

HOUSE BILL REPORT

ESB 5305

As Reported by House Committee On:
Health Care & Wellness

Title: An act relating to requiring hospitals to report when providing treatment for bullet wounds, gunshot wounds, and stab wounds to all patients.

Brief Description: Requiring hospitals to report when providing treatment for bullet wounds, gunshot wounds, and stab wounds to all patients.

Sponsors: Senators Becker, Schlicher, Kline, Dammeier, Delvin, Ericksen, Parlette and Carrell.

Brief History:

Committee Activity:

Health Care & Wellness: 3/21/13, 3/28/13 [DP].

Brief Summary of Engrossed Bill

- Requires that a health care provider contact a patient advocate if he or she believes that a patient's bullet, gunshot, or stab wound may have been caused by domestic violence.
- Requires hospitals to report bullet, gunshot, and stab wounds to local law enforcement authorities whether the person was conscious or unconscious.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: Do pass. Signed by 12 members: Representatives Cody, Chair; Jinkins, Vice Chair; Schmick, Ranking Minority Member; Angel, Clibborn, Harris, Manweller, Moeller, Riccelli, Rodne, Short and Tharinger.

Minority Report: Do not pass. Signed by 5 members: Representatives Hope, Assistant Ranking Minority Member; Green, Morrell, Ross and Van De Wege.

Staff: Chris Blake (786-7392).

Background:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

The Uniform Health Care Information Act provides that a health care provider may not disclose health care information about a patient unless there is a statutory exception or a written authorization by the patient. One statutory exception requires a health care provider or health care facility, upon request from law enforcement, to disclose specific information about patients with bullet, gunshot, or stab wounds to law enforcement agencies. The information to be disclosed includes the name, residence, sex, and age of the patient; the patient's condition; the patient's diagnosis or extent and location of injuries; whether the patient was conscious upon admission; the name of the health care provider; and transfer and discharge information.

Hospital regulations have similar requirements to report bullet, gunshot, and stab wounds to law enforcement authorities as soon as reasonably possible if a patient is unconscious, regardless of whether law enforcement makes a request. Information to be reported includes the name, residence, sex, and age of the patient; whether the patient has received a bullet, gunshot, or stab wound; and the name of the treating health care provider. Under this reporting requirement, hospitals are provided immunity for good faith reports that do not constitute gross negligence.

Summary of Bill:

Under hospital reporting requirements related to bullet, gunshot, and stab wounds, if the health care provider believes that the patient's injury could have been caused by domestic violence, the hospital must alert a patient advocate, such as a case manager, social worker, or domestic violence advocate. The law enforcement officer and the patient advocate must determine whether there should be a delay in contact with the patient, suspect, or other witness to assist in assuring the safety of the patient or his or her family.

Requirements that hospitals report bullet, gunshot, and stab wounds to local law enforcement authorities apply to all patients with such injuries, rather than only those who are unconscious.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

Staff Summary of Public Testimony:

(In support) The police and sheriffs have been inhibited in their ability to save lives by not having access to all reports of gunshots. This bill helps to enable police departments to respond to incidents. This bill is about keeping communities safe. Without early access to information from hospitals regarding bullet, gunshot, and stab wound victims, investigators

must rely upon witness information which delays responses to dangerous situations and preventing further violence. The more information that law enforcement can receive and the quicker that it can be received, the more effective it will be to bring the people responsible to justice.

Once a situation gets to the point that guns are being fired, it is no longer just the individuals involved who are at risk, but other citizens who are innocent bystanders. Time is a critical factor in gang shootings so that retaliations can be prevented. When violence escalates to the point of gun violence, intervention is necessary. Although a domestic violence victim needs discretion to develop a safety plan for themselves, at the point when one's private safety plan results in the person being shot, that safety plan is no longer working. The law should reflect what is actual practice and the reality is that doctors and nurses call law enforcement when somebody has been shot, whether the person is conscious or unconscious.

(With concerns) Domestic violence victims should have a choice in deciding whether or not they want a law enforcement invention. Mandatory reporting may discourage domestic violence victims from contacting law enforcement. In some instances a domestic violence victim may not see law enforcement as a safe haven. People should be notified before a call is made to law enforcement. The provision regarding reporting domestic violence to law enforcement is very vague and is left up to the provider's perceptions. Hospitals already have rules and guidelines that they must follow regarding identifying patients who are victims of physical assault and assist with the referral of patients who are victims of abuse or neglect.

(Opposed) None.

Persons Testifying: (In support) Senator Becker, prime sponsor; Ken Thomas, Kent Police Department and Washington Association of Sheriffs and Police Chiefs; Dick Reed, Seattle Police Department; Sue Rahr, Washington Association of Sheriffs and Police Chiefs; and Tom McBride, Washington Association of Prosecuting Attorneys.

(With concerns) Grace Huang, Washington State Coalition Against Domestic Violence; Courtney Weaver; and Lisa Thatcher, Washington State Hospital Association.

Persons Signed In To Testify But Not Testifying: None.