

Testimony of the Connecticut Association of Directors of Health

*In Support of Raised Bill 277: An Act Establishing a Council to Promote Collaboration Between
Local Health Departments and the Department of Public Health*

To the Distinguished Co-Chairs and Members of the Public Health Committee

March 7, 2012

Good afternoon, Representative Ritter, Senator Gerratana and members of the Public Health Committee. My name is Patrick McCormack and I am President of the Connecticut Association of Directors of Health (CADH) and the Director of the Uncas Health District, serving the towns of Bozrah, Griswold, Lisbon, Montville, Norwich, Sprague, and Voluntown.

CADH, on behalf of Connecticut's local health departments, supports Raised Bill 277, which would institutionalize a process for meaningful collaboration and partnership between state and local governmental public health. Ultimately, governmental public health agencies are responsible for ensuring the health of Connecticut's residents. They are at work enforcing the Public Health Code, assessing public health needs, and implementing public health initiatives.

The original impetus for the Connecticut Conference of Municipalities (CCM) pursuing this legislation was two-fold. First, the proposed council was intended to facilitate dialogue between state and local governmental public health about changes in regulations and other policies that local health departments are ultimately asked to implement and enforce. Second, the proposed council was intended to ensure that state and local governmental public could collaboratively review, prior to submission, those federal grant applications that have direct implications for local health practice. Local health directors have an on-the-ground perspective that can and should inform the feasibility of proposed initiatives and public health policies and how best to secure and apply federal public health dollars available to the State.

CADH supports Raised Bill 277. There are, however, some concerns with respect to the language as written:

- 1) As noted above, the key impetus for CCM pursuing this legislation was to ensure dialogue around regulatory and policy changes with direct implications for local governmental public health and collaborative review of federal grant applications. Section 1(b) of the bill ought to more explicitly state these functions.
- 2) To ensure that dialogue remains focused explicitly on enhancing collaboration between state and local governmental public health, council membership ought to be limited to local health directors and representatives of the Department of Public Health only.
- 3) The bill ought to ensure representation on the council by both municipal health authorities and district departments of health. Representation should not be based on population alone. Moreover, if the intent is to ensure representation from urban, suburban, and rural population centers, the language as drafted does not accomplish this aim. For example, a district comprised of several rural towns may serve a population of more than 75,000, but each of those towns individually may have small populations.
- 4) To support the selection process, the bill ought to include language that local health director members be selected from nominations by community groups, such as CCM and CADH.
- 5) The bill ought to include language that sets forth terms for council members and a process for filling vacancies.

Subject to these concerns, CADH supports Raised Bill 277 to promote meaningful collaboration and partnership between state and local governmental public health. CADH is a nonprofit organization comprised of Connecticut's 77 local health departments and districts. Local health directors are the statutory agents of the Commissioner of Public Health and are critical providers of essential public health services at the local level in Connecticut. Thank you for your consideration.