



Washington State Board of Health

Briefing: Chapter 246-101, Notifiable Conditions

January 13, 2021

Overview

- Background
- Rule Development
- Draft Rules
- Next Steps



Background

Notifiable Conditions; Rulemaking Timeline

Purpose of Notifiable Conditions Reporting

- Key public health tool
- Identify outbreaks and clusters early
 - Examples: measles, mumps, pertussis, hepatitis
- Case investigations and contact tracing
- Data-driven policy decisions

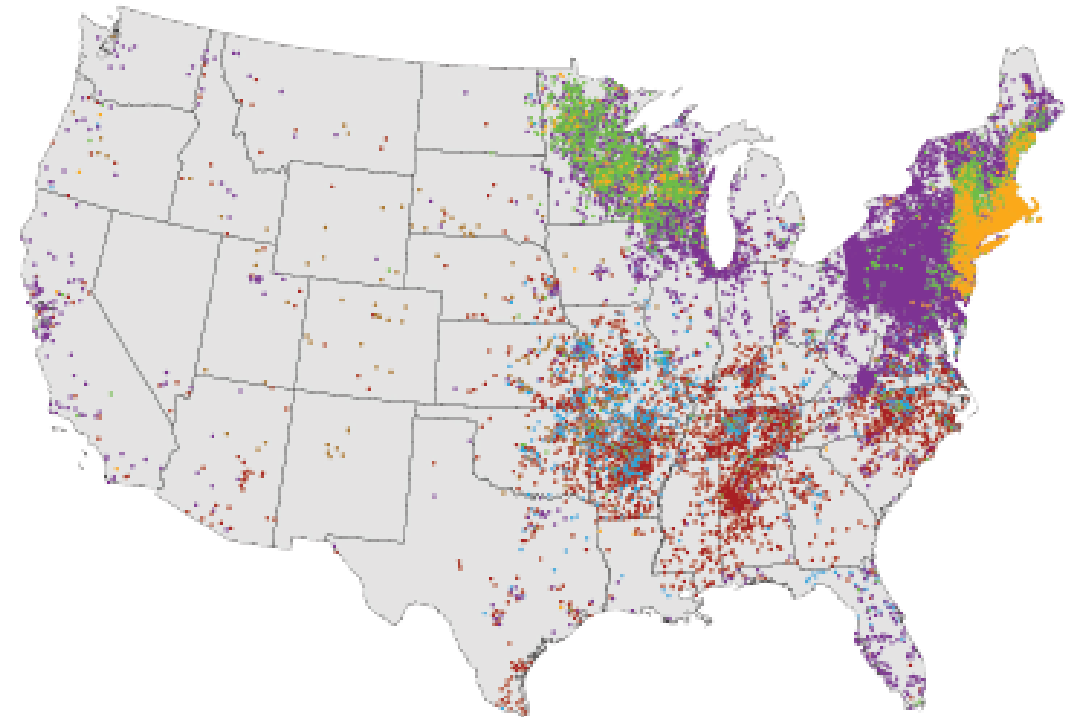
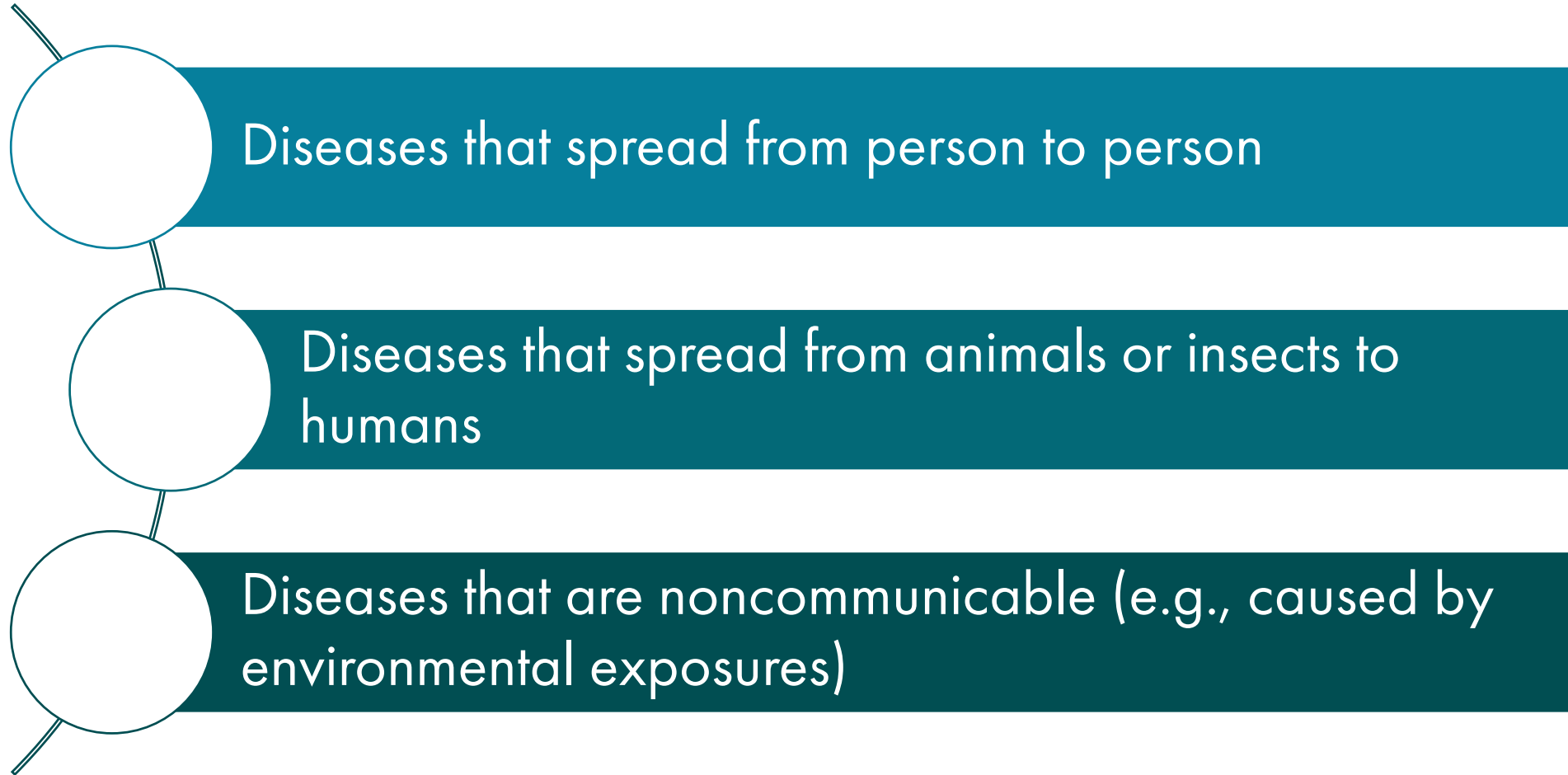


Image Source: <https://www.sciencenews.org/article/ticks-lyme-disease-testing-new-approaches>

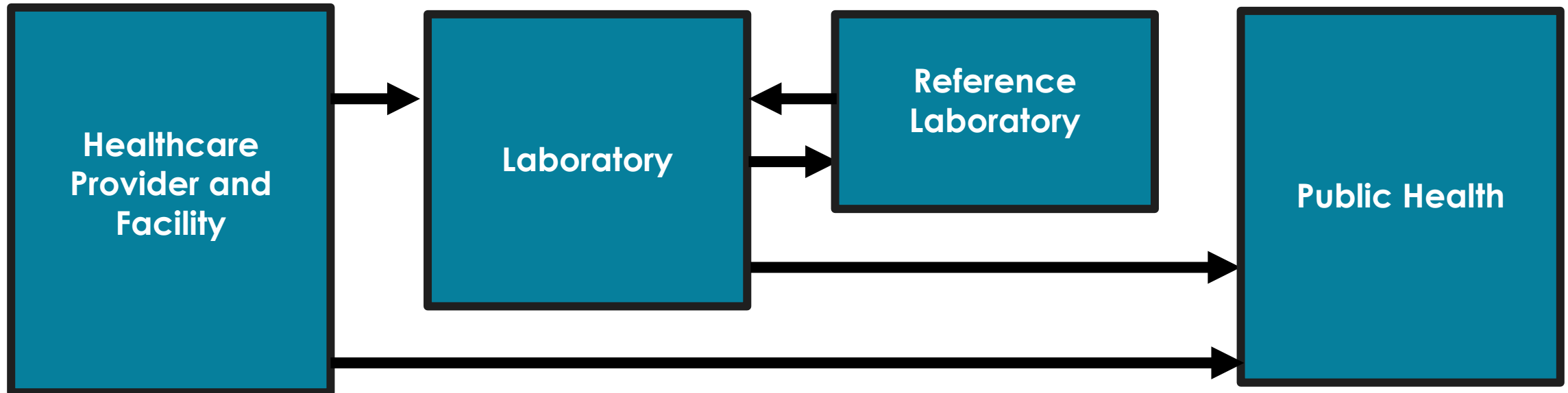
Types of Notifiable Conditions



Primary Reporters

- Laboratories
- Health Care Facilities
- Health Care Providers
- Local Health Jurisdictions

Complex system of information flow



Chapter 246-101 WAC Rulemaking Timeline



*Original CR-101 filed in April 2017; current CR-101 filed in May 2018 after internal work with subject matter experts.



Rule Development

Partner Engagement & Collaboration

Early Collaboration

- Department of Agriculture
- Department of Labor & Industries
- Technical Advisory Committee
- WSALPHO, Communicable Disease Leadership Committee
- Local Health Officers
- American Indian Health Commission
- Informal Comment



Formal Public Comment

Requested reportable data components:

- Race
- Ethnicity
- Primary Language
- Gender Identity
- Sexual Orientation
- Disability Status



Information & Listening Sessions: Key Insights

Session #1 (October)

- Importance of using disaggregated data
- Inclusion of sexual orientation, gender identity, and disability status
- Guidance to staff, community partner priorities

Session #2 (December)

- Feedback on draft race, ethnicity, and language reporting categories
- Inclusion of various additional demographic variables

Informal Comment

- Interested parties lists
- Health care providers & facilities licensed by DOH & DSHS
- Licensed laboratories
- Local health jurisdictions
- State agencies impacted by rules

[Chapter 246-101 WAC](#) outlines requirements for reporting information that is necessary for public health officials to protect the public's health by tracking communicable diseases and other conditions.

We are seeking feedback on the current working draft of the rule language for the Notifiable Conditions chapter. [Review the draft rule](#) (document also attached). Email [Kaitlyn Donahoe](#) with comments on the draft rule by **Friday, December 18, 2020**.

More information can be found on the Board's [rulemaking web page](#). Please feel free to share this working draft with others. For more information on the Notifiable Conditions rule email [Kaitlyn Donahoe](#), State Board of Health Policy Advisor, or call 360-584-6737.

Thank you,



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Draft Rules

Summary of Key Proposed Revisions

Key Proposed Revisions

New Conditions

- 74 conditions added or modified
- Removed “other rare diseases of public health significance” and “disease of suspected bioterrorism origin”

Existing Conditions

- Revised notification timeframes
- Narrowed test results for laboratories
- Clarified specimen submission requirements
- De-identified negatives for five conditions

Key Proposed Revisions (continued)

Administrative Changes

- Consistent data components and means of notification between reporters (no hand-written or mailed reports)
- Test results for out of state patients to Department of Health

Department of Agriculture

- Removed requirements for veterinarians
- State Department of Agriculture requirements added
- Consultation between Department of Health and Department of Agriculture

Key Proposed Revisions (continued)

Local Health Jurisdictions

- Washington Disease Reporting System (WDRS)
- Added 24-hour phone number
- Added immediately notifiable conditions and 3-day response for all other conditions
- Added 3-day response for cases that do not need investigation
- Local Health Officer diagnosis confirmation

Additional Proposed Revisions (June 2020)

- Inclusion of SARS-CoV-2 (COVID-19)
- Inclusion of patient race and ethnicity reporting
- Other administrative changes and clarifications



Additional Proposed Revisions (December 2020)

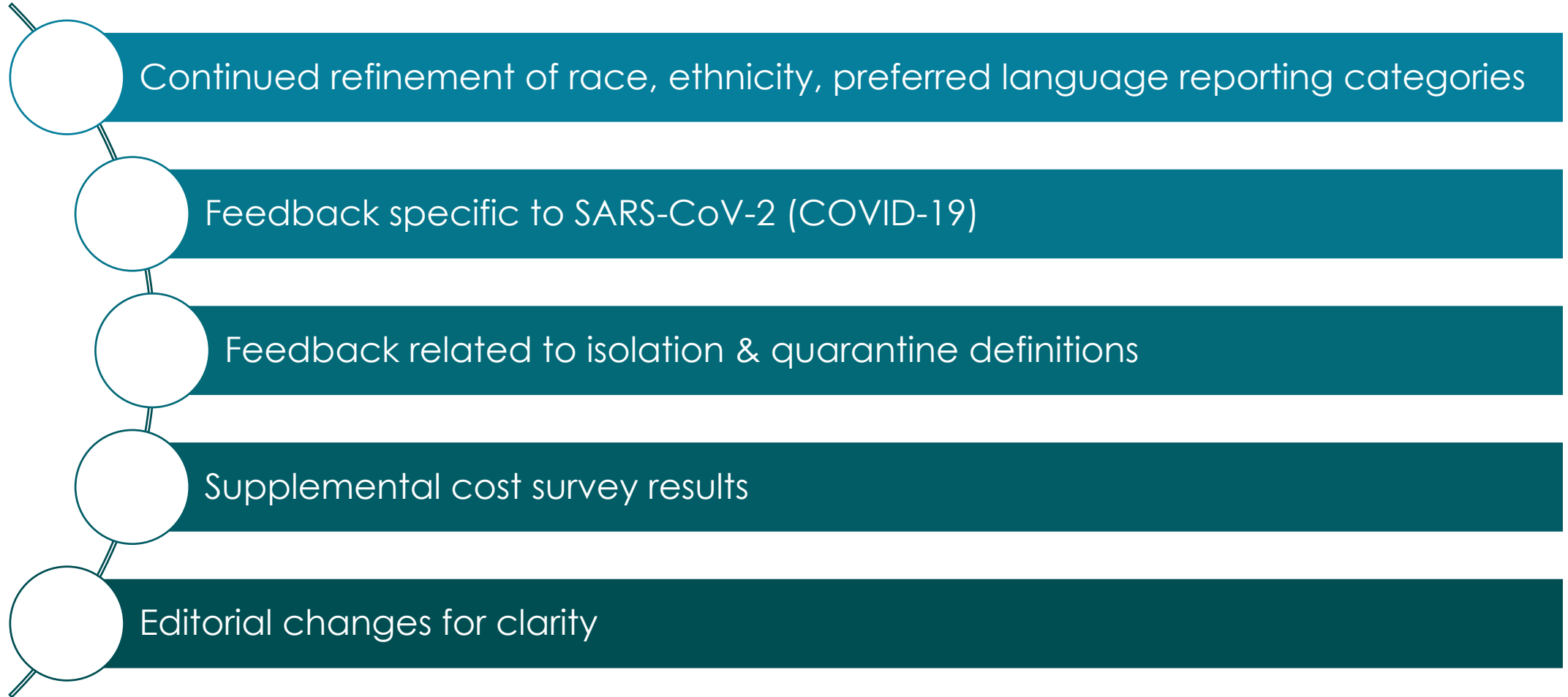
- Description of reporting categories for patient race and ethnicity
- Addition of patient preferred language reporting
- Additions consistent with COVID-19 Emergency Rule
 - Reporting by Enhanced Service Facilities (all conditions)
 - Reporting by Department of Agriculture (COVID-19)
- Further editorial changes for clarity/usability
 - Definitions for animal case report, case report, laboratory report, investigation report, and outbreak report
- Revisions consistent with statutory changes in ESHB 1551 (2020; STD Modernization)



Draft Rules

Feedback & Considerations

Informal Comment Feedback



Continued Requests for Additional Demographic Data

Sexual
Orientation

Gender
Identity

Disability
Status

Housing
Status

Tribal
Affiliation

Birth
Country

Veteran
Status

Occupation

Community Health Board Coalition Demands

1: Add question about patient's birthplace

Where were you (patient) born?

2: Add question about patient's indigenous identity

Do you (patient) have ties or relationship to an indigenous tribe or community?

3: Add the following race categories

Cambodian/Khmer

Cham

Marshallese

Middle Eastern

North African

Oromo

Other (specify)

4: Add the following language categories

Cambodian/Khmer

Chuukese

Fijian

Kosraean

Marshallese

Oromo

Samoaan

Swahili

Other (specify)

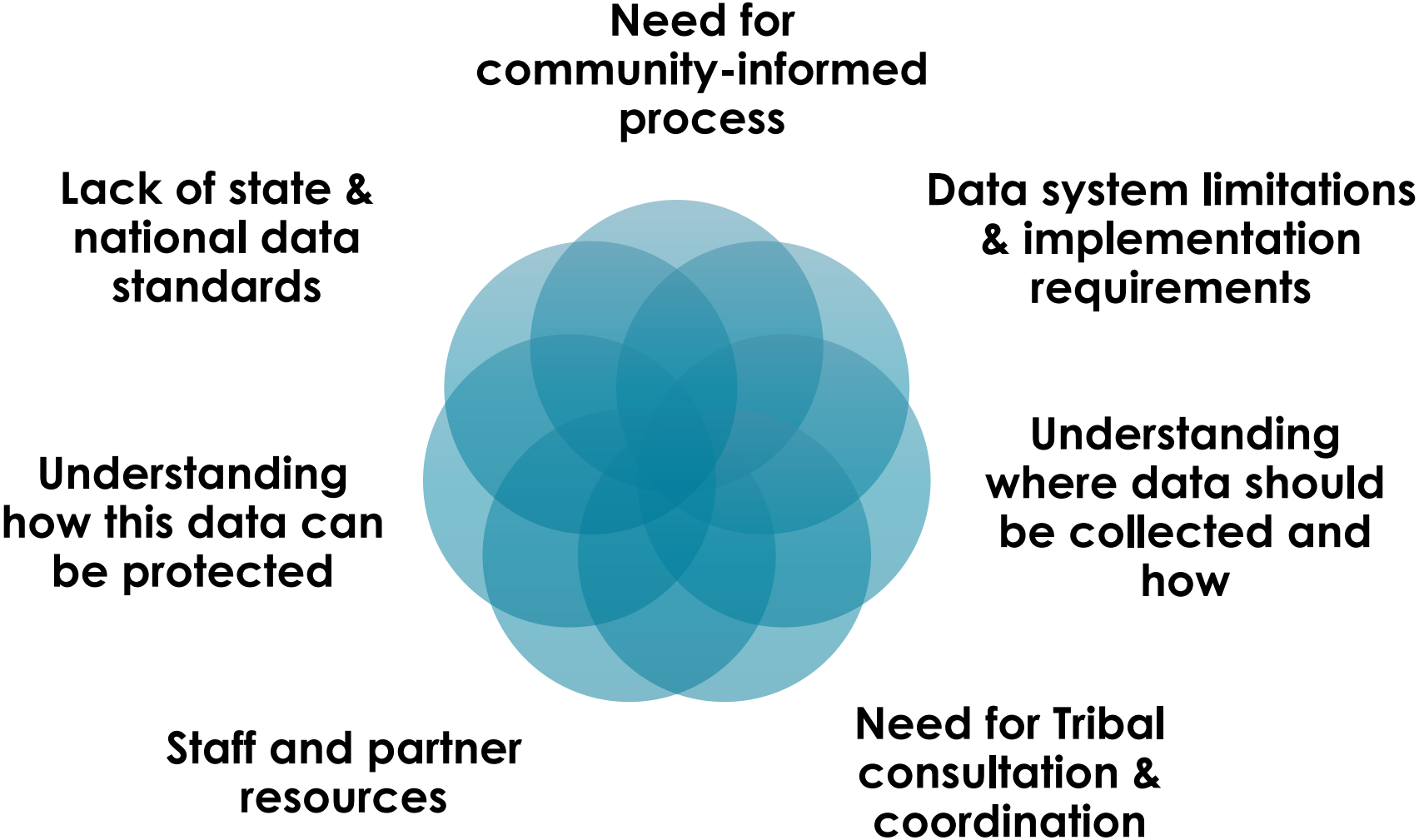
5: Add questions about patient's housing

Do you (patient) live in a multi-generational home?

How many people live in your (patient) home including yourself?

How many bedrooms does your (patient) home have?

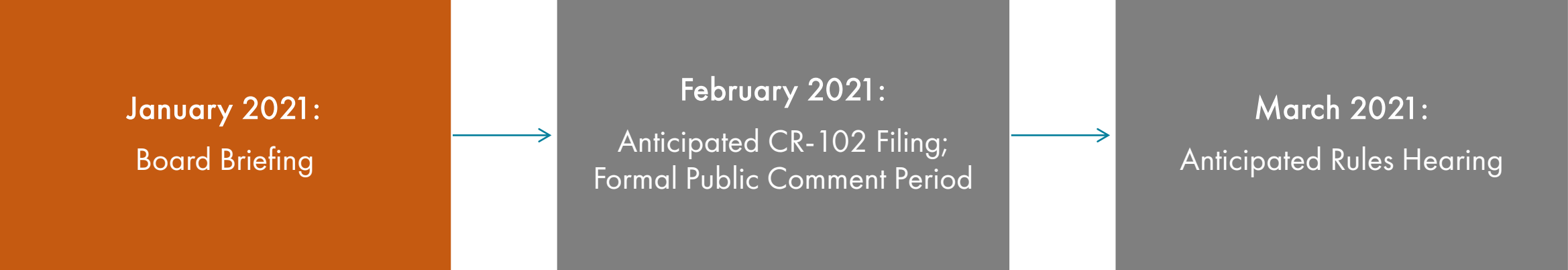
Considerations





Next Steps

Next Steps



| THANK YOU

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