## DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

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August 15, 2003

## To Senator Lasich:

I have drafted this bill in preliminary form to afford you the opportunity to review and revise it before introduction. In drafting mergers or consolidations by municipalities for the creation of jointly run local health departments, several issues arise. The statutes present two differing treatments: in Racine County, village and town health departments and multiple municipal health departments are treated fairly cursorily; in Dane County, the proposed merger between Dane County and the City of Madison is treated extensively. After speaking with Curt Wytinski of the League of Wisconsin Municipalities, it appeared to me that a more extensive treatment would be appropriate for mergers in Milwaukee County. The following is a list, which is not exhaustive, of the kinds of issues involved with the Dane County–Madison merger and an explanation of the manner in which I treated them in this draft, and, if relevant, other options for treatment that exist in current law:

- 1. Establishment of the merged health department. Because s. 251.02 (2), stats., specifically requires each city or village in Milwaukee County to establish a health department or contract with another city or village for that city's or village's health department services, I thought that it would be appropriate to specify (in s. 251.02 (2) (b) in the draft) the decision–making process for the powers and duties of the merged health department, the merged board of health, and the respective powers and duties for each city or village that merges, as is done in s. 251.02 (1m), stats., for the Dane County–Madison merger. An alternative option is the treatment in s. 251.02 (3r), for mergers in Racine County, which does *not* specify a decision–making process.
- 2. Represented employees; retention. I included provisions concerning retention of represented employees, as was done under ss. 40.21 (3m), 46.56 (3) (b) 6., and 251.02 (1r), stats., for Dane County–Madison. Racine County mergers have no such employee protections. I am uncertain whether you feel that these protections are appropriate, and wanted, for Milwaukee mergers. For instance, they would appear to require the retention of both persons who may currently be serving as local health officers; they may, however, be necessary if current employees of any of the merging municipalities are under collective bargaining agreements.
- 3. *Board of health membership.* Please see my amendment of s. 251.03 (3), stats., which follows a model for multiple-county and Dane County-Madison mergers.

Decision making for membership of the local board of health is not specified in the statutes for Racine County mergers.

- 4. *Governance.* Please see my amendment of s. 251.04 (2), stats.; this statute sets a model for all health departments except those in Racine County, for which governance is not specified.
- 5. Appointment of local health officer. Please see the creation of ss. 251.02 (2) (b) 3. a., b., and c. and 251.06 (4) (c) 3. in this draft. These provisions require the local board of health to appoint the local health officer, as is currently required in Racine County. Other alternatives are for appointment by the chief executive officer of a city or village (see s. 251.03 (2), stats.) or as agreed upon by the merging municipalities (see s. 251.03 (1m) (c), stats.) (Dane County–Madison).

Please let me know if I may provide you with further assistance with regard to this draft.

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