

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1997

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SENATE BILL 636

Short Title: Public Health Authority Act.

(Public)

Sponsors: Senators Hartsell; Forrester, Lucas, and Martin of Guilford.

Referred to: Children and Human Resources.

April 1, 1997

A BILL TO BE ENTITLED

AN ACT TO AUTHORIZE THE ESTABLISHMENT OF LOCAL PUBLIC HEALTH
AUTHORITIES, AS RECOMMENDED BY THE NORTH CAROLINA PUBLIC
HEALTH COMMISSION.

The General Assembly of North Carolina enacts:

Section 1. Article 2 of Chapter 130A of the General Statutes is amended by
adding a new Part to read:

"PART 1A. PUBLIC HEALTH AUTHORITIES AUTHORIZED.

"§ 130A-43. Title and purpose.

(a) This Part shall be known and may be cited as the 'Public Health Authorities
Act'.

(b) The purpose of this Part is to provide an additional and alternative method for
counties to provide public health services. This Part shall not be regarded as repealing
any powers now existing under any other law, either general, special, or local.

(c) It is the policy of the General Assembly that Public Health Authorities should
have adequate authority to exercise the powers, rights, duties, functions, privileges, and
immunities conferred upon them by law. To this end the provisions of this Part shall be
broadly construed, and grants of powers shall be construed to include any powers that are
reasonably expedient to the exercise of power.

"§ 130A-44. Definitions.

1 As used in this Part, unless otherwise specified:

- 2 (1) 'Authority service area' means area within the boundaries of the
3 authority as provided for in G.S. 130A-45.4.
- 4 (2) 'Board' means a public health authority board created under this Part.
- 5 (3) 'Department' means the Department of Environment, Health, and
6 Natural Resources.
- 7 (4) 'County board of commissioners' means the legislative body charged
8 with governing the county.
- 9 (5) 'County' means the county which is, or is about to be, included in the
10 territorial boundaries of a public health authority when created
11 hereunder.
- 12 (6) 'Federal government' means the United States of America, or any
13 agency, instrumentality, corporate or otherwise, of the United States of
14 America.
- 15 (7) 'Government' means the State and federal governments and any
16 subdivision, agency, or instrumentality, corporate or otherwise, of either
17 of them.
- 18 (8) 'Public health authority' means a public body and a body corporate and
19 politic organized under the provisions of this Part.
- 20 (9) 'Public health facility' means any one or more buildings, structures,
21 additions, extensions, improvements, or other facilities, whether or not
22 located on the same site or sites, machinery, equipment, furnishings or
23 other real or personal property suitable for providing public health
24 services; and includes, without limitation, local public health
25 departments or centers; public health clinics and outpatient facilities;
26 nursing homes, including skilled nursing facilities and intermediate care
27 facilities, adult care homes for the aged and disabled; public health
28 laboratories; administration buildings, central service and other
29 administrative facilities; communication, computer and other electronic
30 facilities; pharmaceutical facilities; storage space; vehicular parking lots
31 and other such public health facilities, customarily under the jurisdiction
32 of or provided by public health departments, or any combination of the
33 foregoing, with all necessary, convenient or related interests in land,
34 machinery, apparatus, appliances, equipment, furnishings,
35 appurtenances, site preparation, landscaping, and physical amenities.
- 36 (10) 'Real property' means lands, lands under water, structures, and any and
37 all easements, franchises and incorporeal hereditaments and every estate
38 and right therein, legal and equitable, including terms for years and liens
39 by way of judgment, mortgage or otherwise.
- 40 (11) 'State' means the State of North Carolina.

41 **"§ 130A-45. Creation of a public health authority.**

42 (a) A public health authority may be created whenever a county board of
43 commissioners finds and adopts a resolution finding that it is in the interest of the public

1 health and welfare to create a public health authority to provide public health services as
2 required under G.S. 130A-34.

3 (b) A public health authority including more than one county may be formed upon
4 joint resolution of the county boards of commissioners and local boards of health having
5 jurisdiction over each of the counties involved.

6 (c) After the adoption of a resolution creating a public health authority, a public
7 health authority board shall be appointed in accordance with G.S. 130A-45.1.

8 (d) A county may join a public health authority upon joint resolution of the boards
9 of commissioners and local boards of health having jurisdiction over each of the counties
10 involved.

11 (e) A public health authority board shall govern the public health authority. All
12 powers, duties, functions, rights, privileges, or immunities conferred on the public health
13 authority may be exercised by the authority board.

14 (f) The public health authority board shall absorb the functions, assets, and
15 liabilities of the county or district boards of health, and that board is dissolved.

16 (g) For the purpose of Chapter 159 of the General Statutes, a public health
17 authority is a public authority as defined in G.S. 159-7(b)(10).

18 (h) Before adopting a resolution creating a public health authority, the county
19 board of commissioners shall hold a public hearing with notice published at least 10 days
20 before the hearing.

21 (i) For the purposes of Article 9 of Chapter 131E of the General Statutes, a public
22 health authority is a person as defined in G.S. 131E-176(19).

23 **"§ 130A.45.1. Membership of the Public Health Authority Board.**

24 (a) A public health authority board shall be the policy-making, rule-making, and
25 adjudicatory body for a public health authority and shall be composed of no fewer than
26 seven members and no more than nine members; except that in an authority comprising
27 two or more counties, the board shall be composed of no more than 11 members.

28 (b) In a single county authority, the county board of commissioners shall jointly
29 appoint the members of the board; in an authority comprising two or more counties, the
30 chairman of the county board of commissioners of each county in the authority shall
31 appoint one county commissioner to the authority board and these members shall jointly
32 appoint the other members of the board.

33 (c) The members of the board shall include:

34 (1) At least one physician licensed under Chapter 90 of the General Statutes
35 to practice medicine in this State;

36 (2) At least one county commissioner or the commissioner's express
37 designee from each county in the authority;

38 (3) At least three licensed or registered professionals from any of the
39 following professionals: dentistry, optometry, veterinary science,
40 nursing, pharmacy, engineering, accounting, or health care
41 administration; and

42 (4) At least four members may be selected from the general public or from
43 the professions listed in subdivision (3) of this subsection.

1 (d) Except as provided in this subsection, members of the board shall serve terms
2 of three years. Two of the original members shall serve terms of one year, and two of the
3 original members shall serve terms of two years.

4 (e) Any member who is a county commissioner serves on the board in an ex
5 officio capacity.

6 (f) Whenever a county shall join or withdraw from an existing public health
7 authority, the board shall be dissolved and a new board shall be appointed as provided in
8 subsection (b) of this section.

9 (g) Vacancies shall be filled within 120 days for any unexpired portion of a term.

10 (h) A chair shall be elected annually by a board. The local health director shall
11 serve as secretary to the board.

12 (i) A majority of the members shall constitute a quorum.

13 (j) A member may be removed from office by the board for any of the following:

14 (1) Commission of a felony or other crime involving moral turpitude.

15 (2) Violation of a State law governing conflict of interest.

16 (3) Violation of a written policy adopted by the county board of
17 commissioners of each county in the authority.

18 (4) Habitual failure to attend meetings.

19 (5) Conduct that tends to bring the office into disrepute.

20 (6) Failure to maintain qualifications for appointment required under
21 subsection (b) of this section.

22 A board member may be removed only after the member has been given written
23 notice of the basis for removal and has had the opportunity to respond.

24 (k) Board members shall receive no compensation for their services, but they shall
25 be entitled to reimbursement for subsistence and travel expenses incurred in the discharge
26 of their duties.

27 (l) The board shall meet at least quarterly. The chairperson or three of the
28 members may call a special meeting.

29 **§ 130A-45.2. Dissolution of a public health authority.**

30 (a) Whenever the board of commissioners of each county constituting a public
31 health authority determines that the authority is not operating in the best health interests
32 of the authority service area, they may direct that the authority be dissolved. In addition,
33 whenever a board of commissioners of a county which is a member of an authority
34 determines that the authority is not operating in the best health interests of that county, it
35 may withdraw from the authority. Dissolution of an authority or withdrawal from the
36 authority by a county shall be effective only at the end of the fiscal year in which the
37 action of dissolution or withdrawal transpired.

38 (b) Notwithstanding the provisions of subsection (a) of this section, no public
39 health authority shall be dissolved without prior written notification to the Department.

40 (c) Any budgetary surplus available to a public health authority at the time of its
41 dissolution shall be distributed to those counties comprising the authority on the same pro
42 rata basis that the counties appropriated and contributed funds to the authority's budget
43 during the current fiscal year. Distribution to the counties shall be determined on the

1 basis of an audit of the financial record of the authority. The public health authority board
2 shall select a certified public accountant or an accountant who is subsequently certified
3 by the Local Government Commission to conduct the audit. The audit shall be performed
4 in accordance with G.S. 159-34. The same method of distribution of funds described
5 above shall apply when one or more counties of an authority withdraw from the
6 authority.

7 (d) Upon dissolution or withdrawal, all rules adopted by the board continue in
8 effect until amended or repealed by the new authority board or boards of health.

9 **"§ 130A-45.3. Powers and duties of authority board.**

10 (a) A public health authority shall have all the powers necessary or convenient to
11 carry out the purposes of this Part, including the following powers to:

12 (1) Protect and promote the public health. The board shall have the
13 authority to adopt rules necessary for that purpose. In adopting rules to
14 protect and promote the public health, a public health authority board
15 may take into account factors other than public health that may enhance
16 the reasonableness of the rule in light of the health risk addressed.

17 (2) Construct, equip, operate, and maintain public health facilities.

18 (3) Use property owned or controlled by the authority.

19 (4) Acquire real or personal property, including existing public health
20 facilities, by purchase, grant, gift, devise, lease, condemnation, or
21 otherwise.

22 (5) Establish a fee schedule for services received from public health
23 facilities and make services available regardless of ability to pay.

24 (6) Appoint a public health authority director to serve at the pleasure of the
25 authority board.

26 (7) Establish a salary plan which shall set the salaries for employees of the
27 area authority.

28 (8) To adopt and enforce a professional reimbursement policy which may
29 include the following provisions: (i) require that fees for the provision
30 of services received directly under the supervision of the public health
31 authority shall be paid to the authority, (ii) prohibit employees of the
32 public health authority from providing services on a private basis which
33 require the use of the resources and facilities of the public health
34 authority, and (iii) provide that employees may not accept dual
35 compensation and dual employment unless they have the written
36 permission of the public health authority director.

37 (9) Delegate to its agents or employees any powers or duties as it may deem
38 appropriate.

39 (10) Employ its own counsel and legal staff.

40 (11) Adopt, amend, and repeal bylaws for the conduct of its business.

41 (12) Enter into contracts for necessary supplies, equipment, or services for
42 the operation of its business.

- 1 (13) Act as an agent for the federal, State, or local government in connection
2 with the acquisition, construction, operation, or management of a public
3 health facility, or any part thereof.
- 4 (14) Insure the property or the operations of the authority against risks as the
5 authority may deem advisable.
- 6 (15) Sue and be sued.
- 7 (16) Accept donations or money, personal property, or real estate for the
8 benefit of the authority and to take title to the same from any person,
9 firm, corporation, or society.
- 10 (17) Appoint advisory boards, committees, and councils composed of
11 qualified and interested residents of the authority service area to study,
12 interpret, and advise the public health authority board.
- 13 (b) A public health authority shall have the power to establish and operate health
14 care networks and may contract with or enter into any arrangement with other public
15 health authorities or local health departments of this or other states, federal, or other
16 public agencies, or with any person, private organization, or nonprofit corporation or
17 association for the provision of public health services, including managed health care
18 activities; provided, however, that for the purposes of this subsection only, a public health
19 authority shall be permitted to and shall comply with the requirements of Article 67 of
20 Chapter 58 of the General Statutes to the extent that such requirements apply to the
21 activities undertaken by the public health authority pursuant to this subsection. The
22 public health authority may pay for or contribute its share of the cost of any such contract
23 or arrangement from revenues available for these purposes, including revenues arising
24 from the provision of public health services.
- 25 (c) A public health authority may lease any public health facility, or part, to a
26 nonprofit association on terms and conditions consistent with the purposes of this Part.
27 The authority will determine the length of the lease. No lease executed under this
28 subsection shall be deemed to convey a freehold interest.
- 29 (d) A public health authority shall not sell nor convey any rights of ownership the
30 county has in any public health facility, including the buildings, land and equipment
31 associated with the facility, to any corporation or other business entity operated for profit,
32 except that nothing herein shall prohibit the sale of surplus buildings, surplus land or
33 surplus equipment by an authority to any corporation or other business entity operated for
34 profit. For purposes of this subsection, 'surplus' means any building, land or equipment
35 which is not required for use in the delivery of public health care services by a public
36 health facility at the time of the sale or conveyance of ownership rights.
- 37 (e) A public health authority may lease any public health facility, or part, to any
38 corporation, foreign or domestic, authorized to do business in North Carolina on terms
39 and conditions consistent with the purposes of this Part and with G.S. 160A-272.
- 40 (f) A public health authority may exercise any or all of the powers conferred upon
41 it by this Part, either generally or with respect to any specific public health facility or
42 facilities, through or by designated agents, including any corporation or corporations
43 which are or shall be formed under the laws of this State.

1 (g) An authority may contract to insure itself and any of its board members,
2 agents, or employees against liability for wrongful death or negligent or intentional
3 damage to person or property or against absolute liability for damage to person or
4 property caused by an act or omission of the authority or of any of its board members,
5 agents, or employees when acting within the scope of their authority and the course of
6 their employment. The board shall determine what liabilities and what members, agents,
7 and employees shall be covered by any insurance purchased pursuant to this subsection.

8 Purchase of insurance pursuant to this subsection waives the authority's governmental
9 immunity, to the extent of insurance coverage, for any act or omission occurring in the
10 exercise of a governmental function. Participation in a local government risk pool
11 pursuant to Article 23 of Chapter 58 of the General Statutes shall be deemed to be the
12 purchase of insurance for the purposes of this section. By entering into an insurance
13 contract with the authority, an insurer waives any defense based upon the governmental
14 immunity of the authority.

15 (h) If an authority has waived its governmental immunity pursuant to subsection
16 (g) of this section, any person, or if he dies, his personal representative, sustaining
17 damages as a result of an act or omission of the authority or any of its board members,
18 agents, or employees, occurring in the exercise of a governmental function, may sue the
19 authority for recovery of damages. To the extent of the coverage of insurance purchased
20 pursuant to subsection (g) of this section, governmental immunity may not be a defense
21 to the action. Otherwise, however, the authority has all defenses available to private
22 litigants in any action brought pursuant to this section without restriction, limitation, or
23 other effect, whether the defense arises from common law or by virtue of a statute.

24 Despite the purchase of insurance as authorized by subsection (g) of this section, the
25 liability of an authority for acts or omissions occurring in the exercise of governmental
26 functions does not attach unless the plaintiff waives the right to have all issues of law or
27 fact relating to insurance in the action determined by a jury. The judge shall hear and
28 determine these issues without resort to a jury, and the jury shall be absent during any
29 motion, argument, testimony, or announcement of findings of fact or conclusions of law
30 relating to these issues unless the defendant requests a jury trial on them.

31 **"§ 130A-45.4. Appointment of a public health authority director.**

32 (a) A public health authority board, after consulting with the appropriate county
33 board or boards of commissioners, shall appoint a public health authority director.

34 (b) All persons who are appointed to the position of public health authority
35 director must possess minimum education and experience requirements for that position,
36 as follows:

37 (1) A medical doctorate; or

38 (2) A masters degree in Public Health Administration, and at least one year
39 of employment experience in health programs or health services; or

40 (3) A masters degree in a public health discipline other than public health
41 administration, and at least three years of employment experience in
42 health programs or health services; or

1 (4) A masters degree in public administration, and at least two years of
2 experience in health programs or health services; or

3 (5) A masters degree in a field related to public health, and at least three
4 years of experience in health programs or health services; or

5 (6) A bachelors degree in public health administration or public
6 administration and at least three years of experience in health programs
7 or health services.

8 (c) Before appointing a person to the position of public health authority director
9 under subdivision (a)(5) of this section, the authority board shall forward the application
10 and other pertinent materials of such candidate to the State Health Director. If the State
11 Health Director determines that the candidate's masters degree is in a field not related to
12 public health, the State Health Director shall so notify the authority board in writing
13 within 15 days of the State Health Director's receipt of the application and materials, and
14 such candidate shall be deemed not to meet the education requirements of subdivision
15 (a)(5) of this section. If the State Health Director fails to act upon the application within
16 15 days of receipt of the application and materials from the authority board, the
17 application shall be deemed approved with respect to the education requirements of
18 subdivision (a)(5) of this section, and the authority board may proceed with the
19 appointment process.

20 (d) The State Health Director shall review requests of educational institutions to
21 determine whether a particular masters degree offered by the requesting institution is
22 related to public health for the purposes of subdivision (a)(5) of this section. The State
23 Health Director shall act upon such requests within 90 days of receipt of the request and
24 pertinent materials from the institution, and shall notify the institution of its
25 determination in writing within the 90-day review period. If the State Health Director
26 determines that an institution's particular masters degree is not related to public health,
27 the State Health Director shall include the reasons therefor in his written determination to
28 the institution.

29 (e) When an authority board fails to appoint a public health authority director
30 within 60 days of the creation of a vacancy, the State Health Director may appoint an
31 authority director to serve until the authority board appoints an authority director in
32 accordance with this section.

33 **"§ 130A-45.5. Powers and duties of a public health authority director.**

34 (a) The public health authority director is an employee of the authority board and
35 shall serve at the pleasure of the authority board.

36 (b) An authority health director shall perform public health duties prescribed by
37 and under the supervision of the public health authority board and the Department and
38 shall be employed full time in the field of public health.

39 (c) An authority health director shall have the following powers and duties:

40 (1) To administer programs as directed by the public health authority board;

41 (2) To enforce the rules of the public health authority board;

42 (3) To investigate the causes of infectious, communicable, and other
43 diseases;

- 1 (4) To exercise quarantine authority and isolation authority pursuant to G.S.
2 130A-145;
3 (5) To disseminate public health information and to promote the benefits of
4 good health;
5 (6) To advise local officials concerning public health matters;
6 (7) To enforce the immunization requirements of Part 2 of Article 7 of this
7 Chapter;
8 (8) To examine and investigate cases of venereal disease pursuant to Parts 3
9 and 4 of Article 6 of this Chapter;
10 (9) To examine and investigate cases of tuberculosis pursuant to Part 5 of
11 Article 6 of this Chapter;
12 (10) To examine, investigate, and control rabies pursuant to Part 6 of Article
13 6 of this Chapter;
14 (11) To abate public health nuisances and imminent hazards pursuant to G.S.
15 130A-19 and G.S. 130A-20;
16 (12) To employ, discipline, and dismiss employees of the public health
17 authority.

18 (d) Authority conferred upon a public health authority director may be exercised
19 only within the county or counties comprising the public health authority.

20 **"§ 130A-45.6. Boundaries of the authority.**

21 A public health authority may provide or contract to provide public health services
22 and to acquire, construct, establish, enlarge, improve, maintain, own, or operate, and
23 contract for the operation of any public health facilities outside the territorial limits,
24 within reasonable limitation, of the county or counties creating the authority, but in no
25 case shall a public health authority be held liable for damages to those outside the
26 territorial limits of the county or counties creating the authority for failure to provide any
27 public health service.

28 **"§ 130A-45.7. Medical review committee.**

29 (a) A member of a duly appointed medical review committee who acts without
30 malice or fraud shall not be subject to liability for damages in any civil action on account
31 of any act, statement, or proceeding undertaken, made, or performed within the scope of
32 the functions of the committee.

33 (b) The proceedings of a medical review committee, the records and materials it
34 produces and the materials it considers shall be confidential and not considered public
35 records within the meaning of G.S. 132-1, "' Public records" defined', and shall not be
36 subject to discovery or introduction into evidence in any civil action against a public
37 health authority or a provider of professional health services which results from matters
38 which are the subject of evaluation and review by the committee. No person who was in
39 attendance at a meeting of the committee shall be required to testify in any civil action as
40 to any evidence or other matters produced or presented during the proceedings of the
41 committee or as to any findings, recommendations, evaluations, opinions, or other actions
42 of the committee or its members. However, information, documents, or records otherwise
43 available are not immune from discovery or use in a civil action merely because they

1 were presented during proceedings of the committee. A member of the committee or a
2 person who testifies before the committee may testify in a civil action but cannot be
3 asked about his testimony before the committee or any opinions formed as a result of the
4 committee hearings.

5 **"§ 130A-45.8. Confidentiality of patient information.**

6 (a) Medical records compiled and maintained by public health authorities in
7 connection with the admission, treatment, and discharge of individual patients are not
8 public records as defined by Chapter 132 of the General Statutes.

9 (b) Charges, accounts, credit histories, and other personal financial records
10 compiled and maintained by public health authorities in connection with the admission,
11 treatment, and discharge of individual patients are not public records as defined by
12 Chapter 132 of the General Statutes.

13 **"§ 130A-45.9. Confidentiality of personnel information.**

14 (a) Except as provided in subsection (b) of this section, the personnel files of
15 employees or former employees, and the files of applicants for employment maintained
16 by a public health authority are not public records as defined by Chapter 132 of the
17 General Statutes.

18 (b) The following information with respect to each employee of a public health
19 authority is a matter of public record: name; age; date of original employment or
20 appointment; beginning and ending dates, position title, position descriptions, and total
21 compensation of current and former positions; and date of the most recent promotion,
22 demotion, transfer, suspension, separation, or other change in position classification. In
23 addition, the following information with respect to each licensed medical provider
24 employed by or having privileges to practice in a public health facility shall be a matter
25 of public record: educational history and qualifications, date and jurisdiction or original
26 and current licensure; and information relating to medical board certifications or other
27 qualifications of medical specialists.

28 (c) Information regarding the qualifications, competence, performance, character,
29 fitness, or conditions of appointment of an independent contractor who provides health
30 care services under a contract with a public health authority is not a public record as
31 defined by Chapter 132 of the General Statutes. Information regarding a hearing or
32 investigation of a complaint, charge, or grievance by or against an independent contractor
33 who provides health care services under a contract with a public health authority is not a
34 public record as defined by Chapter 132 of the General Statutes. Final action making an
35 appointment or discharge or removal by a public health authority having final authority
36 for the appointment or discharge or removal shall be taken in an open meeting, unless
37 otherwise exempted by law. The following information with respect to each independent
38 contractor of health care services of a public health authority is a matter of public record:
39 name; age; date of original contract; beginning and ending dates; position title; position
40 descriptions; and total compensation of current and former positions; and the date of the
41 most recent promotion, demotion, transfer, suspension, separation, or other change in
42 position classification.

43 **"§ 130A-45.10. Confidentiality of credentialing information.**

1 Information acquired by a public health authority or by persons acting for or on behalf
2 of a public health authority in connection with the credentialing and peer review of
3 persons having or applying for privileges to practice in a public health facility is
4 confidential and is not a public record under Chapter 132 of the General Statutes;
5 provided that information otherwise available to the public shall not become confidential
6 merely because it was acquired by the authority or by persons acting for or on behalf of
7 the authority.

8 **"§ 130A-45.11. Confidentiality of competitive health care information.**

9 Information relating to competitive health care activities by or on behalf of public
10 health authorities shall be confidential and not a public record under Chapter 132 of the
11 General Statutes; provided that any contract entered into by or on behalf of a public
12 health authority shall be a public record unless otherwise exempted by law."

13 Section 2. (a) G.S. 130A-2(4) reads as rewritten:

14 "(4) 'Local board of health' means a district board of health or a public health
15 authority board or a county board of health."

16 (b) G.S. 130A-2(5) reads as rewritten:

17 "(5) 'Local health department' means a district health department or a public
18 health authority or a county health department."

19 Section 3. G.S. 105-164.14(c)(9) of the General Statutes reads as written:

20 "(9) ~~A district health department.~~ district health department, or a public
21 health authority created pursuant to Part 1A of Article 2 of Chapter
22 130A of the General Statutes."

23 Section 4. G.S. 128-37 of the General Statutes reads as rewritten:

24 **"§ 128-37. Membership of employees of ~~district health departments.~~ district health**
25 **departments, or public health authorities.**

26 Under such rules and regulations as the Board of Trustees shall establish and
27 promulgate, the boards of county commissioners of any group of counties composing a
28 district health department, or the governing board of any public health authority, or the
29 board of county commissioners of any county as to county boards of health, or the
30 governing authorities of any county and/or city as to city-county boards of health, may
31 elect that employees of such health departments may be members of the North Carolina
32 Local Governmental Employees' Retirement System to the extent of that part of their
33 compensation paid by the various counties composing said district health department."

34 Section 5. G.S. 153A-77.1 of the General Statutes reads as rewritten:

35 **"§ 153A-77.1. Single portal of entry.**

36 A county may develop for human services a single portal of entry, a consolidated case
37 management system, and a common data base; provided that if the county is part of a
38 district health department or multicounty public health authority or a ~~multi-county~~
39 multicounty area mental health, developmental disabilities, and substance abuse
40 authority, such action must be approved by the district board of health or public health
41 authority board or the area mental health, developmental disabilities, and substance abuse
42 board to affect any matter within the jurisdiction of that board. Nothing in this section
43 shall be construed to abrogate a patient's right to confidentiality as provided by law."

1 Section 6. G.S. 153A-149(13) of the General Statutes reads as rewritten:

2 "(13) Health. – To provide for the county's share of maintaining and
3 administering services offered by or through the ~~county or district~~ local
4 health department."

5 Section 7. G.S. 106-266.17 reads as rewritten:

6 **"§ 106-266.17. Marketing agreements not to be deemed illegal or in restraint of**
7 **trade; conflicting laws.**

8 The making of marketing agreements between producers' cooperative marketing
9 associations and distributors and producer- distributors under the provisions of this
10 Article shall not be deemed a combination in restraint of trade or an illegal monopoly, or
11 an attempt to lessen competition or fix prices arbitrarily nor shall the marketing contract
12 or agreements between the association and the distributors and producer-distributors, or
13 any agreements authorized in this Article, be considered illegal or in restraint of trade. All
14 laws and clauses of laws in conflict with the provisions of this Article are hereby repealed
15 to the extent necessary for the full operation of this Article. No provisions of this Article
16 shall be deemed in conflict with Articles 28 and 28A of Chapter 106 of the General
17 Statutes. No provisions of this Article shall be deemed in conflict with the authority
18 granted to ~~county, city-county and district~~ local boards of health by G.S. 130-19, 130-20,
19 130-66, to make and enforce rules and regulations governing milk sanitation or with the
20 authority granted to the Department of Human Resources by G.S. 130-3 to make sanitary
21 inquiries and investigations."

22 Section 8. G.S. 88-28.1 reads as rewritten:

23 **"§ 88-28.1. Restraining orders against persons engaging in illegal practices.**

24 If it is found that any licensed cosmetologist, cosmetic art shop, or other person
25 subject to the provisions of this Chapter is violating any rules and regulations adopted by
26 the State Board of Cosmetic Art Examiners or any provisions of G.S. 88-28, then the
27 Department of Human Resources, any ~~county or district~~ local health director, or the State
28 Board of Cosmetic Art Examiners shall give notice to the person of the violation and
29 apply to the superior court for injunctive relief to restrain such person from continuing
30 such illegal practices. If, upon such application, it shall appear to the court that such
31 person has violated and/or is violating any of the said rules and regulations or any
32 provisions of Chapter 88, section 28, of the General Statutes of North Carolina G.S. 88-
33 28, the court may issue an order restraining any further violations thereof. All such
34 actions for injunctive relief shall be governed by the provisions of Article 37 of Chapter
35 1 of the General Statutes: Provided, such injunctive relief may be granted regardless of
36 whether criminal prosecution has been or may be instituted under any of the provisions of
37 this Chapter. Actions under this section shall be commenced in the county in which the
38 respondent resides or has his principal place of business or in which the alleged acts
39 occurred."

40 Section 9. G.S. 143-215.7 reads as rewritten:

41 **"§ 143-215.7. Effect on laws applicable to public water supplies and the sanitary**
42 **disposal of sewage.**

1 This Article shall not be construed as amending, repealing, or in any manner
2 abridging or interfering with the provisions of Article 10 of Chapter 130A of the General
3 Statutes relating to the control of public water supplies; nor shall the provisions of this
4 Article be construed as being applicable to or in anywise affecting the authority of the
5 Department to control the sanitary disposal of sewage as provided in Article 11 of
6 Chapter 130A of the General Statutes, or as affecting the powers, duties and authority of
7 ~~city, county, county city and district~~ local health departments ~~usually referred to as local~~
8 ~~health departments~~ or as affecting the charter powers, or other lawful authority of
9 municipal corporations, to pass ordinances in regard to sewage disposal."

10 Section 10. G.S. 130A-140 reads as rewritten:

11 "**§ 130A-140. Local health directors to report.**

12 A local health director shall report to the Department all cases of diseases or
13 conditions or laboratory findings of residents of the jurisdiction of the local health
14 department which are reported to the local health director pursuant to this Article. A
15 local health director shall report all other cases and laboratory findings reported pursuant
16 to this Article to the local health director of the ~~county or district~~ county, district or
17 authority where the person with the reportable disease or condition or laboratory finding
18 resides."

19 Section 11. G.S. 120-196 reads as rewritten:

20 "**§ 120-196. (See editor's note) Commission duties.**

21 The Commission shall study the availability and accessibility of public health services
22 to all citizens throughout the State. In conducting the study the Commission shall:

- 23 (1) Determine whether the public health services currently available in each
24 ~~county or district~~ local health department conform to the mission and
25 essential services established under G.S. 130A-1.1;
- 26 (2) Study the workforce needs of each ~~county or district~~ health local
27 department, including salary levels, professional credentials, and
28 continuing education requirements, and determine the impact that
29 shortages of public health professional personnel have on the delivery of
30 public health services in ~~county and district~~ local health departments;
- 31 (3) Review the status and needs of local health departments relative to
32 facilities, and the need for the development of minimum standards
33 governing the provision and maintenance of these facilities;
- 34 (4) Propose a long-range plan for funding the public health system, which
35 plan shall include a review and evaluation of the current structure and
36 financing of public health in North Carolina and any other
37 recommendations the Commission deems appropriate based on its study
38 activities;
- 39 (5) Conduct any other studies or evaluations the Commission considers
40 necessary to effectuate its purpose; and
- 41 (6) Study the capacity of small counties to meet the core public health
42 functions mandated by current State and federal law. The Commission
43 shall consider whether the current ~~county and district~~ local health

1 departments should be organized into a network of larger multidistrict
2 community administrative units. In making its recommendations on this
3 study, the Commission shall consider whether the State should establish
4 minimum populations for local health departments, and if so, shall
5 recommend the number of and configuration for these multicounty
6 administrative units and shall recommend a series of incentives to ease
7 county transition into these new arrangements."

8 Section 12. This act becomes effective January 1, 1998, and applies to
9 contracts and agreements entered into on or after that date.