

Public Health - Seattle & King County

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Department Description

Public Health - Seattle and King County (Public Health) provides public health services that promote health and prevent disease throughout King County.

Administered by King County, Public Health serves all of King County, including the City of Seattle. In partnership since 1951, the City of Seattle and King County jointly finance and operate a City-County Health Department. The City's financial contributions to the Public Health Department are voluntary and are used to enhance health services to Seattle citizens.

With the support of the City of Seattle, Public Health provides a wide range of services targeted to populations largely under-served by the private health care system. The Department's services are offered regardless of income and include:

- prevention-focused primary care and dental services for "at-risk" and vulnerable populations;
- family health care;
- health care for teens in Seattle's public schools;
- health care for homeless individuals and families in Seattle's shelters;
- HIV/AIDS programs;
- a nationally recognized tobacco prevention program;
- specialized care for seniors who live in the downtown area;
- programs to reduce the disparities in health between populations in Seattle; and
- public health nursing care home visits to give mothers and babies a healthy start in life.

All Public Health employees are under the administration of King County.

Policy and Program Changes

The budget for Public Health - Seattle and King County makes a General Subfund contribution of \$9.7 million in 2003 and \$6.5 million in 2004 to enhance public health services for residents of Seattle. This represents a reduction from previous years' support and is proposed in the following context: 1) the Mayor is committed to support measures in the State legislature realizing the principle in State law that public health services are the responsibility of State and County governments; 2) in addition to assuming increases in patient-generated revenue, the Department continues to be successful in leveraging appropriate funding sources to pay for services previously covered by City funds; 3) the County has agreed through this biennium to substitute City General Subfund with regional revenue sources that continue services identified in the Joint Executive Committee agreement; and 4) funding for community health clinics (Community Health Center Partners) is reduced in light of the fact that they have enhanced Medicaid and Medicare rates; local, state, and federal grants; and managed care plans that were not available to the clinics when the City began subsidizing them nearly 30 years ago. The City Council restored Community Health Center Partners funding pending the results of a Council Statement of Legislative Intent, as noted in the Council Changes and Budget Provisos below.

Public Health

The Joint Executive Committee agreement was reached between the City and County to clarify provisions of their 1996 interlocal agreement, which specifies that King County has financial responsibility for basic or critical health services, commonly understood to be those formerly mandated by the State of Washington. The City of Seattle provides voluntary contributions to enhance services above the critical service base. In 2000, the County and the City undertook a study to determine compliance with the financial responsibility provisions of the interlocal agreement and mutually determined that City General Subfund was being used to fund \$2 million in critical health services in 11 programs. Based on those findings, the County agreed to supplant City funding for those services over a three-year period, so that by 2004, City money will be paying only for enhanced services to Seattle residents.

Public Health - Seattle and King County is challenged not only with reductions in General Subfund, but also diminishing resources from King County's general revenue used to fund county-wide services and the potential loss of State General Fund, money that replaced formerly allocated collections from the Motor Vehicle Excise Tax. The Department eliminates all enhanced public health services, except for those supported by Seattle's General Subfund. The Department has also made reductions in legally mandated and critical health programs to meet the County Executive's priorities in balancing the County budget.

City Council Budget Changes and Provisos

Council increases the proposed 2003 budget for Community Health Center Partners by \$1,630,333, yielding a total 2003 budget of \$5,083,000. Fifty percent is reserved in Finance General pending the review of the Community Health Center Partners' funding called for in a related Statement of Legislative Intent. Council increases the proposed 2004 budget for Community Health Center Partners by \$761,445, yielding a total 2004 budget of \$3,697,438. One hundred percent of the 2004 allocation is reserved in Finance General pending the results of the above-mentioned Statement of Legislative Intent.

Council adds funding to the Family Support Services for a two-nurse team to be added to the Best Beginnings Program. This program provides nurse home visits to low-income, first-time teen mothers from pregnancy through age two.

Council restores funding at the 2002 Adopted Budget levels to the following programs: Alcohol & Other Drugs for substance abuse treatment program for youth and Chemical & Physical Hazards program for the Master Home Environmentalist Program.

Council reduces funding for Interpretation Services by 50% in 2003 and 100% in 2004. Interpretation services are mandated by federal law, and consequently are a core health service and not an optional local enhancement. By interlocal agreement, King County is responsible for core public health services and Seattle funding is for optional enhancements.

Resources	Summit Code	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
Administration and Management Budget Control Level	VH00123	31,309	45,021	0	0
Alcohol and Other Drugs Budget Control Level	VH00114	1,011,013	1,039,516	1,039,516	1,065,505
Asthma Budget Control Level	VH00100	0	0	172,987	177,312
Breast and Cervical Health Budget Control Level	VH00115	18,006	14,656	0	0
Budget and Financial Planning Budget Control Level	VH00122	36,437	100,694	79,624	81,615
Chemical and Physical Hazards Program Budget Control Level	VH00116	54,416	56,375	56,375	58,066
Child Care Health and Safety Budget Control Level	VH00106	414,726	468,371	127,553	130,742
Chronic Disease/Healthy Aging Budget Control Level	VH00117	12,542	0	0	0
Community Health Center Partners Budget Control Level	VH00111	4,936,013	5,083,009	2,541,505	0
Community-Based Public Health Practice Program Budget Control Level	VH00102	0	17,910	0	0
Epidemiology, Planning, and Evaluation Budget Control Level	VH00103	257,056	370,741	195,011	199,887
Family Planning Budget Control Level	VH00107	262,534	294,006	102,891	0
Family Support Services Budget Control Level	VH00108	576,111	433,457	662,492	679,654
Food Protection Program Budget Control Level	VH00104	86,927	90,056	0	0
Health Care Access Budget Control Level	VH00119	513,313	572,074	315,959	323,858
Health Care for the Homeless Budget Control Level	VH00112	750,459	744,978	774,767	794,136
HIV / AIDS Program Budget Control Level	VH00120	1,026,687	920,238	946,419	661,448
Immunizations Budget Control Level	VH00126	384,807	362,762	234,456	0
Interpretation Services Budget Control Level	VH00109	496,869	469,144	243,913	0
Methadone Vouchers Budget Control Level	VH00118	0	0	327,498	335,685

Public Health

Oral Health Budget Control Level	VH00125	921,580	705,014	733,503	751,841
Primary Care Budget Control Level	VH00124	465,829	550,765	35,984	36,884
Public Health Laboratory Budget Control Level	VH00105	54,716	57,383	0	0
School Age Health Budget Control Level	VH00113	1,229,529	1,271,449	996,216	1,021,121
Tuberculosis Control Budget Control Level	VH00110	195,759	188,734	196,250	201,156
Women, Infants, and Children Program (WIC) Budget Control Level	VH00121	1,083,207	402,376	0	0
Department Total		14,819,845	14,258,729	9,782,919	6,518,910

Selected Mid-year Performance Measures

Dedicated to having children receive the care and nurturing they need to become functional adults

Number per FTE

2001 Year End Actuals: Dedicated funding began 3/02

2002 Midyear Actuals: 104

2002 Year End Projection: 150. Goal mid-year is 100 based on current staffing. Goal of 150 represents adjustment for staggered hiring dates.

Number of visits to Best Beginnings Clients

2001 Year End Actuals: Dedicated funding began 3/02

2002 Midyear Actuals: 415. Data entry systems for North team were not in place until late June 2002. Data is underreported for North team in May and June, but will be reported with end of year statistics.

2002 Year End Projection: 800. Data entry systems for North team were not in place until late June 2002.

Number of enrolled Best Beginnings Clients

2001 Year End Actuals: Dedicated funding began 3/02

2002 Midyear Actuals: 67

2002 Year End Projection: 100. Funding for North team of Best Beginnings hiring began in May 2002 with full staffing expected in October 2002.

Committed to preventing HIV infection by providing syringe exchange services in Seattle

Number of syringes exchanged that are supported by General Fund

2001 Year End Actuals: 1,056,128

2002 Midyear Actuals: 504,527

2002 Year End Projection: 941,320 - The General Fund supports roughly half of the syringe exchange volume conducted within Seattle. This level of support has been consistent over the past 4 years.

Number of syringes exchanged in Seattle

2001 Year End Actuals: 1,811,915

2002 Midyear Actuals: 807,110

2002 Year End Projection: 1,886,000. The decline during the first half of 2002 may be attributed to the number of exchange clients placed in methadone treatment through a General Fund supported vouchers program, initiated in March 2002.

Committed to improving the health of homeless people and increased stability in their lives

Number of unduplicated homeless people in Seattle provided with health care and linked to other systems and services

2001 Year End Actuals: 5,590

2002 Midyear Actuals: 3,593

2002 Year End Projection: 5,500. Health Care for Homeless Network (HCHN) continues to experience high demand for health services in shelters, day centers, and other homeless settings.

Number of tuberculosis consultations (screenings, contact investigations, and other visits) provided to homeless people in the City of Seattle

2001 Year End Actuals: 1,615

2002 Midyear Actuals: 1,374

2002 Year End Projection: 3,200

Number of health care visits provided to homeless people in the City of Seattle

2001 Year End Actuals: 27,219

2002 Midyear Actuals: 15,395

2002 Year End Projection: 24,000. HCHN continues to see high demand for HCHN services in shelters, day centers, and other homeless settings. Provider productivity remains high, although complexity of health issues is increasing.

Public Health

Administration and Management

Purpose Statement

The purpose of the Administration and Management program is to provide accountability, leadership, technical, and managerial support to Public Health employees and elected officials in order to provide effective services and achieve departmental goals.

Program Summary

Funding for Seattle's portion of the expenses of the Seattle-King County Board of Health will be paid for through Department overhead and not a direct General Fund allocation. This does not affect the functioning of the Board of Health.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	31,309	45,021	0	0
Total	31,309	45,021	0	0

Alcohol and Other Drugs

Purpose Statement

The purpose of the Alcohol and Other Drugs program is to provide funding, program development assistance, and educational resources and training to King County residents in order to promote primary alcohol/drug prevention.

Program Summary

Maintains the 2002 mid-year budget reduction to the Housing Specialist; the program has not been successful in obtaining housing for chronic public inebriates.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	1,011,013	1,039,516	1,039,516	1,065,505
Total	1,011,013	1,039,516	1,039,516	1,065,505

Asthma

Purpose Statement

The purpose of the Asthma program is to control asthma by providing in-home indoor air testing and education, case management services, and an expansion of asthma registry services in order to promote well being and reduce the health risks of asthma.

Program Summary

Ordinance #120732, adopted February 19, 2002, appropriates funds to provide asthma management tools for low-income families of asthmatics. The program is an enhanced public health service.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	0	0	172,987	177,312
Total	0	0	172,987	177,312

Breast and Cervical Health

Purpose Statement

The purpose of the Breast and Cervical Health program is to provide public education and health screening services to women aged 40 to 64 with low incomes and limited or no health insurance in order to assure early detection and treatment of breast and cervical cancer.

Program Summary

Maintain a mid-year 2002 cut for outreach services to targeted populations. Overall, Public Health received new grant funding to add to this program and will continue to provide services; however, services may experience a slight reduction.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	18,006	14,656	0	0
Total	18,006	14,656	0	0

Public Health

Budget and Financial Planning

Purpose Statement

The purpose of the Budget and Financial Planning program is to provide a budgeting and forecasting framework so that Department managers can make sound programmatic and financial decisions.

Program Summary

Reduce funding for the Seattle budget liaison from .75 FTE to .50 FTE. Work is currently being done by part-time staff; service should not be affected by this cut.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	36,437	100,694	79,624	81,615
Total	36,437	100,694	79,624	81,615

Chemical and Physical Hazards

Purpose Statement

The purpose of the Chemical and Physical Hazards program is to provide information and compliance enforcement to residents and businesses in order to reduce injury and illness.

Program Summary

Maintain funding at the 2002 Adopted Budget level.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	54,416	56,375	56,375	58,066
Total	54,416	56,375	56,375	58,066

Child Care Health and Safety

Purpose Statement

The purpose of the Child Care Health and Safety program is to provide facility assessment, training and support, and consultation about children of concern to child care providers and families so that children achieve optimum growth and development and families are able to maintain employment.

Program Summary

Reduce General Fund provided for the portion of Child Care Health and Safety that is considered a critical service (i.e., facility assessment, training, and support to child care centers). Public Health is shifting other funds into Child Care Health and Safety and there are no service reductions in critical services. Maintain General Fund for the enhanced service of consultations about children with behavioral and/or out of the ordinary problems with growth and development. General Fund for the critical services portion of this program is phased out completely in 2003-04 as part of the Joint Executive Committee agreement between the City of Seattle and King County. The 2003-04 budget reflects that City of Seattle General Fund is used only for enhanced public health services for residents of Seattle, in compliance with the 1996 interlocal agreement between King County and the City of Seattle.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	414,726	468,371	127,553	130,742
Total	414,726	468,371	127,553	130,742

Chronic Disease/Healthy Aging

Purpose Statement

The purpose of the CDHA program is to provide planning, coordination, consultation, coalition building, demonstration programs, research, information, and other support to King County agencies and individuals in order to help facilitate their working together toward chronic disease prevention, health promotion, and reduction in health disparities.

Program Summary

This was one-time funding for a prostate cancer study.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	12,542	0	0	0
Total	12,542	0	0	0

Public Health

Community Health Center Partners

Purpose Statement

The purpose of the Community Health Center Partners program is to provide high quality contract management and accountability systems for pass-through funds that support medical, dental, and access services delivered by community-based health care safety net partners, in order to improve the health status of low-income, uninsured residents of King County.

Program Summary

Council increases the proposed 2003 budget for Community Health Center Partners by \$1,630,333 from the Mayor's Proposed budget, yielding a total 2003 budget of \$5,083,000. Fifty percent is reserved in Finance General pending the review of the Community Health Center Partners' funding called for in a related Statement of Legislative Intent. Council increases the proposed 2004 budget for Community Health Center Partners by \$761,445 from the Mayor's Proposed budget, yielding a total 2004 budget of \$3,697,438. One hundred percent of the 2004 allocation is reserved in Finance General pending the results of the above-mentioned Statement of Legislative Intent.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	4,936,013	5,083,009	2,541,505	0
Total	4,936,013	5,083,009	2,541,505	0

Community-Based Public Health Practice Program

Purpose Statement

The purpose of the Community-Based Public Health Practice Program is to provide planning, coordination, demonstration, and policy development assistance to communities, as collaborative partners, so that communities can be strengthened and health status improved.

Program Summary

Funds for this program are moved to Epidemiology, Planning, and Evaluation as part of program restructuring in 2003-04. Positions in this program are funded by various funding sources including King County and are not affected by this change.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	0	17,910	0	0
Total	0	17,910	0	0

Epidemiology, Planning, and Evaluation

Purpose Statement

The purpose of the Epidemiology, Planning, and Evaluation program is to provide health information and technical assistance based on health assessment data and research findings to public and private organizations and individuals so that they can develop data-informed policies and actions to improve the health of King County residents.

Program Summary

Reduce General Fund for Epidemiology, Planning, and Evaluation by 15%. This reduces the position of one epidemiologist, which will not materially reduce services due to additional grant funds. The City may experience delays in receiving specialized reports on health issues relating to Seattle. The General Fund is further reduced due to shifting funds to other programs.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	257,056	370,741	195,011	199,887
Total	257,056	370,741	195,011	199,887

Family Planning

Purpose Statement

The purpose of the Family Planning program is to provide reproductive health and sexually transmitted disease outreach and education services for King County residents in order to promote sexual health and well-being and reduce unintended pregnancies.

Program Summary

Public Health has identified other revenue sources, including revenue from the state's "Take Charge" program for this program; there are no resulting service reductions. General Fund for this program is reduced in 2003 and phased out completely in 2004 as part of the Joint Executive Committee agreement between the City of Seattle and King County. Family Planning is a critical service and funding critical public health services is King County's responsibility. The 2004 budget reflects that City of Seattle General Subfund is used only for enhanced public health services for residents of Seattle; this is in compliance with the 1996 interlocal agreement between King County and the City of Seattle.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	262,534	294,006	102,891	0
Total	262,534	294,006	102,891	0

Public Health

Family Support Services

Purpose Statement

The purpose of the Family Support Services program is to provide assessment, education, skills-building, and support to pregnant women and families with children so that babies are born with the best opportunity to grow and thrive, the impact of health problems are minimized, and children receive the care and nurturing they need to become functional adults. Family Support Services also includes geriatric care and care for AIDS-affected families.

Program Summary

Ordinance #120732, adopted February 19, 2002, added funds for Best Beginnings, an intensive nurse, and a case management program for first-time teen parents. The City Council adds additional funds for another two-nurse team for Best Beginnings.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	576,111	433,457	662,492	679,654
Total	576,111	433,457	662,492	679,654

Food Protection

Purpose Statement

The purpose of the Food Protection program is to provide information and compliance enforcement to food service operators so that they can comply with the King County Food Code and prevent the incidence of food-borne illness in food service establishments.

Program Summary

Eliminate General Fund support for Food Protection. The King County Council approved funding to offset cuts. Food protection is a critical public health service.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	86,927	90,056	0	0
Total	86,927	90,056	0	0

Health Care Access

Purpose Statement

The purpose of the Health Care Access program is to provide outreach, medical application assistance, linkage to community services and resources, coordination of care, and targeted interventions to uninsured, underserved and/or high risk individuals and families so that health disparities are minimized.

Program Summary

Outreach services to individuals without health care will largely be maintained, including the Citywide Help for Working Families program. Help for Working Families is a service that helps low- to moderate-income families enroll in public benefits for which they are eligible. It provides a single point of contact and application for state- and city-funded public benefits, including utility rate assistance, Basic Health Plan and other low-cost insurance, food assistance, and child care subsidies. Infant mortality outreach services will also be maintained. However, outreach contracts with Seattle Public Schools are reduced.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	513,313	572,074	315,959	323,858
Total	513,313	572,074	315,959	323,858

Health Care for the Homeless

Purpose Statement

The purpose of the Health Care for the Homeless Network is to provide education, technical assistance, and high quality contract management to our contractors, other homeless service providers, and the community so that the health status and quality of life of homeless people is improved.

Program Summary

There are no substantive program changes from the 2002 Adopted Budget.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	750,459	744,978	774,767	794,136
Total	750,459	744,978	774,767	794,136

Public Health

HIV/AIDS

Purpose Statement

The purpose of the HIV/AIDS program is to work with community partners to assess, prevent, and manage HIV infection in King County in order to stop the spread of HIV and improve the health of people living with HIV.

Program Summary

Reduce General Fund for AIDS prevention and education contracts and clinical services in 2004. Funding is replaced with other funds and services are not reduced. Services within this program are both "critical" and "enhanced". General Fund for the critical services portion of this program is phased out completely in 2004 as part of the Joint Executive Committee agreement between the City of Seattle and King County. The 2003-04 budget reflects that City of Seattle General Fund is used only for enhanced public health services for residents of Seattle; this is in compliance with the 1996 interlocal agreement between King County and the City of Seattle.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	1,026,687	920,238	946,419	661,448
Total	1,026,687	920,238	946,419	661,448

Immunizations

Purpose Statement

The purpose of the Immunizations program is to assure access to immunization services for King County residents and to provide technical support for health care providers in order to prevent disease in individuals and the spread of disease in the community.

Program Summary

General Fund for this program is reduced in 2003 and phased out completely in 2004 as part of the Joint Executive Committee agreement between the City of Seattle and King County. Immunizations are a critical service and funding critical public health services is King County's responsibility. The 2003-04 budget reflects that City of Seattle General Fund is used only for enhanced public health services for residents of Seattle; this is in compliance with the 1996 interlocal agreement between King County and the City of Seattle. Public Health has identified other revenue sources for this program; there are no service reductions as a result of this cut.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	384,807	362,762	234,456	0
Total	384,807	362,762	234,456	0

Interpretation Services

Purpose Statement

The purpose of the Interpretation Services program is to provide medically qualified interpreters to non- or limited-English speaking clients so that these clients have equal access to public health services.

Program Summary

Council reduces funding for Interpretation Services by 50% in 2003 and 100% in 2004. Interpretation services are mandated by federal law, and consequently are a core health service and not an optional local enhancement. By interlocal agreement, King County is responsible for core public health services and Seattle funding is for optional enhancements.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	496,869	469,144	243,913	0
Total	496,869	469,144	243,913	0

Methadone Vouchers

Purpose Statement

The purpose of the Methadone Vouchers program is to facilitate entry into methadone or other opiate replacement therapies for heroin-dependent residents of the City of Seattle in order to promote well-being and reduce social/economic costs and blood-borne illnesses.

Program Summary

Ordinance #120732, adopted February 19, 2002, adds funds for the methadone voucher program.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	0	0	327,498	335,685
Total	0	0	327,498	335,685

Oral Health

Purpose Statement

The purpose of the Oral Health program is to provide prevention and clinical dental services to high-risk populations so that dental disease is prevented and oral health is improved.

Program Summary

There are no substantive program changes from the 2002 Adopted Budget.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	921,580	705,014	733,503	751,841
Total	921,580	705,014	733,503	751,841

Public Health

Primary Care

Purpose Statement

The purpose of the Primary Care program is to provide accessible health care services for King County residents so that they can maintain and/or improve their health.

Program Summary

Other fund sources are being used to cover the costs of providing primary care in Public Health sites. The City will no longer fund primary care (routine medical health services) in Public Health clinics, except for maternity services. Other funding results from a contract change in 2001; increased revenue from managed care programs; and Washington State Department of Health and Human Services (DSHS) funding for refugee health screening.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	465,829	550,765	35,984	36,884
Total	465,829	550,765	35,984	36,884

Public Health Laboratory

Purpose Statement

The purpose of the Public Health Laboratory is to provide laboratory services for public health clinics, disease control programs, and research studies so that communicable diseases that threaten the health of the public can be prevented and controlled.

Program Summary

Eliminate General Fund support for costs of providing personal health laboratory services in Public Health clinics in Seattle. Funds will be replaced by patient-generated revenue.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	54,716	57,383	0	0
Total	54,716	57,383	0	0

School-Age Health

Purpose Statement

The purpose of the School-Age Health program is to provide leadership, technical assistance, and resources to community partners and youth so that the physical and mental health of youth is optimized.

Program Summary

Reduce program administration in the School-Age Health program by eight percent. Impacts will be in program administration and evaluation and timeliness of reports. These clinics are funded through the General Fund in this program and by the Families and Education Levy (appropriated in the Educational and Developmental Services Department in the budget).

Funding for the Rainier Beach Teen Clinic, the only teen health clinic not previously paid for by the Families and Education Levy, will be moved to the Families and Education Levy for the next three years.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	1,229,529	1,271,449	996,216	1,021,121
Total	1,229,529	1,271,449	996,216	1,021,121

Tuberculosis Control

Purpose Statement

The purpose of the Tuberculosis Control program is to provide treatment and preventive services to persons with, and those at risk of, tuberculosis so that the incidence of tuberculosis in Seattle is reduced.

Program Summary

There are no substantive program changes from the 2002 Adopted Budget.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	195,759	188,734	196,250	201,156
Total	195,759	188,734	196,250	201,156

Public Health

Women, Infants, and Children Program (WIC)

Purpose Statement

The purpose of the Women, Infants, and Children program (WIC) is to provide nutrition assessment, education, and supplemental food to low-income women and young children so they have adequate nutrition to grow and develop.

Program Summary

Public Health has generated significant savings to the General Fund through the adoption of a new service delivery model for the Women, Infants, and Children program. The new model, although untested, is not expected to reduce services.

Resources	2001 Actual	2002 Adopted	2003 Adopted	2004 Endorsed
General Subfund	1,083,207	402,376	0	0
Total	1,083,207	402,376	0	0