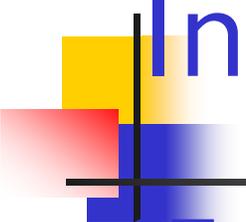


# Connecticut's Public Health Infrastructure

PAMELA KILBEY-FOX, MPH  
Branch Chief, Local Health Administration  
Branch

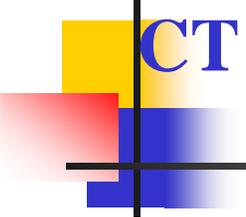
# Connecticut's Public Health Infrastructure



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## **CT Gen. Statutes 19a-2a – Powers and Duties.**

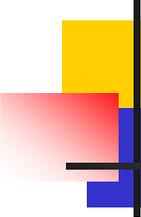
- The Commissioner has authority over local directors of health (DOH):
- May remove DOH from appointment
- Shall assist and advise DOH in their duties
- When requested by DOH, the Commissioner shall consult, investigate and advise



## **CT Gen. Statutes 19a-2a – Powers and Duties.**

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- Shall investigate nuisances and conditions affecting public health
- Shall ensure the enforcement of the CT General Statutes and regulations of the Public Health Code by local health departments



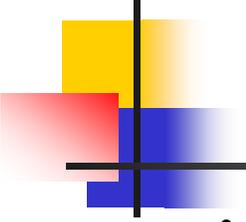
# Local Health Administration Branch

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## **Commissioner's liaison to local health departments:**

- Review of Director of Health (DOH) credentials for appointment
- Provide orientation for new and Acting DOH's
- Assist in the recruitment of new DOH
- Administer Per Capita grant funding

# Local Health Administration Branch



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- Assist in the formation of health districts
- Plan Commissioner's Semi-annual meetings
- Administer the Annual Report (AR)
- Analyze data collected from the AR
- Manage the Directory of Local DOH's
- Assist in the development and implementation of Local Public Health Standards

# Local Health Administration Branch



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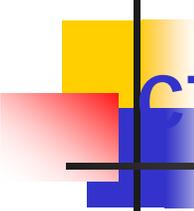
- Coordinate with other DPH programs in providing technical assistance to local health departments
- Investigate complaints about local health departments
- Administer the Health Alert Network (HAN) grant
- Oversee development of the Local Health Restricted Website

# Local Health Administration Branch

## Virtual Office of Public Health Nursing

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- **Strengthen the Public Health Nursing (PHN) infrastructure between HDs and community partners**
- **Develop the capacity of nurses working in CT's HDs**
  - build on strengths
  - provide forum to promote professional development
- **Assure a competent PHN workforce based on core competencies**
- **Enhance networking**
  - CAPHN, CNA, CPHA, CADH, CEHA
  - Home Health and School Based nurse groups
  - others



# Municipal Health Departments:

## CT Gen. Statutes - 19a-200, 206 & 207

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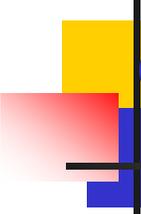
- DOH appointed by each city, borough or town  
DOH must be: (1) a licensed physician, (2) hold a graduate degree in public health as a result of at least one year's training, including at least sixty hours in local public health administration, in a recognized school of public health or (3) training and experience as meets the approval of the Commissioner.
- Appointment under option (3) must be approved by the Commissioner.

# Municipal Health Departments:

## CT Gen. Statutes - 19a-200, 206 & 207

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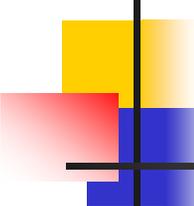
- Municipalities with populations greater than 40,000 for 5 consecutive years, must have a Full-time DOH
- If a DOH vacancy exists, an Acting DOH may be appointed, with Commissioner approval.
- Municipality shall provide the services of a licensed sanitarian
- Shall enforce the Public Health Code and investigate and require the abatement of nuisances



## District Departments of Health (DDH): CT Gen. Statute 19a - 241 through 244

"Towns cities and boroughs may unite to form district departments of health..."

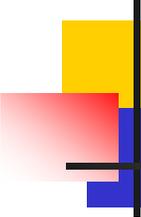
- Affairs of DDH are managed by a board
- DDH boards exercise all public health authority as municipalities
- Each district member town, city or borough to appoint One (1) board member to the district
- Additional board members may be appointed for every 10,000 in population or any part thereof



## District Departments of Health (DDH):

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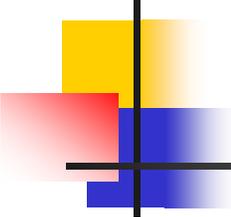
- DOH appointed by board must be (1) a doctor of medicine and have an MPH or, in lieu of MPH, shall meet the qualifications of Commissioner, or (2) hold an MPH.
- DOH Appointment must be approved by Commissioner
- The DOH for a DDH is a Full-time position



## District Departments of Health (DDH):

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- DDH shall provide the services of a licensed sanitarian
- Shall enforce the Public Health Code
- Shall investigate and require the abatement of nuisances



# Full and Part Time Local Health Departments in CT FY 2008-2009

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	<u># Towns</u>	<u>Population</u>	<u>Percent</u>
<b>Full Time</b>	<b>141</b>	3,277,258	93%
Municipal	32	1,692,266	48%
District(20)	109	1,584,992	45%
<b>Part Time</b>	<u><b>28</b></u>	<u>225,051</u>	<u>7%</u>
<b>Total</b>	<b>169</b>	<b>3,502,309</b>	<b>100%</b>

July 2009

# Local Health Departments and Districts, July 2009

## Health Districts<sup>1,2</sup>

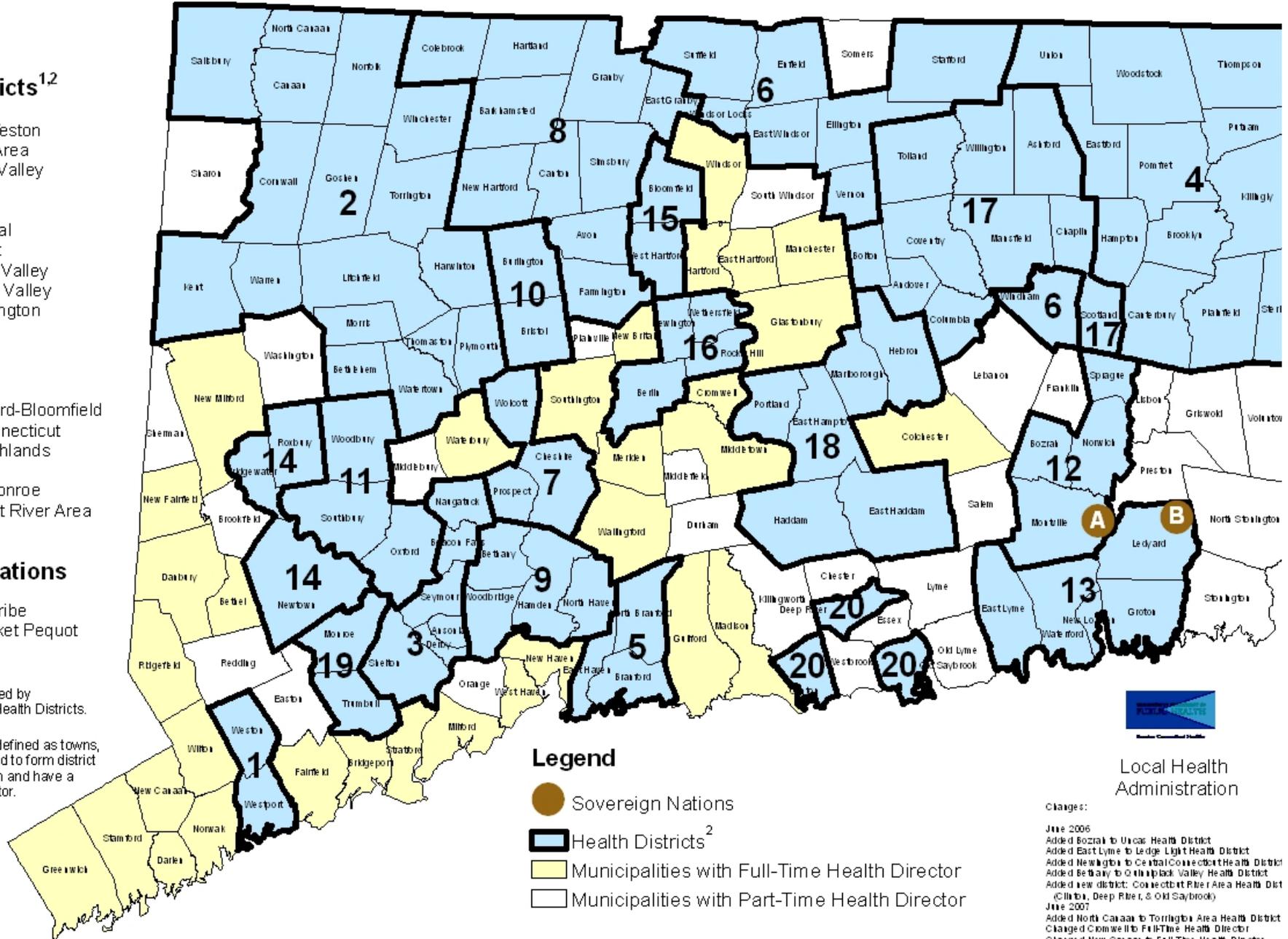
- Westport Weston
- Torrington Area
- Naugatuck Valley
- Northeast
- East Shore
- North Central
- Chesprocott
- Farmington Valley
- Quinnipiac Valley
- Bristol-Burlington
- Pomperaug
- Uncas
- Ledge Light
- Newtown
- West Hartford-Bloomfield
- Central Connecticut
- Eastern Highlands
- Chatham
- Trumbull-Monroe
- Connecticut River Area

## Sovereign Nations

- Mohegan Tribe
- Mashantucket Pequot Tribe

Numbers are assigned by the date of formation of Health Districts.

Health Districts are defined as towns, cities, or boroughs united to form district departments of health and have a full-time Health Director.



## Legend

- Sovereign Nations
- Health Districts<sup>2</sup>
- Municipalities with Full-Time Health Director
- Municipalities with Part-Time Health Director

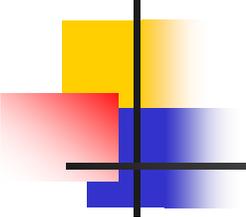
**Local Health Administration**

Changes:

June 2006  
 Added Bozrah to Uncas Health District  
 Added East Lyme to Ledge Light Health District  
 Added Newington to Central Connecticut Health District  
 Added Bethany to Quinnipiac Valley Health District  
 Added new district: Connecticut River Area Health District (Clifford, Deep River, & Old Saybrook)

June 2007  
 Added North Canaan to Torrington Area Health District  
 Changed Cromwell to Full-Time Health Director  
 Changed New Canaan to Full-Time Health Director

June 2008  
 Changed Danbury to Full-Time Health Director



# Local Health Department Per Capita Funding

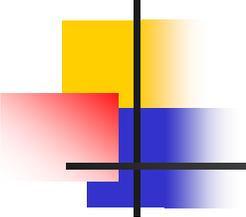
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## **CT Gen. Statutes 19a-202**

- Full Time Health Departments receive \$1.18 per person

## **CT Gen. Statutes 19a-202a**

Part Time Health Departments receive \$0.49 per person



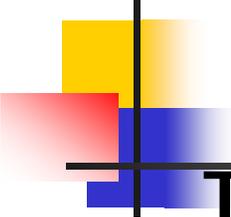
# Local Health Department Per Capita Funding

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## CT Gen. Statutes 19a-245

### District Health Departments:

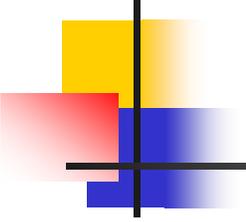
- Towns with population less than or equal to 5000 receive--\$2.43 per person
- Towns with populations more than 5000 receive --\$2.08 per person



# Local Health Department Per Capita Funding

**To receive funding, the local health department shall ensure the provision of a basic health program as outlined in the CT Regulations Section 19a-76-2:**

- Public Health Statistics
- Health Education
- Nutritional Services
- Maternal and Child Health
- Communicable and Chronic Disease Control
- Environmental Services
- Community Nursing Services
- Emergency Medical Services



# LOCAL HEALTH DEPARTMENT PER CAPITA FUNDING

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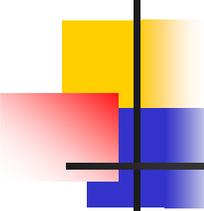
- Part time Health Departments

CGS Section 19a-202a

- To receive per capita funding the Part time municipality must have the equivalent of at least one full-time employee (FTE)

CT Regulations Section 19a-76-1. Definitions.

a maximum of three employees whose total work week consists of a minimum of 35 hours

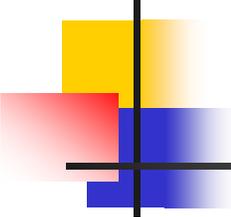


# Part Time Health Departments

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## Transition Program

- CDC federal funding available to municipalities with part time health directors
- Letter sent to all First Selectman/woman and CEOs in April of 2005, announcing availability of federal funding
  - **to build public health emergency response capacity and enhance public health infrastructure to full time capacity**



## PART TIME HEALTH DEPARTMENTS TRANSITION PROGRAM

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- **Since March, 2005 through January 2009, 42 municipalities with a part-time health director have expressed interest and/or is currently participating in our transition program.**
- **Of these 42 municipalities, 15 have actually joined a district and/or formed a health district, 4 municipalities are now full time health departments.**
- **Two (2) full time health departments have joined a health district.**
- **A total of 21 towns have restructured their public health delivery system.**