

CERTIFICATION OF ENROLLMENT

SUBSTITUTE SENATE BILL 5163

69th Legislature
2025 Regular Session

Passed by the Senate March 12, 2025
Yeas 48 Nays 0

President of the Senate

Passed by the House April 10, 2025
Yeas 85 Nays 10

**Speaker of the House of
Representatives**

Approved

Governor of the State of Washington

CERTIFICATE

I, Sarah Bannister, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SUBSTITUTE SENATE BILL 5163** as passed by the Senate and the House of Representatives on the dates hereon set forth.

Secretary

FILED

**Secretary of State
State of Washington**

SUBSTITUTE SENATE BILL 5163

Passed Legislature - 2025 Regular Session

State of Washington

69th Legislature

2025 Regular Session

By Senate Human Services (originally sponsored by Senators Orwall, Shewmake, Dhingra, Conway, Cleveland, Wellman, Hasegawa, Riccelli, Saldaña, Nobles, Valdez, and C. Wilson)

READ FIRST TIME 01/30/25.

1 AN ACT Relating to modernizing the child fatality statute; and
2 amending RCW 70.05.170.

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

4 **Sec. 1.** RCW 70.05.170 and 2010 c 128 s 1 are each amended to
5 read as follows:

6 (1)(a) The legislature finds that the mortality rate in
7 Washington state among infants and children less than (~~eighteen~~) 19
8 years of age is unacceptably high, and that such mortality may be
9 preventable. The legislature further finds that, through the
10 performance of child (~~mortality~~) fatality reviews, preventable
11 causes of child mortality can be identified and addressed, thereby
12 reducing the infant and child mortality in Washington state.

13 (b) It is the intent of the legislature to encourage the
14 performance of child (~~death~~) fatality reviews by local health
15 departments by providing necessary legal protections to the families
16 of children whose deaths are studied, local health department
17 officials and employees, and health care professionals participating
18 in child (~~mortality~~) fatality review committee activities.

19 (2) As used in this section, "child (~~mortality~~) fatality
20 review" means a process authorized by a local health department as
21 such department is defined in RCW 70.05.010 for examining factors

1 that contribute to deaths of children (~~((less than eighteen))~~) up to 19
2 years of age. The process may include a systematic review of medical,
3 clinical, and hospital records; home interviews of parents and
4 caretakers of children who have died; analysis of individual case
5 information; and review of this information by a team of
6 professionals in order to identify modifiable medical, socioeconomic,
7 public health, behavioral, administrative, educational, and
8 environmental factors associated with each death.

9 (3) Local health departments are authorized to conduct child
10 (~~((mortality))~~) fatality reviews. In conducting such reviews, the
11 following provisions shall apply:

12 (a) All health care information collected as part of a child
13 (~~((mortality))~~) fatality review is confidential, subject to the
14 restrictions on disclosure provided for in chapter 70.02 RCW. When
15 documents are collected as part of a child (~~((mortality))~~) fatality
16 review, the records may be used solely by local health departments
17 for the purposes of the review.

18 (b) (~~((No identifying information related to the deceased child,~~
19 ~~the child's guardians, or anyone interviewed as part of the child~~
20 ~~mortality review may be disclosed. Any such information shall be~~
21 ~~redacted from any records produced as part of the review.))~~) Local
22 health departments and the department may retain identifiable
23 information and geographic information on each case for the purposes
24 of determining trends, performing analysis over time, and for quality
25 improvement efforts. Information and records prepared, owned, used,
26 or retained by the local health departments, their respective
27 offices, or staff that reveals the identification and location of any
28 person or persons being the subject of review shall not be made
29 public in accordance with RCW 42.56.365.

30 (c) Any witness statements or documents collected from witnesses,
31 or summaries or analyses of those statements or records prepared
32 exclusively for purposes of a child (~~((mortality))~~) fatality review,
33 are not subject to public disclosure, discovery, subpoena, or
34 introduction into evidence in any administrative(~~((, civil, or~~
35 ~~criminal))~~) or civil proceeding related to the death of a child
36 reviewed. This provision does not restrict or limit the discovery or
37 subpoena from a health care provider of records or documents
38 maintained by such health care provider in the ordinary course of
39 business, whether or not such records or documents may have been
40 supplied to a local health department pursuant to this section. This

1 provision shall not restrict or limit the discovery or subpoena of
2 documents from such witnesses simply because a copy of a document was
3 collected as part of a child (~~mortality~~) fatality review.

4 (d) No local health department official or employee, and no
5 members of technical committees established to perform case reviews
6 of selected child deaths may be examined in any administrative(~~civil, or criminal~~) or civil proceeding as to the existence or
7 contents of documents assembled, prepared, or maintained for purposes
8 of a child (~~mortality~~) fatality review.

9 (e) This section shall not be construed to prohibit or restrict
10 any person from reporting suspected child abuse or neglect under
11 chapter 26.44 RCW, nor to limit access to or use of any records,
12 documents, information, or testimony in any civil or criminal action
13 arising out of any report made pursuant to chapter 26.44 RCW, nor to
14 require disclosures in conflict with state or federal law.

15 ~~((4))~~ (f) If the team identifies a current, reportable, and
16 unresolved concern about child abuse or neglect, it may designate one
17 member to make a report to the child abuse hotline. This subsection
18 does not create a mandatory duty under RCW 26.44.030 for any review
19 team or individual review team member.

20 (4) To aid in a child fatality review, the local health
21 department may:

22 (a) Request and receive data for specific fatalities including,
23 but not limited to, all medical records related to the child death,
24 autopsy reports, medical examiner reports, coroner reports, and
25 school, the criminal justice system, law enforcement, and social
26 services records; and

27 (b) Request and receive data described in (a) of this subsection
28 from health care providers, health care facilities, clinics, schools,
29 the criminal justice system, law enforcement, laboratories, medical
30 examiners, coroners, professions and facilities licensed by the
31 department, local health departments, the health care authority and
32 its licensees and providers, the department of social and health
33 services and its licensees and providers, and the department of
34 children, youth, and families and its licensees and providers.

35 (5) Upon request by the local health department, health care
36 providers, health care facilities, clinics, schools, the criminal
37 justice system, law enforcement, laboratories, medical examiners,
38 coroners, professions and facilities licensed by the department of
39 health, local health departments, the health care authority and its
40

1 licensees and providers, the department of social and health services
2 and its licensees and providers, and the department of children,
3 youth, and families and its licensees and providers must provide all
4 medical records related to the child, autopsy reports, medical
5 examiner reports, coroner reports, social services records, and other
6 data requested for specific child fatality reviews to the local
7 health department. Data described in certifications and informational
8 copies of birth and death records issued from the state vital records
9 system shall be provided at no charge.

10 (6) The department shall assist local health departments to
11 collect the reports of any child ((mortality)) fatality reviews
12 conducted by local health departments and assist with entering the
13 reports into a database ((to the extent that the data is not
14 protected under subsection (3) of this section. Notwithstanding
15 subsection (3) of this section, the department shall respond to any
16 requests for data from the database to the extent permitted for
17 health care information under chapter 70.02 RCW)). All information
18 submitted to the department and local health departments pursuant to
19 this subsection is not subject to public disclosure, discovery,
20 subpoena, or introduction into evidence in any civil, criminal, or
21 administrative proceeding related to the death of a child reviewed.
22 In addition, the department shall provide technical assistance to
23 local health departments and child death review coordinators
24 conducting child ((mortality)) fatality reviews and encourage
25 communication among child ((death)) fatality review teams. ((The
26 department shall conduct these activities using only federal and
27 private funding.

28 ~~(5))~~ (a) This subsection does not prevent any person from
29 testifying in a civil, criminal, or administrative action concerning
30 facts that form the basis of a child fatality review for which the
31 person had personal knowledge acquired independently of the child
32 fatality review or which is public information.

33 (b) This subsection does not prevent the introduction of evidence
34 into any civil, criminal, or administrative proceeding of information
35 related to a child death acquired independently of the department or
36 a local health jurisdiction or which is public information.

37 (7) This section does not prevent the department or a local
38 health department from publishing statistical compilations and
39 reports related to the child ((mortality)) fatality review. Any
40 portions of such compilations and reports that identify individual

1 cases and sources of information must be redacted. These reports may
2 be used in the development and coordination of statewide child
3 fatality prevention strategies and interventions.

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