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PROPOSED BILL NO 317 AN ACT CONCERNING COMMUNITY BASED HEALTH CARE SERVICES

Committee on Public Health

FEBRUARY 17, 2017

Good Morning: Representative Steinberg, Senator Gerratana, Senator Somers, Representative Srinivasan and esteemed members of the Committee on Public Health. I want to thank-you for the opportunity to provide testimony on behalf of the Connecticut Nurses' Association (CNA). I am Mary Jane Williams Ph.D., RN current chairperson of Government Relations Committee for the Connecticut Nurses Association.

I speak in opposition of **PROPOSED BILL NO 317 AN ACT CONCERNING COMMUNITY BASED HEALTH CARE SERVICES at this time.**

However, it is our strong belief that the intent of the Bills coming forward to increase the community based providers available in our communities is the result of a valid need. However, the process by which we are attempting to fill a perceived gap is wrong. It is essential that before we attempt to add another category of workers we need to need to establish a working committee of community health experts who are qualified and representative of all the stakeholders involved in our Communities who have the potential of being affected by this legislation. This working group needs to:

- 1) Define the role of the providers in the Community
- 2) Establish the specific role and role responsibilities

- 3) Define the Role, Responsibility and Preparation
- 4) Evidence Based Research that supports the role
- 5) Examine National Curriculums
- 6) National certifications
- 7) Examine the legal ramifications
- 8) Make recommendations to the Public Health Committee regarding each of the roles and how they all work cohesively within a organized cost effective system.

It should be noted that the American Nurses Association has already developed a set of guidelines for the Community Paramedic. However, before we add another Community Health provider we need to examine the role and how it fits into and supports the current health care delivery system. The literature abounds with articles related to Community Health providers. Many states already utilize a variety of Community Health providers. However, if we create another community worker without a systematic, organized review we are possibly creating a situation that is costly to the State. Coordinated comprehensive community health with appropriate providers who are members of an organized system are essential to the provision of high quality community care that is cost effective.

Before Connecticut moves forward we need to clearly define the role, the educational needs, preparation and place within a complex community health care system and we must do this with the current provider groups/organizations who have a vested interest in the health of the citizens of Connecticut. Therefore **SPEAK IN OPPOSITION TO PROPOSED BILL NO 317 AN ACT CONCERNING COMMUNITY BASED HEALTH CARE SERVICES**

Thank you,

Mary Jane M. Williams PhD., RN

Chair, Government Relation, Connecticut Nurses Association

Professor Emeritus Central Connecticut State University

