

2 of 3 DOCUMENTS

ANNOTATED REVISED CODE OF WASHINGTON
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*** STATUTES CURRENT THROUGH ALL NEW 2008 LEGISLATION ***
*** ANNOTATIONS CURRENT THROUGH JUNE 30, 2008 ***

TITLE 43. STATE GOVERNMENT -- EXECUTIVE
CHAPTER 43.70. DEPARTMENT OF HEALTH

GO TO REVISED CODE OF WASHINGTON ARCHIVE DIRECTORY

Rev. Code Wash. (ARCW) § 43.70.520 (2008)

§ 43.70.520. Public health services improvement plan -- Performance measures

(1) The legislature finds that the public health functions of community assessment, policy development, and assurance of service delivery are essential elements in achieving the objectives of health reform in Washington state. The legislature further finds that the population-based services provided by state and local health departments are cost-effective and are a critical strategy for the long-term containment of health care costs. The legislature further finds that the public health system in the state lacks the capacity to fulfill these functions consistent with the needs of a reformed health care system. The legislature further finds that public health nurses and nursing services are an essential part of our public health system, delivering evidence-based care and providing core services including prevention of illness, injury, or disability; the promotion of health; and maintenance of the health of populations.

(2) The department of health shall develop, in consultation with local health departments and districts, the state board of health, the health services commission, area Indian health service, and other state agencies, health services providers, and citizens concerned about public health, a public health services improvement plan. The plan shall provide a detailed accounting of deficits in the core functions of assessment, policy development, assurance of the current public health system, how additional public health funding would be used, and describe the benefits expected from expanded expenditures.

(3) The plan shall include:

(a) Definition of minimum standards for public health protection through assessment, policy development, and assurances:

(i) Enumeration of communities not meeting those standards;

(ii) A budget and staffing plan for bringing all communities up to minimum standards;

(iii) An analysis of the costs and benefits expected from adopting minimum public health standards for assessment, policy development, and assurances;

(b) Recommended strategies and a schedule for improving public health programs throughout the state, including:

(i) Strategies for transferring personal health care services from the public health system, into the uniform

benefits package where feasible; and

(ii) Linking funding for public health services to performance measures that relate to achieving improved health outcomes; and

(c) A recommended level of dedicated funding for public health services to be expressed in terms of a percentage of total health service expenditures in the state or a set per person amount; such recommendation shall also include methods to ensure that such funding does not supplant existing federal, state, and local funds received by local health departments, and methods of distributing funds among local health departments.

(4) The department shall coordinate this planning process with the study activities required in section 258, chapter 492, Laws of 1993.

(5) By March 1, 1994, the department shall provide initial recommendations of the public health services improvement plan to the legislature regarding minimum public health standards, and public health programs needed to address urgent needs, such as those cited in subsection (7) of this section.

(6) By December 1, 1994, the department shall present the public health services improvement plan to the legislature, with specific recommendations for each element of the plan to be implemented over the period from 1995 through 1997.

(7) Thereafter, the department shall update the public health services improvement plan for presentation to the legislature prior to the beginning of a new biennium.

(8) Among the specific population-based public health activities to be considered in the public health services improvement plan are: Health data assessment and chronic and infectious disease surveillance; rapid response to outbreaks of communicable disease; efforts to prevent and control specific communicable diseases, such as tuberculosis and acquired immune deficiency syndrome; health education to promote healthy behaviors and to reduce the prevalence of chronic disease, such as those linked to the use of tobacco; access to primary care in coordination with existing community and migrant health clinics and other not for profit health care organizations; programs to ensure children are born as healthy as possible and they receive immunizations and adequate nutrition; efforts to prevent intentional and unintentional injury; programs to ensure the safety of drinking water and food supplies; poison control; trauma services; and other activities that have the potential to improve the health of the population or special populations and reduce the need for or cost of health services.

HISTORY: 2007 c 259 § 64; 1993 c 492 § 467.

NOTES:

SEVERABILITY -- SUBHEADINGS NOT LAW -- 2007 C 259: See notes following RCW 41.05.033.

FINDINGS -- INTENT -- 1993 C 492: See notes following RCW 43.20.050.

SHORT TITLE -- SEVERABILITY -- SAVINGS -- CAPTIONS NOT LAW -- RESERVATION OF LEGISLATIVE POWER -- EFFECTIVE DATES -- 1993 C 492: See RCW 43.72.910 through 43.72.915.

CROSS REFERENCES.

Additional contents: RCW 43.70.550.

EFFECT OF AMENDMENTS.

2007 c 259 § 64, effective July 22, 2007, added the last sentence in (1); and rewrote (3)(b)(ii), which read: "Timing of increased funding for public health services linked to specific objectives for improving public health."

USER NOTE: For more generally applicable notes, see notes under the first section of this heading, part, article, chapter or title.