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ISSUES, EVENTS, AND DEVELOPMENTS OF CURRENT INTEREST TO STATE AND LOCAL GOVERNMENT

SOURCES OF INFORMATION ON BIOTERRORISM

- Centers for Disease Control and Prevention, bioterrorism Web page, www.bt.cdc.gov
- North Carolina Division of Public Health, information on anthrax, www.epi.state.nc.us/epi/anthrax. html
- UNC-Chapel Hill School of Public Health, North Carolina Center for Public Health Preparedness, www.sph.unc.edu/bioterrorism/
- Responding to Biological Threats: The Public Health System's Communicable Disease Authority, by Jill Moore (Institute of Government, Health Law Bulletin No. 78), available through the Institute's Publications Sales Office, (919) 966-4119, or on the Internet at www.iogpubs.iog.unc.edu

North Carolina Responds to Bioterrorism hen the first case of inhalational anthrax in the United States in more than twenty years was diagnosed in a Florida man last fall, North Carolina public health officials were notified almost immediately. The man, who

subsequently died, had been traveling in North Carolina in late September when he became sick. It therefore was considered likely that he had been exposed to the deadly bacteria while he was in this state.

North Carolina officials learned of the diagnosis in the late afternoon on Thursday, October 4. By midnight, a large-scale information-gathering process known as public health surveillance was well under way. Public health workers in four counties pored over hospital records, looking for patients with symptoms that might suggest inhalational anthrax. Local health directors throughout the state notified hospitals and health care providers to be on the lookout for additional cases. They also provided information to aid physicians and laboratory workers in recognizing anthrax, a disease that occurs naturally so rarely that most clinicians have never seen it.

By mid-October the country was aware that anthrax was being spread deliberately through the mail. The Florida man's exposure had been linked to his workplace, and no one else with a North Carolina connection had become sick, so the intensive surveillance efforts in this state ended.

Public health and other government workers continued to work on anthrax and other bioterrorism issues, though. Throughout the state, local and regional interagency teams formed to plan a response, as a wary public referred hundreds of suspicious letters and packages to police, the fire department, the health department, and other emergency services. Government officials participated in "tabletop" exercises, working their way through hypothetical



terrorist releases of smallpox, nerve gases, and other biological and chemical agents. The General Assembly enacted several new laws on bioterrorism. One requires laboratories and researchers who use certain biological agents in their work to register with the state Department of Health and Human Services. Another provides stiff criminal penalties for people who use biological or chemical agents as weapons.

Preparation to respond to bioterrorism began in the state's Division of Public Health several years ago, resulting in a draft response plan released in June 2001. The UNC-Chapel Hill School of Public Health also has been at the forefront of response planning, through its North Carolina Center for Public Health Preparedness, which was established in 2000 to prepare the public health workforce to respond to bioterrorism and other health threats. Within days of the September 11 attacks, the division and the center had marshaled existing expertise and resources for a series of seminars and conferences on bioterrorism, geared primarily toward the government officials who must respond to such events and the health care workers who may be the first to recognize that a terrorist act is causing disease outbreaks.

Nationally the anthrax letters have prompted a review of the legal authority of public health officials to control the spread of diseases that may be caused by terrorist attacks. The federal Centers for Disease Control and Prevention commissioned the drafting of the Model State Emergency Health Powers Act to provide a template for new state laws establishing or clarifying the role and the power of public health systems in emergencies. The model act is available on the Internet at www.public healthlaw.net.

The Institute of Government will provide updated information on the legal issues associated with bioterrorism through Popular Government and other publications. For more information, contact Jill Moore, (919) 966-4442 or moore@iogmail. iog.unc.edu, or consult the sources in the sidebar on this page.



Leaders Visit Mexico to Study Issues Affecting Local Immigrants

n March 2001, Thomas Thornburg, the Institute of Government's associate director for programs, traveled to Mexico with public officials, Latino leaders, and others from Durham, Orange, and Wake counties to learn more about issues affecting Latinos living in North Carolina.

The group was participating in the Latino Initiative, which in recent years has sent several groups of North Carolinians to the country on the southern border of the United States: foundation and nonprofit leaders in 1998; representatives from Chatham County and state government in 2000; and a delegation from Harnett, Johnston, and Lee counties in fall 2001. The sponsor of the initiative is the University of North Carolina's Center for International Understanding (www.ga.unc.edu/ NCCIU/latinoinit.html).

In February 2002 the Latino Initiative will bring twenty-five leaders from Mexico City and the states of Guanajuato, Oaxaca, and Puebla to North Carolina. As part of their visit, the leaders will meet with Thornburg and with Gordon Whitaker and Margaret Henderson of the Institute, who specialize in relationships between local governments and nonprofit organizations.

Almost two hundred community leaders from across North Carolina will have participated in the center's outreach program by the end of 2003. The center is organizing programs for two more groups in 2002: a delegation from Buncombe, Catawba, and Henderson counties, who will visit Mexico City and the state of Michoacan; and one from Duplin, Sampson, and Wayne counties, who will visit Mexico City and the state of Oaxaca.

A group of educators also is scheduled to go in 2002, building on earlier centersponsored trips by classroom teachers, administrators, and board members to learn about educational issues facing immigrants to North Carolina.

For more information about the Latino Initiative, contact Thornburg, (919) 966-4377 or thornburg@iogmail. iog.unc.edu.

Cumberland Opts for County-wide Planning

n November 2001, all ten elected boards in Cumberland County agreed to collaborate in designing and implementing countywide planning. As a result, representatives of the county, its school system, and all its municipalities soon will sit down at one table and work together on issues that cut across political jurisdictions and geographic boundaries.

The boards made this decision after much conversation with business, community, and other government leaders across summer and fall 2001, facilitated by Institute of Government faculty. The period leading to the boards' decision constituted the first phase of the project. In the next phase, the boards will engage business, military,

and community leaders in planning. All issues are open for discussion—from economic development to schools to parks to public health—and all decisions will be made collectively by the representatives of the participating groups.

For more information about comprehensive planning in Cumberland County and collaborative planning in general, contact Phil Boyle at (919) 962-9594 or boyle@iogmail.iog.unc.edu.

Participating Organizations

Elected Boards

Cumberland County Board of Commissioners Cumberland County Board of Education Falcon Town Council Fayetteville City Council Godwin Town Council Hope Mills Town Council Linden Town Council Spring Lake Town Council Stedman Town Council Wade Town Council

Other Organizations City–County Liaison Committee Cumberland County Joint Planning Board Downtown Development Corporation Fayetteville Area Economic Development Corporation Fayetteville Chamber of Commerce Fayetteville Planning Commission Mayor's Committee on Electric Restructuring (Fayetteville) Public Works Commission

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Organizations Teach Consensus-Building

ore and more stakeholder groups are helping form policy, coordinate services for citizens, and tackle difficult community problems. Sometimes everyone in the group must work together to implement a decision, so decision making by consensus is the appropriate way to proceed. Even when decision making by consensus is not possible, a government entity may need or want robust involvement from interested groups.

Recently, to help stakeholder groups understand consensus-building and other models of active participation, the Institute of Government, North Carolina State University's Natural Resources Leadership Institute, the Mediation Network of North Carolina, and the Orange County Dispute Settlement Center sponsored two conferences on the theme "Improving Public Decision Making through Participation: Leadership, Governance, and Community." Offered August 29 in Greenville and September 13 in Hickory, they attracted more than 300 people. Conference organizers helped participants new to consensus-building recognize appropriate situations for using consensus, showed them how to design a process for achieving consensus, and demonstrated groupprocess tools to make collaboration work. Specialized topics included understanding legal standards affecting collaboration, working with the media, and using facilitators and mediators.

A tangible product of the conference was a compilation of resources on participation, collaboration, and related topics. The resource guide identifies fourteen North Carolina organizations that can provide advice, training, reports, and other assistance to groups seeking effective public participation. For example, the newly formed North Carolina Community Solutions Network provides support for a variety of community-building efforts. The resource guide includes Web sites and citations for manuals, reports, guidebooks, and other documents on civic involvement, community development, community building, models for engaging community groups in dialogue, and facilitating groups. It is available at the Institute's NCINFO Web site, www.iog.unc.edu/programs/dispute/ resourcemats.htm.

For more information, contact John Stephens at (919) 962-5190 or stephens@ iogmail.iog.unc.edu.

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Institutes to Offer Training in New Medical Privacy Rule

o assist local governments in complying with a new federal rule on the privacy of health information, the Institute of Government and the North Carolina Institute for Public Health will offer a comprehensive training program beginning in May 2002. Agencies have only until April 2003 to comply with the rule, which is complex and creates a number of new legal obligations.

The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires public and private health care providers, health plans, and health care clearinghouses that transmit health information electronically to comply with a detailed set of rules on managing information. One of those rules provides for a comprehensive scheme to protect the privacy of health information identifying an individual.

To achieve compliance, agencies must assess their current privacy policies and practices to determine where changes or additions must be made. They also must review any forms that authorize uses or disclosures of information. In numerous instances they will have to develop new forms. Many agencies will have to change some business practices as well.

The rule also creates a new set of patients' rights that must be addressed by policies and procedures. For example, it requires agencies covered by HIPAA to permit patients to inspect their personal health information, to obtain copies of it, and to request amendments to correct inaccuracies. (A thorough summary of the rule's requirements will appear in the Spring 2002 issue of *Popular Government*.)

Local health departments and area mental health agencies in North Carolina are covered by HIPAA. Social services and other local agencies may be covered as well, depending on the types of services they provide. Many agencies that are not covered will nevertheless be affected because they obtain health information from agencies that are covered. The training program of the two institutes will begin in May 2002 with an intensive seminar, to be held in several locations across North Carolina. The seminar will provide a detailed introduction to the new rule and other laws affecting medical privacy. Participants will receive extensive outlines of the key legal issues facing local government agencies and other materials designed to help them develop new policies and forms that comply with the law and meet their agencies' needs.

Following the seminar, participants will have access to a medical-privacy Web site for legal updates and answers to frequently asked questions. Follow-up videoconferences in fall 2002 and spring 2003 will round out the program. The videoconferences will offer further exploration of selected topics, legal updates, and an opportunity for questions and discussion.

The program is intended primarily for privacy officers in local government agencies that are covered or affected by HIPAA. It also will be appropriate for the directors of those agencies, county attorneys, county managers, and others who work for or with covered agencies.

Registration information will be sent to all local health departments, area mental health agencies, county social services departments, county attorneys, and county managers in early spring 2002. It also will be available on the UNC–Chapel Hill School of Public Health's Web page, www.sph.unc.edu/oce/.

For more information, contact Jill Moore, (919) 966-4442 or moore@iogmail.iog. unc.edu, or Aimee Wall, (919) 843-4957 or wall@iogmail.iog.unc.edu.

