CERTIFICATION OF ENROLLMENT

ENGROSSED SUBSTITUTE SENATE BILL 6366

Chapter 63, Laws of 2006

59th Legislature 2006 Regular Session

PANDEMIC INFLUENZA--PREPAREDNESS

EFFECTIVE DATE: 6/7/06

Passed by the Senate March 8, 2006 YEAS 44 NAYS 0

BRAD OWEN

President of the Senate

Passed by the House March 8, 2006 YEAS 98 NAYS 0

FRANK CHOPP

Speaker of the House of Representatives

Approved March 15, 2006.

CERTIFICATE

I, Thomas Hoemann, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **ENGROSSED SUBSTITUTE SENATE BILL 6366** as passed by the Senate and the House of Representatives on the dates hereon set forth.

THOMAS HOEMANN

Secretary

FILED

March 15, 2006 - 2:27 p.m.

CHRISTINE GREGOIRE

Governor of the State of Washington

Secretary of State State of Washington

ENGROSSED SUBSTITUTE SENATE BILL 6366

AS AMENDED BY THE HOUSE

Passed Legislature - 2006 Regular Session

State of Washington 59th Legislature 2006 Regular Session

By Senate Committee on Ways & Means (originally sponsored by Senators Keiser, Thibaudeau and Kline)

READ FIRST TIME 02/7/06.

1 AN ACT Relating to preparation and response to pandemic influenza; 2 and adding a new chapter to Title 70 RCW.

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

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<u>NEW SECTION.</u> Sec. 1. The legislature finds that:

5 (1) Pandemic influenza is a global outbreak of disease that occurs 6 when a new virus appears in the human population, causes serious 7 illness, and then spreads easily from person to person.

8 (2) Historically, pandemic influenza has occurred on average every 9 thirty years. Most recently, the Asian flu in 1957-58 and the Hong 10 Kong flu in 1968-69 killed seventy thousand and thirty-four thousand, 11 respectively, in the United States.

12 (3) Another influenza pandemic could emerge with little warning, affecting a large number of people. Estimates are that another 13 14 pandemic influenza would cause more than two hundred thousand deaths in our country, with as many as five thousand in Washington. 15 Our state could also expect ten thousand to twenty-four thousand people needing 16 hospital stays, and as many as a million people requiring outpatient 17 18 visits. During a severe pandemic these numbers could be much higher. 19 The economic losses could also be substantial.

(4) The current Avian or bird flu that is spreading around the 1 2 world has the potential to start a pandemic. There is yet no proven vaccine, and antiviral medication supplies are limited and of unknown 3 effectiveness against a human version of the virus, leaving traditional 4 5 public health measures as the only means to slow the spread of the disease. Given the global nature of a pandemic, as much as possible, 6 7 the state must be able to respond assuming only limited outside resources and assistance will be available. 8

9 (5) An effective response to pandemic influenza in Washington must 10 focus at the local level and will depend on preestablished partnerships 11 and collaborative planning on a range of best-case and worst-case 12 scenarios. It will require flexibility and real-time decision making, 13 guided by accurate information. It will also depend on a well-informed 14 public that understands the dangers of pandemic influenza and the steps 15 necessary to prevent the spread of the disease.

16 (6) Avian flu is but one example of an infectious disease that, 17 were an outbreak to occur, could pose a significant statewide health 18 hazard. As such, preparation for pandemic flu will also enhance the 19 capacity of local public health jurisdictions to respond to other 20 emergencies.

It is therefore the intent of the legislature that adequate pandemic flu preparedness and response plans be developed and implemented by local public health jurisdictions statewide in order to limit the number of illnesses and deaths, preserve the continuity of essential government and other community services, and minimize social disruption and economic loss in the event of an influenza pandemic.

27NEW SECTION.Sec. 2.The definitions in this section apply28throughout this chapter unless the context clearly requires otherwise.

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(1) "Department" means the department of health.

30 (2) "Local health jurisdiction" means a local health department as 31 established under chapter 70.05 RCW, a combined city-county health 32 department as established under chapter 70.08 RCW, or a health district 33 established under chapter 70.05 or 70.46 RCW.

34 (3) "Secretary" means the secretary of the department of health.

35 <u>NEW SECTION.</u> Sec. 3. (1) The secretary shall establish 36 requirements and performance standards, consistent with any

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requirements or standards established by the United States department
 of health and human services, regarding the development and
 implementation of local pandemic flu preparedness and response plans.

4 (2) To the extent state or federal funds are provided for this 5 purpose, by November 1, 2006, each local health jurisdiction shall 6 develop a pandemic flu preparedness and response plan, consistent with 7 requirements and performance standards established in subsection (1) of 8 this section, for the purpose of:

9 (a) Defining preparedness activities that should be undertaken 10 before a pandemic occurs that will enhance the effectiveness of 11 response measures;

(b) Describing the response, coordination, and decision-making structure that will incorporate the local health jurisdiction, the local health care system, other local response agencies, and state and federal agencies during the pandemic;

16 (c) Defining the roles and responsibilities for the local health 17 jurisdiction, local health care partners, and local response agencies 18 during all phases of a pandemic;

(d) Describing public health interventions in a pandemic responseand the timing of such interventions;

(e) Serving as a guide for local health care system partners, response agencies, and businesses in the development of pandemic influenza response plans; and

24 (f) Providing technical support and information on which 25 preparedness and response actions are based.

Each plan shall be developed based on an assessment by the local health jurisdiction of its current capacity to respond to pandemic flu and otherwise meet department outcome measures related to infectious disease outbreaks of statewide significance.

NEW SECTION. Sec. 4. (1) Each local health jurisdiction shall develop its pandemic flu preparedness and response plan based on the requirements and performance standards established under section 3(1) of this act and an assessment of the jurisdiction's current capacity to respond to pandemic flu. The plan shall be developed in consultation with appropriate public and private sector partners, including departments of emergency management, law enforcement, school districts, hospitals and medical professionals, tribal governments, and business
 organizations. At a minimum, each plan shall address:

3 (a) Strategies to educate the public about the consequences of 4 influenza pandemic and what each person can do to prepare, including 5 the adoption of universal infectious disease prevention practices and 6 maintaining appropriate emergency supplies;

7 (b) Jurisdiction-wide disease surveillance programs, coordinated 8 with state and federal efforts, to detect pandemic influenza strains in 9 humans and animals, including health care provider compliance with 10 reportable conditions requirements, and investigation and analysis of 11 reported illness or outbreaks;

(c) Communication systems, including the availability of and access specialized communications equipment by health officials and community leaders, and the use of mass media outlets;

15 (d) Mass vaccination plans and protocols to rapidly administer 16 vaccine and monitor vaccine effectiveness and safety;

(e) Guidelines for the utilization of antiviral medications for thetreatment and prevention of influenza;

(f) Implementation of nonmedical measures to decrease the spread of the disease as guided by the epidemiology of the pandemic, including increasing adherence to public health advisories, voluntary social isolation during outbreaks, and health officer orders related to quarantines;

(g) Medical system mobilization, including improving the linkages and coordination of emergency responses across health care organizations, and assuring the availability of adequate facilities and trained personnel;

(h) Strategies for maintaining social order and essential community
 services while limiting the spread of disease throughout the duration
 of the pandemic; and

(i) The jurisdiction's relative priorities related toimplementation of the above activities, based on available funding.

33 (2) To the extent state or federal funds are provided for this 34 purpose, the department, in consultation with the state director of 35 emergency management, shall provide technical assistance and disburse 36 funds as needed, based on the formula developed under section 6 of this 37 act, to support local health jurisdictions in developing their pandemic 38 flu preparedness and response plans.

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<u>NEW SECTION.</u> Sec. 5. Local health jurisdictions shall submit 1 2 their pandemic flu preparedness and response plans to the secretary by November 1, 2006. Upon receipt of a plan, the secretary shall approve 3 or reject the plan. When the plan is determined by the department to 4 5 comply with the requirements and integrate the performance standards established under section 3(1) of this act, any additional state or 6 7 federal funding appropriated in the budget shall be provided to the local health jurisdiction to support the preparedness response 8 9 activities identified in the plan, based upon a formula developed by 10 the secretary under section 6 of this act. Preparedness and response activities include but are not limited to: 11

(1) Education, information, and outreach, in multiple languages, to
 increase community preparedness and reduce the spread of the disease
 should it occur;

(2) Development of materials and systems to be used in the event of
a pandemic to keep the public informed about the influenza, the course
of the pandemic, and response activities;

18 (3) Development of the legal documents necessary to facilitate and19 support the necessary government response;

20 (4) Training and response drills for local health jurisdiction 21 staff, law enforcement, health care providers, and others with 22 responsibilities identified in the plan;

23 (5) Enhancement of the communicable disease surveillance system; 24 and

(6) Development of coordination and communication systems amongresponding agencies.

27 Where appropriate, these activities shall be coordinated and funded on a regional or statewide basis. The secretary, in consultation with 28 29 the state director of emergency management, shall provide implementation support and assistance to a local health jurisdiction 30 31 when the secretary or the local health jurisdiction has concerns 32 regarding a jurisdiction's progress toward implementing its plan.

33 <u>NEW SECTION.</u> Sec. 6. The secretary shall develop a formula for 34 distribution of any federal and state funds appropriated in the omnibus 35 appropriations act on or before July 1, 2006, to local health 36 jurisdictions for development and implementation of their pandemic flu 37 preparedness and response plans. The formula developed by the

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secretary shall ensure that each local health jurisdiction receives a minimum amount of funds for plan development and that any additional funds for plan development be distributed equitably, including consideration of population and factors that increase susceptibility to an outbreak, upon soliciting the advice of the local health jurisdictions.

7 <u>NEW SECTION.</u> Sec. 7. The secretary shall:

8 (1) Develop a process for assessing the compliance of each local 9 health jurisdiction with the requirements and performance standards 10 developed under section 3(1) of this act at least biannually;

(2) By November 15, 2008, report to the legislature on the level of compliance with the performance standards established under section 3(1) of this act. The report shall consider the extent to which local health jurisdictions comply with each performance standard and any impediments to meeting the expected level of performance.

16 <u>NEW SECTION.</u> **Sec. 8.** Sections 1 through 7 of this act constitute 17 a new chapter in Title 70 RCW.

Passed by the Senate March 8, 2006. Passed by the House March 8, 2006. Approved by the Governor March 15, 2006. Filed in Office of Secretary of State March 15, 2006.