

Executive Summary: Health Impact Review of Community Health Centers' Capital Budget Request

Request to Partially Fund the Construction of Five Community Health Centers

Evidence indicates that funding these community health centers has potential to increase access to culturally and linguistically appropriate health care and improve health outcomes for a projected 42,300 underserved patients, thereby decreasing health disparities

CAPITAL BUDGET REQUEST INFORMATION

Sponsor: Representative Ryu

Summary of Request:

- Requests 25% of the funding needed to build five community health centers (CHCs)—a total funding request of \$14,700,000.
- Each project contact indicated ways their organization has secured or plans to secure the remaining funding to complete the project.
- These health centers include International Community Health Services in Shoreline, Yakima Valley Farmworkers Clinic in Toppenish, and Sea Mar Community Health Centers in Ocean Shores, Seattle, and Vancouver.
- Four of these projects would replace existing health centers with larger and more comprehensive facilities, while the fifth project would construct the first CHC in Shoreline.
- Combined, these five CHCs would provide care to a projected additional 42,300 patients once the clinics are operating at full capacity (which takes an average of three years).

HEALTH IMPACT REVIEW

Summary of Findings:

We have assumed that if these CHCs are provided with 25% of the funding for these projects, as requested, then the organizations would be able to secure the rest of the funding needed to complete these builds. This appears to be a strong assumption since each of the project contacts has indicated ways their organization has secured or plans to secure the remaining funding needed to complete the project.

This health impact review found the following evidence regarding this capital budget request:

- Very strong evidence that building these new CHCs and increasing patient capacity would likely increase access to care for underserved populations.
- Strong evidence that building these new CHCs and increasing patient capacity would likely increase access to culturally and linguistically appropriate care.
- Strong evidence that increasing access to care for underserved populations would likely improve health outcomes for these patient populations.
- Strong evidence that increasing access to culturally and linguistically appropriate services would likely improve health outcomes for diverse patient populations.
- Very strong evidence that improving health outcomes for underserved populations would likely decrease health disparities.

FULL REVIEW

For review methods, a logic model showing the potential pathways between the budget request and decreased health disparities, strength-of-evidence analyses, and citations of empirical evidence refer to the full health impact review: <http://sboh.wa.gov/Portals/7/Doc/HealthImpactReviews/HIR-2014-04-Capbudget.pdf>

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