
ENGROSSED SUBSTITUTE SENATE BILL 5253

Passed Legislature - 1995 Regular Session

State of Washington 54th Legislature 1995 Regular Session

By Senate Committee on Health & Long-Term Care (originally sponsored by Senators Quigley, Moyer, Hargrove and C. Anderson; by request of Department of Health)

Read first time 02/09/95.

1 AN ACT Relating to implementation of the public health improvement
2 plan; amending RCW 41.05.240, 70.05.030, 70.05.035, 70.05.050,
3 70.08.040, 70.46.020, 43.72.902, and 43.72.915; adding a new section to
4 chapter 70.46 RCW; adding new sections to chapter 43.70 RCW;
5 recodifying RCW 41.05.240; repealing 1993 c 492 s 244; repealing 1993
6 c 492 s 255; repealing 1993 c 492 s 256 (uncodified); providing
7 effective dates; and declaring an emergency.

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

9 NEW SECTION. **Sec. 1.** The legislature declares its intent to
10 implement the recommendations of the public health improvement plan by
11 initiating a program to provide the public health system with the
12 necessary capacity to improve the health outcomes of the population of
13 Washington state and establishing the methodology by which improvement
14 in the health outcomes and delivery of public health activities will be
15 assessed.

16 NEW SECTION. **Sec. 2.** Unless the context clearly requires
17 otherwise, the definitions in this section apply throughout sections 1
18 through 3 of this act.

1 (1) "Capacity" means actions that public health jurisdictions must
2 do as part of ongoing daily operations to adequately protect and
3 promote health and prevent disease, injury, and premature death. The
4 public health improvement plan identifies capacity necessary for
5 assessment, policy development, administration, prevention, including
6 promotion and protection, and access and quality.

7 (2) "Department" means the department of health.

8 (3) "Local health jurisdiction" means the local health agency,
9 either county or multicounty, operated by local government, with
10 oversight and direction from a local board of health, that provides
11 public health services throughout a defined geographic area.

12 (4) "Health outcomes" means long-term objectives that define
13 optimal, measurable, future levels of health status, maximum acceptable
14 levels of disease, injury, or dysfunction, or prevalence of risk
15 factors in areas such as improving the rate of immunizations for
16 infants and children to ninety percent and controlling and reducing the
17 spread of tuberculosis and that are stated in the public health
18 improvement plan.

19 (5) "Public health improvement plan," also known as the public
20 health services improvement plan, means the public health services
21 improvement plan established under RCW 43.70.520, developed by the
22 department, in consultation with local health departments and
23 districts, the state board of health, the health services commission,
24 area Indian health services, and other state agencies, health services
25 providers, and residents concerned about public health, to provide a
26 detailed accounting of deficits in the core functions of assessment,
27 policy development, and assurance of the current public health system,
28 how additional public health funding would be used, and to describe the
29 benefits expected from expanded expenditures.

30 (6) "Public health" means activities that society does collectively
31 to assure the conditions in which people can be healthy. This includes
32 organized community efforts to prevent, identify, preempt, and counter
33 threats to the public's health.

34 (7) "Public health system" means the department, the state board of
35 health, and local health jurisdictions.

36 NEW SECTION. **Sec. 3.** The primary responsibility of the public
37 health system, is to take those actions necessary to protect, promote,

1 and improve the health of the population. In order to accomplish this,
2 the department shall:

3 (1) Identify, as part of the public health improvement plan, the
4 key health outcomes sought for the population and the capacity needed
5 by the public health system to fulfill its responsibilities in
6 improving health outcomes.

7 (2)(a) Distribute state funds that, in conjunction with local
8 revenues, are intended to improve the capacity of the public health
9 system. The distribution methodology shall encourage system-wide
10 effectiveness and efficiency and provide local health jurisdictions
11 with the flexibility both to determine governance structures and
12 address their unique needs.

13 (b) Enter into with each local health jurisdiction performance-
14 based contracts that establish clear measures of the degree to which
15 the local health jurisdiction is attaining the capacity necessary to
16 improve health outcomes. The contracts negotiated between the local
17 health jurisdictions and the department of health must identify the
18 specific measurable progress that local health jurisdictions will make
19 toward achieving health outcomes. A community assessment conducted by
20 the local health jurisdiction according to the public health
21 improvement plan, which shall include the results of the comprehensive
22 plan prepared according to RCW 70.190.130, will be used as the basis
23 for identifying the health outcomes. The contracts shall include
24 provisions to encourage collaboration among local health jurisdictions.
25 State funds shall be used solely to expand and complement, but not to
26 supplant city and county government support for public health programs.

27 (3) Develop criteria to assess the degree to which capacity is
28 being achieved and ensure compliance by public health jurisdictions.

29 (4) Adopt rules necessary to carry out the purposes of chapter
30 . . . , Laws of 1995 (this act).

31 (5) Biennially, within the public health improvement plan, evaluate
32 the effectiveness of the public health system, assess the degree to
33 which the public health system is attaining the capacity to improve the
34 status of the public's health, and report progress made by each local
35 health jurisdiction toward improving health outcomes.

36 **Sec. 4.** RCW 41.05.240 and 1993 c 492 s 468 are each amended to
37 read as follows:

1 Consistent with funds appropriated specifically for this purpose,
2 the ((authority)) department shall establish in conjunction with the
3 area Indian health services system and providers an advisory group
4 comprised of Indian and non-Indian health care facilities and providers
5 to formulate an American Indian health care delivery plan. The plan
6 shall include:

7 (1) Recommendations to providers and facilities methods for
8 coordinating and joint venturing with the Indian health services for
9 service delivery;

10 (2) Methods to improve American Indian-specific health programming;
11 and

12 (3) Creation of co-funding recommendations and opportunities for
13 the unmet health services programming needs of American Indians.

14 NEW SECTION. **Sec. 5.** RCW 41.05.240 shall be recodified as a new
15 section in chapter 43.70 RCW.

16 **Sec. 6.** RCW 70.05.030 and 1993 c 492 s 235 are each amended to
17 read as follows:

18 In counties without a home rule charter, the board of county
19 commissioners shall constitute the local board of health, unless the
20 county is part of a health district pursuant to chapter 70.46 RCW. The
21 jurisdiction of the local board of health shall be coextensive with the
22 boundaries of said county. The board of county commissioners may, at
23 its discretion, adopt an ordinance expanding the size and composition
24 of the board of health to include elected officials from cities and
25 towns and persons other than elected officials as members so long as
26 persons other than elected officials do not constitute a majority. An
27 ordinance adopted under this section shall include provisions for the
28 appointment, term, and compensation, or reimbursement of expenses.

29 **Sec. 7.** RCW 70.05.035 and 1993 c 492 s 237 are each amended to
30 read as follows:

31 In counties with a home rule charter, the county legislative
32 authority shall establish a local board of health and may prescribe the
33 membership and selection process for the board. The county legislative
34 authority may appoint to the board of health elected officials from
35 cities and towns and persons other than elected officials as members so
36 long as persons other than elected officials do not constitute a

1 majority. The county legislative authority shall specify the
2 appointment, term, and compensation or reimbursement of expenses. The
3 jurisdiction of the local board of health shall be coextensive with the
4 boundaries of the county. The local health officer, as described in
5 RCW 70.05.050, shall be appointed by the official designated under the
6 provisions of the county charter. The same official designated under
7 the provisions of the county charter may appoint an administrative
8 officer, as described in RCW 70.05.045.

9 **Sec. 8.** RCW 70.05.050 and 1993 c 492 s 238 are each amended to
10 read as follows:

11 The local health officer shall be an experienced physician licensed
12 to practice medicine and surgery or osteopathy and surgery in this
13 state and who is qualified or provisionally qualified in accordance
14 with the standards prescribed in RCW 70.05.051 through 70.05.055 to
15 hold the office of local health officer. No term of office shall be
16 established for the local health officer but the local health officer
17 shall not be removed until after notice is given, and an opportunity
18 for a hearing before the board or official responsible for his or her
19 appointment under this section as to the reason for his or her removal.
20 The local health officer shall act as executive secretary to, and
21 administrative officer for the local board of health and shall also be
22 empowered to employ such technical and other personnel as approved by
23 the local board of health except where the local board of health has
24 appointed an administrative officer under RCW 70.05.040. The local
25 health officer shall be paid such salary and allowed such expenses as
26 shall be determined by the local board of health. In home rule
27 counties that are part of a health district under this chapter and
28 chapter 70.46 RCW the local health officer and administrative officer
29 shall be appointed by the local board of health.

30 **Sec. 9.** RCW 70.08.040 and 1985 c 124 s 4 are each amended to read
31 as follows:

32 Notwithstanding any provisions to the contrary contained in any
33 city or county charter, where a combined department is established
34 under this chapter, the director of public health under this chapter
35 shall be appointed by the county executive of the county and the mayor
36 of the city (~~for a term of four years and until a successor is~~
37 ~~appointed and confirmed.~~ The director of public health may be

1 reappointed by the county executive of the county and the mayor of the
2 city for additional four year terms)). The appointment shall be
3 effective only upon a majority vote confirmation of the legislative
4 authority of the county and the legislative authority of the city. The
5 director may be removed by the county executive of the county, after
6 consultation with the mayor of the city, upon filing a statement of
7 reasons therefor with the legislative authorities of the county and the
8 city.

9 **Sec. 10.** RCW 70.46.020 and 1993 c 492 s 247 are each amended to
10 read as follows:

11 Health districts consisting of two or more counties may be created
12 whenever two or more boards of county commissioners shall by resolution
13 establish a district for such purpose. Such a district shall consist
14 of all the area of the combined counties. The district board of health
15 of such a district shall consist of not less than five members for
16 districts of two counties and seven members for districts of more than
17 two counties, including two representatives from each county who are
18 members of the board of county commissioners and who are appointed by
19 the board of county commissioners of each county within the district,
20 and shall have a jurisdiction coextensive with the combined boundaries.
21 The boards of county commissioners may by resolution or ordinance
22 provide for elected officials from cities and towns and persons other
23 than elected officials as members of the district board of health so
24 long as persons other than elected officials do not constitute a
25 majority. A resolution or ordinance adopted under this section must
26 specify the provisions for the appointment, term, and compensation, or
27 reimbursement of expenses. Any multicounty health district existing on
28 the effective date of this act shall continue in existence unless and
29 until changed by affirmative action of all boards of county
30 commissioners or one or more counties withdraws pursuant to RCW
31 70.46.090.

32 At the first meeting of a district board of health the members
33 shall elect a chair to serve for a period of one year.

34 NEW SECTION. **Sec. 11.** A new section is added to chapter 70.46 RCW
35 to read as follows:

36 A health district to consist of one county may be created whenever
37 the county legislative authority of the county shall pass a resolution

1 or ordinance to organize such a health district under chapter 70.05 RCW
2 and this chapter.

3 The resolution or ordinance may specify the membership,
4 representation on the district health board, or other matters relative
5 to the formation or operation of the health district. The county
6 legislative authority may appoint elected officials from cities and
7 towns and persons other than elected officials as members of the health
8 district board so long as persons other than elected officials do not
9 constitute a majority.

10 Any single county health district existing on the effective date of
11 this act shall continue in existence unless and until changed by
12 affirmative action of the county legislative authority.

13 **Sec. 12.** RCW 43.72.902 and 1993 c 492 s 470 are each amended to
14 read as follows:

15 The public health services account is created in the state
16 treasury. Moneys in the account may be spent only after appropriation.
17 Moneys in the account may be expended only for maintaining and
18 improving the health of Washington residents through the public health
19 system. For purposes of this section, the public health system shall
20 consist of the state board of health, the state department of health,
21 and local health departments and districts. ~~((Funds appropriated from
22 this account to local health departments and districts shall be
23 distributed ratably based on county population as last determined by
24 the office of financial management.))~~

25 NEW SECTION. **Sec. 13.** Sections 1 through 3 of this act are each
26 added to chapter 43.70 RCW.

27 NEW SECTION. **Sec. 14.** If any provision of this act or its
28 application to any person or circumstance is held invalid, the
29 remainder of the act or the application of the provision to other
30 persons or circumstances is not affected.

31 **Sec. 15.** RCW 43.72.915 and 1993 sp.s. c 25 s 603 are each amended
32 to read as follows:

33 This act is necessary for the immediate preservation of the public
34 peace, health, or safety, or support of the state government and its

1 existing public institutions, and shall take effect July 1, 1993,
2 except for:

3 (1) Sections 234 through 243, 245 through 254, and 257 of this act,
4 which shall take effect (~~(July 1, 1995)~~) January 1, 1996 or January 1,
5 1998, if funding is not provided as set forth in section 17(4) of this
6 act; and

7 (2) Sections 301 through 303 of this act, which shall take effect
8 January 1, 1994.

9 NEW SECTION. **Sec. 16.** The following acts or parts of acts are
10 each repealed, effective June 30, 1995:

11 (1) 1993 c 492 s 244;

12 (2) 1993 c 492 s 256 (uncodified); and

13 (3) 1993 c 492 s 255.

14 NEW SECTION. **Sec. 17.** (1) Sections 15 and 16 of this act are
15 necessary for the immediate preservation of the public peace, health,
16 or safety, or support of the state government and its existing public
17 institutions, and shall take effect June 30, 1995.

18 (2) Sections 1 through 5, 12, and 13 of this act are necessary for
19 the immediate preservation of the public peace, health, or safety, or
20 support of the state government and its existing public institutions,
21 and shall take effect July 1, 1995.

22 (3) Section 9 of this act is necessary for the immediate
23 preservation of the public peace, health, or safety, or support of the
24 state government and its existing public institutions, and shall take
25 effect immediately.

26 (4) Sections 6 through 8, 10, and 11 of this act take effect
27 January 1, 1996, if funding of at least two million two hundred fifty
28 thousand dollars, is provided by June 30, 1995, in the 1995 omnibus
29 appropriations act or as a result of the passage of Senate Bill No.
30 6058, to implement the changes in public health governance as outlined
31 in this act. If such funding is not provided, sections 6 through 8,
32 10, and 11 of this act shall take effect January 1, 1998.

Passed the Senate March 10, 1995.

Passed the House April 5, 1995.

Approved by the Governor April 17, 1995.

Filed in Office of Secretary of State April 17, 1995.

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