

# Oregon Public Health Connection

An e-bulletin co-produced by the Oregon Public Health Division, DHS, and the Conference of Local Health Officials

December 22, 2006

Volume 1, Number 5

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## Top Priority: Proposed Changes to State's Public Health Law



Dr. Susan Allan

*By Susan Allan, MD, JD, MPH, Public Health Director, Oregon Public Health Division, DHS*

One of the key new legislative proposals for the Department of Human Services is a 46-page draft that revises many provisions of the state's public health laws. The purpose of the proposed new legislation is to ensure that Oregon's public health laws allow state and local officials to take appropriate actions to protect the health of the public and the rights of individuals in an emergency. The draft has been distributed to CLHO and we could encourage anyone interested to review it.

The current draft, written by legislative counsel, makes a few changes and deletions from our original proposal. We are developing a list of amendments that we might want to submit on our own behalf due to these changes. We are very interested in the perspective of local health officials because the new law is intended to strengthen our system overall and to clarify our respective roles and powers for action.

*(...continued on page 2)*

## CLHO Perspective: Proposed Changes to Public Health Law

*By Dave Houghton, Chair, Oregon Conference of Local Health Officials*

CLHO appreciates the opportunities our organization has been provided to actively participate in the crafting of this proposed statutory change. CLHO recently distributed the new public health law legislative counsel draft to all Oregon local health department administrators for review and comment.

This is a critical and time-limited opportunity to closely review the proposed statute and comment so that CLHO is actively engaged in the development of amendments that may be submitted as soon as early January. Feedback to date from initial review of the legislative counsel draft will lead to language change proposals from CLHO. I strongly encourage local health administrators to take this opportunity, as soon as possible, to provide feedback through CLHO to the state.

Key changes include language related to state and local public health authority, definitions including "public health emergency," quarantine and isolation standards and due process, the state's authority to set standards and guidelines in an emergency, management of human remains and management of toxic and radiation health threats. If you have questions or comments, please contact Dave Houghton, CLHO Chair, at [david.b.houghton@co.multnomah.or.us](mailto:david.b.houghton@co.multnomah.or.us)

## Spanish Resources

Health-Related Materials Available to Counties for Spanish-Speaking Clients

[PH Eng-Span Glossary 11.06](#)

## Partner Links

[Oregon Department of Education Handwashing Awareness, pg. 5](#)

[Oregon Dept. of Environmental Quality Oregon Air Pollution Advisories](#)

[Earth 911 Partnership Beach Water Quality Status](#)

## PH: In the News

[Multi-state oyster recall 12.11.06](#)

A disease outbreak investigation by Oregon state and Marion County public health officials has led to a multi-state recall of pounds of frozen oysters.

[Groundwater: Deschutes Co 12.07.06](#)

Deschutes County is considering a proposed rule that will help protect the sole source of drinking water for south Deschutes County residents by reducing the level of nitrogen discharged.

[Flu Shot Advice: Clatsop Co 12.1.06](#)

Five good reasons to get a flu immunization according to public health officials in Clatsop County.

[Josephine Co Report 12.06](#)

Bi-monthly newsletter published by the Josephine County Board of Commissioners.

[Medicare Part D: Mult Co 11.30.06](#)

Staff and volunteers from Multnomah County are reminding seniors about enrollment in Medicare Part D.

[Wood Burning: Jackson Co 11.06](#)

From November through February, the Wood Burning Advisory designates days as green, yellow, or red depending on the amount of particulate matter in the air.

## Contact Us

Oregon Public Health Connection is a monthly e-bulletin produced jointly by the Oregon Public Health Division and the Conference of Local Health Officials (CLHO). To provide information for the bulletin, email:

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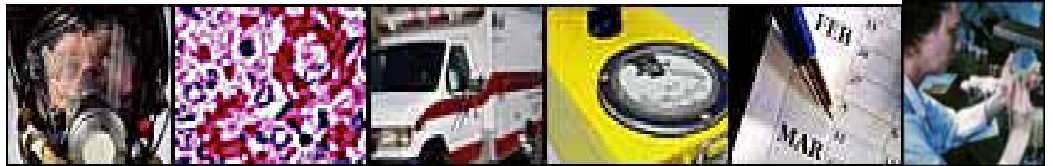
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... continued from page 1, [State public health law proposed changes](#)

The proposal was the result of the work of a review group from April to August 2006. About 20 members of key organizations were involved in the review including the Attorney General's office, CLHO, AOC, Oregon Medical Association, Oregon Association of Hospitals and Health Systems, Oregon Nurses Association, and ACLU. Other organizations were consulted on certain provisions.

A tremendous amount of work by many people went into the development of this draft. Undoubtedly it isn't perfect – some issues weren't addressed, and perhaps some sections could be written more clearly. But this proposes major improvements to the current state public health laws. Of course, the next challenge is to move this draft through the legislative process. We look forward to working with CLHO and the Counties to strengthen the ability of our public health system to protect people. *(To view a complete copy of the proposed law changes, see your local county health department administrator.)*



## Summary of major changes:

- **PH Authority:** Current law lacks clarity regarding state and local public health powers and duties. The draft better defines responsibilities and actions that can be taken by state and local public health authorities during a public health emergency. Concern exists that public health may need to take strong action in situations that are less than those that would trigger a Governor's declaration of emergency. For recent public health emergencies in other states, such as anthrax and monkeypox, there were no declarations of emergency. The draft provides the authority for the state public health director to respond to this type of situation and describes others where this additional authority could be involved. To invoke this provision, the public health director must obtain initial authorization from the Governor's office. The draft also specifies that this does not change the day-to-day authorities of local health officials.
- **Public Health Emergencies:** Definition of "public health emergency" to include current, imminent and likely event.
- **Quarantine & Isolation (Q & I):** Current state Q & I provisions provide limited options for protecting the community and also do not clearly protect the civil rights of individuals. The draft law clarifies and updates standards and due process, provides for the Q & I of groups in certain circumstances, specifies other public health measures, clearly identifies that public health orders are enforceable and provides for emergency Q & I.
- **Controlling Public Health Hazards in an Emergency:** During planning regarding pandemic influenza, local health officials, hospitals, and physicians stated that consistency of action would be essential in a situation that requires allocation of scarce resources or altered standards of care. The draft provides the authority during emergencies for the state to set standards when events require consistency across counties or statewide, to issue guidelines for allocating scarce resources, and to issue guidelines authorizing altered standards of care. Consistency in these decisions is ethically and politically important, and would help minimize concerns about provider liability because it would in effect redefine community standards of care during an emergency.
- **Management of Remains:** Current law has no provisions for urgent management of human remains or for management of large numbers of remains in current state emergency laws. The Medical Examiner's office has authority to take charge of and examine bodies, but not to manage them once examinations are completed. The draft addresses this.
- **Toxic Contamination or Radiation:** Current law is unclear regarding authority to take measures to assess situations or to manage health threats from toxic or radiation sources. The draft provides authority to assess the risk, and to intervene as needed including isolation of property where indicated.