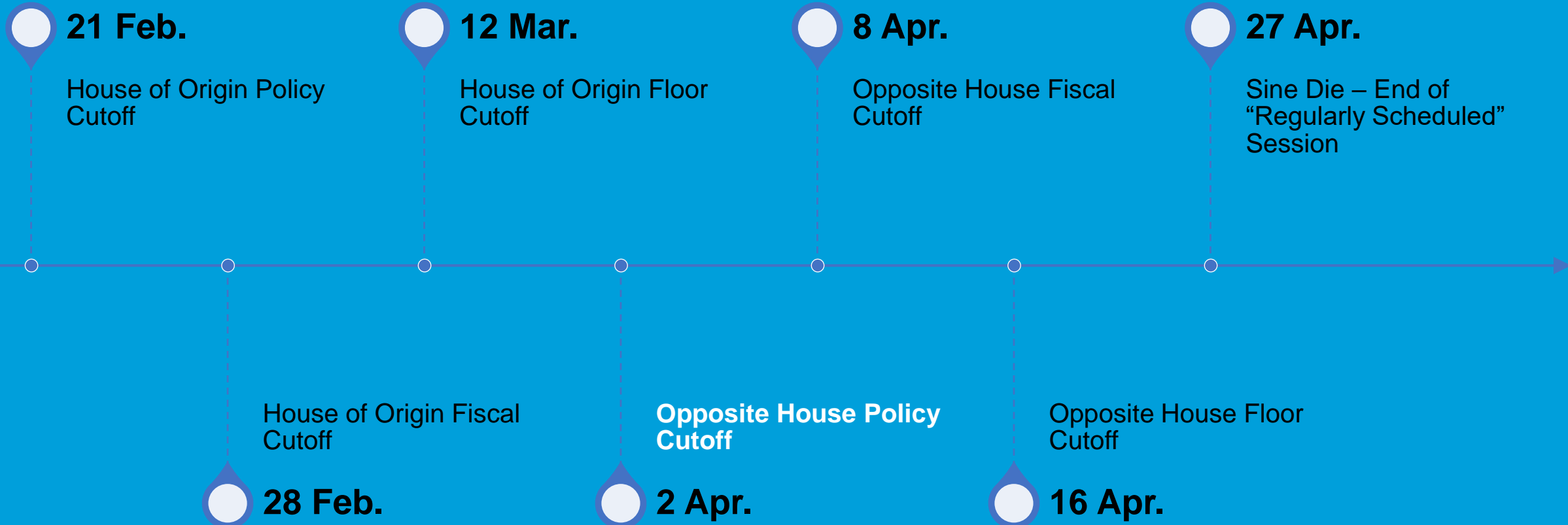
Simon Vila

Government Relations Officer

Public Health – Seattle & King County



Key Dates





State Budget and Revenue Proposals

Foundational Public Health Services (FPHS)

Local Government Revenue



Community Health and Healthcare Access

HB 1531 - Preserving the ability of public officials to address communicable diseases.

SB 5217 - Expanding pregnancy-related accommodations.

HB 1291 - Concerning cost sharing for maternity services.

SB 5498 - Concerning contraceptive coverage.

HB1162 - Concerning workplace violence in health care settings.

HB 1382 - Modernizing the all-payers claim database.

SB 5568 - Updating and modernizing the Washington state health plan.



Gun Violence

HB 1163 - Enhancing requirements relating to the purchase, transfer, and possession of firearms.

SB 5098 - Restricting the possession of weapons on the premises of state or local public buildings, parks, or playground facilities where children are likely to be present.

Injury Prevention

SB 5705 - Improving traffic safety by modifying penalty amounts for certain traffic infractions.

HB 1878 - Improving young driver safety.

SB 5163 - Modernizing the child fatality statute.



Overdose Prevention

HB 1432 - Improving access to appropriate mental health and substance use disorder services.

HB 1574 - Protecting access to life-saving care and substance use services.

Homelessness, Housing, and Health

SB 5232 - Updating eligible uses for the essential needs and housing support program.

HB 1899 - Concerning the homelessness point-in-time count.



Environmental Health and Climate Change

HB 1497 - Improving outcomes associated with waste material management systems.

HB 1670 - Increasing transparency regarding sewage-containing spills.

SB 5494 - Protecting Washington communities from lead-based paint.

SB 5033 - Concerning sampling or testing of biosolids for PFAS chemicals.

SB 5628 - Concerning lead in cookware.



Questions?

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