

## Governor's Council for Local Public Health Regionalization

Minutes for first meeting, July 16, 2009

### In Attendance:

Dr. Galvin, Karen Buckley-Bates (Facilitator), Pamela Kilbey-Fox, Mary Pettigrew, Richard H. Matheny, Jr., Baker Salisbury, Karen Spargo, Jennifer Kertanis, William Fritz, Jr., Carolyn Wysocki, Robert Dakers, Bart Russell (alternate)

Absent: Matt Hart, Ralph Eno, William Blitz (alternate)

Public: Senator Len Fasano, Eloise Hazelwood, Bill Gerrish, Eugene Ciccone

### Opening Remarks:

Dr. Galvin welcomed the participants to the meeting and explained the need for decisions to be made by the Council. The Council needs to agree on a structure for local public health in Connecticut or someone less vested than the Council, will make the decision for them. He also said that it is necessary that all of the same core members are needed at every meeting. Regionalization is not a forgone conclusion. This group's charge is to find the best possible system for Connecticut's citizens.

Karen Buckley-Bates, the facilitator explained that the council has an ambitious agenda and timeline and it is imperative that the council stay on track, be courteous and focus on the end result.

Dr. Galvin spoke of an economist at UCONN, that is of the opinion that the state of Connecticut divide to form five large districts.

Bart Russell stated that consolidation into districts is not a "silver bullet" in terms of cutting costs and saving money, but that it could cost more if the state divides into districts. Other members of the council expressed themselves by saying that this is not about money and should not be about money but that the people of Connecticut deserve a public health system capable of giving them the services that they need.

Eloise Hazelwood, Local Health Director of Wallingford and public speaker, explained that what needs to be changed is the wording of the executive order so that it is not about regionalization but about a review of the essential public health services. She further stated that the Council should go over what each health department should provide to its citizens such as, health education, community nursing and chronic disease control, etc.

Senator Len Fasano (public speaker) gave the council some guidance as to why it is important that the council agree on a decision in a timely manner. He stated that the council should look at what is best for every region, recommend any amendments to the language of the statutes, and define regionalization as it will work for Connecticut or define the downfalls of regionalization and why it will not work. He strongly recommended that the council not leave the decision making up to the legislature because then the council may severely disagree with what decisions are made.

## Presentations:

### Pamela Kilbey-Fox, Connecticut's Public Health Infrastructure

This presentation explained the Local Health Administration Branch, municipal health departments, district departments of health, full and part-time health departments, local health department per capita funding and the part-time health department transition program. It was highlighted that Municipalities with populations greater than 40,000 for 5 consecutive years, must have a full-time director of health.

First Selectman William Fritz discussed that several part-time health departments became one full-time district because they can now provide many more services to their residents to better protect them, their staff is more accountable and more organized and in the cases of emergency preparedness, full-time departments of health seem to be more prepared.

Karen Buckley-Bates reviewed the two Local Health Proposals from this past session. She handed out a document that contained the language from the Governor's budget proposal and the language that reflects the Appropriations budget proposal. Karen highlighted that the language in the proposals are directly linked to actual dollar amounts budgeted. When the final state budget is passed, it may change per capita amount and/or change the definition of Local Health department. In addition, she discussed the 2004 Legislative Program Review and Investigation Committee Study: Preparedness for Public Health Emergencies and how it ties to the Transition Program that Pamela Kilbey-Fox discussed.

Jennifer Kertanis noted that we should all agree on function first and then figure out the model for delivery.

## Ground Rules & Council Structure:

- The council will be complaint with FOI.
- Meetings are Public and votes must be taken in person (not via email).
- Only Core members of the council will vote on decisions.
- Defined alternate members may attend meetings to listen and keep current on the issues. They may only voice opinions and vote on decisions in the absence of the core member.
- However, they may speak during the public comment period at any time.
- At the beginning of each meeting there will be 15 minutes allotted, 3-5 minutes per person, for public comment.
- DPH will post information on their website and minutes and information will be shared via the CT HAN (CT Health Alert Network) and via the Council email distribution list.
- Meetings will be perfume or fragrances due to an allergy of a Council member.
- Technology at CHA will be evaluated to see if others can listen in when they cannot be present at the meetings.
- The Council will plan to have a "Draft" plan available for review at the Dec. 2<sup>nd</sup> meeting.
- The agenda will be available before the next meeting.

## Presentation/Discussion for Next Meeting:

- 10 Essential Services of Public Health

- Accreditation of Health Departments (may need to hold off)
- What is going on at the Federal Level
- Mass Dispensing areas
- What are other states doing
- Operational definitions and standards
- Annual Report Summary of Information sent to DPH
- Panel Presentations from current models (Part-time, Municipal, & District) (may need to hold off to a future meeting)

Preliminary Discussion on "function":

- To protect and improve the residents of Connecticut
- To better inspect the food supply
- To improve the water supply
- To monitor illness more effectively
- To better protect our environment
- To better control the spread of disease

Future Meeting Dates:

**Sept 2nd from 9 to 11**

**Oct 2nd from 9 to 11**

**Nov 2nd from 9 to 11**

**Dec 2nd from 1 to 3**

**Dec 15th from 1 to 3**