

# Committee Report

**CONSENT CALENDAR**

**February 23, 2021**

**HOUSE OF REPRESENTATIVES**

**REPORT OF COMMITTEE**

**The Committee on Municipal and County Government  
to which was referred HB 79,**

**AN ACT relative to town health officers. Having  
considered the same, report the same with the  
recommendation that the bill OUGHT TO PASS.**

**Rep. Everett McBride**

**FOR THE COMMITTEE**

## COMMITTEE REPORT

Committee:	<b>Municipal and County Government</b>
Bill Number:	<b>HB 79</b>
Title:	<b>relative to town health officers.</b>
Date:	<b>February 23, 2021</b>
Consent Calendar:	<b>CONSENT</b>
Recommendation:	<b>OUGHT TO PASS</b>

### STATEMENT OF INTENT

This bill is the result of a year's work by the NH Health Officers Association to strengthen the public health system in New Hampshire and to incorporate numerous measures to achieve that goal. Communication between the Department of Health and Human Services (DHHS) and town health officers will be improved by the collection of contact information. DHHS will begin training health officers so that they will be better able to perform their duties. This bill gives health officers needed tools to be the local "boots on the ground" by providing information about quarantine and enforcement orders in their local communities. Health officers will meet at least annually with selectmen, receive information from the Public Health Department when actions are necessary to protect the public in their locale, and coordinate with selectmen when necessary. And while education and cooperation have always been the first choice of health officers when action is needed, this bill puts in statute the enforcement authority granted to health officers by provision 5 of emergency order 65, which is necessary before lifting the state of emergency. Last, local health officers will report through the NH Health Officer's Association to the Health and Human Services Oversight Committee and the State Health Assessment and State Health Improvement Plan Advisory Council annually about readiness for public health emergencies so that New Hampshire will be better prepared if another public health emergency ensues.

Vote 17-1.

Rep. Everett McBride  
FOR THE COMMITTEE

Original: House Clerk  
Cc: Committee Bill File

## CONSENT CALENDAR

Municipal and County Government

**HB 79**, relative to town health officers. **OUGHT TO PASS.**

Rep. Everett McBride for Municipal and County Government. This bill is the result of a year's work by the NH Health Officers Association to strengthen the public health system in New Hampshire and to incorporate numerous measures to achieve that goal. Communication between the Department of Health and Human Services (DHHS) and town health officers will be improved by the collection of contact information. DHHS will begin training health officers so that they will be better able to perform their duties. This bill gives health officers needed tools to be the local "boots on the ground" by providing information about quarantine and enforcement orders in their local communities. Health officers will meet at least annually with selectmen, receive information from the Public Health Department when actions are necessary to protect the public in their locale, and coordinate with selectmen when necessary. And while education and cooperation have always been the first choice of health officers when action is needed, this bill puts in statute the enforcement authority granted to health officers by provision 5 of emergency order 65, which is necessary before lifting the state of emergency. Last, local health officers will report through the NH Health Officer's Association to the Health and Human Services Oversight Committee and the State Health Assessment and State Health Improvement Plan Advisory Council annually about readiness for public health emergencies so that New Hampshire will be better prepared if another public health emergency ensues. **Vote 17-1.**

Original: House Clerk

Cc: Committee Bill File

# Voting Sheets

**HOUSE COMMITTEE ON MUNICIPAL AND COUNTY GOVERNMENT**

**EXECUTIVE SESSION on HB 79**

**BILL TITLE:** relative to town health officers.

**DATE:** February 9, 2021

**LOB ROOM:** Hybrid

**MOTIONS: OUGHT TO PASS**

Moved by Rep. McBride

Seconded by Rep. Lascelles

Vote: 17-1

**CONSENT CALENDAR: YES**

**Statement of Intent:** Refer to Committee Report

Respectfully submitted,

Rep John MacDonald, Clerk



2021 SESSION

Municipal and County Government

Bill #: HB79 Motion: OTP AM #: \_\_\_\_\_ Exec Session Date: 2/9/21

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Dolan, Tom Chairman	17		
Piemonte, Tony Vice Chairman	1		
MacDonald, John T. Clerk	2		
Tripp, Richard P.	3		
Guthrie, Joseph A.	4		
Lascelles, Richard W.	5		
McBride, Everett P.	6		
Melvin, Charles R.		1	
Ayer, Paul F.			
Pauer, Diane	7		
Porter, Marjorie A.	8		
Treleaven, Susan GS	9		
Gilman, Julie D.	10		
Maggiore, Jim V.	11		
Stavis, Laurel	12		
Mangipudi, Latha D.	13		
Vann, Ivy C.	14		
Klee, Patricia S.	15		
Gallager, Eric B.	16		
<b>TOTAL VOTE:</b>			

~~17~~ 17 1

# Public Hearing



HOUSE COMMITTEE ON MUNICIPAL AND COUNTY GOVERNMENT

PUBLIC HEARING ON HB 79

**BILL TITLE:** relative to town health officers.

**DATE:** February 8, 2021

**LOB ROOM:** Hybrid                      **Time Public Hearing Called to Order:** 9:05 a.m.

**Time Adjourned:** 9:45 a.m.

**Committee Members:** Reps. Dolan, Piemonte, J. MacDonald, Tripp, Guthrie, Lascelles, McBride, Melvin, Ayer, Pauer, Porter, Treleaven, Gilman, Maggiore, Stavis, Mangipudi, Vann, Klee and Gallager

**Bill Sponsors:**

Rep. Marsh

Rep. Avellani

Sen. Bradley

Rep. Salloway

Rep. Edwards

Sen. Sherman

Rep. Merchant

Rep. Deshaies

TESTIMONY

\* Use asterisk if written testimony and/or amendments are submitted.

**\*Rep. William Marsh, Health Officer, Town of Brookfield** - Request of NH Health Officer Association. Section 1, update the section. Section 2, State resident required. Section 3, Annual Reporting to HHS. Section 4, Department Health Officer may continue to service. Section 5, Health Officer may serve in other towns. Section 6, HHS Reporting. Section 7, Non compliance communication. Section 8, Data sharing. Section 9, Notice to Health Officer.

Rep. Mangipudi: Having their change in the book, would they have helped with COVID? ANS: Yes, process would have been smoother.

Rep. Tripp: Department Health Officer duties, if not similar to the Health Officer? ANS: Same duties as Health Officer. No real defined duties for.

Rep. Gilman: Health Officer, how are they approved? ANS: Health Officer is appointed by HHS at the recommendation of the selectmen.

Rep. Maggiore: Fee for background check? Any problems if the Board of Selectmen serve as the Health Officer? ANS: I don't believe there is a problem with the Board serving as a Health Officer. The Governor did not put the background requirement in his Executive Order.

**\*Matthew Cahillane, NH DHHS** - Written testimony to be submitted. Health Officer and Deputy Health Officer will serve the same term. DHHS relies heavily on Public Health Officer. Provides basic training to Health Officers.

Rep. Treleaven: Covers towns not cities, why? ANS: The RSA does not cover cities.

**Mr. Lockhard, Health Officer, Town of Salem, V.P. of NH Health Officers Association** - Supports the testimony and the bill. This would have helped if we had this bill during this crisis. Some of the information is not shared with local Health Officers.

Rep. Mangipudi: Is there something similar to cities for COVID? ANS: The information comes out from HHS for the cities also.

Rep. Klee: Who receives reporting to the Health Officer? ANS: Two requirements for reporting threats to communities. 1) Readiness to public health threats, mosquito born illnesses, bed bugs, how to manage, 2) Shall report the readiness from the local health departments to report to the Legislature.

**Mr. Graves** - Number one issues are the failure to communicate from local Health Officer and the state. This will improve that communication.

Rep. Gilman: Will we grandfathering in local Health Officer? ANS: Will have to check with HHS.

Respectfully submitted,

Rep. John MacDonald  
Clerk

# House Remote Testify

## Municipal and County Government Committee Testify List for Bill HB79 on 2021-02-08

Support: 8 Oppose: 1 Neutral: 0 Total to Testify: 2

<u>Name</u>	<u>Email Address</u>	<u>Phone</u>	<u>Title</u>	<u>Representing</u>	<u>Position</u>	<u>Testifying</u>	<u>Signed Up</u>
Greyes, Natch	ngreyes@nhmunicipal.org	2247711	A Lobbyist	New Hampshire Municipal Association	Support	Yes (2m)	2/5/2021 2:54 PM
Cahillane, Matthew	matthew.j.cahillane@dhhs.nh.gov	603.271.4072	State Agency Staff	Myself	Support	Yes (0m)	2/7/2021 6:55 PM
Rathbun, Eric	ericrathbun@gmail.com	860.912.3751	A Member of the Public	Myself	Support	No	2/7/2021 11:11 PM
Deshaies, Brodie	Brodiefornh@gmail.com	603.387.4210	An Elected Official	Carroll 6, Wolfeboro	Support	No	1/31/2021 6:25 PM
Ward, Tyler	tyward1198@gmail.com	603.315.5134	An Elected Official	Myself	Support	No	2/5/2021 6:48 PM
Kudlik, Cindy	cindykudlik@protonmail.com	7804511	An Elected Official	Myself	Oppose	No	2/5/2021 9:23 PM
Stevens, Holly	hstevens@new-futures.org	603.255.9540	A Lobbyist	New Futures	Support	No	2/6/2021 5:21 PM
Merchant, Gary	merchant4nhhouse@gmail.com	603.558.1389	An Elected Official	Myself	Support	No	2/7/2021 1:25 PM
Smith, J. J.	jaycmd7699@gmail.com	603.738.6221	A Member of the Public	NH Public Health Association	Support	No	2/7/2021 4:15 PM

# Testimony

**Archived:** Monday, April 19, 2021 9:56:09 AM  
**From:** Rogers, Abigail  
**Sent:** Sunday, February 7, 2021 6:47:44 PM  
**To:** ~House Municipal and County Govt  
**Subject:** DHHS in support of HB 79 (relative to health officers)  
**Importance:** Normal  
**Attachments:**

[DHHS HB 79 relative to health officers.pdf](#)  [Sample Health Officer Readiness Report.pdf](#) 

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Dear Chairman Dolan and members of the Committee:

Please see the attached DHHS testimony in support of HB 79 relative to health officers which is scheduled for a hearing at 9am tomorrow in the committee. Also, attached is a sample readiness document related to health officers, added as an attachment.

Please do not hesitate to contact me with any questions.

Thank you!

Abby Rogers

Abigail Rogers  
Legislative Liaison

Division of Public Health Services  
New Hampshire Department of Health and Human Services  
29 Hazen Drive, Concord, NH 03301  
603-333-6309 (cell)  
603-271-4593 (O)  
[Abigail.Rogers@dhhs.nh.gov](mailto:Abigail.Rogers@dhhs.nh.gov)

**ATTENTION:** please visit the DHHS COVID-19 website for the latest COVID-19 information, resources and guidance: <https://www.nh.gov/covid19/>

Good Morning! For the record I am Rep William Marsh, representing 7 towns in southern Carroll County. Relevant to this bill, I have been the Health Officer of the Town of Brookfield since 2002.

I am pleased today to offer for your consideration HB79, relative to town health officers. This bill began as a request of the NH Health Officers Association. We worked on it over the summer, and I want to especially thank the Town of Tamworth, and their Selectman and Health Officer Becky Mason, who hosted a meeting last summer to work on the bill. My top priority for this legislative session is strengthening the public health system in NH. This bill is a key piece of that effort.

Let me walk you through the bill and hit the highlights.

Section 1 updates the appointment of health officers, and requires the health officers to provide contact information to DHHS.

Section 2 removes the requirement that a health officer be a state resident.

Section 3 requires local boards of health to meet at least once a year and report to DHHS on their readiness to address public health threats. Draft templates are in development and will be shared.

Section 4 allows deputy health officers to continue to serve when the health officer position becomes vacant.

Section 5 allows a single person to be the health officer for several towns.

Section 6 adds training of health officers by DHHS, background checks, and rule making. Most importantly, regarding NH's readiness for the next pandemic, is a requirement for the Health Officers Assn to report to the HHS Oversight Committee and the State Health Assessment and State Health Improvement Plan Advisory Council.

Section 7 gives health officers the new duty to communicate with the commissioner about non-compliance with quarantine and enforcement orders. It also gives health officers enforcement authority in the event of a public health emergency, the same enforcement authority extended to health officers by provision 5 of emergency order 65. I believe these provisions need to be in statute to enable lifting the current state of emergency.

Section 8 allows data sharing between health officers and DHHS, thereby enabling health officers to inform local officials when actions are advisable to protect the public. In my town, this would have been most helpful when we had a sudden covid outbreak shortly after the November election. This is necessary to make our public health system into a true system where local officials can work together with state officials.

Section 9 requires DES to provide a copy of notices closing pools to local health officers, a request of the Littleton health officer. The contact information in section 1 will allow this to happen without burdening DES.

I thank you for your consideration, and I will be glad to take questions.

**Archived:** Monday, April 19, 2021 9:53:41 AM

**From:** [William Marsh](#)

**Sent:** Monday, February 8, 2021 9:29:58 AM

**To:** [~House Municipal and County Govt](#)

**Subject:** Rep Marsh testimony HB79

**Importance:** Normal

**Attachments:**

[HB79 - Marsh.pdf](#) 

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My testimony

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

To be completed by Municipal Board of Health

Date: \_\_\_\_\_

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 \_\_\_\_\_

Are appropriate PPE available to the Health Officer?  Yes  No

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 training courses related to their duties?

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):

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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 or concerns you have for your municipality.

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

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Lori A. Shibinette  
Commissioner

Lisa M. Morris  
Director

STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
*DIVISION OF PUBLIC HEALTH SERVICES*  
*BUREAU OF PUBLIC HEALTH PROTECTION*

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**Testimony on HB 79, an act relative to health officers**  
House Committee - Municipal and County Government  
February 8, 2021

Good morning Chairman Dolan and members of the Municipal and County Government Committee:

My name is Matthew Cahillane, and I am a Program Manager at the Department of Health and Human Services (DHHS), Division of Public Health Services (DPHS). Over the past four years, I have managed a state program for the appointment, training and technical support of local health officers. I am pleased to have the opportunity to provide information today to the Municipal and County Government Committee on House Bill 79. DHHS has worked with Representative Marsh during the process of developing the language for this bill. We are supportive of the bill and we believe the proposed changes will assist health officers with their charge of protecting local public health.

Many of the suggested changes in the proposed legislation would effect RSA 128. It should be noted that these items only apply to New Hampshire towns, and not to cities. The bill will require the local board of health to meet once per year to review public health threats and readiness to respond to them. This provision will allow the Department to better understand the types of public health threats and readiness of NH communities. Public health threats can include communicable diseases, sanitary conditions in housing, pest or rodent infestations, health nuisances in the form of waste, noise and odors, and hoarding of possessions or animals. As a comparison, most municipalities complete a local hazard mitigation plan to prepare for the threats from natural disasters and other hazards.

Another provision of this bill requires that health officers and deputy health officers share the same appointment term of office, yet allows for more flexibility for deputies should the health officer position become vacant during the term. The bill provides for an extension of the deputy's term until such time as the vacant health officer position is filled. We believe this would allow municipalities greater continuity at the local level until a new health officer is appointed.

Removing the residency requirement in RSA 128:2 will allow communities more opportunity with recruitment and expand the pool of eligible applicants. The bill will also require newly appointed health officers to attend a three-hour training to understand the state laws that protect or improve sanitary conditions. DHHS finds that much of the technical advice the Department provides to health officers relates to interpreting and correctly enforcing existing health laws.

The bill includes a requirement for a criminal history record check for health officers by the Department of Safety to ensure that they have no prior convictions that might affect their ability to carry out their duties and ensure public safety.

The inclusion of an annual reporting requirement to both the Health and Human Services Oversight Committee and to the State Health Assessment and State Health Improvement Plan Advisory Council will ensure that important information is shared with the legislature on readiness and capacity of local health officials.

During the past year, the COVID-19 response has provided many lessons on how to best assess threats and manage public health emergencies at the state and local level. DHHS has used the best available information to create guidance that has both met public health standards and allowed flexibility for the business and the public sector. In an effort to inform local officials about the COVID-19 guidelines, DHHS's Health Officer Liaison Program released over 50 private ListServe messages and directed two dozen training webinars on the spread, prevention and treatment of the disease. As we continue work to reopen the economy, the Department will rely heavily on local health officers to inform community members of public health guidance, respond to complaints, and pursue compliance in collaboration with state agencies. As part of its response to the COVID-19 pandemic, DHHS has identified some areas for improvement and further collaboration with local health authorities. Some of the gaps identified include the need to improve communication, clarify local public health readiness, and support for basic training of local health officers.

On pages 2 and 3 Section 7, the bill provides that health officers during a declared public health emergency, can enforce orders pursuant to RSA 4:47 and inform the Commissioner of any substantive noncompliance with those orders. Section 8 of the bill adds language that the Department may share information, as necessary, with town and city health officers acting in accordance with their duties under RSA 141-C:5 provided that the health officer has proof of completion of training on confidentiality and security laws and regulations and has signed a confidentiality agreement. This proposed change would apply to both town and city governments.

In conclusion, DHHS acknowledges that the changes included in the bill will provide greater flexibility for local government to nominate health officers, and improve the ability of health officers to fulfill their duties under specific state laws.

Thank you for the opportunity to provide testimony about how we can best support local communities to address sanitation and improve public health.

Sincerely,

Matthew Cahillane, MPH  
NH DHHS/DPHS/Bureau of Public Health Protection  
29 Hazen Drive, Concord, NH 03301-6504  
Phone: 603.271.4072  
Email: [matthew.j.cahillane@dhhs.nh.gov](mailto:matthew.j.cahillane@dhhs.nh.gov)

Bill as  
Introduced

**HB 79 - AS INTRODUCED**

2021 SESSION

21-0037

06/04

HOUSE BILL **79**

AN ACT relative to town health officers.

SPONSORS: Rep. Marsh, Carr. 8; Rep. Salloway, Straf. 5; Rep. Merchant, Sull. 4; Rep. Avellani, Carr. 5; Rep. Edwards, Rock. 4; Rep. Deshaies, Carr. 6; Sen. Bradley, Dist 3; Sen. Sherman, Dist 24

COMMITTEE: Municipal and County Government

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ANALYSIS

This bill modifies the law regarding town health officers by deleting the residency requirement, adding a training requirement and a criminal background check, and adding a reporting requirement.

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Explanation: Matter added to current law appears in ***bold italics***.  
Matter removed from current law appears ~~[in brackets and struckthrough.]~~  
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Twenty One*

AN ACT relative to town health officers.

*Be it Enacted by the Senate and House of Representatives in General Court convened:*

1 1 Town Health Officers; Appointment. RSA 128:1 is repealed and reenacted to read as follows:

2 128:1 Appointment. The commissioner of the department of health and human services shall  
3 appoint as health officer for each town such person as the selectmen of the town recommend, and the  
4 commissioner of the department of health and human services shall issue to the health officer a  
5 certificate of appointment. The appointed officer shall provide the department with sufficient and  
6 complete contact information to be readily accessible as needed. Upon the expiration of the officer's  
7 term, or upon his or her removal, death, or resignation or the occurrence of a vacancy in the office for  
8 any reason, the selectmen shall recommend a replacement as soon as reasonably practicable; but if  
9 no recommendation is made within 15 days after notice, the commissioner may appoint a health  
10 officer without such recommendation.

11 2 Town Health Officers; Residence. Amend RSA 128:2 to read as follows:

12 128:2 Residence. [~~Said health officer shall be a resident of the state.~~] The commissioner of the  
13 department of health and human services may appoint any qualified person to act in unorganized  
14 localities **as a health officer**.

15 3 Town Health Officers; Secretary of Local Board. Amend RSA 128:3 to read as follows:

16 128:3 Secretary of Local Board. The health officer shall be the secretary and executive officer of,  
17 and, with the selectmen, shall constitute the local board of health for the town. ***The local board of  
18 health for each town shall meet at least once every year, and as frequently as needed, to  
19 review the state of local public health issues and concerns and provide information, as  
20 requested, to the department of health and human services, on the readiness to address  
21 relevant public health threats at the local or regional levels.***

22 4 Town Health Officer; Deputy Health Officer. Amend RSA 128:5-b to read as follows:

23 128:5-b Deputy Health Officer. When a health officer has been appointed under the provisions  
24 of RSA 128:1, such officer may, subject to the approval of the selectmen and the commissioner of the  
25 department of health and human services, appoint a deputy health officer or officers who shall be  
26 empowered to enforce public health laws and regulations and make such sanitation investigations as  
27 the health officer may direct or as may be required by the department of health and human services.  
28 ***The term of the deputy health officer shall expire with that of the health officer, or may be  
29 extended with the approval of the board of selectmen, in consultation with the  
30 commissioner of the department of health and human services or designee, until the health***

**HB 79 - AS INTRODUCED**

**- Page 2 -**

1 ***officer vacancy is filled.*** The deputy health officer shall receive such compensation from the town  
2 as the selectmen of the town shall fix.

3 5 Town Health Officers; Officer for Several Towns. Amend RSA 128:6 to read as follows:

4 128:6 ***Health*** Officer for Several Towns. Upon recommendation of the selectmen of each of  
5 several towns the commissioner of the department of health and human services may, in the  
6 commissioner's discretion, appoint any qualified person [~~resident of the state~~] as health officer for all  
7 of said towns, and such health officer shall receive such compensation from each town as the  
8 selectmen thereof or the town shall fix.

9 6 New Sections; Town Health Officers; Training and Qualifications. Amend RSA 128 by  
10 inserting after section 7 the following new sections:

11 128:8 Training and Qualifications. Within one year of appointment every health officer shall  
12 complete a minimum of 3 hours of training on topics related to the specific state laws that provide  
13 authority to health officers. The training shall be administered at no cost to the municipality by the  
14 department of health and human services in collaboration with the New Hampshire health officers  
15 association (NHHOA). The curriculum shall cover, but not be limited to, duties and responsibilities  
16 of the health officer as required on rental housing standards pursuant to RSA 48-A:3, I(c),  
17 assessment and management of health nuisances pursuant to RSA 147, and duties pursuant to RSA  
18 128:5. The required training may be taken in person, or through a remote learning platform as  
19 provided by the department of health and human services. Municipalities shall cover reasonable  
20 costs of attending the NHHOA training subject to the provisions of RSA 129:1.

21 128:9 Background Check. Each municipality shall request and obtain a criminal history record  
22 information request from the department of safety, as a prerequisite to any nomination of a health  
23 officer or deputy health officer, to be submitted to the commissioner of the department of health and  
24 human services or his or her designee, in order to determine if there are any prior convictions that  
25 may disqualify such person or interfere with the performance his or her duties.

26 128:10 Administrative Rulemaking. The commissioner of the department of health and human  
27 services may adopt administrative rules for implementation of this chapter pursuant to RSA 541-A.

28 128:11 Reporting Requirement. Beginning November 1, 2021, and annually thereafter, the New  
29 Hampshire health officers association, in consultation with the department of health and human  
30 services, shall report to the joint legislative oversight committee on health and human services,  
31 established in RSA 126-A:13, and the state health assessment and state health improvement plan  
32 advisory council, established in RSA 126-A:88, regarding the readiness of municipal health officers  
33 to respond to potential public health threats in New Hampshire.

34 7 New Paragraphs; Communicable Disease; Health Officers. Amend RSA 141-C:5 by inserting  
35 after paragraph II the following new paragraphs:

**HB 79 - AS INTRODUCED**  
**- Page 3 -**

1           III. After being informed of isolation and quarantine orders issued pursuant to RSA 141-  
2 C:12 to persons in their jurisdiction, inform the commissioner if they identify any substantive non-  
3 compliance with the order.

4           IV. In the event of a public health emergency declared pursuant to RSA 4:45, enforce orders  
5 issued pursuant to RSA 4:47.

6           8 New Paragraph; Communicable Disease; Disclosure. Amend RSA 141-C:10 by inserting after  
7 paragraph IV the following new paragraph:

8           V. The department may share information with town and city health officers acting in  
9 accordance with their duties under RSA 141-C:5, provided the health officer has signed a  
10 confidentiality agreement at the time of his or her appointment under RSA 128 and has presented  
11 proof of successful completion of training on adherence to applicable confidentiality and security  
12 laws and regulations required when assisting the department of health and human services under  
13 RSA 141-C:5. All sharing of confidential information under this section shall be in accordance with  
14 this section and pursuant to 45 C.F.R. 164.512(b).

15           9 Safety Regulations for Pools and Bathing Places; Injunction; Emergency Closures. Amend  
16 RSA 485-A:27, II(b) to read as follows:

17                   (b) If the department determines that a pool at the facility is not in compliance with the  
18 standards and safety requirements specified in subparagraph (a) and that the deficiencies threaten  
19 the health or safety of patrons of the facility, the department shall issue an emergency closure notice  
20 to the owner of the facility or the owner's on-site representative ***and immediately provide a copy***  
21 ***of the notice to the town or city health officer***. The notice shall identify which pool must be  
22 closed and specify the reason for the emergency closure.

23           10 Effective Date.

24           I. Sections 7 and 8 of this act shall take effect 60 days after passage.

25           II. The remainder of this act shall take effect upon its passage.