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SUBSTITUTE SENATE BILL 6110

State of Washington 68th Legislature 2024 Regular Session

By Senate Human Services (originally sponsored by Senators Keiser, Lovick, Nobles, Van De Wege, Wagoner, and C. Wilson)

- 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:
 - (1) (a) The legislature finds that the mortality rate in Washington state among infants and children less than ((eighteen)) 19 years of age is unacceptably high, and that such mortality may be preventable. The legislature further finds that, through the performance of child ((mortality)) fatality reviews, preventable causes of child mortality can be identified and addressed, thereby reducing the infant and child mortality in Washington state.
 - (b) It is the intent of the legislature to encourage the performance of child ((death)) <u>fatality</u> reviews by local health departments by providing necessary legal protections to the families of children whose deaths are studied, local health department officials and employees, and health care professionals participating in child ((mortality)) <u>fatality</u> 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

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- that contribute to deaths of children ((less than eighteen)) up to 19 years of age. The process may include a systematic review of medical, clinical, and hospital records; home interviews of parents and caretakers of children who have died; analysis of individual case information; and review of this information by a team of professionals in order to identify modifiable medical, socioeconomic, public health, behavioral, administrative, educational, and environmental factors associated with each death.
 - (3) Local health departments are authorized to conduct child ((mortality)) <u>fatality</u> reviews. In conducting such reviews, the following provisions shall apply:

- (a) All health care information collected as part of a child ((mortality)) fatality review is confidential, subject to the restrictions on disclosure provided for in chapter 70.02 RCW. When documents are collected as part of a child ((mortality)) fatality review, the records may be used solely by local health departments for the purposes of the review.
- (b) ((No identifying information related to the deceased child, the child's guardians, or anyone interviewed as part of the child mortality review may be disclosed. Any such information shall be redacted from any records produced as part of the review.)) Local health departments and the department may retain identifiable information and geographic information on each case for the purposes of determining trends, performing analysis over time, and for quality improvement efforts. Information and records prepared, owned, used, or retained by the local health departments, their respective offices, or staff that reveals the identification and location of any person or persons being the subject of review shall not be made public in accordance with RCW 42.56.365.
- (c) Any witness statements or documents collected from witnesses, or summaries or analyses of those statements or records prepared exclusively for purposes of a child ((mortality)) fatality review, are not subject to public disclosure, discovery, subpoena, or introduction into evidence in any administrative, civil, or criminal proceeding related to the death of a child reviewed. This provision does not restrict or limit the discovery or subpoena from a health care provider of records or documents maintained by such health care provider in the ordinary course of business, whether or not such records or documents may have been supplied to a local health department pursuant to this section. This provision shall not

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restrict or limit the discovery or subpoena of documents from such witnesses simply because a copy of a document was collected as part of a child ((mortality)) fatality review.

- (d) No local health department official or employee, and no members of technical committees established to perform case reviews of selected child deaths may be examined in any administrative, civil, or criminal proceeding as to the existence or contents of documents assembled, prepared, or maintained for purposes of a child ((mortality)) fatality review.
- (e) This section shall not be construed to prohibit or restrict any person from reporting suspected child abuse or neglect under chapter 26.44 RCW, nor to limit access to or use of any records, documents, information, or testimony in any civil or criminal action arising out of any report made pursuant to chapter 26.44 RCW, nor to require disclosures in conflict with federal law.
- (((4))) (f) If the team identifies a current, reportable, and unresolved concern about child abuse or neglect, it may designate one member to make a report to the child abuse hotline. This subsection does not create a mandatory duty under RCW 26.44.030 for any review team or individual review team member.
- 21 <u>(4) To aid in a child fatality review, the local health</u>
 22 department may:
 - (a) Request and receive data for specific fatalities including, but not limited to, all medical records related to the child death, autopsy reports, medical examiner reports, coroner reports, and school, the criminal justice system, law enforcement, and social services records; and
 - (b) Request and receive data described in (a) of this subsection from health care providers, health care facilities, clinics, schools, the criminal justice system, law enforcement, laboratories, medical examiners, coroners, professions and facilities licensed by the department, local health departments, the health care authority and its licensees and providers, the department of social and health services and its licensees and providers, and the department of children, youth, and families and its licensees and providers.
- 36 (5) Upon request by the local health department, health care providers, health care facilities, clinics, schools, the criminal justice system, law enforcement, laboratories, medical examiners, coroners, professions and facilities licensed by the department of health, local health departments, the health care authority and its

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

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

(5))) (7) This section does not prevent the department or a local health department from publishing statistical compilations and reports related to the child ((mortality)) fatality review. Any portions of such compilations and reports that identify individual cases and sources of information must be redacted. These reports may be used in the development and coordination of statewide child fatality prevention strategies and interventions.

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