

SENATE BILL REPORT

SB 5650

AS REPORTED BY COMMITTEE ON WAYS & MEANS, MARCH 11, 1991

Brief Description: Establishing pilot local community outreach for health programs.

SPONSORS: Senators West, Wojahn, L. Smith, Niemi, Johnson, L. Kreidler, Amondson, Barr, Sutherland and Bauer.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5650 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators West, Chairman; L. Smith, Vice Chairman; Amondson, Johnson, L. Kreidler, Niemi, and Wojahn.

Staff: Suzanne Brown (786-7483)

Hearing Dates: February 20, 1991; March 6, 1991

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Substitute Senate Bill No. 5650 as recommended by Committee on Health & Long-Term Care be substituted therefor, and the substitute bill do pass.

Signed by Senators McDonald, Chairman; Craswell, Vice Chairman; Bailey, Bauer, Bluechel, Cantu, Gaspard, Hayner, Johnson, L. Kreidler, Matson, Metcalf, Murray, Newhouse, Niemi, Owen, Rinehart, Saling, L. Smith, Talmadge, West, Williams, and Wojahn.

Staff: Karen Hayes (786-7711)

Hearing Dates: March 8, 1991; March 11, 1991

BACKGROUND:

Community-based outreach programs staffed by lay community members are receiving considerable local, national and international attention. Some national and international public health experts report that the most successful outreach and health promotion programs are initiated and conducted by community members. In addition, outreach programs using indigenous community members have demonstrated improvements in health outcomes among targeted high-risk populations.

Indigenous community outreach programs among high-risk pregnant and parenting women in Cleveland, Ohio and South Carolina have led to improvements in infant mortality rates, low birth weight rates and prenatal and well-baby visit attendance. The "Gatekeeper" program, a community volunteer casefinding program in Spokane County, has improved access to

multi-disciplinary services for isolated elderly persons at risk for mental illness and institutionalization.

Washington's current outreach and casefinding programs focus primarily on multimedia campaigns, telephone hotlines and professional casefinding and referrals. These programs may fail to address the access barriers experienced by many community members including low income individuals, substance abusers, ethnic minorities, teens, and other individuals without family or informal supports.

SUMMARY:

Legislative intent is to empower communities to promote health and prevent illness and injury among high-risk groups through active outreach programs using indigenous, non-professional community members and resources.

The Department of Health must assist interested local health departments to establish pilot community outreach for health projects using indigenous, non-professional community volunteers. Local health departments, in collaboration with local government and community-based organizations, must establish key local health objectives. These groups must also develop and coordinate community outreach for health projects targeted toward geographic areas or population groups identified as high-risk according to established key local health objectives. These outreach projects must focus on direct contact and may provide education, referral or other assistance necessary to facilitate access to public or private community resources.

The Department of Health allocates grants for community outreach for health programs based on their potential for health improvement and community participation. Grant applications must provide a 50 percent match of funds or in-kind public or private resources including volunteer hours.

The bill contains a null and void clause.

EFFECT OF PROPOSED SUBSTITUTE:

Legislative intent is revised to promote health and prevent illness and injury among high-risk pregnant and parenting women and their families.

The establishment of key local health objectives is removed from the legislation. Local health departments, in collaboration with specified parties, must develop and coordinate community outreach for health projects targeted toward geographic areas and population groups experiencing substantial health risks among pregnant and parenting women and their families.

Appropriation: none

Revenue: none

Fiscal Note: available

TESTIMONY FOR:

Considerable expert evidence exists supporting the preventive focus of community outreach workers. Outreach workers, whether paid or volunteer staff, provide an important link to health and social services among high risk groups.

TESTIMONY AGAINST:

The Department of Health supports the concept of the bill. However, the Department of Health cannot support the bill because it is not included in the Governor's proposed 1991-93 biennium budget.

TESTIFIED (Health & Long-Term Care): Margaret Casey, Children's Budget Coalition (pro); Kristine Gebbie, Department of Health; Gladys Burns, Washington Association Child Abuse Councils (pro)

TESTIFIED (Ways & Means): Margaret Casey, Children's Budget Coalition (pro)