(3) This section does not relieve a provider of any duty otherwise imposed by law.

(4) This section does not apply to any act or omission which constitutes gross negligence or willful or wanton misconduct.

(5) This section applies in addition to provisions already established in RCW 18.71.210.

NEW SECTION. Sec. 27. RCW 18.73.060, 18.73.073, and 18.73.085 are each recodified as sections in chapter 70.168 RCW.

NEW SECTION. Sec. 28. Section 7, chapter 208, Laws of 1973 1st ex. sess., section 5, chapter 261, Laws of 1979 ex. sess., section 5, chapter 214, Laws of 1987 and RCW 18.73.0'10 are each repealed.

NEW SECTION. Sec. 29. Sections 2 through 4, 8 through 11, 13, and 26 of this act are each added to chapter 70.168 RCW.

NEW SECTION. Sec. 30. If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected.

NEW SECTION. Sec. 31. This act is necessary for the immediate preservation of the public peace, health, or safety, or support of the state government and its existing public institutions, and shall take effect immediately.

NEW SECTION. Sec. 32. If specific funding for the purposes of this act, referencing this act by bill number, is not provided by June 30, 1990, in the omnibus appropriations act, this act shall be null and void.

Passed the Senate March 3, 1990.
Passed the House March 1, 1990.
Approved by the Governor March 29, 1990.
Filed in Office of Secretary of State March 29, 1990.

CHAPTER 270
[Substitute Senate Bill No. 6190]
HEAD INJURY PREVENTION

AN ACT Relating to prevention of head injuries; amending RCW 46.37.535; reenacting and amending RCW 46.37.530; adding new sections to chapter 43.70 RCW; and making an appropriation.

Be it enacted by the Legislature of the State of Washington:

NEW SECTION. Sec. 1. This act shall be known and cited as the Head Injury Prevention Act of 1990.

NEW SECTION. Sec. 2. The legislature finds that head injury is a major cause of death and disability for Washington citizens. The costs of
head injury treatment and rehabilitation are extensive and resultant disabili-
ties are long and indeterminate. These costs are often borne by public pro-
grams such as medicaid. The legislature finds further that many such
injuries are preventable. The legislature intends to reduce the occurrence of
head injury by educating persons whose behavior may place them at risk
and by regulating certain activities.

NEW SECTION. Sec. 3. As used in sections 1 through 6 of this act,
the term "head injury" means traumatic brain injury.

A head injury prevention program is created in the department of
health. The program's functions may be integrated with those of similar
programs to promote comprehensive, integrated, and effective health pro-
motion and disease prevention.

In consultation with the traffic safety commission, the department
shall, directly or by contract, identify and coordinate public education ef-
forts currently underway within state government and among private groups
to prevent traumatic brain injury, including, but not limited to, bicycle
safety, pedestrian safety, bicycle passenger seat safety, motorcycle safety,
motor vehicle safety, and sports safety. If the department finds that pro-
grams are not available or not in use, it may, within funds appropriated for
the purpose, provide grants to promote public education efforts. Grants may
be awarded only after recipients have demonstrated coordination with rele-
vant and knowledgeable groups within their communities, including at least
schools, brain injury support organizations, hospitals, physicians, traffic
safety specialists, police, and the public. The department may accept grants,
gifts, and donations from public or private sources to use to carry out the
head injury prevention program.

The department may assess or contract for the assessment of the effec-
tiveness of public education efforts coordinated or initiated by any agency of
state government. Agencies are directed to cooperate with assessment efforts
by providing access to data and program records as reasonably required.
The department may seek and receive additional funds from the federal
government or private sources for assessments. Assessments shall contain
findings and recommendations that will improve the effectiveness of public
education efforts. These findings shall be distributed among public and pri-
ivate groups concerned with traumatic brain injury prevention.

NEW SECTION. Sec. 4. The department of health, the department of
licensing, and the traffic safety commission shall jointly prepare information
for driver license manuals, driver education programs, and driving tests to
increase driver awareness of pedestrian safety, to increase driver skills in
avoiding pedestrian and motor vehicle accidents, and to determine drivers'
abilities to avoid pedestrian motor vehicle accidents.

*NEW SECTION. Sec. 5. The department shall establish a state-wide
trauma registry to collect information on the incidence, severity, and causes

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of traumatic brain injury. The state-wide trauma registry shall identify and track major brain injury cases from injury through rehabilitation or recovery. The registry shall keep specific statistics on helmet and nonhelmet, motorcycle-related head and neck injuries. Specific data elements of the registry, sources for collecting the data, and data collection procedures shall be determined by the department by rule. Information obtained shall be used to design prevention and treatment programs. By January 1, 1991, the department shall report to the legislature on the feasibility, cost, and benefits of expanding the registry requirements of this section to include information on minor brain injuries.

*Sec. 5 was vetoed, see message at end of chapter.

NEW SECTION. Sec. 6. The department shall prepare guidelines on relevant training and education regarding traumatic brain injury for health and education professionals, and relevant public safety and law enforcement officials. The department shall distribute such guidelines and any recommendations for training or educational requirements for health professionals or educators to the disciplinary authorities governed by chapter 18.130 RCW and to educational service districts established under chapter 28A.21 RCW. Specifically, all emergency medical personnel shall be trained in proper helmet removal.

Sec. 7. Section 4, chapter 232, Laws of 1967 as last amended by section 732, chapter 330, Laws of 1987 and by section 1, chapter 454, Laws of 1987 and RCW 46.37.530 are each reenacted and amended to read as follows:

(i) It is unlawful:

(a) For any person to operate a motorcycle or motor-driven cycle not equipped with mirrors on the left and right sides of the motorcycle which shall be so located as to give the driver a complete view of the highway for a distance of at least two hundred feet to the rear of the motorcycle or motor-driven cycle: PROVIDED, That mirrors shall not be required on any motorcycle or motor-driven cycle over twenty-five years old originally manufactured without mirrors and which has been restored to its original condition and which is being ridden to or from or otherwise in conjunction with an antique or classic motorcycle contest, show, or other such assembly: PROVIDED FURTHER, That no mirror is required on any motorcycle manufactured prior to January 1, 1931;

(b) For any person to operate a motorcycle or motor-driven cycle which does not have a windshield unless wearing glasses, goggles, or a face shield of a type conforming to rules adopted by the state patrol;

(c) For any person (under the age of eighteen years) to operate or ride upon a motorcycle (or), motor-driven cycle, or moped on a state highway, county road, or city street unless wearing upon his or her head a
protective helmet of a type conforming to rules adopted by the state patrol except when the vehicle is an antique motor-driven cycle or automobile that is licensed as a motorcycle or when the vehicle is equipped with seat belts and roll bars approved by the state patrol. The helmet must be equipped with either a neck or chin strap which shall be fastened securely while the motorcycle or motor-driven cycle is in motion;

(d) For any person to transport a child under the age of five on a motorcycle or motor-driven cycle;

(e) For any person to sell or offer for sale a motorcycle helmet which does not meet the requirements established by the state patrol.

(2) The state patrol is hereby authorized and empowered to adopt and amend rules, pursuant to the administrative procedure act, concerning the standards and procedures for conformance of rules adopted for glasses, goggles, face shields, and protective helmets.

Sec. 8. Section 10, chapter 232, Laws of 1967 as last amended by section 733, chapter 330, Laws of 1987 and RCW 46.37.535 are each amended to read as follows:

It is unlawful for any person to rent out motorcycles, motor-driven cycles, or mopeds unless the person also has on hand for rent helmets of a type conforming to rules adopted by the state patrol.

It shall be unlawful for any person to rent a motorcycle, motor-driven cycle, or moped unless the person has in his or her possession a helmet of a type approved by the state patrol, regardless of from whom the helmet is obtained.

NEW SECTION. Sec. 9. Sections 1 through 6 of this act are each added to chapter 43.70 RCW.

NEW SECTION. Sec. 10. The sum of forty-nine thousand dollars, or as much thereof as may be necessary, is appropriated from the public safety and education account to the department of health for the biennium ending June 30, 1991, to carry out the purposes of this act.

Passed the Senate March 3, 1990.
Passed the House March 1, 1990.
Approved by the Governor March 29, 1990, with the exception of certain items which were vetoed.

Filed in Office of Secretary of State March 29, 1990.

Note: Governor's explanation of partial veto is as follows:
"I am returning herewith, without my approval as to section 5, Substitute Senate Bill No. 6190, as amended by the House, entitled:

"AN ACT Relating to prevention of head injuries."

Section 5 requires the Department of Health to establish a state-wide trauma registry to collect information on the incidence, severity, and causes of traumatic brain injury. This registry is to identify and track major brain injury cases from onset through rehabilitation or recovery, and is to keep specific statistics on helmet and
non-helmet, motorcycle-related head and neck injuries. This section would also require the Department of Health to report to the Legislature on the feasibility of expanding the registry to include information on minor brain injuries.

This bill contains an appropriation of $49,000 to the Department of Health for all the purposes of this act. The Department's estimate of the fiscal impact of section 5 alone is nearly $500,000. I cannot in good conscience sign into law a program which will put the Department of Health at such a fiscal risk.

However, I am signing into law Substitute Senate Bill No. 6191, as amended by the House. Substitute Senate Bill 6191 requires the Department of Health to establish a state-wide data registry to collect and analyze data on the incidence, severity, and causes of trauma, including traumatic brain injury. That provision is more comprehensive than section 5 of Substitute Senate Bill No. 6190. It is very likely that if adequately funded, the Department could collect the information required by section 5 of Substitute Senate Bill No. 6190 in the overall trauma registry of Substitute Senate Bill No. 6191.

For these reasons, I have vetoed section 5 of Substitute Senate Bill No. 6190.

With the exception of Section 5, Substitute Senate Bill No. 6190 is approved.*

CHAPTER 271
[Second Substitute Senate Bill No. 6418]
RURAL HEALTH CARE

AN ACT Relating to rural health care; adding a new section to Title 28B RCW; adding a new section to chapter 70.175 RCW; adding a new chapter to Title 70 RCW; adding a new chapter to Title 48 RCW; creating new sections; making an appropriation; and declaring an emergency.

Be it enacted by the Legislature of the State of Washington:

PART I

NEW SECTION. Sec. 1. The legislature finds that a health care access problem exists in rural areas of the state due to a lack of practicing physicians, physician assistants, pharmacists, and advanced registered nurse practitioners. In addition, many of these rural providers are unable to leave the community for short-term periods of time to attend required continuing education training or for personal matters because their absence would leave the community without adequate medical care coverage. The lack of adequate medical coverage in geographically remote rural communities constitutes a threat to the health and safety of the people in those communities.

The legislature declares that it is in the public interest to recruit and maintain a pool of physicians, physician assistants, pharmacists, and advanced registered nurse practitioners willing and able on short notice to practice in rural communities on a short-term basis to meet the medical needs of the community.

NEW SECTION. Sec. 2. The department shall establish the health professional temporary substitute resource pool. The purpose of the pool is