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HEALTH ACT***Executive Summary*

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Effective public health laws are critical for maintaining the health and well-being of people in every state around the country. Public health laws should provide the framework to conduct essential public health services in both emergency and everyday situations. Unfortunately, many public health laws in this country are antiquated, ineffective and insufficient for addressing modern public health needs.

The Challenges

In order to be effective, public health laws should clarify the responsibilities of a public health system and provide standard approaches for controlling contagious diseases. Yet, many current public health laws were built up in layers during the 20th century in response to specific diseases or health threats. For example, some public health laws have separate sections for each specific communicable disease, including smallpox, TB and HIV. Because each section focuses on a specific disease, there is no standard approach for addressing new infectious diseases such as West Nile virus or SARS.

In addition, some current public health laws do not reflect advances in public health practice and constitutional law, neglecting important issues such as privacy and anti-discrimination. Other current public health laws have been rendered less effective by changes in modern day health systems, government structures, and other laws.

People living in the United States are facing many new health threats, including SARS, monkey pox, and rapidly mutating strains of influenza. Just like modern vaccines and public health science, public health laws must be updated to better equip public health agencies to deal with these new threats.

Over the past 25 years, the Institute of Medicine -- part of the National Academy of Sciences chartered by the U.S. Congress -- has cited the need to reform public health laws in two major reports on public health in the United States.

The Turning Point Model State Public Health Act

In response to these challenges, the Turning Point Model State Public Health Act (Turning Point Act) provides model public health statutory provisions that can be used by public health agencies to assess their current public health laws and identify areas that may need updating or improving.

The Turning Point Act was developed by the Turning Point Public Health Statute Modernization Collaborative (Collaborative). Funded by The Robert Wood Johnson Foundation, the Collaborative is a partnership of five states, several national organizations and government agencies, and experts in specialty areas of public health.

The Turning Point Act's provisions reflect modern constitutional, statutory, and case-based law, as well as current scientific and ethical principles at the forefront of modern public health practice. State and local public health officials may examine and compare their own laws to the Act, deciding then what revisions (if any) need to be made to strengthen public health law in their respective jurisdictions.

The Turning Point Act is divided into nine articles, each addressing a different area of law, including:

- **Public Health Infrastructure** addresses the need to develop a strong infrastructure among state, local, and tribal public health entities to provide essential public health services and functions, to maintain an adequate public health workforce, establish performance management standards, and to create comprehensive state and local public health plans.
- **Collaboration and Relationships with Public and Private Sector Partners** addresses the relationships among public and private sector partners in the public health system and authorizes various mechanisms to encourage information sharing, collaboration, and coordination among partners.
- **Public Health Authorities/Powers** provides model language on potential core powers and authorities of state and local public health agencies, including reporting requirements, epidemiologic investigations, quarantine, isolation, vaccination, and licenses. These powers and authorities are guided by a series of principles focused on balancing public health practice with individual rights.
- **Public Health Emergencies** uses components of the Model State Emergency Health Powers Act (MSEPHA). The MSEPHA was drafted by the Center for Law and the Public's Health at Georgetown and Johns Hopkins Universities following September 11 and the anthrax exposures. Many state and local governments have used the MSEPHA to clarify their public health emergency laws, but they may not have assessed other facets of their public health laws.
- **Public Health Information Privacy** uses provisions from the The Model State Public Health Privacy Act of 1999. These provisions present a "gold standard" for the responsible acquisition, use, disclosure, and storage of identifiable health information by state and local public health agencies, and are consistent with the HIPAA Privacy Rule promulgated by the Department of Health and Human Services.

The Turning Point Act is available at www.turningpointprogram.org or www.hss.state.ak.us/dph/improving/turningpoint/MSPHA.htm.