GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1991

H 1 **HOUSE BILL 476** Short Title: Public Health Study. (Public) Sponsors: Representatives Payne; H. Hunter and McLawhorn. Referred to: Human Resources April 1, 1991 A BILL TO BE ENTITLED 2 AN ACT TO ESTABLISH THE PUBLIC HEALTH STUDY COMMISSION. 3 The General Assembly of North Carolina enacts: Section 1. Chapter 120 of the General Statutes is amended by adding the 4 following new Article to read: "ARTICLE 22. 6 "THE PUBLIC HEALTH STUDY COMMISSION. 7 "§ 120-195. Commission created; purpose. 8 There is established the Public Health Study Commission. The Commission shall 9 examine the public health system to determine its effectiveness and efficiency in 10 assuring the delivery of public health services to the citizens of North Carolina. "§ 120-196. Commission duties. 12 The Commission shall study the availability and accessibility of public health 13 services to all citizens throughout the State. In conducting the study the Commission 14 15 shall: 16 (1) Evaluate whether the current organizational structure of the public health system is effective in meeting public health needs and the 17 18 likelihood that such structure will be able to achieve the State's public health mandate in the future; 19 Ascertain what public health services are currently available in each 20 (2) 21 county or district health department and the degree to which those 22 services are meeting the health-related needs of residents served by the

county or district health department;

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Study the personnel structure and needs of each county or district (3) health department, including salary levels, professional credentials, and continuing education requirements, and determine the impact that shortages of public health professional personnel have on the delivery of public health services in each county or district health department: (4) Establish a standing subcommittee of not more than eleven members to study and make recommendations on financing of the public health system. Commission cochairmen shall appoint members and nonmembers of the Commission to the subcommittee, provided that at least seven of the appointments shall be Commission members. The subcommittee shall consider recommendations in the 1989-90 Public

Health Study Commission's final report:

- (5) Determine whether there is a need for ongoing orientation and training programs for local boards of health, and, if so, what the State's role should be in assuring that such programs are available;
- Review the status and needs of local health departments relative to facilities, and the need for the development of minimum standards governing the provision and maintenance of these facilities;
- (7) Propose a long-range plan for improving and funding the public health system, which plan shall include a review and evaluation of the current structure and financing of public health in North Carolina, and any other recommendations the Commission deems appropriate based on its study activities. The Commission may request that the long-range plan be developed by the State Health Director in consultation with the Commission for Health Services and submitted to the Study Commission for its consideration;
- Establish a standing subcommittee of not more than nine members to study and make recommendations on injury prevention and control. The cochairmen of the Commission shall appoint members and nonmembers of the Commission to the subcommittee, provided that at least five of the appointments shall be Commission members. The subcommittee shall review periodically but at least annually, the injury problem in North Carolina and make recommendations to the Commission for measures to alleviate this problem:
- (9) Examine the need for additional legislation to deal with Acquired Immune Deficiency Syndrome AIDS within this State and recommend legislation, as needed; and
- (10) Conduct any other studies or evaluations the Commission considers necessary to effectuate its purpose.

"§ 120-197. Commission membership.

The Commission shall consist of 21 members. The Speaker of the House of Representatives shall appoint seven members, a minimum of four of whom shall be members of the House of Representatives. The President Pro Tempore of the Senate shall appoint seven members, a minimum of four of whom shall be members of the

Senate. The Governor shall appoint seven members, as follows: one of whom shall be a recipient of public health services, one of whom shall be a public health director, one of whom shall be a county commissioner, one of whom shall be an advocate for lowincome people who is familiar with public health services in North Carolina, one of whom shall be the Secretary of the Department of Human Resources or a designee thereof, one of whom shall be a physician licensed to practice medicine under Chapter 90 of the General Statutes, and one of whom shall be an individual involved in the administration or funding of public health services.

Vacancies shall be filled by the official who made the initial appointment using the same criteria as provided by this section. All initial appointments shall be made within one calendar month from the effective date of this Article. Members' terms shall last for two years. Members may be reappointed for two consecutive terms and may be appointed again after having been off the Commission for two years.

"§ 120-198. Commission meetings.

The Commission shall have its initial meeting no later than 60 days after adjournment of the 1991 General Assembly, first session, at the call of the President Pro Tempore of the Senate and the Speaker of the House of Representatives. The President Pro Tempore of the Senate and the Speaker of the House of Representatives shall appoint a cochairman each from the membership of the Commission. The Commission shall meet upon the call of the cochairmen.

"§ 120-199. Commission reimbursement.

The Commission members shall receive no salary as a result of serving on the Commission but shall receive necessary subsistence and travel expenses in accordance with the provisions of G.S. 120-3.1, 138-5, and 138-6, as applicable.

"§ 120-200. Commission public hearings.

The Commission may hold public hearings across the State to solicit public input with respect to issues affecting public health in North Carolina.

"§ 120-201. Commission authority.

The Commission has the authority to obtain information and data from all State officers, agents, agencies and departments, while in discharge of its duties, pursuant to the provisions of G.S. 120-19, as if it were a committee of the General Assembly. The Commission shall also have the authority to call witnesses, compel testimony relevant to any matter properly before the Commission, and subpoena records and documents, provided that any patient record shall have patient identifying information removed. The provisions of G.S. 120-19.1 through G.S. 120-19.4 shall apply to the proceedings of the Commission as if it were a joint committee of the General Assembly. In addition to the other signatures required for the issuance of a subpoena under this section, the subpoena shall also be signed by the cochairmen of the Commission. Any cost of providing information to the Commission not covered by G.S. 120-19.3 may be reimbursed by the Commission from funds appropriated to it for its continuing study.

"§ 120-202. Commission reports.

The Commission shall report to the General Assembly and the Governor the results of its study and recommendations. A written report shall be submitted to each biennial session of the General Assembly not later than 30 days after its convening. The report

made to the 1993 Session shall include the long-range plan required under G.S. 120-196(7).

"§ 120-203. Commission staff; meeting place.

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 The Commission may contract for clerical or professional staff or for any other services it may require in the course of its ongoing study. At the request of the Commission, the Legislative Services Commission may supply members of the staff of the Legislative Services Office and clerical assistance to the Commission as the Legislative Services Commission deems appropriate.

The Commission may, with the approval of the Legislative Services Commission, meet in the State Legislative Building or the Legislative Office Building."

- Sec. 2. There is appropriated from the General Fund to the Legislative Services Commission the sum of \$50,000 for the 1991-92 fiscal year and the sum of \$50,000 for the 1992-93 fiscal year to fund the first two years of the Commission's study established by this act.
- Sec. 3. The Department of Environment, Health, and Natural Resources shall carry out the following tasks and shall report to the Public Health Study Commission established under this act on the implementation status of each task:
 - (1) Implement a plan to increase the Department's capability and the capability of local health departments to secure private sector financial resources to supplement public health activities and services mandated by the State;
 - (2) Establish a statewide system for assessing health status and health needs in every county. In establishing the system the Department shall solicit input from private providers, community groups and agencies, the general public, and policy makers in determining community health needs;
 - (3) Plan for the development of a computerized statewide data collection and retrieval system that will permit comparisons of State and local health data with those of the nation and of other states and localities. The system should be standardized with respect to local reporting of health status and needs, health services delivered, funds expended, and outcomes achieved, and should be adaptable to systems currently used by local health departments. In developing the Plan, the Department shall consider data collection and retrieval capabilities currently in place in the State, and shall determine the level of State funding that will be needed to implement the system statewide and to provide financial assistance to counties for local system integration into the statewide system. The Department shall present the Plan to the Public Health Study Commission not later than October 1, 1992; and
 - (4) The Commission for Health Services shall establish statewide health outcome objectives and delivery standards, taking into account funds available to implement them. The Department shall implement statewide health outcome objectives and delivery standards established by the Commission for Health Services, and shall develop and

1991	GENERAL ASSEMBLY OF NORTH CAROLINA
1	implement a monitoring and evaluation program to measure local
2	health department progress in applying standards and achieving
3	objectives.
4	Sec. 4. This act becomes effective July 1, 1991.