

SENATE BILL REPORT

SB 5614

As of February 11, 1997

Title: An act relating to incorporating environmental health into the public health improvement plan.

Brief Description: Incorporating environmental health into the public health improvement plan.

Sponsors: Senators Franklin, Winsley, Fraser, Kline, Fairley, Jacobsen, Brown, Patterson, Kohl, Heavey, Prentice, McAuliffe, Haugen, Wood, Thibaudeau, Bauer, Rasmussen, Spanel and Goings.

Brief History:

Committee Activity: Health & Long-Term Care: 2/11/97.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Don Sloma (786-7319)

Background: In 1995, the state Department of Ecology completed A Study on Environmental Equity in Washington State with funds appropriated by the Legislature for the purpose. The study looked at the proportional distribution of some 900 facilities and contaminated sites around the state in relation to communities of color and low-income.

The study found a disproportionately greater number of facilities in low-income and minority areas. Toxic chemical releases permitted in low-income and minority areas were also disproportionately high, although not as consistently. The study found an even greater level of disproportionate distribution on a county-by-county basis than when the data were viewed statewide.

The study did not measure potential health risks in relation to its findings, owing to a lack of resources for such an analysis. Instead, the study recommended follow-up analysis, limited case studies at the local level, data enhancements and increased coordination among many state and local groups as ways to determine the significance of its findings for health and environmental policy development.

Under current law, the state Department of Health, local health jurisdictions and others must participate in a series of statutorily specified activities to produce a biennial public health improvement plan (PHIP). In conjunction with local health jurisdictions, the PHIP must identify specific system capacity improvements and key health outcomes to be achieved. The state must enter into performance based contracts with local health jurisdictions to improve local capacity, and to make measurable progress toward achieving specific health outcomes identified according to a prescribed local planning process. In addition, the PHIP must evaluate the public health system's progress biennially toward enhancing capacity and improving health outcomes.

Summary of Bill: The contents of the PHIP are expanded to include a summary of federal, state and local data sources related to personal and environmental health, and recommendations to improve interagency coordination and increased public access to health information.

Activities which must be considered in developing the PHIP are expanded to include efforts to assess, monitor, and reduce or eliminate certain environmental health risks.

Community health assessments, which currently serve as the basis for performance based state contracts with local health jurisdictions, are expanded to include assessments of the demographics, health status, health problems, risk behaviors and health system capacity within the local health jurisdiction, an assessment of community environmental health risks and a plan to reduce these risks, and a program of public outreach to involve the community in the overall planning effort.

The state Department of Health's current duty to evaluate the public health system, biennially within the PHIP, is expanded to include an evaluation of the effectiveness of local health jurisdictions at addressing both personal and environmental health risks.

Appropriation: None.

Fiscal Note: Requested on February 5, 1997.

Effective Date: Ninety days after adjournment of session in which bill is passed.