



**Office of
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For Immediate Release

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**House Unanimously Passes Legislation to Improve
Municipal Public Health Services**

Bill filed by Reps. Kane and Garlick helps coordinate local and regional public health services, including disease control, emergency preparedness

Feb. 28, 2020 – BOSTON – On Wednesday **Representative Hannah Kane (R-Shrewsbury)** along with her colleagues in the House of Representatives unanimously passed legislation to strengthen local and regional public health services across Massachusetts.

The legislation, *An Act Relative to Strengthening the Local and Regional Public Health System*, supports collaboration between local boards of health and neighboring municipal public health departments to deliver high-quality and efficient public health services such as disease control, emergency preparedness, restaurant inspection, sanitary code enforcement, and suicide prevention and substance use disorder outreach.

“With the threat of a global virus outbreak on our doorstep, I’m proud that the House took action today to help communities across the Commonwealth protect the health and safety of their residents,” said **House Speaker Robert A. DeLeo (D – Winthrop)**. “Thank you to Vice Chair Garlick and Representative Kane for their diligence and focus on this issue.”

“The House has voted unanimously to strengthen local health departments through training and resources, and to create regional synergy with other health departments,” said **Representative Denise Garlick, Vice Chair of the House Committee on Ways & Means (D-Needham)**. “Public health departments in our 351 communities deal with issues seen and unseen, from water quality and effective sanitation to substance use disorders and suicide prevention. These are the concerns that affect quality of life in Massachusetts. This bill is vitally important and timely given current concerns over emergency preparedness with infectious diseases such as EEE and COVID-19.”

“This legislation will work toward ensuring each resident of the Commonwealth has access to the public health services they need to live a healthy life, regardless of their zip code or the size of their community,” said **Representative Hannah Kane (R-Shrewsbury)**. “It will significantly strengthen our local and regional health systems by tackling many of the financial and operational burdens municipalities face. Representing a town that is a regionalized public health

alliance member, I know first-hand how effective and efficient sharing public health services can be across multiple municipalities. I am grateful to the Speaker for prioritizing the bill's passage.”

Specifically, the legislation seeks to strengthen local public health in three ways:

- **Establishes the State Action for Public Health Excellence (SAPHE) program:** A competitive grant program that provides funding to public health departments to increase sharing of services across municipalities, strengthen service delivery capabilities, and improve system accountability and data reporting.
- **Ensures the local public health workforce has access to training:** Provides boards of health officials and staff with free educational and training opportunities four times annually in regions across the state.
- **Sets new statewide public health standards:** Department of Public Health will develop a set of minimum standards for foundational public health services to improve the quality of and create uniformity within the public health services of the Commonwealth.

As a first step, last year, the House committed to \$500,000 in the Fiscal Year 2020 budget to fund new and expanded shared service programs in MetroWest, North Shore, and Western Massachusetts communities.

The legislation builds on the work of the Special Commission on Local and Regional Public Health, a 25-member body of public health and municipal experts established in 2016. The [commission released a 2019 report](#) identifying ways for municipalities to overcome barriers and provide quality public health services to residents in Massachusetts. The report found that of the 105 towns with fewer than 5,000 residents, 78 percent lacked full-time staff and that more than half had no health inspector. The report also found inconsistencies in training and credentials of local health department staff members and a lack of consistent data reporting across communities.

The bill will now go to the Senate.

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