## BEFORE THE BOARD OF COMMISSIONERS OF LANE COUNTY, OREGON

ORDER 18-05-08-01

IN THE MATTER OF AMENDING LANE MANUAL CHAPTER 9 TO UPDATE THE POLICY ON COMMUNICABLE DISEASE RESPONSE AND CONTROL (LM 9.005, 9.500)

The Board of County Commissioners of Lane County ORDERS as follows:

Lane Manual Chapter 60 is amended by removing, substituting or adding the following section:

## **REMOVE THIS SECTION**

**INSERT THIS SECTION** 

9.005 NONE NONE 9.500

If any section, subsection, sentence, clause, phrase or portion of this Order or the referenced Lane Manual provisions is for any reason held invalid or unconstitutional by any court or administrative agency of competent jurisdiction, such portion is deemed a separate, distinct, and independent provision, and such holding does not affect the validity of the remaining portions.

Said section is attached hereto and incorporated herein by reference. The purpose of this substitution is to update the policy on Water Supply Systems Rules and Regulations (LM 9.005, 9.500).

ADOPTED this 8th day of May 2018.

Jay Bozievich, Chair

Lane County Board of Commissioners

LANE COUNTY OFFICE OF LEGAL COUNSEL

# LEGISLATIVE FORMAT

9.005 Lane Manual 9.100

# Chapter 9

#### ENVIRONMENT AND HEALTH

### 9.005 Policy.

Lane County recognizes that while the diagnosis and treatment of disease is considered the general responsibility of the private medical community, the County will intervene in cases where the spread of disease is considered a public health hazard. It is expected that the Health and Human Services Department shall take whatever action is necessary when a communicable disease outbreak is a threat to the public health. Consistent with the applicable provisions of the Oregon Revised Statutes and under the authority of the Lane County Home Rule Charter, the following policies are hereby adopted for providing treatment and medication for control of communicable disease in Lane County:

- (1) Provision of immunizations to the general public in order to reduce the number and severity of communicable disease outbreaks. Part of the biologicals are furnished by the Oregon Department of Human Services/Health Services. Influenza immunizations are offered to persons identified by ACIP and state guidelines as eligible with emphasis on service to the elderly and those without other medical resources.
- (2) Diagnosis and treatment (including provision of medications) for sexually transmitted diseases.
- (3) Identification, referral and treatment including routine exams, X-rays, lab work and medications as ordered by PMD or Health Officer for tuberculosis.
- (4) Tuberculin testing for high risk persons and population groups. Tuberculin Skin Test (TST) is also available for a charge to others requesting testing.
- (5) Provision of gamma globulin for close associates of infectious hepatitis cases. Gamma globulin is supplied by Oregon Department of Human Services/Health Services in moderate amounts.
- (6) Individual communicable disease cases and outbreaks among school children are considered to be the responsibility of the school districts involved. Consultation services are available from Public Health Services to all school districts, just as they are available to any community organization. Where direct medical and nursing services are required above those designated in contract agreements, districts will need to make their own arrangements. (This includes costs of medications for the school population). County does not have sufficient resources to provide comprehensive school health services.
- (7) When an outbreak becomes a threat to the total community, the Department has the responsibility to divert other staff members to the problem and mobilize other community resources. Suspected cases will be referred to the private medical care systems. If, in the judgment of the Department's staff, a patient who is a communicable disease risk to the community will not receive appropriate medications due to lack of funds, Department will supply such biologicals. Except in an extreme emergency so designated by County Board of Health, County will not provide mass community treatment services. (Revised by Order No. 93 3 31 7; Effective 3.31.93; 03 3 12 5, 3.12.03)

## RULES AND REGULATIONS FOR WATER SUPPLY SYSTEMS

#### 9.100 Authority.

The following rules and regulations relating to water supply systems are hereby adopted pursuant to the authority granted in Chapter 9, Lane Code, and the Lane County Home Rule Charter. (Revised by Order No. 93-3-31-7, Effective 3.31.93)

# LEGISLATIVE FORMAT

9.006 Lane Manual 9.006

- (4) If a rehearing is held, an amended order shall be entered.
- (5) If the County does not act on the petition within the 60th day following the date the petition was filed, the petition shall be deemed denied. (Revised by Order No. 76-5-5-8, Effective 6.9.76)

#### **COMMUNICABLE DISEASE**

## 9.005500 Policy Communicable Disease Response and Control.

Lane County recognizes that while the diagnosis and treatment of disease is considered the general responsibility of the private medical community, the County will intervene in cases wherehas an obligation to prevent the spread of disease that is considered a public health hazard. It is expected that the Health and Human Services Department is authorized to shall take whatever action is it deems necessary when a communicable disease outbreak is a threat to the public health. Consistent with the applicable provisions of the Oregon Revised Statutes and under the authority of the Lane County Home Rule Charter, the following policies are hereby adopted for providing treatment and medication for control of communicable disease in Lane County, consistent with the applicable provisions of the Oregon Revised Statutes and under the authority of the Lane County Home Rule Charter:

- (1) Provision of immunizations to the general public in order to reduce the number and severity of communicable disease outbreaks, **including i.** Part of the biologicals are furnished by the Oregon Department of Human Services/Health Services. Influenza immunizations, are offered to persons identified by ACIP and state guidelines as eligible with emphasis on service to the elderly and those without other medical resources.
- (2) Diagnosis and treatment, (including provision of medications,) for gonorrhea, chlamydia, syphilis, or other communicable diseases for which the Centers for Disease Control and Prevention (CDC) or the Oregon Health Authority (OHA) directs the Department to monitor, report on, and provide treatment forsexually transmitted diseases.
- (3) Identification, referral and treatment including for active or infectious tuberculosis including routine exams, X-rays, lab work and medications as ordered by the primary medical Doctor PMD or Health Officer for tuberculosis.
- (4) **Provision of** Tuberculin testing for high-risk persons individuals and population groups; and make such tests. Tuberculin Skin Test (TST) is also available to others for a charge-to others requesting testing.
- (5) Provision of gamma globulin for close associates of infectious hepatitis cases. Gamma globulin is supplied by Oregon Department of Human Services/Health Services in moderate amounts.
- (6) Provision of Public Health Division technical services to school districts, while recognizing that lindividual communicable disease cases and outbreaks among school children are considered to be the responsibility of the school districts, in accordance with OAR Chapter 333 involved. Consultation services are available from Public Health Services to all school districts, just as they are available to any community organization. Where direct medical and nursing services are required above those designated in contract agreements, districts will need to make their own arrangements. (This includes costs of medications for the school population). County does not have sufficient resources to provide comprehensive school health services.
- (7) Investigation of outbreaks of communicable diseases in healthcare facilities, including hospitals, ambulatory surgery centers, dialysis centers, birthing centers and community-based care centers (nursing homes, assisted living, residential care and foster homes) by Public Health Division. The Division will follow the State protocol as set forth in OAR Chapter 333 with respect to these investigations, as well as those protocols related to foodborne illnesses, gastroenteritis and respiratory outbreaks.

# LEGISLATIVE FORMAT

9.800 Lane Manual 9.805

(8) When an outbreak becomes a threat to the total-community as a whole, the Department has the responsibility to divert other staff members to the problem and mobilize other community resources to address the threat. Suspected cases will be referred to the private medical care systems. However, Hif, the Department determines that in the judgment of the Department's staff, a patient who ispresents a communicable disease risk to the community will—and may not receive appropriate medications due to lack of fundsthe patient's inability to pay, the Department will—may supply such—biologicals, vaccines, or medications appropriate to the condition being controlled. Except in an extreme emergency so designated by the County Board of Health, the County will not provide mass community—treatment services for the community at large. In addition, the County may activate the Incident Command System, in response to a danger to public health that threatens to overwhelm County resources. (Revised by Order No. 93-3-31-7, Effective 3.31.93; 03-3-12-5, 3.12.03)

### SEWAGE FACILITIES MANAGEMENT REGULATIONS

## 9.800 Review of Submissions.

All submissions required for approval of sewage facilities management corporations shall be submitted to the Director of the Department of Health and Human Services, or his or her designee. The Director, or his or her designee, shall make a recommendation to the Board regarding approval of the management corporation.

(Revised by Order No. 93-3-31-7, Effective 3.31.93)

#### 9.805 Fees.

The following fees are established for administration of the sewage facilities management regulations.

- (1) Submittal Review Fee.
  - (a) 20 lots or less......\$300.00
  - (b) 21 to 40 lots......\$ 5.00/additional lot
- (2) Annual Review Fee.
  - (a) 40 lots or less......\$100.00
  - (b) Each additional 20 lots or portion thereof ......... \$25.00 (Revised by Order No. 93-3-31-7,

Effective 3.31.93)

#### LANE COUNTY BOARD OF HEALTH AND LOCAL PUBLIC HEALTH AUTHORITY

## 9.900 Local Public Health Authority and Board of Health

The Board of County Commissioners (Board) acts as the governing body for the Local Public Health Authority and as Board of Health in Lane County pursuant to ORS 431. The purpose of these rules is to set forth general procedures for adopting policies, rules and ordinances and not to establish authority or extent of authority to act on any particular issue. Nothing in these rules shall be construed to interfere with the Board of Health's or Local Public Health Authority's use of emergency procedures which are required by law or which they deem necessary to meet a public health need; or to amend, limit, or interfere with the ability of county officers, agents or employees to act in emergencies or address incidents, or otherwise meet their legal obligations.

(Revised by Order 10-9-15-1, Effective 9.15.10)

#### 9.901 Procedures of Local Public Health Authority and Ordinances

Pursuant to statute, county government is the Local Public Health Authority. It submits a countywide annual public health plan for state approval, manages local public health services, administers public health programs, and is responsible for enforcing and administering public health laws including its own

#### 9.240 Record.

The record in a contested case shall include:

- (1) All pleadings, motions and intermediate rulings.
- (2) Evidence received or considered.
- (3) Stipulations.
- (4) A statement of matters officially noticed.
- (5) Questions and offers of proof, objections and rulings thereon.
- (6) Proposed findings and exceptions.
- (7) Any proposed, intermediate or final order. (Revised by Order No. 76-5-5-8, Effective 6.9.76)

## 9.245 Evidentiary Rules.

- (1) Evidence of a type commonly relied upon by reasonably prudent persons in the conduct of their serious affairs shall be admissible.
  - (2) Irrelevant, immaterial or unduly repetitious evidence shall be excluded.
- (3) All offered evidence, not objected to, will be received by the Director subject to said Director's power to exclude irrelevant, immaterial or unduly repetitious matter.
- (4) Evidence objected to may be received by the Director with rulings on its admissibility or exclusion to be made at a time a final order is issued. (Revised by Order No. 76-5-5-8, Effective 6.9.76)

## 9.250 Final Orders, Notification.

- (1) Final orders on contested cases shall be made by the Director, be in writing and include the following:
  - (a) Rulings on admissibility of offered evidence.
- (b) Findings of fact those matters which either agreed as fact or which, when disputed, are determined by the fact finder, on substantial evidence, to be a fact over contentions to the contrary.
- (c) Conclusions of law applications of the controlling law to the facts found and the legal results arising therefrom.
- (d) Order the action taken by the County as a result of the findings of fact and conclusions of law.
- (2) Parties to contested cases and their attorneys of record shall be served a copy of the final order. Parties shall be notified of their right to judicial review of the order. (Revised by Order No. 76-5-5-8, Effective 6.9.76)

## 9.255 Reconsideration, Rehearing.

- (1) A party may file a petition for reconsideration or rehearing on a final order with the County within 60 days after the order is served.
- (2) The petition shall set forth the specific ground or grounds for requesting the reconsideration or rehearing. The petition may be supported by a written argument.
- (3) The County may grant a reconsideration petition if sufficient reason therefor is made to appear. The rehearing may be limited by the County to specific matters.
  - (4) If a rehearing is held, an amended order shall be entered.
- (5) If the County does not act on the petition within the 60th day following the date the petition was filed, the petition shall be deemed denied. (Revised by Order No. 76-5-5-8, Effective 6.9.76)

#### **COMMUNICABLE DISEASE**

# 9.500 Communicable Disease Response and Control.

Lane County recognizes that while the diagnosis and treatment of disease is considered the general responsibility of the private medical community, the County has an obligation to prevent the spread of disease that is considered a public health hazard. The Health and Human Services Department is

authorized to take whatever action it deems necessary when a communicable disease outbreak is a threat to the public health. The following policies are hereby adopted for providing treatment and medication for control of communicable disease in Lane County, consistent with the applicable provisions of the Oregon Revised Statutes and under the authority of the Lane County Home Rule Charter:

- (1) Provision of immunizations to the general public in order to reduce the number and severity of communicable disease outbreaks, including influenza immunizations.
- (2) Diagnosis and treatment, including provision of medications, for gonorrhea, chlamydia, syphilis, or other communicable diseases for which the Centers for Disease Control and Prevention (CDC) or the Oregon Health Authority (OHA) directs the Department to monitor, report on, and provide treatment for.
- (3) Identification, referral and treatment including for active or infectious tuberculosis including routine exams, X-rays, lab work and medications ordered by the primary medical Doctor or Health Officer.
- (4) Provision of tuberculin testing for high-risk individuals and population groups; and make such tests available to others for a charge.
  - (5) Provision of gamma globulin for close associates of infectious hepatitis cases.
- (6) Provision of Public Health Division technical services to school districts, while recognizing that individual communicable disease cases and outbreaks among school children are the responsibility of the school districts, in accordance with OAR Chapter 333.
- (7) Investigation of outbreaks of communicable diseases in healthcare facilities, including hospitals, ambulatory surgery centers, dialysis centers, birthing centers and community-based care centers (nursing homes, assisted living, residential care and foster homes) by Public Health Division. The Division will follow the State protocol as set forth in OAR Chapter 333 with respect to these investigations, as well as those protocols related to foodborne illnesses, gastroenteritis and respiratory outbreaks.
- (8) When an outbreak becomes a threat to the community as a whole, the Department has the responsibility to divert staff members and mobilize other community resources to address the threat. Suspected cases will be referred to the private medical care systems. However, if, the Department determines that a patient presents a communicable disease risk to the community and may not receive appropriate medications due to the patient's inability to pay, the Department may supply biologicals, vaccines, or medications appropriate to the condition being controlled. Except in an extreme emergency designated by the County Board of Health, the County will not provide mass treatment services for the community at large. In addition, the County may activate the Incident Command System, in response to a danger to public health that threatens to overwhelm County resources. (Revised by Order No. 93-3-31-7, Effective 3.31.93; 03-3-12-5, 3.12.03)

## SEWAGE FACILITIES MANAGEMENT REGULATIONS

#### 9.800 Review of Submissions.

All submissions required for approval of sewage facilities management corporations shall be submitted to the Director of the Department of Health and Human Services, or his or her designee. The Director, or his or her designee, shall make a recommendation to the Board regarding approval of the management corporation.

(Revised by Order No. 93-3-31-7, Effective 3.31.93)

## 9.805 Fees.

The following fees are established for administration of the sewage facilities management regulations.

- (1) Submittal Review Fee.
  - (a) 20 lots or less......\$300.00
  - (b) 21 to 40 lots......\$ 5.00/additional lot