

Regional Health Districts

Statutory Reference: [M.G.L. c.111, s.27A-27C](#)

Summary: Separately provides for the creation of a joint health committee and sharing of a health officer ([s.27A](#)) or for the establishment of an autonomous regional health district ([s.27B](#)).

Section 27A - Joint Health Committee/Health Officer

Creation - Although referred to as a district, municipalities can by a town meeting, or by a city council vote form a joint health committee, which would employ a joint health agent and assistants. Member towns may withdraw by vote of town meeting or city council, effective on the last day of the next FY. This section does not apply to communities in Barnstable County.

Governance - A joint health committee is comprised of all health board members from participating towns, or of some members selected as each town determines.

The joint health committee annually appoints a chair, secretary and treasurer and the joint committee appoints a health officer, assistants and clerks, who are regarded as employees of each member town, and are responsible to each town's BOH when performing services in that community.

Finances - The joint committee determines the amount of service each participating town will receive, develops a budget estimate and, in December, notifies each participating town of its apportioned share of costs. On the direction of the local BOH, the town treasurer pays the district from amounts that are raised in the tax levy, but not appropriated.

Employee Rights - None specified.

Other - The section also allows a health agent from one town to serve in the same capacity in another town, on condition that the current public employer approves and the health agent is a physician or meets other experience and education related criteria.

Section 27B - Regional Health District

Creation - Cities and towns can form a regional health district by vote of the local BOH and with approval of the city council in a Plan E government, the city council and mayor in other cities, and town meeting in towns. There is no mention of town council governments. A member community can withdraw from the district after three years by vote of its BOH and legislative body. According to the section, when votes are taken prior to July 1, the withdrawal is effective on January 1 of the following year.

Governance -The district is governed by an autonomous regional board of health (RBH) comprised of at least one representative from each member community, who serve three year terms. Unless otherwise agreed, a member community receives an additional representative for each major fraction of 10,000 residents to a maximum of five. Each member town determines its own selection process as approved by town meeting. In Plan E cities, RBH members are selected by the city manager; in other cities by the mayor with city council approval. All serve without compensation, but are entitled to travel reimbursements. Establishing a RBH does not require the elimination of a local health board, whose members may be appointees to the RBH.

The RBH adopts rules and regulations to promote general health within the district. It selects a chair, secretary and treasurer, and appoints a director of health to manage the regional department. He, in turn, may appoint deputies and assistants with RHB approval. The section mandates that the RBH follow regulations set by the state department of public health, which must consult with the department of environmental protection, relative to minimum qualifications for the director of health.

Finances - In a district, the director of health prepares and presents an annual budget for board approval. The statute also states that the RBH, in December, develops and adopts budget; apportions costs, according to choice of formulas in statute. Member communities are directed to raise amounts due in tax levy and appropriate it to the district. The RBH determines a method for apportioning costs.

Employee Rights - If a municipality withdraws from the district, or in the event of dissolution of the district, employees of the district, if originally employees of a member community, automatically return to the same position in that municipality's BOH.

Employees brought to the district from municipalities take positions without loss of compensation, civil service standing, retirement or other rights. If an employee's prior position was not under [C.31](#) (civil service), he or she must receive a comparable position in the district. If an employee's prior position was not under civil service and the new district position is, the employee is granted civil service protection without examination. Other protections also apply.

Other - "The powers of each district shall include, but not be limited to, the power to: (1) sue and be sued; (2) make and execute contracts and other instruments necessary or convenient to the exercise of the powers of the health district; (3) make and from time to time amend and repeal rules and regulations relative to the operation of the district; (4) receive and expend funds; (5) apply for and receive grants from the commonwealth, the federal government and from other grantors, if the purpose of the grant is to improve public health; and (6) have such other powers as are necessary to properly carry out its powers as an independent entity of government."