2005 Boards and Commission Report

Washington Dairy Products Commission

1. Full Name of Board or Commission (B/C)  Washington Dairy Products Commission

Department of Agriculture

2. Name under which B/C reported in 2003

1939

3. Official or agency to which B/C reports

4. Year created

5. Number of members

6. # of meetings last biennium

7. Summary of primary responsibilities:
Building demand for milk and dairy products on either a state, national, or foreign basis. Conduct scientific research to develop and discover uses for products of milk and its derivatives. Conduct the necessary research to develop more efficient and equitable methods of marketing dairy products, and enter upon, singly or in participation with others, the promotion and development of state, national, or foreign markets. Promote public relations and educational efforts. Participate in federal and state agency hearings, meetings, and other proceedings relating to the regulation of the production, manufacture, distribution, sale, or use of dairy products, to provide educational meetings and seminars for the dairy industry on such matters, and to expend commission funds for such activities.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05 Cost Actual</td>
<td>Assessment on all fresh milk sales</td>
</tr>
<tr>
<td>$95,013</td>
<td>Assessment on all fresh milk sales</td>
</tr>
<tr>
<td>2005-07 Cost Estimate</td>
<td></td>
</tr>
<tr>
<td>$86,839</td>
<td></td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Active producer participation is essential otherwise producer support would decline.
This is an agricultural program and should not be transferred.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Funding of research and marketing activities would decline affecting producer income, research efforts and the economic viability of the industry in Washington.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
RCW 15.44
Specific

12. Title of official who appoints the B/C (e.g., Governor, agency director):
WSDA Director

13. Is Senate confirmation required?  Yes ☑  No  ☐

14. Authority to issue subpoenas? Yes ☑  No  ☐

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
Class One ☐ Class Two ☑ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
Seven members from each district who are producers of dairy products;
One dealer member;
One member who is a producer and also acts as a dealer; and
One member appointed by the WSDA Director to represent the Director.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
The Washington Dairy Products Commission is a qualified promotion program certified by USDA under the Dairy & Tobacco Adjustment Act of 1983. No

18. Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Celeste Piette
Business Manager
7/20/05

Name Washington Dairy Products Commission

Title 4201 198th Street SW, Ste. 101
Lynnwood, WA 98036

Date (425) 672-0687

Agency Address Phone

93
ODHH/DSHS Advisory Committee on Deafness

1. Full Name of Board or Commission (B/C)
   Office of the Deaf and Hard of Hearing

2. Name under which B/C reported in 2003
   1979

3. Official or agency to which B/C reports
   9

4. Year created
   5

5. Number of members
   6. # of meetings last biennium

7. Summary of primary responsibilities:
   To provide feedback on various issues related to deafness to ODHH and DSHS. Make recommendations to improve service delivery to deaf and hard of hearing clients and the Telecommunication Relay Service. Consult with ODHH on the budget.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

   2003-05 Cost Actual
   22,000

   2005-07 Cost Estimate
   24,000

   Fund Source (e.g., GF State)
   Non-appropriated

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
   Should the B/C be abolished, ODHH staff would need to conduct additional statewide meetings to obtain feedback and recommendations. Other agencies do not have the specialized knowledge of Deaf and Hard of Hearing communication needs. The deaf and hard of hearing communities would not be as receptive to a new agency unfamiliar with their needs.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
    The deaf and hard of hearing communities would not have a venue to express their needs, provide feedback or recommendations. It would be an impediment for ODHH in maintaining stakeholder relations. The major consequence would be a loss of a public value.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
    RCW 43.20A.725 (5)
    WAC 388-818-0020

12. Title of official who appoints the B/C (e.g., Governor, agency director):
    Office of the Secretary

13. Is Senate confirmation required? Yes ☐ No ☒

14. Authority to issue subpoenas? Yes ☐ No ☒

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
    Class One ☒ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
    Membership composition or representation requirements is not specified in the RCW or WAC but ODHH is using the following guidelines:
    - by disability: deaf, hard of hearing, deafblind and speech disabled
    - by geographic region – by DSHS region or Eastern WA vs. Western WA
    - by ethnicity – a minimum of at least one person should be of ethnicity with hearing loss
    - by ex-officio membership – representatives from DSHS Division of Vocational Rehabilitation, WA State Association of the Deaf, Self Help for the Hard of Hearing, WA State DeafBlind Citizens, WA State Registry of Interpreters for the Deaf

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
    N/A

18. Certification
    I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Eric Raff Director 6/30/05

Name
DSHS, Office of the Deaf and Hard of Hearing

Title
1115 Washington SE MS: 45300, Olympia, WA 98504

Date
360-902-8000
### Washington State Department of Health

#### 2005 Boards and Commission Report

**Dental Hygiene Examining Committee**

<table>
<thead>
<tr>
<th>Full Name of Board or Commission (B/C)</th>
<th>Name under which B/C reported in 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Washington State Department of Health</td>
<td>1983</td>
</tr>
</tbody>
</table>

#### Summary of primary responsibilities:
Set standards of care by health care professionals, credential and discipline health care professionals.

#### Total Cost of B/C Operation

<table>
<thead>
<tr>
<th>Year</th>
<th>Cost</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05</td>
<td>$23,300</td>
<td>Health Professions Account 02G</td>
</tr>
<tr>
<td>2005-07</td>
<td>$24,500</td>
<td>Health Professions Account 02G</td>
</tr>
</tbody>
</table>

#### What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Increased workload and expense to hire experts who would provide input regarding standard of care for the profession.

#### What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Either the profession would be de-regulated or the workload as mentioned in #9 would shift to DOH staff and cause a need for additional resources.

#### What is the legal authorization for the B/C?
RCW 18.29.110 - Specific authority.

#### Title of official who appoints the B/C:
Secretary, Department of Health

#### Is Senate confirmation required?
Yes ☑ No ☐

#### Authority to issue subpoenas?
Yes ☑ No ☐

#### What is the compensation class of the B/C?
Class One ☐ Class Two ☐ Class Three ☑ Class Four ☐ Class Five ☐ Full-time salaried ☐

#### What are the membership composition or representation requirements for the B/C?
Three licensed Dental Hygienists and one public member

#### Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
None

#### Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Vicki L. Brown  
Health Services Consultant  
06/03/05

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Washington State Department of Health</td>
<td>PO Box 47867, Olympia, WA 98504-7867</td>
<td>360-236-4865</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agency</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 2005 Boards and Commission Report

### Dental Quality Assurance Commission

<table>
<thead>
<tr>
<th>1. Full Name of Board or Commission (B/C)</th>
<th>2. Name under which B/C reported in 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Washington State Department of Health</td>
<td>1994</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Official or agency to which B/C reports</th>
<th>4. Year created</th>
<th>5. Number of members</th>
<th>6. # of meetings last biennium</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>7. Summary of primary responsibilities:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set standards of care by health care professionals, credential and discipline health care professionals.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05 Cost Actual: $300,000</td>
</tr>
<tr>
<td>2005-07 Cost Estimate: $330,000</td>
</tr>
<tr>
<td>Fund Source (e.g., GF State): 02G - Health Professions</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased workload and expense to hire experts who would provide input regarding standard of care for the profession.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Either the profession would be de-regulated or the workload as mentioned in #9 would shift to DOH staff and cause a need for additional resources.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.</th>
</tr>
</thead>
<tbody>
<tr>
<td>RCW 18.32.0351; RCW 18.32.057 - Specific authority.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12. Title of official who appoints the B/C (e.g., Governor, agency director):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>13. Is Senate confirmation required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes ☐ No ☒</td>
</tr>
<tr>
<td>Yes ☒ No ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class One ☐ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☒ Full-time salaried ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>16. What are the membership composition or representation requirements for the B/C?</th>
</tr>
</thead>
<tbody>
<tr>
<td>DQAQ consists of 12 practicing dentists and 2 consumer members. 4 members must reside east of the summit of the Cascade Range. Dentists must be in active practice for 5 years preceding application, terms are 4 years and no member can serve more than 2 consecutive terms.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>18. Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lisa R. Anderson</th>
<th>Health Services Consultant</th>
<th>June 7, 2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Title</td>
<td>Date</td>
</tr>
<tr>
<td>Washington State Department of Health</td>
<td>310 Israel Road SE, Tumwater, WA 98501</td>
<td>(360)236-4863</td>
</tr>
<tr>
<td>Agency</td>
<td>Address</td>
<td>Phone</td>
</tr>
</tbody>
</table>
2005 Boards and Commission Report

Board of Denturists

1. Full Name of Board or Commission (B/C)  Washington State Department of Health

2. Name under which B/C reported in 2003  1995

3. Official or agency to which B/C reports  7  6

4. Year created  5. Number of members  6. # of meetings last biennium

7. Summary of primary responsibilities:
   Set standards of care by health care professionals, credential and discipline health care professionals.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)

<table>
<thead>
<tr>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05 Cost Actual</td>
<td>$33,500</td>
</tr>
<tr>
<td>2005-07 Cost Estimate</td>
<td>$35,200</td>
</tr>
<tr>
<td></td>
<td>Health Profession Account 02G</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
   Increased workload and expense to hire experts who would provide input regarding standard of care for the profession.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
    Either the profession would be de-regulated or the workload as mentioned in #9 would shift to DOH staff and cause a need for additional resources.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
    RCW 18.30.050 - Specific authority.

12. Title of official who appoints the B/C (e.g., Governor, agency director): Secretary, Department of Health

13. Is Senate confirmation required? Yes ☐ No ☒ 14. Authority to issue subpoenas? Yes ☐ No ☒

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
   Class One ☒ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
    Four licensed Denturists, two public members and one licensed Dentist

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
    None

18. Certification
    I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Vicki L. Brown  Health Services Consultant  June 3, 2005

Name  Title  Date
Washington State Department of Health  PO Box 47867, Olympia, WA  98504-7867  360-236-4865
Agency  Address  Phone
<table>
<thead>
<tr>
<th>1. Full Name of Board or Commission (B/C)</th>
<th>2. Name under which B/C reported in 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community, Trade and Economic Development</td>
<td>1972</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Official or agency to which B/C reports</th>
<th>4. Year created</th>
<th>5. Number of members</th>
<th>6. # of meetings last biennium</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12</td>
<td>33</td>
<td></td>
</tr>
</tbody>
</table>

7. Summary of primary responsibilities:
Conduct advocacy, capacity building and systemic change activities as described in the Council's Five Year State Plan to promote the self-determination, independence, productivity, integration and inclusion of people with developmental disabilities and their families in all facets of community life. Monitor and evaluate the effectiveness of service systems and provide recommendations to the Governor, State Legislature and state service provider agencies on issues and public policies of importance and impact to people with developmental disabilities and their families. Promote partnerships between public and private sectors to provide more comprehensive and personcentered services and supports. Promote and support public participation in the public policy processes.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>269,212</td>
<td>GF State</td>
</tr>
<tr>
<td></td>
<td>2,100,000</td>
<td>GF Federal</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2005-07 Cost Estimate</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>388,000</td>
<td>GF State</td>
</tr>
<tr>
<td></td>
<td>2,500,000</td>
<td>GF Federal</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Loss of federal, Developmental Disabilities and Bill of Rights Act funds. Federal law prohibits transfer of Council activities to a direct service provider agency.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Loss of federal funds

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
Executive Order 96-06

12. Title of official who appoints the B/C (e.g., Governor, agency director):
Governor

13. Is Senate confirmation required? Yes ☑ No ☐
14. Authority to issue subpoenas? Yes ☑ No ☐
15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
Class One ☑ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☑

16. What are the membership composition or representation requirements for the B/C?
60% of membership are people with developmental disabilities, parents, family members or guardians of people with developmental disabilities, the rest are representatives from state agencies receiving federal funds under Rehabilitation Act, Individuals with Disabilities Education Act, Older American Act of 1965, and Titles V and XIX of the Social Security Act, and a representative from the Washington State Protection and Advocacy Systems, University Center in Excellence in Developmental Disabilities and a service provider agency.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
Public Law 106.402 mandates the DD Council advocate for a comprehensive system of supports and services for people with developmental disabilities and their families that are person-centered, self-determined and culturally appropriate. Councils are mandated to develop and implement a Five-year State Plan that is data-driven with public input that addresses goals, objectives and performance targets in the areas of emphasis unique to the state.
These requirements could not be met by another organization not mandated to conduct advocacy, systemic change and capacity building activities to improve services and supports for people with developmental disabilities and their families.

18. Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Date</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>CTED</td>
<td></td>
<td>800-634-4473</td>
<td></td>
</tr>
<tr>
<td>Agency Address</td>
<td>2600 Martin Way E, PO Box 48314, Olympia</td>
<td>8/8/2005</td>
<td></td>
</tr>
</tbody>
</table>
Community, Trade and Economic Development

7. Summary of primary responsibilities:
The Governing Board is responsible for setting policy for the Endowment Fund and authorizing all distributions from the Endowment Fund.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05</td>
<td>$135,000</td>
<td>CTED Fee Account Fund 263</td>
</tr>
<tr>
<td></td>
<td>$120,000</td>
<td>Endowment Trust Fund 833</td>
</tr>
<tr>
<td>2005-07</td>
<td>$350,000</td>
<td>CTED Fee Account Fund 263</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Would not fulfill the Legislative mandate

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Would not fulfill the Legislative mandate

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
RCW 43.330.210

12. Title of official who appoints the B/C (e.g., Governor, agency director):
Governor

13. Is Senate confirmation required? Yes ☒ No ☐
14. Authority to issue subpoenas? Yes ☒ No ☐

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
Class One ☐ Class Two ☐ Class Three ☒ Class Four ☐ Class Five ☐ Full-time salaried ☒

16. What are the membership composition or representation requirements for the B/C?
Three members are persons with expertise and leadership in areas of finance, actuarial science, business or public policy. Three members are persons who have demonstrated expertise and leadership in areas of business, developmental disabilities service design, management or public policy and are family members of a person with developmental disabilities. The seventh member, serving as the Chair, shall be chosen by a quorum of the Governing Board and appointed by the Governor.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
N/A

18. Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Ed Holen
Administrator
8/8/2005

Name ☒ Title ☐ Date 800-634-4473
Division of Developmental Disabilities Region 1 Advisory

1. Full Name of Board or Commission (B/C)  
DSHS - Region 1/Division of Developmental Disabilities

2. Name under which B/C reported in 2003  
Same

3. Official or agency to which B/C reports  
DSHS - Region 1/Division of Developmental Disabilities

4. Year created  
1990

5. Number of members  
20

6. # of meetings last biennium  
15

7. Summary of primary responsibilities:
The advisory board is established by the administration and provides a vehicle through which all stakeholders receive information and give advice on program and budget planning and implementation, priority development, and the delivery of services to people with developmental disabilities and their families living in Northeast Washington. The advisory board is composed of representatives of interest groups which need, use, or provide services.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$5,628.00</td>
<td>$5,628.00</td>
<td>GF, State, Admin</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Management would incorporate this process into other "team planning" sessions and provide information to stakeholders through other existing advocacy and support groups.
Consumers, their families, advocates, and service providers would not have a consistent way of exchanging information about services for people with disabilities in Northeast Washington.
The department would not have routine access to the program and service delivery expertise which the board represents.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Same.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
RCW 43.20A.350  General Authority

12. Title of official who appoints the B/C (e.g., Governor, agency director):
DD Region 1 Regional Administrator

13. Is Senate confirmation required?  
Yes ☒ No ☐

14. Authority to issue subpoenas?  
Yes ☒ No ☐

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
Class One ☒ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
Individuals residing in the eleven northeastern counties of Washington State which comprise Region 1. We have participation from consumers, parents/family members, providers, counties and other community representatives.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
N/A

18. Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Karenn Santschi Dauphin  
Regional Administrator  
June 29, 2005

DSHS/DDD/Region 1  
1611 W. Indiana Ave., Spokane, 99205  
509/329-2893
### 2005 Boards and Commission Report

**Division of Developmental Disabilities Region 2 Advisory**

1. **Full Name of Board or Commission (B/C):**
   - DSHS - Region 2/Division of Developmental Disabilities

2. **Name under which B/C reported in 2003:**
   - Same

3. **Official or agency to which B/C reports:**
   - DSHS - Region 2/Division of Developmental Disabilities

4. **Year created:**
   - 1992

5. **Number of members:**
   - 19

6. **# of meetings last biennium:**
   - 19

7. **Summary of primary responsibilities:**
   - To provide regional administrator and regional program administrators with feedback on needs of the community and feedback concerning policy and program implementation.

8. **Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05</td>
<td>$4,250.00</td>
<td>GF, State, Admin</td>
</tr>
<tr>
<td>2005-07</td>
<td>$4,250.00</td>
<td>GF, State, Admin</td>
</tr>
</tbody>
</table>

9. **What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?**
   - Not a staff function. Specific to DDD.

10. **What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?**
    - Would lose valuable input from parents and community programs.

11. **What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.**
    - RCW 43.20A.350 General Authority

12. **Title of official who appoints the B/C (e.g., Governor, agency director):**
    - DDD Region 2 Regional Administrator

13. **Is Senate confirmation required?**
    - Yes

14. **Authority to issue subpoenas?**
    - Yes

15. **What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)**
    - Class One

16. **What are the membership composition or representation requirements for the B/C?**
    - None. Strong emphasis on diversity, persons with disability, parents, minority representation.

17. **Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?**
    - N/A

18. **Certification**
   - I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

   **Signature:**
   - Paul A. Reynolds

   **Title:**
   - Region Administrator

   **Date:**
   - June 29, 2005

**Agency Information:**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSHS/DDD/Region 2</td>
<td>P.O. Box 12500; B39-22 Yakima, WA 98909</td>
<td>509) 225-4630</td>
<td></td>
</tr>
</tbody>
</table>
### 2005 Boards and Commission Report

**Division of Developmental Disabilities Region 3 Advisory**

1. **Full Name of Board or Commission (B/C)**
   DSHS - Region 3/Division of Developmental Disabilities

2. **Name under which B/C reported in 2003**
   Same

3. **Official or agency to which B/C reports**
   DSHS - Region 3/Division of Developmental Disabilities

4. **Year created**
   1992

5. **Number of members**
   10-15

6. **# of meetings last biennium**
   8

7. **Summary of primary responsibilities:**
   To serve as a bridge between the division and local communities, providing vision, advocacy and education in the interest of people with disabilities.

8. **Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)**

<table>
<thead>
<tr>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05 Cost Actual</td>
<td>$2,316</td>
</tr>
<tr>
<td>GF, State, Admin</td>
<td></td>
</tr>
<tr>
<td>2005-07 Cost Estimate</td>
<td>$2,316</td>
</tr>
<tr>
<td>GF, State, Admin</td>
<td></td>
</tr>
</tbody>
</table>

9. **What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?**
   Less community input to the management team. Not feasible as intent is to provide community input to this agency.

10. **What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?**
    Less consumer and community input.

11. **What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.**
    RCW 43.20A.350 General authority

12. **Title of official who appoints the B/C (e.g., Governor, agency director):**
    DDD Region 3 Regional Administrator

13. **Is Senate confirmation required?**
    Yes ☑ No ☐

14. **Authority to issue subpoenas?**
    Yes ☑ No ☐

15. **What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)**
    ☑ Class One
    ☐ Class Two
    ☐ Class Three
    ☐ Class Four
    ☐ Class Five
    ☐ Full-time salaried

16. **What are the membership composition or representation requirements for the B/C?**
    None. Strong emphasis on diversity, persons with disability, parents, minority representation.

17. **Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?**
    N/A

18. **Certification**
   *I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

   Randy Burge  Regional Administrator  June 29, 2005

   Name  Title  Date  Phone
   DSHS/DDD/Region 3  840 N. Broadway, Building A, Suite 100, Everett 425/339-4838
   Agency  Address  Phone
### 2005 Boards and Commission Report

<table>
<thead>
<tr>
<th>1. Full Name of Board or Commission (B/C)</th>
<th>Same</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSHS - Region 4/Division of Developmental Disabilities</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Name under which B/C reported in 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>1989</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Official or agency to which B/C reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSHS - Region 4/Division of Developmental Disabilities</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Year created</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Number of members</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. # of meetings last biennium</th>
</tr>
</thead>
</table>

#### Summary of primary responsibilities:
- Informational for membership and Advisory to region staff. Resolve local issues; critique policies, advise regional administrator, provide family perspective, assure quality services and living arrangements, share national trends, and understand training needs.

#### Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$300.00</td>
<td>$300.00</td>
<td>GF, State, Admin</td>
</tr>
</tbody>
</table>

| 2005-07 Cost Estimate | $300.00 | GF, State, Admin |

#### What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
- Lack of informed stakeholders, uninformed consumers; Issues are specific to DDD and issues would not be resolved.

#### What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
- No advice to regional administrator on regional basis.

#### What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.

- RCW 43.20A.350 General Authority

<table>
<thead>
<tr>
<th>12. Title of official who appoints the B/C (e.g., Governor, agency director):</th>
</tr>
</thead>
<tbody>
<tr>
<td>DDD Region 4 Regional Administrator</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>13. Is Senate confirmation required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes ☑ No ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>14. Authority to issue subpoenas?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes ☐ No ☑</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Class One</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>16. What are the membership composition or representation requirements for the B/C?</th>
</tr>
</thead>
<tbody>
<tr>
<td>None. Strong emphasis on diversity, persons with disability, parents, minority representation.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>18. Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marybeth Poch</td>
<td>Regional Administrator</td>
<td>June 29, 2005</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agency</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSHS/DDD/Region 4</td>
<td>1700 E. Cherry St., Seattle, 98122</td>
<td>206/568-5711</td>
</tr>
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</table>
### 2005 Boards and Commission Report

**Division of Developmental Disabilities Region 5 Advisory**

<table>
<thead>
<tr>
<th>1. Full Name of Board or Commission (B/C)</th>
<th>Same</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSHS - Region 5/Division of Developmental Disabilities</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Name under which B/C reported in 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>1991</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Official or agency to which B/C reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. Year created</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Number of members</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. # of meetings last biennium</td>
</tr>
</tbody>
</table>

#### 7. Summary of primary responsibilities:
Provide advice to Region 5 DDD on program planning, priority development, budget planning and implementation and service delivery. Provide citizen and other stakeholder access/opportunity for impact on decisions made regionally. Provide for local participation, advice, review, recommendation regarding state services. Programs in Region 5 include field services, Frances Haddon Morgan Center, Rainier School, and State Operated Living Alternatives (SOLA).

#### 8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
</tr>
</thead>
<tbody>
<tr>
<td>GF State, Community Services</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2005-07 Cost Estimate</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
</tr>
</tbody>
</table>

#### 9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Staff cannot contribute stakeholder input so we would lose stakeholder perspectives.

#### 10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Same as 9 above.

#### 11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.

RCW 43.20A.350 General Authority

#### 12. Title of official who appoints the B/C (e.g., Governor, agency director):

*DDD Region 5 Regional Administrator*

<table>
<thead>
<tr>
<th>13. Is Senate confirmation required?</th>
<th>Yes □ No □</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Authority to issue subpoenas?</td>
<td>Yes □ No □</td>
</tr>
</tbody>
</table>

#### 15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)

*Class One □ Class Two □ Class Three □ Class Four □ Class Five □ Full-time salaried □*

#### 16. What are the membership composition or representation requirements for the B/C?
This group is not mandated. The board is expected to have representation of the following groups: clients, parents of persons who have developmental disabilities, parent coalitions, labor, local counties, vendors, and interested citizens.

#### 17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
N/A

#### 18. Certification

*I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.*

<table>
<thead>
<tr>
<th>Anita Delight</th>
<th>Regional Administrator</th>
<th>June 29, 2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Title</td>
<td>Date</td>
</tr>
<tr>
<td>DSHS/DDD/Region 5</td>
<td>1305 Tacoma Ave., S, Tacoma, 98405</td>
<td>253/593-2820</td>
</tr>
<tr>
<td>Agency</td>
<td>Address</td>
<td>Phone</td>
</tr>
</tbody>
</table>
Division of Developmental Disabilities Region 6 Advisory

1. Full Name of Board or Commission (B/C)  DSHS - Region 6/Division of Developmental Disabilities
2. Name under which B/C reported in 2003  1991
3. Official or agency to which B/C reports  8
4. Year created  5. Number of members  2
5. # of meetings last biennium

Summary of primary responsibilities:
To serve as a bridge between Region VI of the division and local communities, providing vision, advocacy and education in the interest of people with disabilities.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$500.00</td>
<td></td>
<td>GF, State</td>
</tr>
<tr>
<td>$500.00</td>
<td></td>
<td>GF, State</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
Lack of informed stakeholders, uninformed consumers; Issues specific to DDD would not be resolved;

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
No advice to administrator on regional basis.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
RCW 43.20A.350 General Authority

12. Title of official who appoints the B/C (e.g., Governor, agency director): DDD Region 6 Regional Administrator

13. Is Senate confirmation required? Yes ☒ No ☐

14. Authority to issue subpoenas? Yes ☒ No ☐

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
Class One ☒ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☒

16. What are the membership composition or representation requirements for the B/C?
None. Strong emphasis on diversity, persons with disability, parents, minority representation.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
N/A

18. Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Geoff Hartford  Regional Administrator  June 29, 2005
Name  Title  Address  Date  Phone
DSHS/DDD/Region 6  6880 Capitol Blvd., SE, Tumwater 98504  360/725-4250
2005 Boards and Commission Report

Division of Developmental Disabilities State Advisory Committee (SAC)

1. Full Name of Board or Commission (B/C): DSHS/DDD
2. Name under which B/C reported in 2003: same

3. Official or agency to which B/C reports: DSHS/DDD
4. Year created: 1998
5. Number of members: 17
6. # of meetings last biennium: 11

7. Summary of primary responsibilities:
The DDD SAC established by the division, provides input and feedback from consumers and their families about services and programs for people with developmental disabilities enrolled for DDD services. SAC is a place where information from the regional advisory committees can be exchanged and statewide implications discussed. The division solicits input from the committee on policy direction, program modifications, and budget impacts to services.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05</td>
<td>$22,494.12</td>
<td>GF-F, GF-State</td>
</tr>
<tr>
<td>2005-07</td>
<td>$61,240.00</td>
<td>GF-F, GF-State</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
SAC members are consumers of division services provided by state and contracted staff and their input and feedback cannot be provided by staff. SAC provides input and feedback directly to the division director and management staff who are responsible for providing services. Moving to another agency would be less effective in impacting change and responsiveness to clients.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
Clients and their families have little opportunity to meet directly with division management to have face-to-face discussions about their issues and concerns. SAC provides this opportunity rather than a more formal, less personal, process through administrative channels.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
RCW 43.20A.350 General Authority

12. Title of official who appoints the B/C (e.g., Governor, agency director):
Division Director

13. Is Senate confirmation required? Yes ☒ No ☐
14. Authority to issue subpoenas? Yes ☒ No ☐

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
Class One ☒ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
By SAC bylaws, representation on the committee will be clients of DDD and family members of people enrolled in DDD’s caseload. Representation will be from statewide regional areas and represent the diversity of the caseload.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
Solicit and consider client and family input to developmental disabilities service planning and delivery.

18. Certification
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Linda S. Johnson
Chief, Office of Facilities and Operational Resources
June 29, 2005

Name: DSHS/DDD
Title: P.O. Box 45310, Olympia, 98504
Date: 360/725-3400
Agency Address Phone

106
Disability Initiative Advisory Committee (DIAC)  

1. Full Name of Board or Commission (B/C): Washington State Department of Social and Health Services

2. Name under which B/C reported in 2003: DIAC

3. Official or agency to which B/C reports: None.

4. Year created: 1994

5. Number of members: 4

6. # of meetings last biennium: 15

7. Summary of primary responsibilities:
- Provide DSHS the disability community's vision of how to establish and implement services that are responsive to the needs of people with disabilities in Washington State.
- Identify barriers to programs and services that confront people with disabilities and monitor effort to remove barriers.
- Describe the problems and concerns of people with disabilities in Washington State.
- Seek information from concerned citizens on issues important to people with disabilities.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$3,200.00</td>
<td>$24,000.00</td>
<td>GF State</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
- It is inappropriate to have another agency review DSHS policies and how it affects this community group.
- New policy and/or changes to policy may not take into consideration persons with disabilities and the impact it will have.
- Budget models with regards to providing social services to this population may be miscalculated.
- Potential litigation may occur for not appropriately consulting with members of this community group.
- Elimination of this committee will reduce the ability of the department or properly plan for the clinical needs of this population.
- Stakeholders are likely to disapprove.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
- It is inappropriate to have another agency review DSHS policies and how it affects this community group.
- New policy and/or changes to policy may not take into consideration persons with disabilities and the impact it will have.
- Budget models with regards to providing social services to this population may be miscalculated.
- Potential litigation may occur for not appropriately consulting with members of this community group.
- Elimination of this committee will reduce the ability of the department or properly plan for the clinical needs of this population.
- Stakeholders are likely to disapprove.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
- RCW 70.96A.070
- Executive Order 93-03

12. Title of official who appoints the B/C (e.g., Governor, agency director):
- Secretary of the Department of Social and Health Services.

13. Is Senate confirmation required? Yes

14. Authority to issue subpoenas? Yes

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
- Yes

16. What are the membership composition or representation requirements for the B/C?
- At least 60 percent of the DIAC members will be people with disabilities.
- Members will be appointed to serve for a term of three years.
- Members may be appointed to no more than two consecutive terms on the DIAC.
- Selection of DIAC members will be based on the following criteria: disability diversity, gender, ethnic diversity, geographical area and experience and interest in the mission and purpose of the DIAC.
- Members will advise the department on ways to make programs and services more responsive to the needs of people with disabilities.
- Members will keep the department apprised of the concerns and recommendations of the disability community. This will require outreach to other disability advocacy/consumer organizations, advisory groups, individuals and private and public service providers.
- Members will monitor the progress of divisions in reaching their diversity plan goals and objectives that pertain to people with disabilities.
- Members will work with community groups, local governments and the legislature to inform them of efforts that the department has taken to implement the recommendations of the DIAC.
- Members will attend regularly scheduled meetings of the DIAC. Three unexcused absences during a three-year appointment may be cause for removal from the committee.
- If a member is unable to attend a regularly scheduled meeting, they must contact a staff member or a member of the Executive Committee. Failure to do so will result in an unexcused absence.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
- None.

18. Certification

I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Eddie Rodriguez  
Director  
July 6, 2005  

Name  
Title  
Date  

Department of Social and Health Services  
PO Box 45014 Olympia, WA 98504-5014  
360.725.5828  

Agency  
Address  
Phone
2005 Boards and Commission Report

Dispensing Optician Examining Committee

1. Full Name of Board or Commission (B/C)  
   Washington State Department of Health

2. Name under which B/C reported in 2003  
   1948

3. Official or agency to which B/C reports  
   3

4. Year created  
   6

5. Number of members  
   6. # of meetings last biennium

7. Summary of primary responsibilities:
   Set standards of care by health care professionals, credential and discipline health care professionals.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.)

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003-05</td>
<td>$40,121</td>
<td>Health Professions Account, 02G</td>
</tr>
<tr>
<td>2005-07</td>
<td>$45,520</td>
<td>Health Professions Account, 02G</td>
</tr>
</tbody>
</table>

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
   Increased workload and expense to hire experts who would provide input regarding standard of care for the profession.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
    Either the profession would be de-regulated or the workload as mentioned in #9 would shift to DOH staff and cause a need for additional resources.

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
    RCW 18.34.050 - Specific authority.

12. Title of official who appoints the B/C (e.g., Governor, agency director):  
    Secretary, Department of Health

13. Is Senate confirmation required?  
    Yes ☐  No ☒

14. Authority to issue subpoenas?  
    Yes ☐  No ☒

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)

   - Class One ☐
   - Class Two ☒
   - Class Three ☐
   - Class Four ☐
   - Class Five ☐
   - Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
    Three licensed dispensing opticians primarily engaged in the business of dispensing opticianry.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
    None

18. Certification
    I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

    Judy Haenke  
    Program Manager  
    June 2, 2005

    Name  
    Washington State Department of Health  
    P O Box 47870, Olympia WA 98504-7870  
    (360) 236-4947
2005 Boards and Commission Report

Displaced Homemaker Program Statewide Advisory Committee

1. Full Name of Board or Commission (B/C): Higher Education Coordinating Board

2. Name under which B/C reported in 2003: 1979

3. Official or agency to which B/C reports: Average 18 mem

4. Year created: est 4

5. Number of members: last biennium

6. # of meetings:

7. Summary of primary responsibilities:
   Work to develop and review policy recommendations and provide expertise and guiding advice to the Board program staff. Develop funding recommendations based on Request for Proposals or applications.

8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

   2003-05 Cost Actual
   2005-07 Cost Estimate

   Total Cost of B/C Operation
   Fund Source (e.g., GF State)
   G.F. State/A
   G.F. State/A

9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?
   We would lose the benefit of a statewide service provider, and program participant perspective in developing funding recommendations and identifying program priorities. Would lose expertise and on-going formal communications between staff of other state agencies thereby inhibiting collaboration.

10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?
   The same as listed in section 9(a).

11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.

   RCW 28B.04.085, WAC 250-44-030
   Legal authority is specific to the B/C.

12. Title of official who appoints the B/C (e.g., Governor, agency director):
   Executive Director of the HECB

13. Is Senate confirmation required? Yes ☐ No ☑

14. Authority to issue subpoenas? Yes ☐ No ☑

15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)
   Class One ☑ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

16. What are the membership composition or representation requirements for the B/C?
   A member from each of the following agencies is required: Department of Social and Health Services; State Board for Community and Technical Colleges; Superintendent of Public Instruction; Employment Security Department; Department of Labor and Industries; Department of Community Trade and Economic Development; Workforce Training and Education Coordinating Board. Two members of the committee shall either be or recently have been a displaced homemaker.

17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?
   There are no federal requirements.

18. Certification
   I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.
   Donald G. Alexander   Assoc. Dir. for Accounting, Budget & Facilities   6/30/05
   Name   Title   Address   Phone
   Higher Education Coordinating Board   P.O. Box 43430, Olympia, WA 98504-3430   (360) 753-7816
## Drug Utilization and Education Council

### 1. Full Name of Board or Commission (B/C)  
DSHS

### 2. Name under which B/C reported in 2003  
same

### 3. Official or agency to which B/C reports

### 4. Year created

### 5. Number of members

### 6. # of meetings last biennium

### 7. Summary of primary responsibilities:
The Drug Utilization and Education Council is established in federal law and rule to set standards for drug use and provides educational intervention which is designed to change prescribing behaviors and reduce adverse drug outcomes for Medicaid clients.

### 8. Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services. (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,500</td>
<td>2,500</td>
<td>GF-S GF-F</td>
</tr>
</tbody>
</table>

### 9. What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?

This committee has been abolished.

### 10. What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?

NA

### 11. What is the legal authorization for the B/C? Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.

Omnibus Reconciliation Act of 1990 (OBRA); 42 CFR 1996(g) Section 1927

### 12. Title of official who appoints the B/C (e.g., Governor, agency director):

Secretary of DSHS

### 13. Is Senate confirmation required? Yes ☒ No ☐

### 14. Authority to issue subpoenas? Yes ☐ No ☒

### 15. What is the compensation class of the B/C? (See RCW 43.03.220-265 for definitions.)

Class One ☒ Class Two ☐ Class Three ☐ Class Four ☐ Class Five ☐ Full-time salaried ☐

### 16. What are the membership composition or representation requirements for the B/C?

Required membership: 1/3 pharmacists; and 1/3 physicians. Minimum number of members is 8 and maximum is 10.

### 17. Are there federal requirements that the B/C exist and perform specific functions? What are those? Could the requirement be met by another organization?

Provide input to a state agency.

### 18. Certification

I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.

Debbie Meyer  Executive Secretary  6/30/05

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>DSHS</td>
<td>PO Box 45080, Olympia, WA 98504-5500</td>
<td>(360) 725-1867</td>
</tr>
</tbody>
</table>
## 2005 Boards and Commission Report

<table>
<thead>
<tr>
<th>Washington Dry Pea &amp; Lentil Commission</th>
<th>Washington Dry Pea &amp; Lentil Commission</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Full Name of Board or Commission (B/C)</strong></td>
<td><strong>2. Name under which B/C reported in 2003</strong></td>
</tr>
<tr>
<td>Department of Agriculture</td>
<td>1965</td>
</tr>
<tr>
<td><strong>3. Official or agency to which B/C reports</strong></td>
<td><strong>4. Year created</strong></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. **Summary of primary responsibilities:**
Collect assessments, develop advertising and marketing programs, establish grades and standards, provide marketing information to producers, and disburse funds for these purposes.

8. **Enter the cost of B/C operation, including staff support, travel, compensation, consultants and good and services.** (Do not count the cost of operating the program; e.g., issuing grants or issuing licenses.

<table>
<thead>
<tr>
<th>2003-05 Cost Actual</th>
<th>Total Cost of B/C Operation</th>
<th>Fund Source (e.g., GF State)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$74,170</td>
<td>$94,673</td>
<td>Producer assessments</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Producer assessments</td>
</tr>
</tbody>
</table>

9. **What would be the expected consequences if the B/C were abolished and its duties assigned to staff within the agency or to another agency?**
Producer support and involvement would decline.
This is an agricultural program and should not be transferred.

10. **What would be the expected consequences if the B/C were abolished and its duties were terminated entirely?**
Funding of marketing activities would decline affecting producer income and the economic viability of the industry in Washington.

11. **What is the legal authorization for the B/C?** Provide the citation for the authorization under the State Constitution, RCW, WAC, Executive Order, or federal statutory or regulatory requirement. State whether the authority is specific to the B/C, or a general authority for an agency to create a B/C.
RCW 15.65 and WAC 16-536
Specific

12. **Title of official who appoints the B/C (e.g., Governor, agency director):**
WSDA Director

13. **Is Senate confirmation required?** Yes ☒ No ☐

14. **Authority to issue subpoenas?** Yes ☒ No ☐

15. **What is the compensation class of the B/C?** (See RCW 43.03.220-265 for definitions.)

<table>
<thead>
<tr>
<th>Class One ☒</th>
<th>Class Two ☐</th>
<th>Class Three ☐</th>
<th>Class Four ☐</th>
<th>Class Five ☐</th>
<th>Full-time salaried ☐</th>
</tr>
</thead>
</table>

16. **What are the membership composition or representation requirements for the B/C?**
District 1: Whitman County - 3 producers
District 2: Spokane County - 2 producers
District 3: Walla Walla, Garfield, Asotin, and Columbia counties - 1 producer
District 4: All other counties of the state of Washington - 1 producer and One affected handler.
One member appointed by the WSDA Director to represent the Director who is neither an affected producer or affected handler.

17. **Are there federal requirements that the B/C exist and perform specific functions?** What are those? Could the requirement be met by another organization?
No

18. **Certification**

_I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge._

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mark Watson</td>
<td>Financial Officer</td>
<td>2780 W. Pullman Rd., Moscow, ID 83843</td>
<td>(208) 882-3023</td>
</tr>
</tbody>
</table>

Mark Watson
7/21/05