		Approved	April	25, 1	986
		11pp10104 <u>—</u>		Date	
MINUTES OF THE <u>Senate</u> (	COMMITTEE ON	Governmental	Organi	zatior	1
The meeting was called to order by .	Senato	r Gaines			at
The meeting was cancel to order by 1		Chairperson			
1:40 XXXX./p.m. on	April l	, 19 <u>86</u>	in room _	531N	_ of the Capitol.
All members were present except:					
Senator Francisco					
Committee staff present:					
Julian Efird - Research Arden Ensley - Revisor					

## Conferees appearing before the committee:

Barbara Sabol - Secretary, Department of Health & Environment Pat Goodson - Right to Life Representative Cloud - 30th District Representative Fuller - 87th District

With a quorum present, Senator Gaines called the meeting to order in the absence of the Chairman and Vice-Chairman to discuss <u>HB 2700</u>. HB 2700 would continue the office of Secretary and the Department of Health and Environment until July 1, 1994, under provisions of the Kansas Sunset Law.

Barbara Sabol addressed the Committee on behalf of HB 2700 presenting an overview of the Department. (Exhibit A) She explained the reorganization goals which were made in order to make the Department more effective. She stated that she felt this had been done and that they have complied with the recommendations in the Post Audit report.

Pat Goodson distributed testimony to the Committee (Exhibit B) and discussed concerns regarding the Department of Health and Environment programs. being in the area of Family Planning, Abortion Clinic Licensing and Stillbirth Reporting. She expressed her concerns for acknowledging the existence of stillbirths and requested that the Department of Health and Environment enforce the stillbirth reporting law.

The Committee then turned its attention to HB 3040 concerning Mined Land Conservation. Senator Winter made a motion to request that the Chairman send a letter to the Post Audit Department requesting a scope statement on the Mined Land Conservation and Reclamation Board. This was seconded by Senator Bogina. Motion carried.

HB 2714 concerning the Juvenile Offender Programs was addressed by Representative Wanda Fuller who proposed an amendment that "one shall be a court services officer appointed by the chief justice of the Kansas Supreme Court" and also inserted language to increase the jurisdiction as explained in section (b) on page 4 of the Proposed Reports of Standing Committees which (Exhibit C) After some discussion a motion was made by is attached. Senator Hoferer to adopt the proposed amendments. This was seconded by Senator Frey and motion carried. Senator Frey then made a motion to recommend HB 2714 favorable for passage as amended. A seconded was made by Senator Hoferer and the motion carried.

Representative Cloud discussed briefly  $\underline{\scriptsize HB\ 2433}$  concerning the Kansas State Grain Inspection Department as worked by the House Governmental Organization Committee and <u>Senator Frey made a motion to change the date for the Sunset Review of this Agency from July 1, 1986 to July 1, 1987. This was seconded</u> by Senator Bogina. Motion carried.

#### CONTINUATION SHEET

MINUTES OF THE Senate COMMITTEE ON Go	vernmental Organization
room <u>531N</u> , Statehouse, at <u>1:40</u> xxx/p.m. on	April l 1986

A motion was then made by Senator Frey to report HB 2433 favorable for passage as amended. This was seconded by Senator Strick. Motion carried.

Then Committee then took up discussion on <u>HB 2884</u> concerning practice of the profession of land surveying and <u>Senator Bogina made a motion to recemmend this bill favorable for passage. This was seconded by Senator Strick. Motion failed.</u>

The Chairman then entertained <u>a motion to approve the minutes of the March 31 minutes.</u> This was made by Senator Hoferer, seconded by Senator Frey and motion carried.

The meeting was then adjourned at 2:30 p.m. by Chairman Vidricksen.

# GUEST LIST

COMMITTEE: Senate Gove	ernmental Organizatio	n DATE: (1981), 198
NAME	ADDRESS	COMPANY/ORGANIZATION
Ed Goff	Tepeka	KSLS
Jarque Oakes	Jopeku	Ka Sa , Man Sume
Selen Stephen	Sapeka.	As Society of L. S.
Wm. I. Shafer	8033 W 90 Terr Oute,	KS66UZ KSLS
Bitty Lose	Dopeha Is.	Bd of Technical
Thom Imale	cedichita	55 CS Professions
Poort SSS	Losofa	KDHE
Belva Ott:	Michita	Planned Parenthrol of Kansns
Theresa Shurty	TOPEKA	KANSAS NARAL
Tat Roodson	Shauence	Right To Light
Dr. Tim ROHRIG	Topeka	KBI
Row Jones	Topeka	KBI-
Heorge Barbee	Topelas	As Consulting Engre
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#### TESTIMONY

Presented to Senate Committee on Governmental Organization

April 1, 1986

Barbara J. Sabol, Secretary Kansas Department of Health and Environment

## HISTORICAL OVERVIEW

The Kansas Department of Health and Environment was established by an Executive Reorganization Order on July 1, 1974. The Order, issued by Governor Robert B. Docking, abolished the State Board of Health and the State Department of Health and created a Department of Health and Environment to assume the diverse responsibilities for administering laws promoting the public health, insuring adequate sanitary conditions and regulating environmental quality.

Historically, the Department can be traced to the establishment of a State Board of Health in 1885. The original Board, appointed by the Governor, consisted of nine physicians who were to be "men of good moral character and temperate habits". Major highlights of the Board's early history include:

- -- A law passed by the 1901 Legislature which enabled the Board to quarantine people who had contagious diseases such as small pox, cholera and diptheria.
- -- In 1907, the new Kansas Food and Drug bills became law and four inspectors were appointed to enforce them, collect samples and make sanitary inspections of food handling establishments.
- -- Also, the 1907 Legislature passed a law to preserve the purity of the State's waters.
- -- About 1909, hotel inspections were added to the health program. Fire escapes were a priority and fines were \$100 for this violation. Unsanitary hotels were fined from \$5 to \$10.
- -- In 1911 the Vital Statistics Law was passed creating the Division of Vital Statistics which was given the responsibility of collecting morbidity reports and conducting studies on the prevalence of reportable diseases.
- -- In 1913, the Legislature created the Hotel and Restaurant Commission, separate from the Board of Health, for the purpose of inspecting and licensing Kansas hotels and restaurants. Seventy years later, in 1983, the functions were once again merged with the Department of Health and Environment.

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The Kansas State Board of Health was reconstituted and reorganized by the 1951 Legislature. This new Board was composed of five physicians, a pharmacist, a dentist, a veterinarian, a hospital administrator and a sanitary engineer. It elected a Secretary who served as the Executive Officer for the part-time policy board. This basic organization continued in effect until the implementation of Executive Reorganization Order No. 3 in July, 1974, creating a cabinet level department within the executive branch of state government.

### AGENCY OPERATIONS

The Department of Health and Environment administers a wide array of programs to promote the level of health care and to protect the quality of the environment in Kansas. Many of these programs are mandated and funded by the federal government. The Department is organized into five major operational units under a Secretary who is appointed by the Governor with the consent of the Senate. The following table summarizes the principal responsibilities of the Department's five major operating divisions:

## KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

## DIVISION

Health (Statutory)

## RESPONSIBILITIES

Maternal and Child Health Services
Epidemiology and Disease Control
Community Health Services
Public Health Nursing
Food and Drug Control
Crippled and Chronically Ill Children
Licensure and Certification of Adult
Care Home and Child Care Facilities
Health Education
Vital Statistics and Registration
Migrant and Refugee Health Services
Food Service and Lodging Inspections

Environment (Statutory)

Air and Water Pollution Control
Water Supply Monitoring
Solid Waste Control
Environmental Sanitation
Asbestos Control
Radiation Control
Oil and Gas Field Regulation
Hazardous Waste Control

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Laboratories and Research

Health and Environmental Laboratory Services Laboratory Certification and Improvement

Policy and Planning

Health Planning

Environmental Planning

Information Systems and Computing

Policy Analysis

Administrative and Support Services

Fiscal Management Support Services

Management Analysis and Program Evaluation

The two statutory Divisions of (1) Health and (2) Environment are each organized into four Bureaus. The Division of Health includes: the Bureau of Community Health, the Bureau of Family Health, the Bureau of Disease Prevention and Control, and the Bureau of Adult and Child Care Facilities. The Division of Environment consists of the Bureau of Water Protection, the Bureau of Waste Management, the Bureau of Air Quality and Radiation Control, and the Bureau of Oil Field and Environmental Geology.

A new Office of Environmental Geology was recently created to coordinate the activities of the Bureau of Oil Field and Environmental Geology with those of the Kansas Corporation Commission's Conservation Division. All oil field pollution control and technical support activities are thus coordinated through a joint KDHE/KCC Oil and Gas Regulatory Program. The director of this Office is jointly responsible to the Chairman of the KCC and the Secretary of KDHE.

The Department also operates six district offices throughout the state which serve as field extension sites for the central office in Topeka. District office locations include: Lawrence, Salina, Hays, Dodge City, Wichita, and Chanete. Both health and environmental programs are administered from these offices on a regional basis.

#### AGENCY RESOURCES

<u>Financial</u>: The Department's current (FY 1986) budget totals \$40.9 million of which \$14.9 million is financed from the State General Fund. The Governor's recommended FY 1987 budget for the Department totals \$45.9 million of which \$14.6 million is financed from the State General Fund. It is notable that while the Department's overall budget would increase by nearly five million dollars or 12.2 percent in FY 1987, the State General Fund portion actually decreases by \$341,152 or 2.3 percent.

The Department's budget is somewhat unique because of the extensive use of federal funds. In recent years, federal funding has constituted approximately

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two-thirds of the Department's budget with the balance financed from State resources. At the present time, the Department utilizes 54 separate federal grants that range from the Women, Infants and Children (WIC) grant of \$11.2 million dollars and the block grants for Maternal and Child Health and Preventive Health of \$4.1 million and \$1.1 million respectively to small special purpose grants such as the Early Childhood Development project of \$43,000. Additionally the Department collects fees from a variety of sources which are credited to the State General Fund. During FY 1985, the Department collected nearly \$5 million from approximately 30 fee revenue sources such as vital statistics fees, radiation control fees, waste water discharge permits, hazardous waste monitoring fees, food service and lodging fees, and air quality fees. Because of extensive fee collections, it can be said that the State's expenditures for health and environmental programs totals somewhat less that \$10 million. This is considerably less than one percent of all State General Fund expenditures! (\$1.63 billion - FY 1985).

The multitude of revenue sources coupled with the fee collection responsibilities makes the Department's fiscal structure exceedingly complex. Planning and development of the Department's annual budget depends not only on State General Fund allocations but also the anticipated funding levels provided by numerous federal grants. This task will become even more difficult as the Gramm-Rudman Act impacts federal funding. Similarly, execution of the Department's budget requires constant monitoring of each revenue source.

The Division of Health is the largest user of funds with a current budget of \$9.6 million in state operations. In comparison, the state operations budget for the Division of Environment is \$8.6 million. The remaining expenditures include \$2.3 million for the Office of Laboratories and Research; \$3.2 million for General Management; \$1.8 million for Policy and Planning; \$5.9 million in Aid to Local Units of Government and \$9.1 million in other assistance expenditures.

<u>Personnel</u>: For the current fiscal year (FY 1986), the Department has been authorized a total of 606.2 full time equivalent positions. In general terms, the positions are divided nearly equally into three groups: health - 215.7 F.T.E positions, environment - 208 F.T.E. positions, and support services - 182.5 F.T.E. positions. A summary of positions by major division follows:

Division of Health Division of Environment	215.7
Office of Laboratories & Research	72.0
Executive Office & Administrative	
Services	63.5
Policy and Planning	<u>47.0</u>
TOTAL	606.2

## FY 1986/1987 BUDGET HIGHLIGHTS

For the current fiscal year new federal grants are recommended for:

- -- providing AIDS virus test sites (\$44,000)
- -- conducting a regional conference on the health care of children in day care facilties (\$50,000)
- -- providing home health training for home health aides (\$70,000)
- -- conducting a diabetes control project that focuses on associated visual problems (\$100,000)
- -- providing consultation services for small generators of hazardous waste (\$50,000)
- -- consulting with schools on asbestos hazards (\$60,000)
- -- investigating hazardous waste sites for possible inclusion on the national priority list (\$166,000)

The recommended changes in the FY 1986 budget also include the reduction of approximately \$300,000 in State General Fund financing for agency.operations.

Significant aspects of the Governor's FY 1987 budget includes the following:

- -- deleting regional tuberculosis clinics (\$166,000)
- -- deleting a full time hearing conservation officer (\$42,000)
- -- maintaining State formula funding for local health departments at the current FY 1986 level 37.5 cents per capita
- -- providing DPT vaccine for use by local health departments (\$120,000)
- -- expanding the Women, Infants and Children Program from 54 to 104 counties
- -- implementing the Commodities Supplemental Food Program jointly with the Department of Social and Rehabilitation Services which will provide over \$4 million in commodities to approximately 2,000 persons.
- -- the addition of six federally funded positions to implement a program to locate and monitor leaking underground storage tanks
- -- the addition of four federally funded positions to eliminate the backlog of activity in the joint KDHE/KCC Oil and Gas Regulatory Program
- expanding the data processing programming staff by 2.5 positions to convert programs to a mini-computer acquired by the Department and to catch up on a large volume of accumulated programming work
- -- the Governor's base budget also includes minimal funding necessary for equipment and processing costs to automate on-line entry of certain vital statistics records.

The Governor's FY 1987 investment budget proposes expenditures totalling \$1,778,000 for the Department of Health and Environment. A sum of \$988,000 is

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proposed for the initiation of a Prenatal Collaborative Care Project. Major elements of this initiative include \$928,000 in aid to local health departments for initiating or enhancing prenatal care projects and \$60,000 to support two F.T.E. positions within the Department for supervising and coordinating the program. A sum of \$790,000 is recommended for the implementation of certain enhancements to the Department's environmental program. The components of this investment budget recommendation include \$50,000 for the Water Research-Chemigation Project, \$26,000 for developing the water data base, \$14,000 for developing minimum desirable stream flow standards, and \$700,000 to expand the hazardous waste clean-up program and to include volatile organic compounds (VOC) clean-up.

## ADVISORY BODIES

The following advisory groups assist the Department in carrying out its activities:

- -- Advisory Board on Low-Level Radioactive Waste
- -- Advisory Committee on Food Service and Lodging Standards
- -- Advisory Commission on Environment
- -- Advisory Commission on Health
- -- Environmental Awareness Council
- -- Governor's Council on Fitness
- -- Home Health Services Advisory Council
- -- Kansas Crippled and Chronically Ill Children's Program Advisory
  Committee
- -- Statewide Health Coordinating Council
- -- Toxicology Advisory Committee

## 1983 REORGANIZATION

Organized in the early 70's, the Department of Health and Environment had not experienced a major refinement either by program or structure in nearly ten years. Yet during the last decade there has been an increasing emphasis on environmental issues as they impact on public health. Consequently there was a need for the Department to change in order to adequately carry out its evolving responsibilities. Coupled with this development, there was a need to improve agency coordination and communication, eliminate unnecessary layers of bureaucracy and create a manageable span of control. Therefore, in June, 1983, the Secretary announced a general plan for reorganizing the Department. Four goals were identified for the reorganization:

- -- an increased emphasis on environmental issues as they relate to health
- -- improved coordination and communication within the Department

- -- elimination of unnecessary layers of bureaucracy in the Department
- -- creation of a more manageable span of control within the Department

Implementing these goals required certain structural changes within the Department. Prior to the reorganization, the Department had five major operating units that reported to the Secretary: the Division of Health, the Division of Environment, the Office of Laboratory Services, the Office of Health Facilities, and the Administrative Services Unit. The two statutory divisions were divided into 18 bureaus — 10 in the Division of Health and 8 in the Division of Environment. Additionally, there was a separate legal staff and personnel office within the Department. Prior to reorganization, the Department operated seven district offices located at Bonner Springs, Topeka, Chanute, Wichita, Salina, Hays and Dodge City.

Before undertaking the reorganization, several steps were taken to better assess where the agency stood as well as its future direction. The background study phase included:

- 1. Examining suggestions from many people within the Department of Health and Environment as well as those associated with the Department in some external fashion.
- 2. Discussing proposed reorganization plans at several executive staff meetings.
- 3. Studying the organizational make-up of comparable agencies in nearly two dozen states.
- 4. Examining audits and studies concerning the Department in recent years.

The initial aspects of reorganization took place during fiscal year 1984 and focused mainly on filling policy level positions and facilitating structural changes within the Department. The major structural changes are shown in the attached chart prepared recently by the Legislative Division of Post Audit.

The major structural changes stemming from the reorganization can be summarized as follows:

- The Bureau of Food and Drug was combined with the Bureau of Food Service and Lodging and placed under the Division of Health as the Bureau of Disease Prevention and Control
- Community Health Services became community liaison and development functions within the new Bureau of Community Health

- -- Maternal and Child Health functions were placed in the Bureau of Family Health.
- -- Epidemiology functions were placed in the newly created Bureau of Disease Prevention and Control
- -- Emergency Medical Services were placed within the Bureau of Community Health. However, this function was subsequently transferred to the Kansas Highway Patrol by the 1984 Legislature
- -- Registration and Health Statistics were placed in the Bureau of Community Health and research and analysis functions previously under Vital Statistics were placed in the newly formed Division of Policy and Planning as were data processing functions
- -- Health promotion and health education were housed in the newly created Bureau of Community Health
- -- Health planning became an Office in the Division of Policy and Planning
- -- Environmental planning was formalized and placed with the Division of Policy and Planning
- The Crippled Children's Program was placed within the newly created Bureau of Family Health
- -- The administrative services unit was expanded and elevated to Division status.
- -- The number of district offices were reduced by consolidating the offices located in Topeka and Bonner Springs at a new location in Lawrence to serve the north-east region.

Within the existing Division of Health and Environment the number of bureaus were reduced from 18 to 8 by consolidating bureaus which had similar or related functions. These basic changes are depicted in the "before and after" organizational chart which is attached. As part of the reorganization, public relation functions were centralized in the Office of the Secretary. Data processing and word processing functions were centralized in the Division of Policy and Planning. The Office of Laboratory Services was not affected directly.

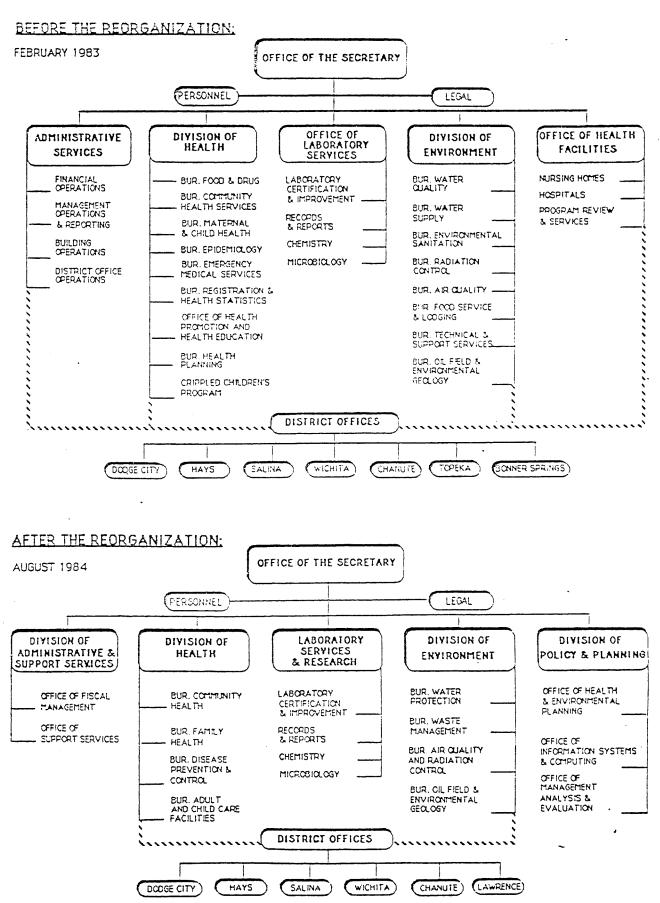
A key aspect of the reorganization was the recruitment of Division Directors and Bureau Managers with strong management, administrative and policy skills. These skills were to some extent emphasized over the traditional technical skills found in these management positions. Lastly, it should be noted that the reorganization was accomplished within the parameters of the approved FY 1984 budget.

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The reorgnization has also fostered a higher degree of partnership and cooperation between the State agency and local health departments. Joint meetings involving appropriate KDHE staff and representatives of local health departments are scheduled periodically for exchanging information, planning and joint problem solving. In the recent past, relationships between the State and local health departments appeared to be largely adversarial in nature. Through reorganization the relationship has evolved into one of mutual respect and consideration.

In conclusion, it should be stressed that the goal of reorganization is to make the Department more effective in dealing with the increasingly complex problems of public health and environmental quality.

# ORGANIZATION OF THE KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT



## SENATE GOVERNMENTAL ORGANIZATION COMMITTEE

April 1, 1986

Re: HB 2700 Sunset review, Department of Health and Environment

Right To Life of Kansas asked the House Committee to address concerns regarding DHE programs in three areas of concern. Secretary Sabol was asked to respond, which she did in a letter dated March 12.

Our first concern dealt with Kansas Family Planning programs. Secretary Sabol states that the program "promotes health" and is an "important cost containment strategy", and that increased state funding for Family Planning services is a "high priority" of the Kansas Association of Local Health Departments. She quotes figures for Michigan and Missouri from (apparently) family planning sources on the cost benefit ratio of family planning. We presume these figures to be the cost of welfare for a child as opposed to the cost of services to prevent one pregnancy. The problem with this is that they have not proven that the family planning program is effective in preventing the pregnancy with which we are all concerned - that of the unmarried teen! They cannot cite statistics for that because teen pregnancy rates have not decreased! SRS, she says reommends Family Planning service as a primary component in reducing teenage pregancy and saving state dollars. But they have been saying the same thing for the last fifteen years and we have been increasing family planning services to teens for fifteen years and it hasn't worked yet. When is someone going to start asking "WHY?

In 1965 the legislature authorized, let me rephrase that, mandated the department of Health and SRS to establish and maintain family planning clinics that would serve married adults ONLY. That statute remains on the books and is cited by the KDHE as the authority to operate a family planning program. After several years of efforts to change the law to allow them to serve minors without parental consent, the DHE in 1976 shifted strategy. The KDHE now says they do not operate any clinics but that the clinics are operated by local health departments. Our point is that the state of Kansas is funding these clinics and it was the obvious intent of the legislature that minors would not be served and certainly not without parental consent in family planning clinics.

Sen. G.O. EXHIBIT B

Secretary Sabol cites federal regulations regarding Title X. Title X is not a mandated program. Utah, for instance, which has reduced teenage pregnancys does not participate in the Title X family planning program. If Kansas did not participate in Title X, local health departments could apply directly for grants from the federal government. In fact, some Kansas agencies already do this. There is no need for the state of Kansas to be involved. In addition, Title X does not provide services directly. Women eligible for medical assistance would still receive family planning services paid for by Medicaid. We understand the committee does not have time to address this complex issue. One Senate Bill proposes to put a band-aid on the issue of parental consent. We think it needs major surgery. The rights of parents are being violated. The rights of children are being violated. Regardless of the outcome of Senate Bill 577, we would hope this committee would lend support for a comprehensive study of this issue and what we are doing in Kansas Family planning programs providing abortion referrals and medical services to minors without parental knowlege or consent and in violation of the intent and the letter of KSA 23-501 & 502. KSA 23-501 mandates the establishment and maintenance of family planning clinics by the KDME in cooperation with local health departments. If local health departments are operating clinics and the KDHE is funding those clinics - how can they claim that they are not being maintained and thus subject to the restriction of 23-501?

Abortion clinic licensing: Kansas law requires a medical facility that is operated primarily for the purpose of doing surgery with a staff of physicians to be licensed as a medical care facility. Secretary Sabol says she is not aware of such facilities operating in violation of licensure requirements. All she needs to do is open the Wichita Yellow page phone book. I would suggest beginning with the Women's Health facility which advertises all over the country for the surgical procedure of abortion up to the 26th wweek of pregnancy. K.S.A. 65-436 as the secretary notes sets forth exceptions to the closing of department files concerning medical care facilities. One of those exceptions is files relating to questions of licensing and it is these precise files - relating to licensing of surgicare, inc. in Overland Park to

SENATE GOVERNMENTAL ORG COMMITTEE April 1, 1986 page three

which we have been denied access.

Eastly, regarding the issue of stillbirth reporting. Mansas law as the secretary agrees requires the filing of a stillbirth certificate for children weighing 350 grams or more who are born dead, regardless of whether it is an abortion or natural occurrence. A few years ago the KDHE recommended that this law be changed. The legislature heard the bill and the testimony of Pight To Life and determined to keep the law as is. Mansas statutes not guidelines issued by the National Center for Health Statistics should govern the policies of the KDHE. Nevertheless Secretary Sabol says they are following the NCHS guidelines. She further states that in the case of a naturally occurring stillbirth the stillbirth certificicate is considered a legal document but in the case of an "induced termination" it is considered as a statistical report. There is nothing in the law to make that distinction, it is an arbitrary one that the department has chosen to make. If the law requires a stillbirth certificate why does the DHE not enforce this? Mrs. Sabol's letter indicates that the department requires a "statistical report" and therefore has the information to enforce this law for which I believe there is a penalty of a 100 dollar fine for each violation.

We are raising this issue because we believe it is important. What is a piece of paper?

A birth certificate a death certificate a marriage certificate a college diploma? What is the importance of a piece of paper? By refusing to honor the law requiring a stillbirth certificate for children intentionally murdered by abortion, by refusing to accord these children the dignity of a birth and death certificate, a legal document if you will acknowleging their existence—and Webster's defines existence the state of being—or life—we reenforce the continued degradation—not only of their lives but of all of our lives.

SENATE GOVERNMENTAL ORG COMMITTEE April 1, 1986 page four

ir. Chairman members of the committee, we would ask that you urge the department of health and environment to enforce the stillbirth reporting law.

Thank You

Pat Goodson,

Right To Life of Kansas, Inc.

# State of Kansas . . . John Carlin, Governor

# DEPARTMENT OF HEALTH AND ENVIRONMENT



Barbara J. Sabol, Secretary

Forbes Field Topeka, Kansas 66620 913-862-9360

March 12, 1986

T0:

Governmental Organization Subcommittee #2

Rep Brown

FROM:

Barbara J. Sabol, Secreta

IN RE:

Response to Concerns Expressed by Mrs. Pat Goodson,

Right to Life

Family Planning - Clinical services in Kansas are administered by community agencies, primarily local health departments, and financed by fee collections and local tax funds, supplemented by federal funds transmitted to local agencies by KDHE. The federal regulations governing Title X Federal Family Planning funds specify that there shall be no eligibility restrictions for race, age, or residence. According to the Attorney General's Opinion of June 22, 1976, any eligibility determinations mentioned in K.S.A. 23-501 and 23-502 apply only to family planning clinics operated by KDHE and do not apply to programs administered by community agencies or persons (see attached). Since KDHE does not operate any clinics, there are no state eligibility restrictions for Kansas local clinics.

Community Family Planning Clinics provide basic health services for women which promote optimal family health. The services emphasize correction of medical conditions prior to the initiation of pregnancy to assure a healthy outcome for mother and infant. During 1985, 47,796 clients used these preventive and treatment services. Each client is screened annually for cancer, hypertension, diabetes, venereal disease, and urinary tract infections. In calendar year 1985, 29,076 women were screened for cancer and 829 women with abnormal findings were referred to physicians for diagnosis and treatment. There were 582 cases of hypertension detected and referred for treatment. Eighty-two percent of the clients had incomes at or below 150% of the federal poverty quidelines.

Studies by the United States Public Health Service, the Urban Institute, the Governor's Family Planning Task Force in Michigan and the Family Planning Coalition of Missouri all demonstrate that "Family Planning is the most potent and low-cost intervention that public health authorities can bring to bear on the problem of infant mortality." Not only does family planning promote health, but it is also an important cost containment strategy. In Michigan, Family Planning saves the state \$3.50 for every dollar spent. In Missouri, the cost benefit ratio is \$1:\$3.76. In addition, here in our state, the SRS in their study, "A Kansas Agenda for Investing in Women and Children" recommends Family Planning service as a primary component in reducing teenage pregnancy and saving state dollars. Finally, the Kansas Association of Local Health Departments has established increased state funding for Family Planning services among their highest priorities.

Medical Licensure Program - There is no licensure category for a facility called an "abortion clinic." Some medical care facilities licensed under K.S.A. 65-426 et seq. do perform abortions. These facilities are licensed as hospitals or ambulatory surgical centers. The department is not aware of facilities operating in violation of the medical care facilities licensure requirements.

Information on the department's files concerning individual medical care facilities is not open to public inspection. K.S.A. 65-436 specifically requires that such information not be released and further sets forth certain limited exceptions to this standard.

Vital Statistics Registration - Guidance information issued to hospitals and physicians by KDHE require that all stillborns weighing over 350 grams, whether natural or induced, be reported to the department.

Since 1977, the National Center for Health Statistics has recommended that all stillborns of 20 weeks gestation or stillborns weighing 350 grams or more be reported, however, that induced terminations of pregnancy at any age or weight be reported on separate forms. KDHE has implemented this recommendation. In the case of induced termination, these reports are considered as legally required statistical reports rather than legal documents, as is the case for naturally occurring stillbirths or fetal deaths. On rare occasion in Kansas, a stillborn from an induced termination is reported on the fetal death certificate (about five a year), and when this occurs data is transferred to the abortion statistical information for the Annual Vital Statistics Report, as recommended by the National Center of Health Statistics (see attached).

The logic for filing fetal death or stillbirth certificates is to determine reasons for this event so that preventive measures can be taken. In the case of an induced termination of pregnancy, the reason for the stillborn is already known and therefore these cases are excluded from the fetal death analysis reported in the annual reports.

## PROPOSED REPORTS OF STANDING COMMITTEES

MR. PRESIDENT:

Your Committee on Governmental Organization

Recommends that House Bill No. 2714 (As amended by House Committee)

"AN ACT affecting the expiration date of the provisions of the act establishing and providing for duties of the advisory commission on juvenile offender programs; amending K.S.A. 75-5390 and repealing the existing section."

Be amended:

On page 1, by striking line 26 and inserting:

75-5388 is hereby amended to read "Sec. 2. K.S.A. follows: 75-5388. There is hereby established, within and as a part of the department of social and rehabilitation services, an juvenile offender programs. advisory commission on commission shall consist of  $\pm 3$   $\underline{14}$  members as follows: One shall be the secretary of social and rehabilitation services or the secretary's designee, one shall be the commissioner of education or the commissioner's designee, one shall be the attorney general or the attorney general's designee, two shall be from judges of the district court appointed by the chief justice of the Kansas supreme court, one shall be a court services officer appointed by the chief justice of the Kansas supreme court, one shall be member of the senate appointed by the president of the senate, one shall be a member of the senate appointed by the minority senate, one shall be a member of the house of leader of the appointed by the speaker of the house of representatives be a member of the house οf shall representatives, one representatives appointed by the minority leader of the house representatives and four members shall be appointed by the governor. Of the members appointed by the governor, one shall be a person who is actively engaged in law enforcement in the state of Kansas, one shall be from the field of corrections and two shall be representatives of organizations or private agencies which are actively involved in providing services or programs for juvenile offenders.

for the secretary of social and rehabilitation Terms services, the commissioner of education and the attorney general shall expire concurrently with their terms as state officers. secretary of social and rehabilitation services, the commissioner of education and the attorney general do not serve as members of the advisory commission, the terms of their designees shall expire concurrently with the term of the state officer making the appointment or when the state officer making the appointment shall withdraw the same, whichever of foregoing shall occur first. The terms of the judges of the district court shall expire concurrently with their terms judges or with the term of the chief justice of the supreme court or when the chief justice shall withdraw the appointments, whichever of the foregoing shall occur first. The terms of shall expire concurrently with their terms legislators legislators or with the term of the legislative officer making the appointment or when the legislative officer making the appointment shall withdraw the same, whichever of the foregoing shall occur first. The terms of the four members appointed by the governor from law enforcement, from the field of corrections and from agencies or organizations which are actively involved in juvenile offender programs shall be for a term of two years, except that, of the members initially appointed by the governor, two shall serve for a term of one year and two shall serve for a term of two years. When making initial appointments of members to the advisory commission, the governor shall designate the term for which each such member shall serve. Within 30 days after the date of this act, the secretary of social effective rehabilitation services, the commissioner of education and the attorney general shall notify the governor of their decision to serve as members of the advisory commission or of the names the persons they have designated to serve on the advisory

commission; the chief justice of the Kansas supreme court shall notify the governor of the names of the judges of the district court the chief justice has appointed to serve on the advisory commission; the president of the senate, the minority leader of the senate, the speaker of the house of representatives and the minority leader of the house of representatives shall notify the governor of the names of the members of the legislature they, respectively, have appointed to serve on the advisory commission. Thereupon, the governor shall appoint the other four members of the advisory commission. All vacancies in the membership of the advisory commission shall be filled in the same manner as originally filled. Vacancies created for reasons other than expiration of terms of office shall be for the unexpired terms. If any appointive member of the advisory commission fails to attend three successive regular meetings of the commission, the member shall automatically forfeit membership on the commission and the appointing authority of such member shall appoint a replacement member.

The advisory commission on juvenile offender programs shall provide annually for its organization by the selection of a chairperson and such other officers as deemed necessary. The advisory commission may adopt such rules as it may deem necessary to govern its operating procedure. The director of juvenile offender programs shall serve as ex officio secretary to the advisory commission. Members of the advisory commission attending meetings of such commission, or attending a subcommittee thereof authorized by such commission, shall be paid amounts as provided in subsection (e) of K.S.A. 75-3223, and amendments thereto.

Sec. 3. K.S.A. 75-5389 is hereby amended to read as follows: 75-5389. (a) The advisory commission on juvenile offender programs shall hold regular quarterly meetings and such other meetings as the chairperson of such commission deems advisable and in addition shall meet at such other times upon the call of the director of juvenile offender programs or the

It shall be the duty of the advisory commission to governor. confer, advise, and consult with the director of juvenile offender programs with respect to the policies governing the management and operation of all services, programs institutions under the jurisdiction of the commissioner. The commission shall also consult with and advise the governor from to time with reference to the management, conduct and operations of institutions and services and programs relating to juvenile offenders. A member or members of the advisory commission shall, from time to time, visit each institution providing services or programs for juvenile offenders for the purpose of inspecting same. Such visits shall be made at times and in such manner as the advisory commission shall determine at a regular meeting thereof.

(b) The advisory commission shall oversee implementation of a policy of eliminating detention of juveniles in adult jails and adult lockups and shall assist in the development of local or regional alternatives to detention of juveniles. For this purpose, the advisory commission shall advise and consult with local governmental officials and private persons interested in developing alternatives to detention. In addition, the advisory commission shall advise the secretary of social and rehabilitation services and the commissioner of youth services in detail on the expenditures of any moneys appropriated or otherwise available for developing or maintaining facilities or programs which provide alternatives to detention of juveniles and transportation of juveniles to alternative detention and may apply for and accept any moneys made available for that purpose. Expenditures of such moneys shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued pursuant to vouchers approved by the secretary of social and rehabilitation services or by a person or persons designated by the secretary. The secretary of social and rehabilitation services shall provide to the advisory commission such technical assistance as necessary to carry out the

## provisions of this section.

- (c) The advisory commission shall make reports at-least annually on or before December 1 of each year to the governor, the commissioner of education, the secretary of social and rehabilitation services, the attorney general, the chief justice of the Kansas supreme court and the members of the legislature, and make such recommendations as it deems advisable for appropriate legislation.
- (d) The advisory commission shall be charged with the task of making recommendations to those responsible for developing a working philosophy of accountability related to juvenile offender programs. The advisory commission shall study and make recommendations concerning the defining of appropriate roles of the various state agencies involved in providing programs and services to the juvenile offender and shall be responsible for reviewing any and all programs relating to services or programs for juvenile offenders. The advisory commission shall perform such other studies or tasks as may be assigned by the governor or specifically requested by the chief justice or the attorney general.
- (e) For the purposes of the federal juvenile justice and delinquency prevention act of 1974, as amended, the advisory commission on juvenile offender programs shall act as the supervisory board.
- New Sec. 4. (a) Before April 1, 1987, the board of county commissioners of each county in this state shall submit to the advisory commission on juvenile offender programs a plan for the removal of juvenile offenders and alleged juvenile offenders from adult jails and adult lockups. In developing such plan, the board may consider using the following alternatives for detention of juveniles:
- Transportation of juveniles to a youth residential facility or juvenile detention facility in another county;
- (2) remodeling existing jail facilities for juvenile detention to meet the requirements of this act;

- (3) use of agreements pursuant to the interlocal cooperation act to share the construction, maintenance and operation of youth residential facilities or juvenile detention facilities with other counties; or
  - (4) use of nonsecure alternatives to detention.
- (b) Before submission of a plan to the advisory commission under subsection (a), the plan must be approved by the administrative judge of the judicial district in which the county is located.
- Sec. 5. K.S.A. 75-5388, 75-5389 and 75-5390 are hereby repealed.";

By renumbering section 3 as section 6;

In the title, in line 17, by striking "affecting the expi-"; by striking all of lines 18 through 20; in line 21, by striking all before the period and inserting "concerning juveniles; relating to detention in adult jails and development of alternatives thereto; continuing in existence the advisory commission on juvenile offender programs; amending K.S.A. 75-5388, 75-5389 and 75-5390 and repealing the existing sections";

And the bill be passed as amended.

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