
SENATE BILL 5353

State of Washington

65th Legislature

2017 Regular Session

By Senators Rivers, Cleveland, and Frockt; by request of Department of Health

Read first time 01/20/17. Referred to Committee on Health Care.

1 AN ACT Relating to foundational public health services; amending
2 RCW 43.70.512, 43.70.514, and 43.70.516; adding a new section to
3 chapter 43.70 RCW; and repealing RCW 43.70.520.

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

5 NEW SECTION. **Sec. 1.** A new section is added to chapter 43.70
6 RCW to read as follows:

7 The core public health services account is created in the state
8 treasury. All receipts from moneys appropriated for foundational
9 public health services must be deposited into the account. Moneys in
10 the account may be spent only after appropriation. Expenditures from
11 the account may only be used for foundational public health services.
12 Distributions from the account shall be made by the department under
13 allocation plans mutually agreed to by the department and local
14 health jurisdictions, and shall not be subject to any administrative
15 fees, expenses, or other deductions by the department.

16 **Sec. 2.** RCW 43.70.512 and 2007 c 259 s 60 are each amended to
17 read as follows:

18 (1) Protecting the public's health across the state is a
19 fundamental responsibility of the state which is accomplished in
20 collaboration with local health jurisdictions and sovereign tribal

1 nations. With any ((new)) state funding of the public health system
2 ((as appropriated for the purposes of sections 60 through 65 of this
3 act)), the state expects that measurable benefits will be realized to
4 the health of the residents of Washington. A transparent process that
5 shows the impact of increased public health spending on performance
6 measures related to the health outcomes in subsection (2) of this
7 section is of great value to the state and its residents. In
8 addition, a well-funded governmental public health system is expected
9 to become a more integral part of the state's emergency preparedness
10 system.

11 (2) Subject to the availability of amounts appropriated for the
12 purposes of ((sections 60 through 65 of)) this act, ((distributions
13 to local health jurisdictions)) the governmental public health system
14 shall deliver ((the following)) measurable outcomes((:

15 (a) ~~Create a disease response system capable of responding at all~~
16 ~~times;~~

17 (b) ~~Stop the increase in, and reduce, sexually transmitted~~
18 ~~disease rates;~~

19 (c) ~~Reduce vaccine preventable diseases;~~

20 (d) ~~Build capacity to quickly contain disease outbreaks;~~

21 (e) ~~Decrease childhood and adult obesity and types I and II~~
22 ~~diabetes rates, and resulting kidney failure and dialysis;~~

23 (f) ~~Increase childhood immunization rates;~~

24 (g) ~~Improve birth outcomes and decrease child abuse;~~

25 (h) ~~Reduce animal to human disease rates; and~~

26 (i) ~~Monitor and protect drinking water across jurisdictional~~
27 ~~boundaries.~~

28 (3) ~~Benchmarks for these outcomes shall be drawn from the~~
29 ~~national healthy people 2010 goals, other reliable data sets, and any~~
30 ~~subsequent national goals)) related to core public health services
31 and essential capabilities that comprise foundational public health
32 services.~~

33 **Sec. 3.** RCW 43.70.514 and 2007 c 259 s 61 are each amended to
34 read as follows:

35 The definitions in this section apply throughout ((sections 60
36 through 65 of this act)) this chapter unless the context clearly
37 requires otherwise.

38 (1) "Core programs" means public health programs needed in every
39 community in order to protect people's health including:

1 (a) Control of communicable disease and other notifiable
2 conditions;

3 (b) Chronic disease and injury prevention;

4 (c) Environmental public health;

5 (d) Maternal, child, and family health;

6 (e) Access to and linkage with medical, oral, and behavioral
7 health care services; and

8 (f) Vital records.

9 (2) "Core public health ((functions)) services of statewide
10 significance" or "foundational public health ((functions)) services"
11 means ((health services that:

12 (a) Address: Communicable disease prevention and response;
13 preparation for, and response to, public health emergencies caused by
14 pandemic disease, earthquake, flood, or terrorism; prevention and
15 management of chronic diseases and disabilities; promotion of healthy
16 families and the development of children; assessment of local health
17 conditions, risks, and trends, and evaluation of the effectiveness of
18 intervention efforts; and environmental health concerns;

19 (b) Promote uniformity in the public health activities conducted
20 by all local health jurisdictions in the public health system,
21 increase the overall strength of the public health system, or apply
22 to broad public health efforts; and

23 (c) If left neglected or inadequately addressed, are reasonably
24 likely to have a significant adverse impact on counties beyond the
25 borders of the local health jurisdiction)) essential capabilities and
26 core programs that must be present in every community through the
27 governmental public health system to effectively and efficiently
28 protect and promote healthy individuals, families, and communities
29 throughout Washington and:

30 (a) Are population-based prevention services or individual
31 interventions that have significant population health implications;

32 (b) Require a consistent and uniform level of services throughout
33 all communities in the state to protect the population;

34 (c) Have governmental public health as the only or primary
35 service provider; or

36 (d) Provide the necessary organizational capabilities to support
37 program services.

38 (3) "Essential capabilities" means the knowledge, skill, ability,
39 and systems infrastructure necessary to support effective and
40 efficient governmental public health services including:

1 (a) Assessing the health of populations through surveillance and
2 epidemiology;

3 (b) Public health emergency planning;

4 (c) Communication;

5 (d) Policy development and support;

6 (e) Community partnership development; and

7 (f) Business competencies.

8 (4) "Governmental public health system" means the state
9 department of health, state board of health, local public health
10 agencies and boards, and the sovereign tribal nations of Washington.

11 ~~((+2))~~ (5) "Local health jurisdiction" or "jurisdiction" means a
12 county board of health organized under chapter 70.05 RCW, a health
13 district organized under chapter 70.46 RCW, or a combined city and
14 county health department organized under chapter 70.08 RCW.

15 (6) "Shared services" means a systematic sharing of resources and
16 functions among state and local governmental public health entities
17 and sovereign tribal nations to increase capacity and improve
18 efficiency and effectiveness.

19 **Sec. 4.** RCW 43.70.516 and 2007 c 259 s 62 are each amended to
20 read as follows:

21 ~~(1) ((The department shall accomplish the tasks included in~~
22 ~~subsection (2) of this section by utilizing the expertise of varied~~
23 ~~interests, as provided in this subsection.~~

24 ~~(a) In addition to the perspectives of local health~~
25 ~~jurisdictions, the state board of health, the Washington health~~
26 ~~foundation, and department staff that are currently engaged in~~
27 ~~development of the public health services improvement plan under RCW~~
28 ~~43.70.520, the secretary shall actively engage:~~

29 ~~(i) Individuals or entities with expertise in the development of~~
30 ~~performance measures, accountability and systems management, such as~~
31 ~~the University of Washington school of public health and community~~
32 ~~medicine, and experts in the development of evidence-based medical~~
33 ~~guidelines or public health practice guidelines; and~~

34 ~~(ii) Individuals or entities who will be impacted by performance~~
35 ~~measures developed under this section and have relevant expertise,~~
36 ~~such as community clinics, public health nurses, large employers,~~
37 ~~tribal health providers, family planning providers, and physicians.~~

38 ~~(b) In developing the performance measures, consideration shall~~
39 ~~be given to levels of performance necessary to promote uniformity in~~

1 core public health functions of statewide significance among all
2 local health jurisdictions, best scientific evidence, national
3 standards of performance, and innovations in public health practice.
4 The performance measures shall be developed to meet the goals and
5 outcomes in RCW 43.70.512. The office of the state auditor shall
6 provide advice and consultation to the committee to assist in the
7 development of effective performance measures and health status
8 indicators.

9 (c) On or before November 1, 2007, the experts assembled under
10 this section shall provide recommendations to the secretary related
11 to the activities and services that qualify as core public health
12 functions of statewide significance and performance measures. The
13 secretary shall provide written justification for any departure from
14 the recommendations.

15 (2) By January 1, 2008, the department shall:

16 (a) Adopt a prioritized list of activities and services performed
17 by local health jurisdictions that qualify as core public health
18 functions of statewide significance as defined in RCW 43.70.514; and

19 (b) Adopt appropriate performance measures with the intent of
20 improving health status indicators applicable to the core public
21 health functions of statewide significance that local health
22 jurisdictions must provide.

23 (3) The secretary may revise the list of activities and the
24 performance measures in future years as appropriate. Prior to
25 modifying either the list or the performance measures, the secretary
26 must provide a written explanation of the rationale for such changes.

27 (4) The department and the local health jurisdictions shall abide
28 by the prioritized list of activities and services and the
29 performance measures developed pursuant to this section.

30 (5) The department, in consultation with representatives of
31 county governments, shall provide local jurisdictions with financial
32 incentives to encourage and increase local investments in core public
33 health functions. The local jurisdictions shall not supplant existing
34 local funding with such state-incented resources.)) Within the funds
35 appropriated, local health jurisdictions and the department shall
36 expand delivery of shared services to modernize and streamline the
37 governmental public health system. This expansion must begin with a
38 shared services project in the following two foundational public
39 health services:

40 (a) Epidemiology assessment; and

1 (b) Communicable disease monitoring and response.

2 (2) By October 1, 2018, the department, in consultation with
3 governmental public health systems and the entities described in (b)
4 of this subsection, shall develop a governmental public health
5 improvement plan.

6 (a) The plan shall include, at minimum:

7 (i) Activities and services that qualify as foundational public
8 health services as defined in RCW 43.70.514;

9 (ii) An assessment of the current capacity, unmet needs, and
10 current service delivery models to provide foundational public health
11 services;

12 (iii) Statewide models for shared services and a plan for further
13 implementation of shared services;

14 (iv) A comprehensive accountability structure including
15 appropriate performance measures;

16 (v) The cost of providing foundational public health services
17 statewide including the cost of improved service delivery models
18 identified in (a)(iii) of this subsection (2);

19 (vi) A funding allocation model to ensure foundational public
20 health services are provided across the state; and

21 (vii) Recommended schedules for periodic updates to the
22 definitions and cost estimates, evaluation of the effectiveness of
23 the governmental public health system, assessment of the degree to
24 which the governmental public health system is providing foundational
25 public health services, and reporting progress made by the state and
26 each local health jurisdiction toward improving health outcomes.

27 (b) The department shall develop the governmental public health
28 improvement plan in consultation with the expertise of varied
29 interests, including but not limited to:

30 (i) Local health jurisdictions and the state board of health;

31 (ii) The Washington state association of local public health
32 officials;

33 (iii) Individuals or entities with expertise in the development
34 of performance measures, accountability, and systems management, and
35 experts in the development of evidence-based public health or medical
36 practice guidelines; and

37 (iv) Individuals or entities who will be impacted by performance
38 measures developed under this section and have relevant expertise,
39 such as community clinics, public health nurses, large employers, the

1 sovereign tribal nations of Washington, other state agencies, health
2 services providers, and citizens concerned about public health.

3 (c) The performance measures must be developed to ensure
4 foundational public health services are available statewide and to
5 meet the goals and outcomes identified in RCW 43.70.512. The measures
6 must:

7 (i) Reflect best scientific evidence, national standards of
8 performance, and innovations in governmental public health;

9 (ii) Establish the levels of performance needed to achieve core
10 public health services delivery for each local health jurisdiction
11 and the department; and

12 (iii) Describe the resources necessary to meet the performance
13 levels.

14 NEW SECTION. Sec. 5. RCW 43.70.520 (Public health services
15 improvement plan—Performance measures) and 2007 c 259 s 64 & 1993 c
16 492 s 467 are each repealed.

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