

CHAPTER 93

AN ACT

SB 1554

Relating to public health preparedness; and declaring an emergency.

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) The Oregon Health Authority shall study the state's public health response to the COVID-19 pandemic and prepare the reports described in this section.

(2) At a minimum, the study shall initially:

(a) Focus on the public health system, including federal, state and local resources and how funding was coordinated between the state, counties and local governments and community organizations;

(b) Identify efficiencies and deficiencies in the public health system response, areas for improvement and needed investment;

(c) Consider emergency management coordination with the public health system, including distribution of personal protective equipment, where vaccines and testing were provided and isolation and quarantine best practices and guidance;

(d) Analyze the enforcement of public health requirements by the state, local governments and schools;

(e) Examine the efficacy of enforcement of pandemic control evidence-based practices, including any statewide public health mandates, at the county and local levels;

(f) Examine outcomes related to public health modernization implementation, including the roles that public-private partnerships played and any challenges posed by the current intersection of state and county public health systems;

(g) Compare the health equity outcomes related to the COVID-19 pandemic response, including secondhand health disparities resulting from the increased strain on hospitals, health systems and resources;

(h) Engage in a qualitative, in-depth analysis of utilization of resources, differing regulations and enforcement of evidence-based pandemic control practices across this state; and

(i) Assess messaging in general, including whether best practices in public health communication were used during the COVID-19 pandemic.

(3)(a) The authority shall prepare a report that, in addition to information regarding the topics described in subsection (2) of this section, includes at least:

(A) A broad review of the COVID-19 pandemic;

(B) Identification of areas in the public health system COVID-19 response that need improvement;

(C) Recommendations to improve the public health system COVID-19 response;

(D) A summary of key lessons learned; and

(E) Recommendations for improving:

(i) Public health system resiliency; and

(ii) Other deficiencies identified in the study.

(b) The authority shall submit, in the manner provided in ORS 192.245, the report described in paragraph (a) of this subsection to an interim committee of the Legislative Assembly related to public health not later than November 15, 2022.

(4) In addition to the study described in subsection (2) of this section, the authority shall perform a study to:

(a) Identify any local epidemiological data and capacity issues, including those that affected the reporting of data to statewide data systems;

(b) Clarify the roles of hospitals, long term care facilities and local public health programs in response coordination;

(c) Compare health and health system data, including COVID-19 positivity rates, rates of COVID-19 infection, hospital capacity and other core metrics, with the efficacy of statewide public health mandate enforcement; and

(d) Investigate specific public health workforce challenges.

(5)(a) The authority shall prepare a report that, in addition to information regarding the topics described in subsection (4) of this section, includes at least:

(A) An in-depth report of nongovernmental and community partner contributions to the COVID-19 response; and

(B) Recommendations for improving specific public health workforce challenges.

(b) The authority shall submit, in the manner provided in ORS 192.245, the report described in paragraph (a) of this subsection to an interim committee of the Legislative Assembly related to public health not later than April 1, 2023.

(6) The authority shall submit, in the manner provided in ORS 192.245, a report that includes a final evaluation and synthesis of the topics described in subsections (2) and (4) of this section and a final analysis, including the findings and recommendations described in subsections (3) and (5) of this section, to an interim committee of the Legislative Assembly related to public health not later than September 1, 2023.

(7) In order to perform the studies described in subsections (2) and (4) of this section and prepare the reports described in subsections (3), (5) and (6) of this section, the authority shall contract with an independent third-party consultant with experience in performing public health after-action studies and preparing reports. The consultant shall perform the studies in partnership with urban, rural, frontier, small

and large counties in this state, and shall perform all assessments as a neutral party.

SECTION 2. Section 1 of this 2022 Act is repealed on April 1, 2024.

SECTION 3. Notwithstanding any other provision of law, the General Fund appropriation made to the Oregon Health Authority by section 1 (1), chapter 668, Oregon Laws 2021, for the biennium ending June 30, 2023, for health systems, health policy and analytics, and public health, is

increased by \$899,573 for the purpose of carrying out section 1 of this 2022 Act.

SECTION 4. This 2022 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2022 Act takes effect on its passage.

Approved by the Governor March 23, 2022

Filed in the office of Secretary of State March 30, 2022

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