

Executive Summary: Health Impact Review of SB 5346

Providing First Responders with Contact Information for Subscribers of Life Alert Services During an Emergency

Evidence and expert opinion at both the local and state level indicate that SB 5346 has potential to improve health outcomes for some individuals who are disproportionately impacted by death, illness, and injury during disasters, thereby helping to decrease health disparities.

BILL INFORMATION

Sponsors: Senators Ranker, Mullet, Darneille, Liias, Conway, McAuliffe, Keiser, Chase

Summary of Bill:

- When requested by first responders during an emergency, employees of companies providing life alert services—also known as personal emergency response systems (PERS)—must provide to first responders the name, address, and other information necessary for responders to contact subscribers.
- First responders must keep this information confidential, use it only for responding to the emergency that prompted the information request, and destroy it at the end of the emergency.
- “Life alert services” are defined as for-profit services that allow the customer in need of emergency assistance to contact a call center through a device that can be activated by breath, touch, or other means.
- “Emergency” is defined as a “combination of circumstances that requires the attention of first responders acting within the scope of their official duties. An emergency includes circumstances that render the life alert services system inoperable.”

HEALTH IMPACT REVIEW

Summary of Findings:

This health impact review found the following evidence regarding the provisions in SB 5346:

- The majority of experts interviewed indicated that SB 5346 would likely result in first responders requesting PERS customer information to inform emergency responses (check on customers, coordinate special transportation, etc.).
- The majority of experts interviewed indicated that using PERS customer records to inform emergency responses would likely have positive health impacts on PERS customers during and after emergencies.
- The majority of experts interviewed indicated that PERS customers are primarily “at-risk” or “vulnerable” populations such as older adults, individuals with disabilities or chronic conditions, individuals with limited mobility, and those living alone.¹
- There is strong evidence in the scientific literature that at-risk or vulnerable populations such as older adults, individuals with disabilities or chronic conditions, individuals with limited mobility, and those living alone are more likely than their counterparts to experience negative health outcomes during an emergency—so improving health outcomes for these populations would likely decrease health disparities between these populations and their counterparts.
- This review did not find enough evidence to determine if SB 5346 would have equitable impacts across demographics such as race/ethnicity, education, income, or primary language.
- This review did not find enough evidence to determine if SB 5346 would have equitable impacts on rural and urban individuals.

FULL REVIEW

For review methods, logic model, strength-of-evidence analyses, and citations of empirical evidence refer to the full health impact review: <http://sboh.wa.gov/Portals/7/Doc/HealthImpactReviews/HIR-2015-04-SB5346.pdf>

¹ Note that this indicates the majority of PERS customers are likely vulnerable individuals, **not** that all vulnerable individuals have PERS services.

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