

Testimony of the Connecticut Association of Directors of Health
To Oppose Proposed Senate Bill No. 352: An Act Concerning Municipal Sewerage Systems

To the Distinguished Co-Chairs and Members of the Public Health Committee
February 27, 2013

Good afternoon, distinguished Co-Chairs and Members of the Public Health Committee. My name is Thad King, a member of the Connecticut Association of Directors of Health (CADH) and Director of Health of the Chatham Health District, serving the towns of Colchester, East Haddam, East Hampton, Haddam, Hebron, Marlborough, and Portland.

CADH opposes *Proposed Senate Bill 352: An Act Concerning Municipal Sewerage Systems*, which, without a stated purpose, would expand the authority of municipal water pollution control authorities (WPCAs) to include septic systems. The bill raises many concerns, not the least of which is that eviscerating local health departments of this function would be extremely costly.

Under Section 22a-430 of the Connecticut General Statutes and the regulations¹ thereunder, the Connecticut Department of Public Health (DPH), municipal health authorities, and district departments of health have authority to regulate subsurface sewage disposal systems, which are systems consisting of a house or collection sewer, a septic tank followed by a leaching system, any necessary pumps or siphons, and any groundwater control system on which the operation of the leaching system is dependent.²

For more than 40 years, DPH and local health departments have worked in partnership to train a qualified and skilled workforce of certified and Registered Sanitarians to conduct subsurface sewage disposal system site evaluations, review plans, issue permits, perform inspections, educate property owners, and enforce state and local laws governing these systems. Local health departments have rich expertise, resources and experience, while WPCAs have essentially no capacity in this area. Expanding the authority of municipal water pollution control authorities (WPCAs) to include septic systems disregards an exemplary, existing regulatory structure that has been in place for decades.

Such an undue expansion would also be costly. Because WPCAs have neither staff nor expertise in this area, training costs would be significant, or in some municipalities, WPCAs ironically might incur the administrative costs of subcontracting with local health departments. Local health departments also may still have to investigate nuisance complaints and health issues arising from faulty onsite sewage systems, but without the necessary revenue generated by issuing subsurface sewage disposal permits. The associated loss of revenue could also jeopardize the capacity of local health departments to adequately perform many of its other legally mandated functions, including inspecting food service establishments, day care centers, and public pools.

Local politics should not drive a statewide change that discards a successful regulatory framework in which decades of investment have been made. Accordingly, CADH opposes *Proposed Senate Bill 352*. CADH is a nonprofit organization comprised of Connecticut's 71 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.

¹ These regulations include Sections 19-13-B100a, 19-13-B103 and 19-13-B104 of the Public Health Code.

² Additional concurring authority to regulate these systems resides in Section 19a-36 of the Connecticut General Statutes.