

# Individual State Agency Fiscal Note

<b>Bill Number:</b> 1925 HB	<b>Title:</b> Adverse childhood exps.	<b>Agency:</b> 303-Department of Health
-----------------------------	---------------------------------------	---

## Part I: Estimates

☐

No Fiscal Impact

### Estimated Cash Receipts to:

NONE

### Estimated Operating Expenditures from:

	FY 2020	FY 2021	2019-21	2021-23	2023-25
FTE Staff Years	1.4	0.3	0.9	0.0	0.0
<b>Account</b>					
General Fund-State 001-1	372,000	48,000	420,000	0	0
<b>Total \$</b>	372,000	48,000	420,000	0	0

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

☒

If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.

☐

If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).

☐

Capital budget impact, complete Part IV.

☐

Requires new rule making, complete Part V.

Legislative Contact: Dawn Eychaner	Phone: 360-786-7135	Date: 02/08/2019
Agency Preparation: Eric Molfino	Phone: 360-236-4537	Date: 02/16/2019
Agency Approval: Stacy May	Phone: (360) 236-4532	Date: 02/16/2019
OFM Review: Bryce Andersen	Phone: (360) 902-0580	Date: 02/18/2019

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Briefly describe by section number, the significant provisions of the bill, and any related workload or policy assumptions, that have revenue or expenditure impact on the responding agency.

Section 2 requires the Department of Health (DOH) to identify videos, printed materials, and other support tools and resources that promote safe, stable, and nurturing relationships and environments and make those materials available online in the five most commonly spoken languages in the state. DOH must promote the website and materials with provider organizations and state and local governments to encourage their use and availability.

- Requires DOH to review and include resiliency promotion and adverse childhood experiences (ACEs) mitigation messaging in Child Profile materials.
- Requires DOH to develop training modules for community health workers (CHWs) and other peer educators and health care providers related to resiliency and preventing ACEs. (Bill provides examples of what those modules could be but does not require the modules be on those topics.)
- Directs DOH to create a pilot program and implement in at least one local clinic or organization to screen for ACEs using an evidence or promising practice informed questionnaire and provide linkages to community and clinical resources. DOH must produce a report on the results of the pilot project by December 1, 2020.

II. B - Cash receipts Impact

Briefly describe and quantify the cash receipts impact of the legislation on the responding agency, identifying the cash receipts provisions by section number and when appropriate the detail of the revenue sources. Briefly describe the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explain how workload assumptions translate into estimates. Distinguish between one time and ongoing functions.

None

II. C - Expenditures

Briefly describe the agency expenditures necessary to implement this legislation (or savings resulting from this legislation), identifying by section number the provisions of the legislation that result in the expenditures (or savings). Briefly describe the factual basis of the assumptions and the method by which the expenditure impact is derived. Explain how workload assumptions translate into cost estimates. Distinguish between one time and ongoing functions.

Section 2(1) Translation costs for translating identified videos/materials into the five most commonly spoken languages in Washington.

Top five languages in Washington State (after English)

Source: Office of Financial Management, 2016 Limited English Proficiency (LEP) Population Estimates

1. Spanish
2. Russian
3. Vietnamese
4. Ukrainian
5. Somali

Translation estimates

Source: Department of Enterprise Services, Translation Services-Written Word Master Contract

Language	Cost per word
Spanish	\$0.13 – \$0.26 per word
Russian	\$0.17 – \$0.28 per word
Vietnamese	\$0.17 – \$0.28 per word
Ukrainian	\$0.17 – \$0.28 per word

Adverse childhood exps.

Form FN (Rev 1/00) 144,638.00

FNS063 Individual State Agency Fiscal Note

Somali \$0.17 – \$0.28 per word

#### Website pages

Source: Estimated length of main DOH landing and educational pages is about 500 words.

Assuming a landing page of each language and a minimum of five additional topic pages to cover the five topics mentioned in HB 1925: 1) Resiliency, 2) ACES prevention, 3) Childhood adversity, 4) Childhood trauma, and 5) Promotion of safe, stable, nurturing environments. Total word estimate for 6 pages = 3,000 words.

Language Cost for 6 total pages per language

Spanish \$780 (\$0.26 x 500 words x 6 pages)

Russian \$840 (\$0.28 x 500 words x 6 pages)

Vietnamese \$840 (\$0.28 x 500 words x 6 pages)

Ukrainian \$840 (\$0.28 x 500 words x 6 pages)

Somali \$840 (\$0.28 x 500 words x 6 pages)

Webpage estimates \$4,140

#### Educational materials

Source: Estimated length of common DOH health education materials is about 300 words.

Assuming a minimum of five educational materials to cover the five topics: 1) Resiliency, 2) ACES prevention, 3) Childhood adversity, 4) Childhood trauma, and 5) Promotion of safe, stable, nurturing environments.

Total word estimate for 5 materials = 1,500 words.

Language Cost for five materials per language

Spanish \$390 (.26 x 300 words x 5 items)

Russian \$420 (.28 x 300 words x 5 items)

Vietnamese \$420 (.28 x 300 words x 5 items)

Ukrainian \$420 (.28 x 300 words x 5 items)

Somali \$420 (.28 x 300 words x 5 items)

Materials estimates \$2,070

#### Videos (translation of closed captions)

Source: Average words per minute of video is 125 words (at medium speed).

It is a best practice to keep videos to less than two minutes. Assuming a minimum of five videos to cover the five topics: 1) Resiliency, 2) ACES prevention, 3) Childhood adversity, 4) Childhood trauma, and 5) Promotion of safe, stable, nurturing environments. Total video caption translations estimates is 250 words per video X 5 videos per language = 1,250 words.

Language Cost for five videos per language

Spanish \$325 (.26 x 125 words/min x 2 min x 5 videos)

Russian \$350 (.28 x 125 words/min x 2 min x 5 videos)

Vietnamese \$350 (.28 x 125 words/min x 2 min x 5 videos)

Ukrainian \$350 (.28 x 125 words/min x 2 min x 5 videos)

Somali \$350 (.28 x 125 words/min x 2 min x 5 videos)

Video estimates \$1,725

Total estimates contractual costs for Webpages, Educational Materials, Video (closed captions) is \$8,000.

Additionally, based on promotional activities of best practices from our Breast Feeding efforts, 0.3 FTE of an health services consultant (HSC)3 in FY 2020 to coordinate projects internally and externally. Staffing and related costs are \$42,000. Contractual costs from above are \$8,000 in FY 2020. Total costs for Section 2 (1) in FY 2020 for translation is \$50,000 and 0.3 FTE.

Section 2(2) will require resource costs associated with Child Profile inserts The department shall review and include resiliency promotion and adverse childhood experiences mitigation messaging in the child profile health promotion materials that are sent to all families with children from birth through six years old. Including this messaging will cost an additional \$6,000 in goods and services in FY 2020.

Section 2(3) will require \$30,000 for contracts in FY 2020 to develop a CHW module, based on quotes from qualified contractors. DOH will develop this module in both English and Spanish. (\$15,000 each). DOH assumes one module will be sufficient to cover all topics listed in the bill. FTE will be required for an HSC3. We anticipate it will take 40 hours for module development coordination, testing, implementation, and quality improvement, we can reprioritize staff time to complete this part within existing resources.

Section 2(4) Evaluation on the ACES screening pilot in clinics. This will require DOH to contract with one or more local clinics or organizations. Based on our Birth Equity project, this will cost \$120,000 per contract and would include implementation of a screening tool, resource coordination and data tracking/reporting by one clinic system.

The following estimates are also based on the Birth Equity Project underway. Staff will be needed identifying the partner clinic(s), partnering with the clinic to identify and implement a culturally appropriate screening tool, developing an evaluation method and performance measures, ongoing contract management, technical assistance on coordinating services and relationship building and preparation of the report due to the legislature by December 1, 2020, will require 0.8 FTE of an HSC 4, 0.2 FTE of an Epi 3, and 0.1 AA 3 ( to provide administrative support in FY 2020 1.1 FTE with total staffing and related costs of \$166,000. In FY 2021 0.2 FTE HSC 4, 0.1 FTE of an Epi 3 will be needed in finalizing this project in FY 2021 0.3 FTE with total staffing and related costs of \$48,000.

Total Costs for Section 2:  
\$372,000 and 1.4 FTE in FY 2020  
\$48,000 and 0.3 FTE in FY 2021

### Part III: Expenditure Detail

#### III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2020	FY 2021	2019-21	2021-23	2023-25
001-1	General Fund	State	372,000	48,000	420,000	0	0
Total \$			372,000	48,000	420,000	0	0

III. B - Expenditures by Object Or Purpose

	FY 2020	FY 2021	2019-21	2021-23	2023-25
FTE Staff Years	1.4	0.3	0.9		
A-Salaries and Wages	106,000	25,000	131,000		
B-Employee Benefits	37,000	9,000	46,000		
C-Professional Service Contracts	158,000		158,000		
E-Goods and Other Services	55,000	11,000	66,000		
J-Capital Outlays	4,000		4,000		
M-Inter Agency/Fund Transfers					
P-Debt Service					
T-Intra-Agency Reimbursements	12,000	3,000	15,000		
9-					
Total \$	372,000	48,000	420,000	0	0

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2020	FY 2021	2019-21	2021-23	2023-25
ADMINISTRATIVE ASST 3	45,096	0.1		0.1		
EPIDEMIOLOGIST 3 (NON-MEDICAL)	99,336	0.2	0.1	0.2		
HEALTH SERVICES CONSULTANT 3	68,580	0.3		0.2		
HEALTH SERVICES CONSULTANT 4	75,684	0.8	0.2	0.5		
Total FTEs		1.4	0.3	0.9		0.0

Part IV: Capital Budget Impact

NONE

None

Part V: New Rule Making Required

Identify provisions of the measure that require the agency to adopt new administrative rules or repeal/revise existing rules.

None