

# **Joint Meeting Regulation & Legal/Process & Funding**

## **Funding Gaps and Recommendations**

### **1. Need for a Sustainable Local Health Funding Source**

For septic systems, local health departments bear substantial responsibility for reviewing every building conversion, addition, accessory structure, teardown and rebuild, and new construction project. These reviews are often extensive and may include:

- Soil testing
- Property file review
- Water data evaluation
- Plan review (Professional Engineer and Installer)
- Review of building plans
- Multiple septic inspections (stakeout, partial, percolation testing in fill, etc.)
- Documentation and filing of all inspections
- Creation of a Permit to Discharge
- Coordination with Building Officials (e.g., Certificate of Occupancy)

Despite this workload, many small towns do not receive per capita funding—specifically, communities under 50,000 population that are not part of a health district. These same towns often rely heavily on septic systems. Even for towns that do receive per capita funding, those funds are sometimes insufficient to cover expanding or unfunded duties.

#### **Additional Strain from Expanding Duties**

New program responsibilities have reprioritized and strained resources in local health. Most notably, the recent reduction of the blood lead reference value. This has substantially increased staff caseloads and often requires immediate follow-up when elevated levels are identified. Lead investigations are time-sensitive and directly related to protecting child health; they must take priority over other duties. As a result, activities such as septic planning, which are important but less urgent from a public-health standpoint, will necessarily take a secondary position when staff are responding to children with elevated blood lead levels or other pressing public health emergencies.

#### **Recommendations**

- **Establish a dedicated, independent funding stream for septic system–related work, separate from current per capita or general public health funding.**

- Potential sources could include:
  - A modest surcharge on building permits or septic permits.
  - State-level grants targeted to communities with high reliance on septic systems.
  - Fees for professional plan reviews or inspections that reflect the true cost of staff time.
- Rationale: Dedicated funding ensures that essential septic oversight is not competing with other urgent public health duties, maintaining compliance and environmental safety.
- **Provide municipalities with sustainable, predictable resources so staffing shortages do not delay essential services.**
  - Ensure funding is stable year-to-year, allowing municipalities to plan staffing and workload effectively.
  - Rationale: Predictable funding reduces delays in septic reviews, permitting, and inspections, which is especially critical as new public health responsibilities (e.g., lead mitigation) compete for staff attention.
- **Support Staff Capacity and Workforce Flexibility**
  - Allocate funds to hire dedicated septic system staff or cross-train existing public health personnel.
  - Implement temporary staffing or shared regional resources for peak workloads, such as during construction booms or lead-related emergencies.
  - Rationale: Adequate staffing ensures timely response to urgent public health needs while maintaining routine septic system oversight.
- **Incentivize Efficient Workflows and Technology Adoption**
  - Fund electronic state permitting systems and digital inspection tracking to reduce administrative burden.
  - Encourage municipalities to adopt standardized templates, checklists, and filing systems to streamline reviews.
  - Rationale: Efficiency improvements stretch limited resources further, allowing staff to focus on high-priority public health interventions without sacrificing septic oversight quality.

***Suggestion: Parallels to the Building Department Model***

*Local building departments are often self-sustaining through permit and inspection fees. A similar fee-based funding model for local health departments—focused on septic system review and inspection—could create a reliable and equitable funding mechanism.*

*A sustainable service-based funding approach would offer:*

- ***Residents:*** *Faster processing, improved service, and safer installations*

- ***Municipalities:*** *Reduced unfunded mandates and better staffing stability*
- ***The State:*** *Stronger compliance and enhanced environmental and public health protection*

This approach mirrors the successful funding structure used in building departments and would support long-term operational stability.

## **2. State Agencies**

### **Connecticut Department of Public Health (CT DPH)**

The Connecticut Department of Public Health (CT DPH) is facing significant operational constraints primarily due to long-term staffing shortages and hiring freezes across multiple divisions. Long-term staffing shortages have been exacerbated by COVID-19 and subsequent retirements, leading to significant shifts in internal responsibilities. As well as a reduction of institutional knowledge.

The Environmental Engineering Program's capacity is especially strained. The program has been assigned additional non-septic-related responsibilities during the COVID years and aftermath. Their program now is in charge of Community Pools and Water Treatment Wastewater Disposal Systems. The current level of duties is already straining the department's ability to support local health departments (LHDs). This situation is particularly concerning given the intention for building to increase, which will further intensify the demand on these limited resources.

#### **Recommendations**

- Provide dedicated funding for workforce development and training to rebuild institutional knowledge and maintain expertise.
- Evaluate and adjust staffing levels to ensure timely permitting, plan review, and oversight functions.
- Increase staffing within the relevant CT DPH divisions and programs to reduce backlogs and improve support for local health departments.

### **Connecticut Department of Energy and Environmental Protection (CT DEEP)**

Key divisions and programs within CT DEEP also experience chronic understaffing, resulting in application backlogs, technical review, and the issuance of technical guidance. Delays in these divisions have downstream impacts on local health departments, including extended timelines for septic system approvals and environmental compliance.

#### **Recommendations**

- Increase staffing within the relevant CT DEEP divisions and programs to reduce backlogs and improve support for local health departments.

### **Funding for Alternative Technologies (AT) Program**

Establishing a dedicated AT review unit—with sufficient staff, engineering support, environmental analysts, and predictable timelines—would:

- Improve consistency and clarity in technology approvals.
- Reduce delays for installers, engineers, and local health departments.
- Ensure municipalities have access to updated and vetted septic technologies.
- Support statewide environmental and water quality goals.

A strengthened AT review program would directly enhance efficiency for towns heavily reliant on septic systems and lessen the burden on local health departments during complex installations or repairs.

#### ***Suggestion:***

*Clean Water Funding is currently reserved for sewer projects. However, shoreline septic towns under state orders—such as Old Saybrook—have been permitted to access this funding. Expanding or clarifying access for septic-dependent municipalities could provide critical financial relief and support environmental compliance.*

## **3. Protecting Towns and Residents from Financial Risk**

Septic system failures are an inevitable consequence of the large number of systems statewide. When a system fails and a homeowner cannot afford repairs, responsibility may shift to the municipality, particularly when a system creates a public health issue. Local health departments face a difficult balance: they cannot ignore a failing septic system, yet they may lack the resources to respond promptly to the immediate public health threat.

Additionally, housing cannot be truly “affordable” if a homeowner must take on significant debt - mortgage their property- to finance septic system repairs.

### **Recommendations**

- **State-Level Assistance Fund:** Establish a state-level legal or technical assistance fund to support municipalities during complex or contested cases.
- **Intervention or Cost-Sharing Fund:** Create a state-managed fund or cost-sharing model for septic failures when homeowners lack the financial capacity to repair them.

- **Streamlined Technical Opinions:** Clarify and simplify how state technical determinations are issued and enforced. Currently, an adverse technical determination effectively functions as an order, but the process to reach that determination is often lengthy, costly, and burdensome. A more efficient, transparent mechanism is needed.

### ***Suggestions***

*Here are some possible examples you could include:*

- ***Statewide Septic Emergency Assistance Program:*** A model similar to heating assistance or emergency home repair programs, providing rapid response funding for imminent public health threats.
- ***Technical Review Board:*** A centralized panel that can issue binding technical decisions quickly—reducing disputes and delays at the local level.
- ***Regional Septic Repair Fund:*** Funded by modest permit fees or state contributions, used to assist homeowners in financial hardship.
- ***Insurance-Backed Septic Warranty Program:*** A voluntary, state-supported safety net that reduces municipal risk