

Chapter 70.26 RCW
PANDEMIC INFLUENZA PREPAREDNESS

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RCW 70.26.010 Findings—Intent. The legislature finds that:

- (1) Pandemic influenza is a global outbreak of disease that occurs when a new virus appears in the human population, causes serious illness, and then spreads easily from person to person.
- (2) Historically, pandemic influenza has occurred on average every thirty years. Most recently, the Asian flu in 1957-58 and the Hong Kong flu in 1968-69 killed seventy thousand and thirty-four thousand, respectively, in the United States.
- (3) Another influenza pandemic could emerge with little warning, affecting a large number of people. Estimates are that another pandemic influenza would cause more than two hundred thousand deaths in our country, with as many as five thousand in Washington. Our state could also expect ten thousand to twenty-four thousand people needing hospital stays, and as many as a million people requiring outpatient visits. During a severe pandemic these numbers could be much higher. The economic losses could also be substantial.
- (4) The current Avian or bird flu that is spreading around the world has the potential to start a pandemic. There is yet no proven vaccine, and antiviral medication supplies are limited and of unknown effectiveness against a human version of the virus, leaving traditional 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, the state must be able to respond assuming only limited outside resources and assistance will be available.
- (5) An effective response to pandemic influenza in Washington must focus at the local level and will depend on preestablished partnerships and collaborative planning on a range of best case and worst case scenarios. It will require flexibility and real-time decision making, guided by accurate information. It will also depend on a well-informed public that understands the dangers of pandemic influenza and the steps necessary to prevent the spread of the disease.
- (6) Avian flu is but one example of an infectious disease that, were an outbreak to occur, could pose a significant statewide health hazard. As such, preparation for pandemic flu will also enhance the capacity of local public health jurisdictions to respond to other 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. [2006 c 63 s 1.]

RCW 70.26.020 Definitions. The definitions in this section apply throughout this chapter unless the context clearly requires otherwise.

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

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

(3) "Secretary" means the secretary of the department of health. [2006 c 63 s 2.]

RCW 70.26.030 Local preparedness and response plans—

Requirements. (1) The secretary shall establish requirements and performance standards, consistent with any 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.

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

(a) Defining preparedness activities that should be undertaken before a pandemic occurs that will enhance the effectiveness of 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;

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

(d) Describing public health interventions in a pandemic response and 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

(f) Providing technical support and information on which 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. [2006 c 63 s 3.]

RCW 70.26.040 Local preparedness and response plans—

Consultation with public, private sector—Department to provide technical assistance and disburse funds.

(1) Each local health jurisdiction shall develop its pandemic flu preparedness and response plan based on the requirements and performance standards established under RCW 70.26.030(1) 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:

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

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

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

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

(e) Guidelines for the utilization of antiviral medications for the treatment 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 to implementation of the above activities, based on available funding.

(2) To the extent state or federal funds are provided for this purpose, the department, in consultation with the state director of emergency management, shall provide technical assistance and disburse funds as needed, based on the formula developed under RCW 70.26.060, to support local health jurisdictions in developing their pandemic flu preparedness and response plans. [2006 c 63 s 4.]

RCW 70.26.050 Plans to be submitted to secretary for approval, rejection—Funding—Preparedness and response activities. Local health jurisdictions shall submit their pandemic flu preparedness and response plans to the secretary by November 1, 2006. Upon receipt of a plan, the secretary shall approve or reject the plan. When the plan is determined by the department to comply with the requirements and integrate the performance standards established under RCW

70.26.030(1), any additional state or federal funding appropriated in the budget shall be provided to the local health jurisdiction to support the preparedness response activities identified in the plan, based upon a formula developed by the secretary under RCW 70.26.060. Preparedness and response activities include but are not limited to:

- (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;
 - (3) Development of the legal documents necessary to facilitate and support the necessary government response;
 - (4) Training and response drills for local health jurisdiction staff, law enforcement, health care providers, and others with responsibilities identified in the plan;
 - (5) Enhancement of the communicable disease surveillance system;
- and
- (6) Development of coordination and communication systems among responding agencies.

Where appropriate, these activities shall be coordinated and funded on a regional or statewide basis. The secretary, in consultation with the state director of emergency management, shall provide implementation support and assistance to a local health jurisdiction when the secretary or the local health jurisdiction has concerns regarding a jurisdiction's progress toward implementing its plan. [2006 c 63 s 5.]

RCW 70.26.060 Secretary to develop a formula for fund distribution—Requirements. The secretary shall develop a formula for distribution of any federal and state funds appropriated in the omnibus appropriations act on or before July 1, 2006, to local health jurisdictions for development and implementation of their pandemic flu preparedness and response plans. The formula developed by the 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. [2006 c 63 s 6.]

RCW 70.26.070 Secretary duties—Report. The secretary shall:

- (1) Develop a process for assessing the compliance of each local health jurisdiction with the requirements and performance standards developed under RCW 70.26.030(1) at least biannually;
- (2) By November 15, 2008, report to the legislature on the level of compliance with the performance standards established under RCW 70.26.030(1). 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. [2006 c 63 s 7.]