

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2003

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SENATE BILL 672
Health & Human Resources Committee Substitute Adopted 6/5/03

Short Title: Strengthen Public Health Infrastructure. (Public)

Sponsors:

Referred to:

April 2, 2003

A BILL TO BE ENTITLED

1 AN ACT TO IMPROVE THE QUALITY AND ACCOUNTABILITY OF THE
2 PUBLIC HEALTH SYSTEM BY STRENGTHENING THE PUBLIC HEALTH
3 INFRASTRUCTURE, TO IMPROVE PUBLIC HEALTH OUTCOMES AND
4 REDUCE HEALTH DISPARITIES BY THE DEVELOPMENT OF STATE AND
5 LOCAL COMPREHENSIVE PUBLIC HEALTH PLANS, AND TO IMPROVE
6 THE PUBLIC HEALTH WORKFORCE BY ENHANCING COLLABORATION
7 WITH PUBLIC AND PRIVATE SECTOR ENTITIES AND IMPOSING
8 PERFORMANCE STANDARDS FOR PUBLIC HEALTH PRACTICE.
9

10 Whereas, North Carolina has a rich local public health heritage and wishes to
11 continue that heritage by strengthening the State's public health infrastructure; and

12 Whereas, the public health system must respond to: new serious public health
13 emergencies, significant changes in population, decreasing funding, and significant
14 variations in public health protection between counties and regions; and

15 Whereas, the mission of protecting and promoting the health of the public can
16 most efficiently and effectively be addressed through the coordinated efforts of State
17 and local public health agencies and the collaboration of the public and private sectors
18 within the public health system; and

19 Whereas, a consensus for establishing, prioritizing, and implementing
20 essential public health services and functions can be achieved through locally developed
21 and coordinated health plans that provide the foundation for a comprehensive statewide
22 public health plan; and

23 Whereas, the public and private sectors can demonstrate public accountability
24 and provide high quality services through accreditation, certification, credentialing, and
25 the implementation of performance standards; Now, therefore,
26 The General Assembly of North Carolina enacts:

27 **SECTION 1.** G.S. 130A-1.1 is repealed.

28 **SECTION 2.** G.S. 130A-2 reads as rewritten:

29 "§ 130A-2. **Definitions.**

1 The following definitions shall apply throughout this Chapter unless otherwise
2 specified:

- 3 (1) "Commission" means the Commission for Health Services.
- 4 (1a) "Communicable condition" means the state of being infected with a
5 communicable agent but without symptoms.
- 6 (1b) "Communicable disease" means an illness due to an infectious agent or
7 its toxic products which is transmitted directly or indirectly to a person
8 from an infected person or animal through the agency of an
9 intermediate animal, host, or vector, or through the inanimate
10 environment.
- 11 (2) "Department" means the Department of Health and Human Services.
- 12 (2a) "Essential public health services and functions" means those services
13 and functions listed in G.S. 130A-2.3.
- 14 (3) "Imminent hazard" means a situation that is likely to cause an
15 immediate threat to human life, an immediate threat of serious physical
16 injury, an immediate threat of serious adverse health effects, or a
17 serious risk of irreparable damage to the environment if no immediate
18 action is taken.
- 19 (3a) "Isolation authority" means the authority to issue an order to limit the
20 freedom of movement or action of a person or animal with a
21 communicable disease or communicable condition for the period of
22 communicability to prevent the direct or indirect conveyance of the
23 infectious agent from the person or animal to other persons or animals
24 who are susceptible or who may spread the agent to others.
- 25 (4) "Local board of health" means a district board of health or a public
26 health authority board or a county board of health.
- 27 (5) "Local health department" means a district health department or a
28 public health authority or a county health department.
- 29 (6) "Local health director" means the administrative head of a local health
30 department appointed pursuant to this Chapter.
- 31 (6a) "Local public health agency" means a local health director, a local
32 board of health, and a local health department.
- 33 ~~(6a)~~(6b) "Outbreak" means an occurrence of a case or cases of a disease in a
34 locale in excess of the usual number of cases of the disease.
- 35 (7) "Person" means an individual, corporation, company, association,
36 partnership, unit of local government or other legal entity.
- 37 (7a) "Private sector partner" means nongovernmental persons, including
38 community organizations, contractors, educational institutions, health
39 care facilities, health insurers, private businesses, media, nonprofit
40 organizations, and volunteers, that provide essential public health
41 services and functions or work to improve public health outcomes in
42 collaboration with the State or a local public health agency and are
43 identified in the local public health plans in accordance with G.S.
44 130A-2.7.

- 1 (7b) "Public health" means assuring the conditions in which the population
2 can be healthy. The term includes population-based or individual
3 efforts primarily aimed at the prevention of injury, disease, or
4 premature mortality or the promotion of health in the community, such
5 as assessing the health needs and status of the community through
6 public health surveillance and epidemiological research, developing
7 public health policy, and responding to public health needs and
8 emergencies.
- 9 (7c) "Public health agency" means a federal, State, or local public health
10 agency.
- 11 (7d) "Public health infrastructure" means the competencies and resources
12 that enable public health agencies, in collaboration with other
13 components of the public health system, to provide essential public
14 health services and functions throughout the State.
- 15 (7e) "Public health system" means State and local public health agencies
16 and their public and private sector partners.
- 17 (7f) "Public health workforce" means State and local public health agents
18 and other persons working within the public health system to provide
19 essential public health services and functions in the State.
- 20 (7g) "Public sector partner" means international, federal, tribal, or other
21 State or local governments and their public health agencies that
22 provide essential public health services and functions or work to
23 improve public health outcomes with a State or local public health
24 agency.
- 25 (7a)(7h) "Quarantine authority" means the authority to issue an order to limit
26 the freedom of movement or action of persons or animals which have
27 been exposed to or are reasonably suspected of having been exposed to
28 a communicable disease or communicable condition for a period of
29 time as may be necessary to prevent the spread of that disease.
30 Quarantine authority also means the authority to issue an order to limit
31 access by any person or animal to an area or facility that may be
32 contaminated with an infectious agent. The term also means the
33 authority to issue an order to limit the freedom of movement or action
34 of persons who have not received immunizations against a
35 communicable disease when the State Health Director or a local health
36 director determines that the immunizations are required to control an
37 outbreak of that disease.
- 38 (8) "Secretary" means the Secretary of Health and Human Services.
- 39 (8a) "State public health agency" means the Commission for Health
40 Services, the Department of Health and Human Services, and the
41 Department of Environment and Natural Resources to the extent that
42 the Department of Environment and Natural Resources has jurisdiction
43 to protect the public's health.

1 (9) "Unit of local government" means a county, city, consolidated
2 city-county, sanitary district or other local political subdivision,
3 authority or agency of local government.

4 (10) "Vital records" means birth, death, fetal death, marriage, annulment
5 and divorce records registered under the provisions of Article 4 of this
6 Chapter."

7 **SECTION 3.** Part 1 of Article 1 of Chapter 130A of the General Statutes is
8 amended by adding the following new sections to read:

9 **"§ 130A-2.1. Mission statement.**

10 (a) The policy of the State is to protect and promote the health of the public to
11 the greatest extent possible through the public health system while respecting individual
12 rights to bodily integrity, health information privacy, nondiscrimination, due process,
13 and other legally protected interests.

14 (b) The mission of the State and local public health agencies is to provide
15 leadership and protect and promote the public's health by:

16 (1) Providing essential public health services and functions as provided in
17 G.S. 130A-2.3.

18 (2) Encouraging collaboration among public and private sector partners in
19 the public health system.

20 (3) Seeking adequate funding to provide essential public health services
21 and functions and to accomplish public health goals from public or
22 private sources.

23 **"§ 130A-2.2. Responsibilities of State and local governments; private sector**
24 **collaboration.**

25 (a) The State and counties are responsible for assuring that the public health
26 system accomplishes the mission of public health.

27 (b) State and local public health agencies shall collaborate with public and
28 private sector partners within the public health system to provide essential public health
29 services and functions listed in G.S. 130A-2.3.

30 (c) State and local public health agencies shall obtain accreditation. Local public
31 health agencies shall meet the accreditation criteria of the accreditation program
32 administered by the State public health agency. The State public health agency shall
33 obtain an accreditation directed at the duties and functions of a state-level public health
34 agency from a national accrediting body.

35 (d) State or local public health agencies may contract with contractors or other
36 private sector partners for the purpose of providing essential health services and
37 functions directly through these private sector entities if:

38 (1) The contractor has the potential to improve public health outcomes
39 without causing harm to individuals or the public health system.

40 (2) Contracted services are fully and regularly monitored by the
41 contracting public health agency. The State and local public health
42 agencies shall devise, in consultation with others within the public
43 health system, evaluation criteria to be used in conducting

1 performance reviews of any private sector partner that provides
2 contracted services or functions.

3 (3) Contracted services or functions are subject to other federal, State, or
4 local laws.

5 **"§ 130A-2.3. Essential public health services and functions.**

6 (a) State and local public health agencies, in collaboration with public and
7 private sector partners, shall provide the following essential public health services and
8 functions:

9 (1) Monitor health status to identify and solve community health
10 problems.

11 (2) Mobilize public and private sector collaboration and action to identify
12 and solve health problems.

13 (3) Diagnose and investigate health problems and health hazards in the
14 community.

15 (4) Inform people about health issues.

16 (5) Develop policies and plans that support individual and community
17 health efforts.

18 (6) Enforce laws and regulations that protect health and ensure a safe and
19 healthful environment.

20 (7) Promote access to and availability of needed personal health care
21 services and collaborate with other public and private sector partners
22 to promote or provide preventative and primary health care services
23 according to identified community needs. For the purposes of this
24 subdivision, preventative and primary health care services include
25 acute and episodic care, prenatal and postpartum care, child health,
26 family planning, school health, chronic disease prevention, child and
27 adult immunization, dental health, nutrition, and health education and
28 promotion services.

29 (8) Monitor and ensure the competency of the public health workforce.

30 (9) Evaluate effectiveness, accessibility, and quality of personal and
31 population-based health services.

32 (10) Conduct research to identify new insights and innovative solutions to
33 health problems.

34 (11) Promote the availability and accessibility of quality health care
35 services through health care facilities or providers.

36 (12) Establish and maintain an effective public health preparedness and
37 response capacity for all hazards.

38 (b) The essential public health services and functions listed in subsection (a) of
39 this section shall not be construed to limit or restrict the powers and duties of the
40 Commission, the Department, rules adopted by local boards of health, or the
41 Department of Environment and Natural Resources as otherwise conferred by State law.

42 **"§ 130A-2.4. Public health infrastructure.**

1 (a) The Secretary shall coordinate State and local public health agencies and their
2 public and private sector partners to do the following to strengthen and maintain
3 stability of the public health infrastructure:

4 (1) Identify and provide leadership for the provision of essential public
5 health services and functions;

6 (2) Develop management standards for the State and local public health
7 workforce that are tied to improvements in public health outcomes or
8 other measures;

9 (3) Develop and provide effective training for members of the State and
10 local public health workforce that is focused on performance-based
11 standards;

12 (4) Evaluate performance management standards and training efforts
13 within State and local public health agencies; and

14 (5) Comprehensively plan and set priorities for the efficient and effective
15 accomplishment of essential public health services and functions.

16 (b) In performing the duties set forth in subsection (a) of this section, State and
17 local public health agencies shall consult with and utilize national guidelines, initiatives,
18 programs, and recommendations relating to improvements in public health
19 infrastructure that are consistent with accomplishing the mission of public health in the
20 State.

21 **"§ 130A-2.5. Public health workforce.**

22 (a) The State public health agency shall manage the State and local public health
23 workforce performance related to public health infrastructure and capacity, processes,
24 and outcomes at the State and local levels. The State public health agency shall establish
25 and implement performance standards, measures, and processes for quality or
26 performance improvement that are accessible, affordable, and nonpunitive. These
27 include the following:

28 (1) Performance measurement standards for the public health system. –
29 Consistent with the National Public Health Performance Standards
30 Program, the State public health agency shall adopt and administer
31 performance measurements within the public health system as a means
32 of improving the quality of State and local public health practice and
33 improving system accountability.

34 (2) Certification or credentialing for the public health workforce. –
35 Consistent with any approved and recognized system of public health
36 workforce certification or credentialing, the State public health agency
37 shall adopt and administer public health workforce certification or
38 credentialing programs for members of the public health agencies.
39 These programs shall be designed to develop knowledge, skills, and
40 abilities in relevant and contemporary public health practice areas and
41 must be based on:

42 a. Basic, core, or technical competencies for public health
43 workers; or

44 b. Professional codes for public health professionals.

1 **(b)** The State public health agency shall, directly or in conjunction with
2 educational institutions or others within the public health system, make available or
3 assure effective programs, continuing education, or other tools for training public health
4 agents and others within the public health workforce.

5 **(c)** The State public health agency may require individuals within the public
6 health system to meet minimal training requirements to assist the individual in
7 providing essential public health services and functions.

8 **(d)** The State public health agency may provide incentives to meet performance
9 management or training requirements, including:

10 **(1)** Organizational accountability awards.

11 **(2)** Accreditation recognition for public health agencies or their
12 contractors or volunteers.

13 **(3)** Certification or credentialing titles or recognition for individuals.

14 **(4)** Other career development initiatives, including financial benefits.

15 **(e)** The State public health agency shall:

16 **(1)** Adopt a framework for the evaluation of the performance of the local
17 public health agency workforce.

18 **(2)** Develop standards to consistently evaluate the effectiveness and
19 delivery of training programs, continuing education, and other tools.

20 **(3)** Consistently evaluate performance management and training
21 programs, continuing education, and other tools pursuant to these
22 frameworks or standards.

23 **"§ 130A-2.6. Local public health plans.**

24 **(a)** Every county, through its local public health agency, shall provide for the
25 development, review, and approval of a local public health plan consistent with the
26 comprehensive State public health plan required under G.S. 130A-2.7. The local public
27 health plan shall address how the local public health agency will coordinate with the
28 State public health agency and others within the public health system to accomplish
29 goals and priorities identified in the comprehensive State public health plan. The local
30 public health plan shall cover five years and shall be reviewed annually. Future plans
31 shall be developed every five years. Prior to the approval of the local public health plan,
32 the local board of health and the board of county commissioners shall hold a public
33 hearing with notice published at least 10 days before the hearing. In addition to the
34 items listed in G.S. 130A-2.7, the local public health plan shall include the following:

35 **(1)** A description of the demographics and health indicators of the
36 population being served by the local public health agency.

37 **(2)** A description of the numbers and types of professionals in the local
38 public health workforce.

39 **(3)** A description of the local public health workforce training needs.

40 **(4)** A description of how the local public health agency is accountable to
41 the public in ensuring the provision of essential public health services
42 and functions.

- 1 (5) A description of how the local public health agency provides the
2 necessary leadership to ensure that public health services are managed,
3 monitored, and of the highest quality possible.
4 (6) A description of how the local public health agency manages its
5 finances and accounts for expenditures of State, local, and all other
6 sources of revenue.
7 (7) Identification of public and private sector partners.
8 (8) Other matters determined by the Secretary to be necessary to
9 effectively and efficiently provide essential public health services and
10 functions by a local public health agency.

11 (b) The State public health agency shall provide technical assistance to local
12 public health agencies that request assistance and shall otherwise work with local public
13 health agencies to generate the plan.

14 **"§ 130A-2.7. Comprehensive State public health plan.**

15 (a) The State public health agency shall develop a comprehensive public health
16 plan ("Plan") that assesses and sets priorities for the State public health system based on
17 local public health plans developed and submitted in accordance with G.S. 130A-2.6.
18 The State public health agency shall develop the Plan in consultation with
19 representatives from its public and private sector partners. The Plan may rely on
20 existing or available surveillance data or other information available to the State public
21 health agency, as well as national guidelines or recommendations concerning public
22 health outcomes and improvements. The Plan shall cover five years and shall be
23 reviewed annually. Future Plans shall be developed every five years. Prior to the
24 adoption of the Plan, the State public health agency shall hold public hearings around
25 the State with notice published at least 10 days before each hearing. The Plan shall
26 include the following:

- 27 (1) Identification and quantification of existing public health problems,
28 disparities, or threats at the State and local levels.
29 (2) Identification of areas needing greater resource allocation to
30 effectively combat public health threats or decrease disparities in the
31 provision of essential public health services and functions.
32 (3) Goals for targeting essential public health services and functions to
33 address prioritized public health problems, disparities, or threats
34 through program development, implementation, and evaluation and
35 specific recommendations, strategies, and schedules for meeting these
36 goals.
37 (4) Identification of specific at-risk populations targeted, including criteria
38 for identifying targeted populations.
39 (5) Goals for increasing the efficiency and effectiveness of the public
40 health system and specific recommendations, strategies, and schedules
41 for meeting these goals.
42 (6) Strategies for coordinating service delivery within the public health
43 system.
44 (7) Measurable indicators of effectiveness and success.

1 (8) Identification of public and private sector partners.

2 (b) The State public health agency shall submit a copy of the comprehensive
3 State public health plan required under this section annually to the Governor and the
4 General Assembly upon its convening or reconvening, including any recommendations
5 for legislative amendments."

6 **SECTION 4.** The Department of Health and Human Services shall do the
7 following to prepare for the development and implementation of the comprehensive
8 State public health plan and the local public health plans:

9 (1) Ensure that local public health plans required under G.S. 130A-2.6 are
10 completed and submitted no later than July 1, 2004.

11 (2) Develop the State comprehensive public health plan in accordance
12 with G.S. 130A-2.7 not later than January 1, 2005.

13 (3) In consultation with local public health agencies, the State public
14 health agency shall develop and administer an accreditation program
15 not later than January 1, 2005. The program shall include criteria that
16 measure the local public health agencies' capacity to provide, in
17 collaboration with public and private sector partners, all essential
18 public health services and functions listed in G.S. 130A-2.3 in a
19 manner that promotes quality and financial sustainability.

20 (4) Review all rules currently in effect and adopted by the Commission for
21 Health Services and the Secretary of Health and Human Services and
22 identify rules that are inconsistent with this act.

23 (5) Review all oversight and monitoring functions currently implemented
24 by the Department with respect to the public health system to
25 determine the effectiveness of the activities on achieving the intent of
26 this act; improve the oversight and monitoring functions and activities,
27 if necessary; and identify areas where additional training is needed and
28 provide it.

29 (6) Develop service standards, outcomes, and financing strategies
30 necessary to implement this act.

31 (7) Develop format and required content for local public health plans.

32 (8) Develop a method for Departmental evaluation of local public health
33 plans.

34 (9) Develop contractual agreements for the provision of technical
35 assistance by the Department to local public health agencies in the
36 development of local public health plans.

37 (10) Report to the Joint Legislative Health Care Oversight Committee on
38 the Department's readiness to implement public health infrastructure
39 reform no later than October 1, 2004.

40 (11) In consultation with officials from the North Carolina Boards of
41 Health, the North Carolina Association of Local Health Directors, and
42 the North Carolina Association of County Commissioners, develop
43 and implement a consolidation plan based on the accreditation criteria
44 developed pursuant to G.S. 130A-2.5. The consolidation plan shall be

1 developed no later than January 1, 2005, and shall be fully
2 implemented no later than July 1, 2006.

3 **SECTION 5.** There is appropriated from the General Fund to the
4 Department of Health and Human Services the sum of twenty-five thousand dollars
5 (\$25,000) for the 2003-2004 fiscal year. These funds shall be used by the Department of
6 Health and Human Services to conduct the public hearings required by this act.

7 **SECTION 6.** Section 5 of this act becomes effective July 1, 2003. The
8 remainder of this act is effective when it becomes law.