# HOUSE BILL REPORT SHB 1303

# As Passed Legislature

**Title**: An act relating to child mortality review.

**Brief Description**: Collecting child mortality reviews into a database.

**Sponsors**: House Committee on Health Care & Wellness (originally sponsored by Representatives Moeller, Green and Roberts).

#### **Brief History:**

# **Committee Activity:**

Health Care & Wellness: 2/5/09, 2/6/09 [DPS];

Health & Human Services Appropriations: 2/25/09 [DPS(HCW)].

# Floor Activity

Passed House: 3/5/09, 97-0. Passed Senate: 4/9/09, 47-0.

Passed Legislature.

# **Brief Summary of Substitute Bill**

• Requires the Department of Health to assist local health departments to collect the reports of child mortality reviews and enter the reports into a database.

#### HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

**Majority Report**: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 10 members: Representatives Cody, Chair; Ericksen, Ranking Minority Member; Bailey, Campbell, Clibborn, Green, Kelley, Moeller, Morrell and Pedersen.

Staff: Jim Morishima (786-7191)

# HOUSE COMMITTEE ON HEALTH & HUMAN SERVICES APPROPRIATIONS

**Majority Report**: The substitute bill by Committee on Health Care & Wellness be substituted therefor and the substitute bill do pass. Signed by 15 members: Representatives Pettigrew, Chair; Seaquist, Vice Chair; Schmick, Ranking Minority Member; Alexander,

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Assistant Ranking Minority Member; Appleton, Cody, Dickerson, Ericksen, Johnson, Miloscia, Morrell, O'Brien, Roberts, Walsh and Wood.

Staff: Chris Blake (786-7392)

# Background:

Local health departments are authorized to conduct child mortality reviews. A child mortality review is a process for examining factors that contribute to deaths of children less than 18 years of age. The process may include:

- a systematic review of medical, clinical, and hospital records;
- home interviews of parents and caretakers of children who have died;
- analysis of individual case information; and
- review of the information by a team of professionals in order to identify modifiable medical, socioeconomic, public health, behavioral, administrative, educational, and environmental factors associated with the death.

Currently, the Department of Health (DOH) collects child mortality reviews and enters them into a database and provides technical assistance relating to child mortality reviews. To do this, the DOH uses funding from the federal Maternal and Child Health Block Grant, one of the purposes of which is to reduce infant mortality.

# **Summary of Substitute Bill:**

The Department of Health (DOH) must assist local health departments to collect the reports of any child mortality reviews and assist the departments to enter the reviews into a database. The DOH must respond to any requests for information from the database, to the extent the information is not protected health information. The DOH must also provide technical assistance to local health departments and child death review coordinators and encourage communication among child death review teams. The DOH must collect these activities using only federal and private funding.

**Appropriation**: None.

**Fiscal Note**: Not requested.

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

# **Staff Summary of Public Testimony** (Health Care & Wellness):

(In support) This bill is trying to save a program in a fiscally-neutral manner. Forensics for children can be complex. Washington used to be one of the leaders in this process and we must be again.

(Neutral) Child mortality reviews help keep kids safe by identifying preventable causes of death. Currently, Washington does not have a coordinated death review process. For

example, under the current system it is impossible to compare deaths that occur within and without the welfare system.

(Opposed) None.

**Staff Summary of Public Testimony** (Health & Human Services Appropriations):

(In support) The Child Death Review Program has great value to the state and should be preserved. Washington had been a national leader in conducting these reviews.

(Opposed) None.

**Persons Testifying** (Health Care & Wellness): (In support) Representative Moeller, prime sponsor; and Deborah Robinson, Northwest Infant Survival Alliance – SIDS Foundation of Washington.

(Neutral) Mary Meinig, Children and Family Ombudsman.

**Persons Testifying** (Health & Human Services Appropriations): Representative Moller, prime sponsor.

Persons Signed In To Testify But Not Testifying (Health Care & Wellness): None.

**Persons Signed In To Testify But Not Testifying** (Health & Human Services Appropriations): None.

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