



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
PUBLIC HEALTH COMMITTEE  
Monday, March 28, 2022**

**SB 477, An Act Concerning The Public Health Of Residents Of The State**

**HB 5397, An Act Declaring Gun Violence A Public Health Crisis And  
Establishing The Office Of Gun Violence Prevention And Advisory  
Council On Gun Violence Prevention And Intervention**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **SB 477, An Act Concerning The Public Health Of Residents Of The State** and **HB 5397, An Act Declaring Gun Violence A Public Health Crisis And Establishing The Office Of Gun Violence Prevention And Advisory Council On Gun Violence Prevention And Intervention**. CHA supports efforts to curtail gun violence and has concerns about the bills as drafted.

Since early 2020, hospitals and health systems have been at the center of Connecticut's response to the COVID-19 public health emergency, acting as a vital partner with the state and our communities. Hospitals expanded critical care capacity, procured essential equipment and supplies, and stood up countless community COVID-19 testing locations. Hospitals have been an essential component of the statewide vaccine distribution plan including efforts to reach and serve historically under-resourced communities disproportionately affected by the virus.

Connecticut hospitals have been collaborating with community partners, legislators, and other stakeholders for years to advance trauma-informed case management services to victims of violence, with the common goals of starting the healing process, supporting victims and their families, and preventing further violence. Hospital-based initiatives in Hartford, New Haven, and Bridgeport have focused on the needs of those who have suffered physical assault injuries (e.g., gunshots, stabbings, and blunt trauma) and sexual assault, as well as victims of human trafficking. These efforts and related work in other states have led to the establishment of a national hospital violence intervention program (HVIP), coordinated by the Health Alliance for Violence Intervention (HAVI), which provides training and certification for violence prevention professionals (VPPs).

VPPs often make an initial connection with victims while they are still in the hospital. They are available to victims and their families to coordinate victim assistance services under the

Victims of Crime Act, to connect victims with mental health services, including brief trauma-focused therapy, to coordinate post-discharge medical follow-up for the treatment of injuries, to connect victims with opportunities for employment and educational advancement, and to coordinate referrals to community-based services for food, clothing, and legal advocacy. VPPs also focus on mitigating the risk of retribution in the hours and days after an incident.

State laws adopted in 2021 require state agency approval of programs to train and certify VPPs and coverage of these services under the Medicaid program.<sup>1</sup> Such measures will promote the implementation of HVIPs and related initiatives across the state. CHA and other hospital representatives were proud to serve on the Gun Violence Intervention and Prevention Advisory Committee established under these laws.

Each bill provides a different approach to addressing gun violence intervention and prevention in Connecticut. **Section 7 of SB 477** would establish a Commission on Gun Violence Intervention and Prevention. **HB 5397** would declare gun violence a public health crisis and establish an Office of Gun Violence Prevention and an Advisory Council on Gun Violence Prevention and Intervention. In addition, the Governor proposed a third approach in **Section 33 of Senate Bill 16**, which provides for the establishment, within available appropriations, of a gun violence intervention and prevention program in the Department of Public Health's (DPH) Office of Injury Prevention (OIP).

CHA urges the Committee to consider the following factors when deciding from among these and other approaches to addressing gun violence prevention.

First, we recommend that the General Assembly appoint an advisory body in a manner similar to the approach adopted in **Section 9 of Public Act 21-35 (SB 1)**, with appointments to be made by legislative leaders and including certain agency commissioners or their designees.

Second, CHA supports the participation and involvement of the DPH OIP in this ongoing work. We recommend that the OIP be directed to collaborate with hospitals and community-based providers to establish a research repository and develop data dashboards.

Third, we urge the state to appropriate funds to support the community organizations that are providing violence-prevention services to individuals and families. These funds may be administered by the Office of Policy and Management via a direct grant program.

CHA is grateful for your ongoing support as we endeavor to implement a unified, consistent, and sustainable statewide approach for hospitals, agencies, and community-based violence intervention programs to deliver targeted case management services to victims of violence and their families.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.

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<sup>1</sup> Senate Bill 1 (PA 21-35) An Act Equalizing Comprehensive Access To Mental, Behavioral And Physical Health Care In Response To The Pandemic and House Bill No. 5677 (PA 21-36) An Act Concerning The Availability Of Community Violence Prevention Services Under Medicaid.