



City of New Britain
New Britain, Connecticut 06052
Health Department

*"New Britain:
A City for All
People"*

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TO: Public Health Committee
FROM: Eugene M. Ciccone, MD
Director of Health, City of New Britain
DATE: February 14, 2007
RE: Proposed Bill No. 5076
"An Act Concerning An Appropriation For A Fetal And Infant Mortality
Review Program"

To whom it may concern,

My name is Eugene M. Ciccone, MD.

I am Director of the Department of Health for the City of New Britain. I am submitting this testimony in support of Proposed Bill No. 5076, "An Act Concerning An Appropriation For A Fetal And Infant Mortality Review Program."

I have been involved with the New Britain Fetal and Infant Mortality Review program (F.I.M.R.) since I became Director of Health for the City of New Britain in 2004, and serve on both the Case Review and Community Action Teams. I am very concerned about the Department of Public Health's decision to terminate funding for five community-based programs in the state, including the one in New Britain, and re-direct those funds to pursue a statewide surveillance and planning process. F.I.M.R. plays an important role in monitoring and improving our local service delivery systems for women and families.

New Britain has had a F.I.M.R. program, coordinated by the UConn Health Center Family Planning Program, since 1998. F.I.M.R. has been very beneficial to New Britain and performs a critical public health function for maternal and child health. The collaborative system established and coordinated through F.I.M.R. is the primary mechanism we have in New Britain to monitor and address perinatal service issues.

As the Health Director for the City, I am very concerned about the potential loss of this important program.

While I support the need to address fetal and infant deaths on a statewide basis, it would be a great loss to abandon support of these community networks. The relatively few dollars invested in the F.I.M.R. model have resulted in tangible improvements in local services. For example, F.I.M.R. has been the catalyst for the following:

- Establishment of a protocol for scheduling postpartum visiting nurse home visits for all mothers following an infant or fetal loss
- Establishment of a community fund to cover fetal burial costs for indigent families
- Bereavement support services for Spanish-speaking families
- Grand Rounds on periodontal disease and pre-term birth attended by OB/Gyns and pediatricians;
- Addressing the need to improve birth certificate reporting of adequacy of prenatal care

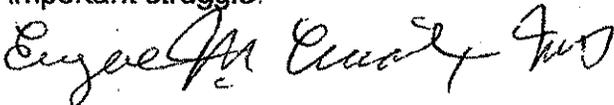
- Grand Rounds on prenatal screening for STDs and obstetric infections (received funding from the March of Dimes)
- Linkage with Oral Health Collaborative to raise awareness of the need for dental services for pregnant women and their children

I am asking the Public Health Committee to support Proposed Bill No. 5076, with a few changes. I would ask that the bill specify continuation of the five existing F.I.M.R. programs:

1. Greater New Haven
2. Hartford
3. Manchester-Vernon
4. New Britain
5. Windham

Further, I would ask that the bill specify establishment of new F.I.M.R. programs in three (3) additional Connecticut communities, to be determined based on need.

Reduction of infant and fetal mortality requires a two-pronged approach: 1) continual data collection, monitoring and analysis; and 2) action at the community level to improve systems of care and, ultimately, birth outcomes. Your support of Proposed Bill No. 5076 will ensure that we do not lose ground in this important struggle.



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