
HOUSE BILL 2854

State of Washington

57th Legislature

2002 Regular Session

By Representatives Schual-Berke, Haigh, Morris, Barlean, O'Brien, Hurst, Hatfield, Anderson, Chase, Upthegrove and Rockefeller

Read first time 01/30/2002. Referred to Committee on Select Committee on Community Security.

1 AN ACT Relating to planning for public health emergencies arising
2 from terrorist acts; adding new sections to chapter 38.52 RCW; creating
3 a new section; providing an expiration date; and declaring an
4 emergency.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** Following the tragic events of September 11,
7 2001, the government's primary role in protecting the health, safety,
8 and well-being of its citizens has been underscored. The threat of
9 biological and chemical agents used for terrorism creates new and
10 emerging dangers for public health and raises the possibility of mass
11 civilian exposures and casualties. In addition, the September 11th
12 attacks demonstrated that other types of terrorist attacks may create
13 public health emergencies for victims, rescue personnel, government
14 agencies, and the public.

15 The legislature finds there is a need to focus on the prevention,
16 detection, management, and containment of public health emergencies
17 from infectious diseases. The legislature also finds that an effective
18 communications system is needed to ensure that health care providers
19 across the state can quickly and efficiently notify and communicate

1 with each other regarding signs and symptoms they may observe that may
2 be the earliest indications of bioterrorism and terrorist related
3 public health emergencies. The legislature further finds that there is
4 a need to coordinate planning among government agencies to ensure an
5 effective response to bioterrorism incidents or other terrorist
6 attacks.

7 NEW SECTION. **Sec. 2.** A new section is added to chapter 38.52 RCW
8 to read as follows:

9 (1) The emergency management council must supervise the development
10 of an internet-based communications system by which any licensed health
11 care professional within the state who has access to the internet can
12 post notices of and communicate with each other about observed signs
13 and symptoms that may be indicative of a bioterrorist event or of a
14 potential public health emergency related to bioterrorism or other type
15 of terrorist attack. The system must be capable of providing licensed
16 health care professionals links to educational materials on the
17 prevention, detection, management, and containment of public health
18 emergencies from infectious diseases and on specific types of
19 infectious diseases and biological agents. All licensed health care
20 providers in the state must be informed of the communication system,
21 and be provided instructions as to how to access and use the
22 communication system. The emergency management council may contract
23 with state or local agencies or private industry to develop the system
24 required by this subsection.

25 (2) Development of the system required by subsection (1) of this
26 section must be completed within four months of the effective date of
27 this section. The director must submit a report to the legislature no
28 later than December 1, 2002, on the development and implementation of
29 the system.

30 (3) The requirements of subsection (1) of this section may not be
31 construed to affect the requirements to report contagious diseases
32 according to RCW 70.05.110 and rules of the state board of health. The
33 communication system described in subsection (1) of this section may
34 not replace the communication system and protocols currently used to
35 report contagious diseases according to RCW 70.05.110 and rules of the
36 state board of health. The communication system described in
37 subsection (1) of this section must be developed to coordinate, when
38 appropriate, with the communication system currently used to report

1 contagious diseases according to RCW 70.05.110 and rules of the state
2 board of health.

3 NEW SECTION. **Sec. 3.** A new section is added to chapter 38.52 RCW
4 to read as follows:

5 (1) The emergency management council must prepare and the director
6 must approve a plan for responding to a public health emergency caused
7 by or related to bioterrorism or other types of terrorist attacks. The
8 plan shall include provisions for the following:

9 (a) A means of notifying and communicating with the population
10 during a state of public health emergency;

11 (b) Centralized coordination of resources, personnel, and services,
12 including coordination of responses by state, local, and federal
13 agencies, and integration of public health response into the incident
14 command structure developed under this chapter;

15 (c) Identification of actions that would be necessary to contain
16 the spread or transmission of any communicable disease that poses a
17 substantial risk of adverse health consequences to the public.
18 Specific actions to be identified include, but are not limited to:
19 Location, procurement, storage, transportation, maintenance, and
20 distribution of essential materials, including medical supplies, drugs,
21 vaccines, food, shelter, and beds; guidelines for vaccination of
22 personnel; guidelines for the safe and effective management of persons
23 isolated, quarantined, vaccinated, or treated during a state of public
24 health emergency; appropriate training and resources for law
25 enforcement personnel who may be called upon to support local public
26 health authorities; and procedures for tracking the source and outcomes
27 of infected persons;

28 (d) Identification and training of health care providers to
29 diagnose and treat persons with infectious diseases;

30 (e) Guidelines for treatment of persons and communities who have
31 been exposed to or who are infected with diseases or health conditions
32 caused by or related to bioterrorism or other types of terrorist
33 attacks, epidemic or pandemic disease, or novel or highly fatal
34 infectious agents, biological toxins, or chemical agents that pose a
35 substantial risk of a significant number of fatalities or incidents of
36 permanent or long-term disability. The guidelines should cover, but
37 not be limited to, anthrax, botulism, smallpox, plague, tularemia, and
38 viral hemorrhagic fevers;

1 (f) Ensuring that each county within the state identify:
2 (i) Sites where persons can be isolated or quarantined;
3 (ii) Sites where medical supplies, food, and other essentials can
4 be distributed to the population;
5 (iii) Sites where emergency workers can be housed or fed; and
6 (iv) Routes and means of transportation of people and materials;
7 (g) Taking into account language, cultural norms, values, and
8 traditions that may be relevant in effectively dealing with a public
9 health crisis;
10 (h) Distribution of this plan and guidelines to those who will be
11 responsible for implementing or acting on the plan in times of need;
12 and
13 (i) Other measures necessary to carry out effective response to a
14 public health emergency.
15 (2) The plan developed according to subsection (1) of this section
16 must be developed by the emergency management council, approved by the
17 director, and delivered to the governor and the legislature no later
18 than six months after the effective date of this section.
19 This section expires June 30, 2003.

20 NEW SECTION. **Sec. 4.** This act is necessary for the immediate
21 preservation of the public peace, health, or safety, or support of the
22 state government and its existing public institutions, and takes effect
23 immediately.

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