

HB79: Legislative Changes to RSA 128

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Agenda

- Review changes to RSA 128
- Understand how these changes affect Local Health Officers (LHOs) and their municipalities
- Understand how responsible parties can implement the legislative changes
- Discussion period

Overview of RSA 128: Town Health Officers

- State statute that governs the appointment, term, and authority of town health officers and their deputies
- This chapter does not apply to cities
- Current statute can be found here:
<http://www.gencourt.state.nh.us/rsa/html/X/128/128-mrg.htm>

Overview of Amendments

**Health officer
appointment changes**

RSA 128:2; RSA 218:5-b; RSA
128:9

**Local Board of Health
meeting/reporting
requirements**

RSA 128:3

**Health officer training
requirements**

RSA 128:8

**New Hampshire Health
Officer Association
(NHHOA) reporting
requirements**

RSA 128:11

RSA 128 Health Officer Appointments

- 128:2 Residency Requirement
 - Health officers no longer have to be a resident of NH
- 128:5-b Terms of Officers
 - *“The term of the deputy health officer shall expire with that of the health officer or may be extended with the approval of the board of selectmen, in consultation with DHHS until the health officer vacancy is filled”*
- 128:9 Background Check
 - *“Each municipality shall request and obtain a criminal history record information request...”*

RSA 128: Local Boards of Health

➤ 128:3: Local Boards of Health

- *The local board of health for each town **shall meet at least once every year**, and as frequently as needed, to review the state of local public health issues and concerns **and provide information, as requested**, to the department of health and human services, on the **readiness to address relevant public health threats** at the local or regional levels.*
- The health officer shall be the secretary and executive officer of, and, with the selectmen, shall constitute the local board of health for the town.

Consider Context for Meetings

- If the board is having a regular annual meeting, then a properly noticed, in-person meeting is probably appropriate.
- However, if there is a health concern, e.g. a contagious disease, remember that RSA 91-A:2, III allows for some remote options for members attending meetings, and there is no prohibition against having rules of procedure that allow remote attendance/participation by members of the public (in addition to having an in-person meeting spot).
- If you are unfamiliar with the Right-to-Know Law, please feel free to reach out to NHMA for guidance and training.

Local Reporting

- DHHS' Health Officer Liaison staff will:
 1. Provide a sample template for a local readiness report
 2. Provide technical assistance and/or written guidance to complete reporting requirement (**yet not write it for you*)
- DHHS recommends:
 1. Local Boards of Health keep copies of meeting notes to document action items and compliance
 2. Meet at least yearly, or more frequently if needed
 3. The report is meant to be an assessment process that help LHOs do their job better

Sample Template – Summary of Readiness to Address Local Public Health Threats

To be completed by Municipal Board of Health

Date of Report: _____

Municipality: _____ Population Size: _____

Health Officer: _____ Health Officer Phone # _____

Section 1: Readiness of Local Health Officer to Fulfill Public Health Duties

Has the local health officer completed a training course on the state laws that provide authority?

Yes No Scheduled for training on this date: _____

Is the Local Health Officer able and willing to perform the duties under the following laws:

1. RSA 128: Sanitary Inspections Yes No Needs Training _____
2. RSA 147 Nuisances Yes No Needs Training _____
3. RSA 48A Housing Inspections Yes No Needs Training _____
4. RSA 141-C Communicable Disease Yes No Needs Training _____
5. RSA xx Health & Safety Plan Yes No Needs Training _____

Are appropriate PPE available to the Health Officer? Yes No Partial/Need Supplies

Please list any available PPE or Safety equipment (e.g. type of mask, gloves, gown, booties, etc.)

Are appropriate inspections tools available to the Health Officer? Yes No

Please list any inspection tools (e.g. air or food thermometer, camera, inspection forms, etc.)

Section 2: Readiness of Municipality to Collaborate with a Regional Public Health Network (RHPN)

Does the municipality have a preparedness plan for public health issues? Yes No

If so, please attach a copy or provide a link to the plan.

Samples of Community Health Improvement Plans (CHIPs): <https://www.dhhs.nh.gov/dphs/rphn/index.htm>

Section 3: Readiness via Training and Certifications

Has the Health Officer completed any specialized Environmental Health training courses?

Yes No Comment: _____

Has the Health Officer completed any advanced environmental health certifications?

REHS CEH Specialist Other relevant training _____

A description of certificates is available at <https://www.neha.org/professional-development/credentials>

Section 4: Local Board of Health

As per RSA 128:3, the health officer and selectmen shall constitute the local board of health.
Please list members of the local Board of Health (BOH):

-

How many meetings did the BOH have this past year? _____
If none, when is the date of the next scheduled meeting? _____

Section 5: Narrative

1. Please describe the top three public health challenges you have for your municipality.

2. Please describe the readiness of the Local Health Officer to respond to these community concerns.

RSA 128 Health Officer Training Requirements

- 128:8 Training and Qualifications
 - **“Within one year of appointment every health officer shall complete a minimum of 3 hours of training on topics related to the specific state laws that provide authority to health officers. The training shall be administered at no cost to the municipality by the department of health and human services in collaboration with the New Hampshire health officers association (NHHOA).”**

Training Requirements: DHHS Proposed Implementation

- Health officers will be nominated by BOS, then receive conditional appointments until training is complete
- Training to be provided up to four times a year (by DHHS staff), either virtual or in-person
- Minimum competencies to be developed in collaboration with the NHHOA and subject matter experts.

Basic 3-Hour Curriculum

1. Overview of Roles and Responsibilities of Health Officer
2. Review Laws and Regulations that specify Health Officer duties and powers, including:
 - RSA 128: Town Health Officers
 - RSA 147: Nuisances
 - RSA 48A: Housing Inspections
 - RSA 141-C: Communicable Disease
 - Applicable RSAs for inspection of schools, daycare, and foster/adoptive homes
3. Review How to Inspect & Gather Evidence
4. Clarify any Enforcement Authority

Post Training Survey and Certification

- Post-training survey requirement to gauge the level of understanding:
 - A score of 60% is the minimum level of competency
 - Likely conducted via a virtual Learning Management System (LMS)
- DHHS' Health Officer Liaison program staff plans to:
 - Send reminder emails for upcoming training dates and lapsed/missing certifications
 - Monitor participation and completion of training. Completion of training and appointment status will be mailed
 - Any enforcement of training will be soft, that is, reminders and encouragement.

Advanced 3-Hr Curriculum:

1. Provide topic specific training as an option for those who have completed basic training during the first term of appointment (i.e. years 1-3).
 - RSA 128, Sanitary Inspect & Enforcement RSAs
 - RSA 48-A Housing Inspect & Enforce RSAs
 - RSA 147 Nuisance and Septic RSAs

Anticipated Questions

How will the training be offered?

- *In-person and virtual options*

Are there alternative options to fulfill the training requirement other than taking a 3-hour course?

- *Yes, you can test-out or propose an alternative curriculum (i.e. REHS certification)*

Can I legally fulfill all of my duties under the law if I only have a conditional appointment?

- *Yes, for the first year*

Anticipated Questions

Do I have to complete the training each 3 year term?

- *Yes, that is what the law says but you can test out*

What if I do not pass the post-test?

- *You can retake the test up to 3 times*

Are Deputy Health Officers required to take training?

- *Yes, that is what the law says*

Will the town be notified of the training completion?

- *The Town will be sent information on the HO's conditional appointment as well as the confirmed appointment once the HO passes the exam via mail. Failure of a HO to meet the training requirements may result in a call or email to the Town Admin*

Confidentiality Training

For Health Officers who would like to receive confidential information as it relates to communicable disease (under RSA 141-C), you must have:

- A signed confidentiality agreement
- Proof of successful completion of training on adherence to applicable confidentiality and security laws

DHHS staff may:

- Suggest options for confidentiality training, and provide information on training opportunities
- Connect LHOs with appropriate DHHS staff to facilitate process
- Provide technical assistance as necessary to complete requirements

RSA 128 NHHOA Reporting Requirements

- 128:11 Reporting Requirement
 - *Beginning November 1, 2021, and annually thereafter, **the New Hampshire health officers association**, in consultation with the department of health and human services, **shall report to the joint legislative oversight committee on health and human services, and the state health assessment and state health improvement plan advisory council** regarding the readiness of municipal health officers to respond to potential public health threats in New Hampshire.*

Reporting Requirements: NHHOA Readiness Report

- DHHS' Health Officer Liaison staff will:
 - Provide sample template for a readiness report
 - Consult with NHHOA to identify appropriate reporting material (*yet not write the report for you*)
- NHHOA Board members may:
 - Consult with municipalities & NHMA on emerging public health concerns to include in the report
 - Focus on the readiness of both towns and cities
 - Focus on the individual health officers – do you have the training, equipment and authority to be ready?

Sample Template—State Readiness Report Health Officers
To be Completed by the New Hampshire Health Officers Association (NHHOA)

Date: _____

NHHOA Contact number _____ NHHOA Email _____

Section 1: Job Status of New Hampshire's Local Health Officers

Full-Time Health Officers	_____
Part-Time Health Officers	_____
Volunteer Health Officers	_____
Vacancies	_____
Total Health Officers	_____

Health Officers who are first-responders (i.e. affiliated with local Fire, Police, or EMT) _____

Section 2: Readiness to Collaborate with Regional Public Health Network (RHPN)

Percentage of municipalities reporting to have a public health emergency preparedness plan?

Section 3: Readiness to Response via Training and Certifications

Percentage of Health Officers who have completed the required 'Basic Certification' 3-hour training course required under RSA 128:xx? _____

Percentage of Health Officers having completed advanced environmental health training? _____

Number and Type of Trainings provided by NHHOA this past year:
_____ (attach information if needed).

Section 4: New Hampshire Health Officer Association

Please list NHHOA Board Members: _____

How many meetings did the NHHOA board have this past year? _____ (please attach minutes)

Section 5: Narrative (description of local public health readiness challenges and resources)

Priority DHHS Response Items

As the law states:

- Changes to RSA 128 shall take effect upon its passage
 - DHHS will finalize a curriculum based on RSAs related to LHOs
 - DHHS expects the changes to take place over a number of months.

Next Steps:

- Implement the 3-hour training requirements
- Provide guidance on readiness reports for BoH
- Provide access to training courses on confidentiality

Other DHHS Initiatives

- DHHS' Health Officer Liaison Staff will:
 1. Update Health Officer Manual in accordance with statute and administrative changes
 2. Update nomination forms
 3. Update Health Officer Liaison website to reflect new requirements
 4. Provide ongoing information to LHOs on changes via list serve messages and online webinars

What Changes for the Municipality?

- May appoint a LHO from out of State
- Shall perform a background check on a nominee
- Shall have a DHO serve the same term as the HO
- Shall have the local Board of Health meet yearly
- May report to DHHS on the readiness of the municipality to respond to public health threats
- Shall cover reasonable costs of attending the NHHOA training subject to the provisions of RSA 129:1.

DHHS may adopt rules to implement this chapter. Rules will clarify any grey areas and address any needed definitions, measures or procedures

Questions and Open Discussion

Contact Information

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