

# HOUSE BILL REPORT

## HB 1139

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**As Reported by House Committee On:**  
Health Care & Wellness

**Title:** An act relating to public notification of local health conditions.

**Brief Description:** Concerning public notification of local health conditions.

**Sponsors:** Representatives Roberts, Walsh, Green, Moscoso, Jenkins, Liias, Fitzgibbon, Morrell, Ryu, Riccelli and Santos.

**Brief History:**

**Committee Activity:**

Health Care & Wellness: 2/1/13, 2/8/13 [DPS].

**Brief Summary of Substitute Bill**

- Authorizes local health jurisdictions to adopt community health alert notification plans to establish methods for informing residents of significant health risks to the public.

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### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report:** The substitute bill be substituted therefor and the substitute bill do pass. Signed by 9 members: Representatives Cody, Chair; Jenkins, Vice Chair; Clibborn, Green, Moeller, Morrell, Riccelli, Tharinger and Van De Wege.

**Minority Report:** Do not pass. Signed by 7 members: Representatives Schmick, Ranking Minority Member; Hope, Assistant Ranking Minority Member; Angel, Harris, Manweller, Ross and Short.

**Staff:** Chris Blake (786-7392).

**Background:**

Notifiable conditions are diseases and conditions that the State Board of Health has determined are of such importance to protecting the public health that they must be reported to either a local health officer or the Department of Health (Department). Many notifiable

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conditions are communicable diseases that can be highly contagious. Health care providers, laboratory directors, and health care facilities all have a duty to report occurrences of these diseases and conditions according to timelines and means established by the Department.

The Department collects the data and disseminates them routinely in monthly and annual reports. The Department may conduct investigations or institute control measures in response to reports of notifiable conditions, or assist local health jurisdictions with such activities.

Local health jurisdictions are required to review reports of notifiable conditions and determine appropriate actions to respond to: (1) each reported or suspected case; (2) any disease or condition considered a threat to public health; and (3) each reported or suspected outbreak of disease.

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**Summary of Substitute Bill:**

The Department of Health must establish a temporary work group of public health officials, health communication experts, and organizations representing health care providers to provide recommendations for implementing best practices to communicate significant health risks to the public. The work group must report its findings to the Legislature by December 31, 2013.

Local boards of health may adopt community health alert notification plans to establish the methods to be used to keep residents in its local health jurisdiction informed of significant health risks to the public. If a local board of health adopts a community health alert notification plan, it must be made available on the local health jurisdiction's website.

**Substitute Bill Compared to Original Bill:**

The substitute bill eliminates the requirement that the Department of Health (Department) establish guidance for local health jurisdictions to use when developing community health alert notification plans related to notifiable conditions. The Department must establish a temporary work group to develop recommendations to the Legislature for implementing best practices to communicate significant health risks to the public.

The substitute bill eliminates the mandate that local boards of health adopt community health alert notification plans related to notifiable conditions and makes them permissive and related to significant health risks to the public.

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**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date of Substitute Bill:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.

**Staff Summary of Public Testimony:**

(In support) Younger Americans die earlier and live in poorer health than their counterparts in other countries. This bill tries to bring more information and awareness into communities about health status. This bill can generate more conversation and personal and community response for improving health. This will warn people about potentially fatal diseases before people die from them. This will help more people get immunized so if another epidemic strikes it will end quicker and fewer people will die. Over 90 percent of all adults are not vaccinated against whooping cough. Nobody is responsible for warning the public in the case of an epidemic. Communications tend to be limited to health care providers and schools, but not the general public. The only way to get the message about epidemics to everybody is through a postcard. This bill will create a plan for communicating to the public when an epidemic has occurred to help members of the community to protect themselves and end the epidemic sooner. Health officials are collecting the health data and the public has the right to know when there is an epidemic.

(In support with concerns) Monitoring and responding to communicable disease is one of the critical roles of the public health network and that includes letting people know when there is a serious public health risk in their communities. During the recent pertussis outbreak, state and local health agencies used advertising and various other methods of informing the public about the outbreak with the result that twice as many adults were vaccinated as the prior year. The intent of the bill to develop a strategy to inform people of what is happening in their communities is good. The bill should use a risk-based approach by focusing on communicable diseases rather than all notifiable conditions. Focusing on communicable diseases that present an imminent risk to the public will focus on the most serious diseases and promote the use of professional judgment to target messages. The bill should not focus on incidents. While the intent of the bill is good, there are concerns with the scope and some of the bill's language. Public health must be able to treat each public health event as a unique situation.

(Opposed) None.

**Persons Testifying:** (In support) Representative Roberts, prime sponsor; Quinton Porter; and Kennetha Scott.

(In support with concerns) Jennifer Tebaldi, Department of Health; and Brad Banks, Washington State Association of Local Public Health Officials.

**Persons Signed In To Testify But Not Testifying:** None.