

## Public Act 21-35

# S.B. 1, An Act Equalizing Comprehensive Access to Mental, Behavioral and Physical Health Care in Response to the Pandemic.



**Section 1:** Declares racism a public health crisis in the state of Connecticut.

**Section 2:** Creates the Commission on Racial Equity in Public Health.

**Section 3:** Requires the Commission to establish a strategic plan.

**Section 4:** Defines "structural racism" and outlines the work of the Commission.

**Section 5:** The Department of Public Health (DPH) must study how to develop & implement a recruitment & retention plan for health care workers who are people of color.

**Section 6:** The Department of Energy & Environmental Protection (DEEP) must assess racial equity in its environmental health quality programs.



**Section 7:** Defines "cultural humility" & requires the Office of Higher Education (OHE), Board of Regents for Higher Education, & Board of Trustees of UCONN to evaluate recruitment & retention of people of color in health care programs & make recommendations, including re: adding cultural humility to curricula.

**Section 8:** The Commission on Women, Children, Seniors, Equity, & Opportunity's annual report must include the status of racial and ethnic impact statements.

**Section 9:** Creates a gun violence intervention & prevention advisory committee to advise the Public Health and Human Services committees of the Connecticut General Assembly (CGA).

**Section 10:** Requires DPH to study the state's COVID response & make recommendations for future communicable disease pandemics.

**Section 11:** Any state agency, board, or commission collecting race, ethnicity, & language (REL) data must collect it using standard, granular categories & following best practices. Health care providers participating in the state's Health Information Exchange (HIE) also have to use & report on these categories.

**For any questions, please contact**

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**Section 12:** Requires the maternal mortality review committee to annually report to the Public Health Committee with recommendations on eliminating disparities in maternal health.

**Section 13:** Requires hospitals to offer implicit bias training for people who provide direct care during pregnancy and the postpartum period.

**Section 14:** Creates a working group in the Public Health Committee on breast health.

**Section 15:** defines "doula" and requires DPH to conduct a scope of practice review study and to submit a recommendation to the CGA to determine whether or not to create a doula certification process.

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**Section 16:** Creates a working group to make recommendations re: expansion of School-Based Health Centers (SBHCs).

**Section 17:** The Department of Mental Health & Addiction Services (DMHAS) must increase the hours during which mobile crisis services are available.

**Section 18:** Creates a peer support specialist task force.



**Section 19:** Requires DMHAS to develop a COVID-19-related mental health toolkit for employers.

**Section 20:** Requires DPH to appoint health directors if a town has a vacancy during a public health emergency and does not fill it quickly.

**Section 21:** Requires DPH to implement loan repayment for community-based primary care providers.

**For any questions, please contact**

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