

Testimony of Jeff Holland

concerning funding for Regional Action Councils in

H.B. No. 6824 - AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE THIRTIETH 2017, AND MAKING APPROPRIATIONS THEREFOR AND OTHER PROVISIONS RELATED TO REVENUE.

Department of Mental Health & Addiction Services - March 6, 2015

Senator Bye, Representative Walker, Senator Gerratana, Representative Dillon and members of the Appropriations subcommittee, my name is Jeff Holland. I am offering testimony in strong opposition to the proposed cuts to the Regional Action Councils.

In my community our Regional Action Council has been instrumental in establishing prevention programs that have been adopted statewide. During my time as an EMT in New Canaan, I have been fortunate to have had the resources and collaboration of my regional action council in proactively addressing important public health issues. It is my opinion that the preventive work of the RACs is just as important as the work of those of us that are, by definition, responders. RACs truly have their finger on the pulse of the communities they serve.

Health care is evolving from an emphasis of providing highly technologic curative care to improving health through prevention and wellness. The objective is to prevent people from ever requiring costly medical care, or needlessly losing their lives. According to the CDC, injury is the leading cause of death in people 1-44 years of age, and until only a few years ago, motor vehicle accidents were largely responsible for this. However, through preventive efforts such as roadway engineering, vehicle design, enforcement and education, those numbers have fallen steadily. Accidental poisoning, due largely to the use of prescription medications such as opioids, is now the leading cause of injury death and the cause of thousands of hospital admissions. Here again, preventive efforts are critical.

The RACs, as part of the Connecticut Prevention Network, have been working statewide with our regional partners in a multi-strategy approach to address the growing problem of prescription drug diversion and abuse, especially involving opioids. By reducing illicit access to opioids, reducing demand, and reducing harm, lives are being saved.

In 2010 we collaborated with the Department of Consumer Protection Drug Control Division to pilot a medication drop box collection program that is now statewide. This program ensures that household medications are disposed of responsibly, preventing potential misuse. We support the use of the Prescription Monitoring Program, as well as prescriber education, to help reduce the overprescribing of opioids. Through programs like SBIRT (Screening, Brief Intervention and Referral to Treatment) we work to ensure that individuals that have developed a dependence on these powerful medications are better identified and receive appropriate care.

During the last legislative session, we worked to secure Good Samaritan protection for anyone administering the opioid overdose antidote known as Narcan. Since its adoption on October 1st, hundreds of first responders have been trained and equipped with this safe, effective life saving medication, and dozens of overdoses have been reversed.

In order to effectively combat this opioid epidemic there needs to be a continued collaboration of all of the providers in the health care system, and the RACs provide the necessary nexus between them. Removing this important link will diminish the effectiveness of every agency's work. It is my hope that this committee will take into account the high costs of preventable injuries and illnesses, and recognize that such costs are not only monetary, but include lost productivity and the human suffering that affects individual patients, their families, as well as the entire community. Quoting Ben Franklin, "an ounce of prevention is worth a pound of cure".

Thank you for accepting my testimony,

Jeff Holland