

CT Trauma Conference
May 14, 2026
How to Lobby 101

Deputy Speaker Liz Linehan



Biography

Deputy Speaker Liz Linehan

103rd Assembly District

Cheshire, Hamden, Wallingford

Majority Caucus Co-Chair

First elected in 2017 (5th Term)

Former Committee on Children Co-Chair

Executive and Legislative Nominations Committee

Public Safety and Security Committee



Legislative Accomplishments

Authored and Championed Numerous Healthcare Laws including:

- Eliminating the religious exemption for school vaccinations
- Codifying the Ten Essential Health Benefits under state law to protect against federal changes
- The transformative Children's Mental Health bill of 2022, improving the availability of mental health, behavioral health, and substance use disorder treatment services to children, and the recruitment, retention, and training of providers
- Guaranteeing health coverage for cardiac calcium scans
- Requiring Stop the Bleed kits and training for school and emergency personnel.



Stop The Bleed Bill 2025

Public Act 25-160



OFFICE OF LEGISLATIVE RESEARCH PUBLIC ACT SUMMARY



PA 25-160—sHB 7200

Public Safety and Security Committee

AN ACT CONCERNING BLEEDING CONTROL TRAINING AND KITS

SUMMARY: This act allows the Department of Emergency Services and Public Protection (DESPP) to administer a bleeding control trainer qualification program in each district health department. Anyone currently qualified as a bleeding control trainer through this program may provide bleeding control training to members of the public.

The act also prohibits any fee from being charged to any individual or member of the public for participating in (1) any trainer qualification program or (2) a bleeding control training.

Under the act, police officers or probationary candidates who receive bleeding control training from a qualified bleeding control trainer must be given credit for the training toward the basic or review training requirements.

The act also allows the Department of Public Health (DPH) to work with local health departments to install bleeding control kits in certain public places (e.g., public buildings).

EFFECTIVE DATE: July 1, 2025

BLEEDING CONTROL TRAINER QUALIFICATION PROGRAM

Under the act, if DESPP administers the program, the program must (1) use a training model developed by a nonprofit organization that specializes in bleeding control, and (2) provide qualification in bleeding control training to allow participants who successfully complete the program to provide bleeding control training to others.

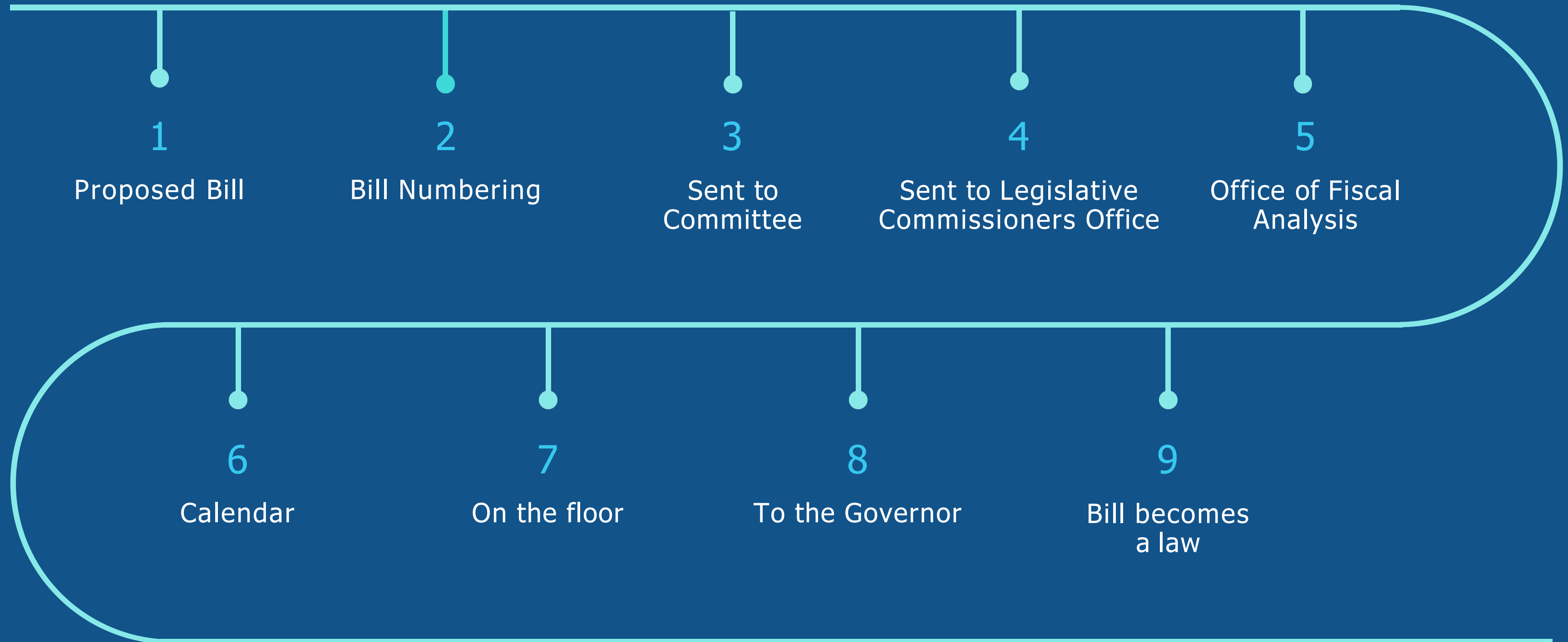
If DESPP administers the program, each district's health director must determine the program's eligibility criteria. Participants must be members of the following groups within the district:

1. employees of the district health department, youth service bureaus, schools, or municipalities, including municipal social service agencies;
2. employees and volunteers of youth-serving organizations and youth athletic activities operated by businesses, nonprofits, or a municipality; and
3. members of paid municipal or volunteer fire departments, local police departments, and local and regional boards of education.

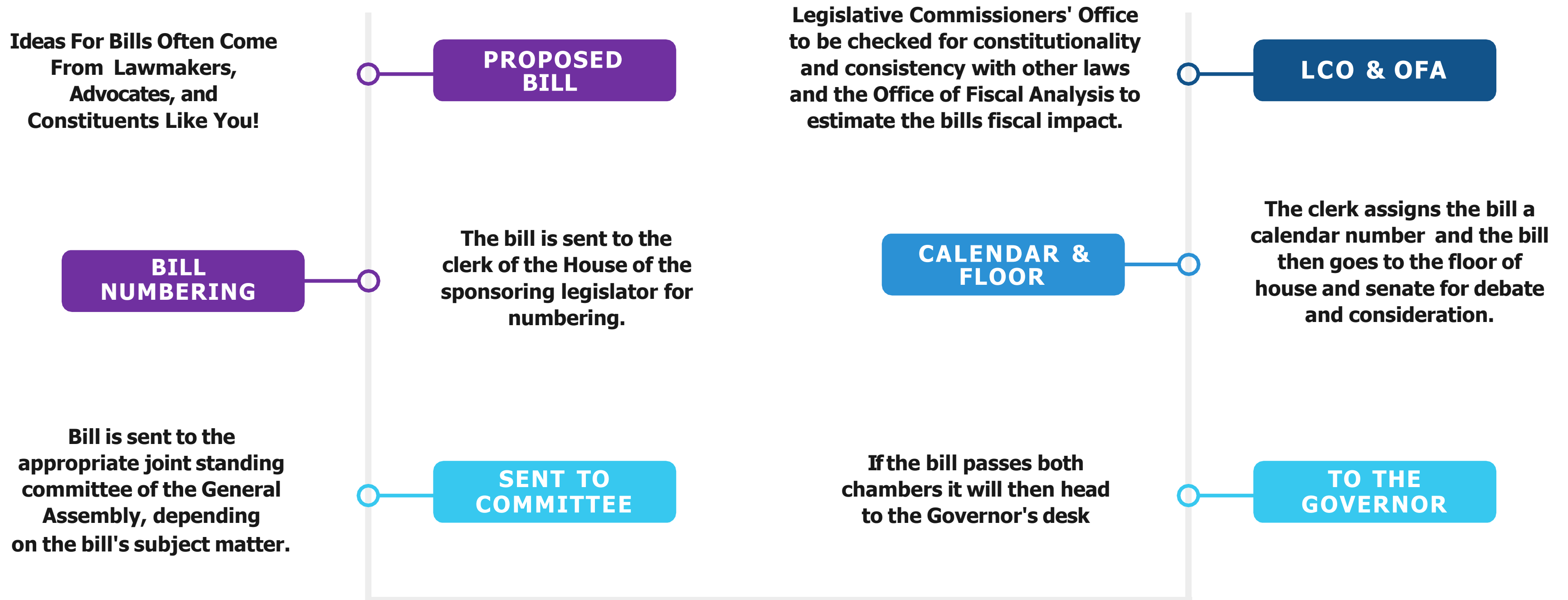
The trainer qualification program may be included as part of an in-service training program for school employees (e.g., teachers, administrators, paraeducators, nurses, and social workers).

The act allows DESPP to partner with a non-profit that specializes in bleeding control to implement these provisions.

Legislative Process



STEPS FOR A BILL BECOMING LAW



What is Your Role in the Legislative Process?

Bill Ideas come from YOU**

- Many pieces of legislation come from subject matter experts with lived experience.
- If there is proposed legislation that you care about that has been scheduled for a public hearing, you can make your voice heard by submitting testimony in support or opposition of the proposal.
- Write to your legislator or committee members to urge them to support or oppose proposals.



The Committee Process

When a bill is sent to a committee the committee may:

1. Have the bill drafted in legal language
2. Combine it with other bills and have it drafted as a committee bill
3. Refer the bill to another committee; or
4. Take no action, so the bill fails.
5. The committee may also write a new "raised" committee bill



The Committee Process

- The committee holds public hearings for the public, state agency representatives and legislators on all bills it wishes to consider.
- The committee may then report the bill favorably, defeat the bill or issue no report.
- Bills requiring action by another committee are referred to that specific committee, e.g. a bill requiring expenditure is referred to the Appropriations Committee.

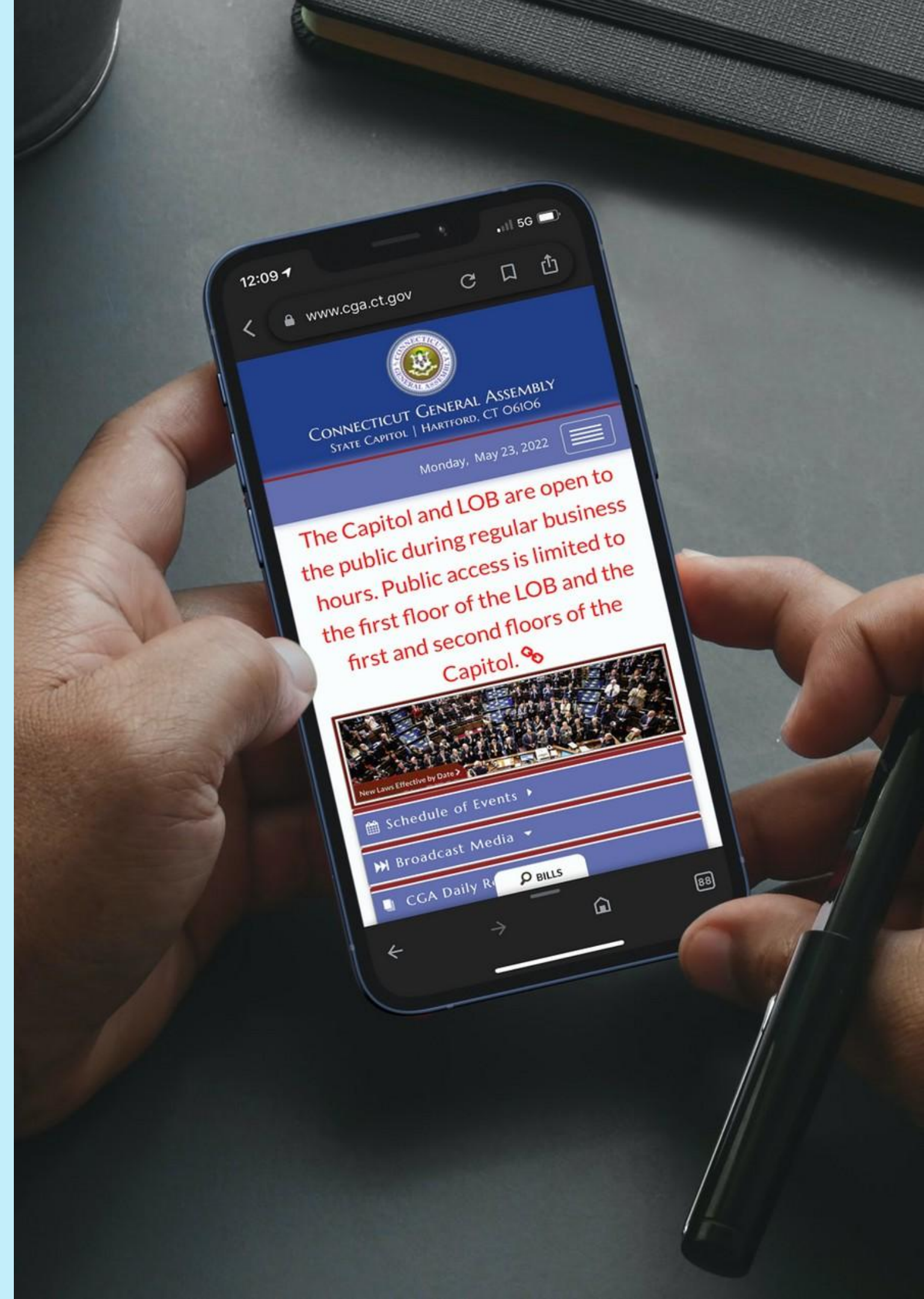


Navigating the CT General Assembly Website

The CGA website can be found at cga.ct.gov

This site has:

- Schedule of meetings and public hearings
- Ways to look up bills
- Sign up for bill tracking
- Links to Connecticut Network (CT-N) to watch committee proceedings and House and Senate sessions online.





Testifying at Public Hearings

Find a bill or an issue you are interested in:

- Speaking at a public hearing, or submitting written testimony is an effective way of sharing your views.

The General Assembly Website Posts the Bulletin [HERE](#)

The Bulletin contains:

- A schedule committee meetings & public hearings
- Instructions for how to submit written testimony
- Sign up info to testify in person

By our joint rules, notices for public hearings must be printed five days in advance.

It is important to know the number of the bill which interests you.



Testifying



STEPS TO TESTIFY AT A PUBLIC HEARING:

1

Review the bulletin daily and check to see which committees are having public hearings.

2

Use the "On-line Testimony Registration Form" link in the notice to register to testify. You can also call the number listed if you do not have access to the internet.

3

If you're registering online, you'll be taken to the Webinar registration page for the hearing. Once you submit your registration you will receive a confirmation email.

4

On the morning of the hearing, go to "Public Hearings" and click "testimony" and select the hearing date. In the right corner, there will be a document labeled "Speaker Order." Click to open and find your placement.

5

Make sure to log onto Zoom before the hearing starts and turn off camera/microphone until it is your turn. You will have to wait to speak as if you are sitting in a hearing room.

6

You can monitor the hearing on CT-N or on CT-N's YouTube channel.



WRITING YOUR TESTIMONY

Conveying your position in an effective and concise manner



ADDRESSING YOUR TESTIMONY

Be sure to address the chairs and ranking members of the committee in your opening paragraph.



WHAT ARE YOU TESTIFYING ON?

Clearly state the bill that you are submitting your testimony about and your positions on the proposed legislation.



MAKE YOUR CASE

Explain why the proposed legislation is important to you and how you came to your position.



KEEP TRACK OF THE TIME

Always remember that if you are testifying in person or virtually that your remarks are limited to 3 minutes.

David S. Shapiro, MD, MHCM, FACS, FCCM
Surgeon, Consultant
Stop The Bleed Champion, American College of Surgeons
West Hartford, Connecticut
860-833-5673

Date: March 9, 2025

Testimony in Support of

HB 7200 An Act Concerning Bleeding Control Training and Kits

List Bill Number
and Title

What does Testimony Look Like?

To: **Co-Chair Boyd, Co-Chair Gaston**, Vice Chair DiGiovancarlo, Vice Chair Slap, Ranking Member Howard, Ranking Member Cicarella, **Representative Linehan** and **members of the Public Safety and Security Committee**

From: David S. Shapiro, MD, MHCM

On December 14, 2012 life changed in Connecticut and across the nation after the mass shooting at Sandy Hook Elementary School, where 26 humans—20 first-grade students and 6 school staff members were taken from their families, their communities, and from this earth. This event was ignition for widely respected trauma surgeons, federal advocates, and legislative and executive officials convened in what became known as the Hartford Consensus in April of 2013.

These events included every agency involved in the care of injured people, including but not limited to the American College of Surgeons Committee on Trauma (ACS COT), the American College of Emergency Physicians (ACEP), the National Association of Emergency Medical Technicians (NAEMT), the Committee on Tactical Combat Casualty Care (CTCCC), the United States Department of Defense, the US Department of Health & Human Services, the Department of Homeland Security, the International Association of Firefighters, the International Association of Police Chiefs, among others. The STOP THE BLEED program was born for a simple reason: the number one cause of preventable death after injury is bleeding.

The STOP THE BLEED® program includes three important tenets:

- 1. Empowering the public to act in the event of a bleeding emergency, becoming “immediate responders.”**
- 2. Teaching the public the technique to stop bleeding, and;**
- 3. Making the materials needed to stop bleeding widely available.**

Thank you for your consideration, and for the opportunity to submit this written testimony.
Respectfully yours,

David S. Shapiro, MD, MHCM, FACS, FCCM
Immediate Past President, ACS Connecticut Chapter
Connecticut Committee on Trauma Chair, 2025-2027
Champions Program Leader, American College of Surgeons, Stop the Bleed®
Associate Professor of Surgery Frank H. Netter MD School of Medicine
Associate Professor of Surgery University of Connecticut School of Medicine
860-833-5673
davidscottshapiro@gmail.com

This testimony was submitted by Dr. Shapiro in favor of the Stop The Bleed legislation.

Dr. Shapiro’s testimony clearly states:

- Which bill he is submitting testimony on



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Surgeon, Consultant
Stop The Bleed Champion, American College of Surgeons
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860-833-5673

Date: March 9, 2025

**Important to mention in
Support of or Against**

Testimony in Support of

HB 7200 An Act Concerning Bleeding Control Training and Kits

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What does Testimony Look Like?

Dr. Shapiro’s testimony clearly states:

- **Whether he stands in support or opposition of the proposed legislation**



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Stop The Bleed Champion, American College of Surgeons
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Date: March 9, 2025

Testimony in Support of
HB 7200 An Act Concerning Bleeding Control Training and

Address Testimony
to Committee
Leadership

To: **Co-Chair Boyd, Co-Chair Gaston, Vice Chair DiGiovancarlo,
Vice Chair Slap, Ranking Member Howard, Ranking Member
Cicarella, Representative Linehan and members of the Public
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What does Testimony Look Like?

Dr. Shapiro's testimony clearly:

- Addresses the chairs, vice chairs and ranking members of the committee.



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Surgeon, Consultant
Stop The Bleed Champion, American College of Surgeons
West Hartford, Connecticut
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Date: March 9, 2025

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David S. Shapiro, MD, MHCM, FACS, FCCM
Immediate Past President, ACS Connecticut Chapter

What does Testimony Look Like?

Dr. Shapiro’s Testimony Clearly Outlines Impacts of Legislation:

- Including Relevant Facts
- Clearly describes NEEDs/ Demands



Include Brief Relevant Facts

On the House Floor



- Lawmakers debate and draft amendments in either the House or Senate depending on if the bill in question was introduced as a House or Senate Bill.
- The chamber may send the bill to another committee before voting. A "yes" vote sends the bill to the other house for placement on the voting calendar.
- The bill is then returned to the first chamber for concurrence if amended by the second house.

To the Governor

The Governor can:

1. Sign the bill
2. Veto the bill
3. Take no action

- If not amended, the bill is sent to the governor.
- If the House and Senate cannot agree, the bill is sent to a joint conference committee.
- If the conference committee reaches an agreement, a report is sent to both houses.
- If one or both chambers reject the changes, the bill fails.
- If both the House and Senate pass the bill, it is sent to the governor.





Veto Override

If the Governor vetoes a bill it is returned to the chamber in which it originated.

Vetoed bills can be reconsidered by both chambers

1. The governor signs it
2. The governor fails to sign it within 5 days during legislative session or 15 days after adjournment from the day it was presented to him
3. The vetoed bill is repassed in each chamber by a 2/3 vote of the elected membership

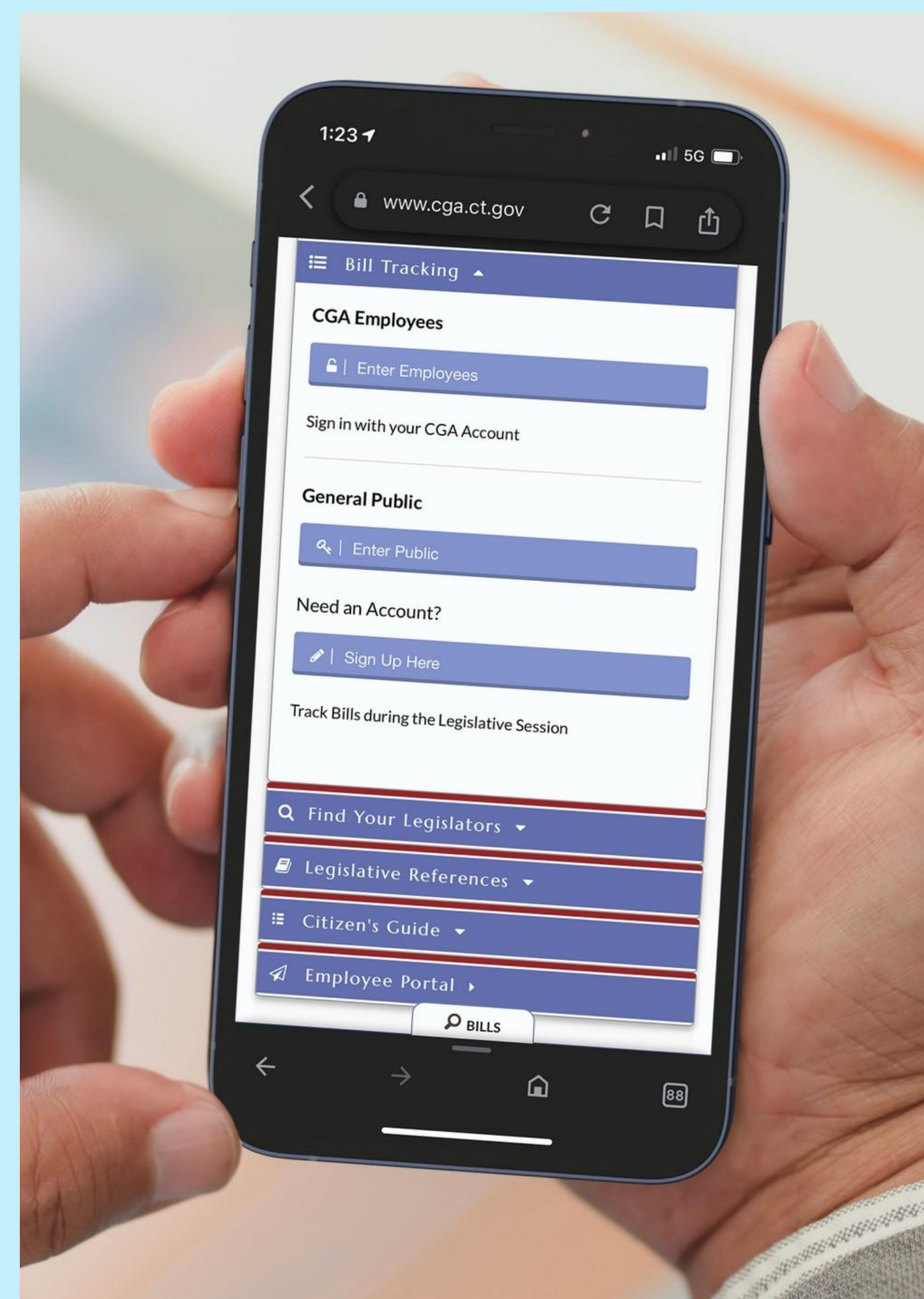
Bill Tracking

Bill tracking is used to alert you to legislative activity affecting one or more bills on lists you create and maintain.

You can sign up for bill tracking at:

cga.ct.gov/asp/menu/cgabiltracking.asp

This page will direct you to a registration form and once you complete this, you will be able to start tracking bills through the legislative process.



CREATING A NEW LIST OF BILLS TO TRACK

Select the **NEW LIST** link at the top of the window. The New List Name dialog box displays.



NEW LIST

In the Track Options section, under Add all Bills Introduced By, select the **CHOOSE INTRODUCER** drop-down and select desired legislators.



BY INTRODUCER

NAME IT



Type a name for your list.

BY CO-SPONSOR



In the Track Options section, under Add Bills CoSponsored By, select the **CHOOSE COSPONSOR** drop-down and select desired legislators.

In the List Options section, indicate how you want to be notified of changes in the bills on your list. You can choose to receive text messages or emails, and you can choose to be notified immediately and/or nightly .



NOTIFICATIONS

In the Track Options section, under Add Bill to List, type in a bill number.



BY BILL NUMBER

Surgeons and Surgery

Surgical Smoke Evacuation Policies

Under a 2022 law, by January 1, 2024, each licensed hospital and outpatient surgical facility had to develop and implement a policy for using a surgical smoke evacuation system to prevent exposure to the substance. “Surgical smoke” is the by-product of using an energy-generating device during surgery, but the term excludes by-products produced during gastroenterological or ophthalmic procedures which are not emitted into the operating room during surgery ([PA 22-58](#), § 67).

Surgical Technologists

A 2023 law generally prohibits outpatient surgical facilities and hospitals (excluding chronic disease hospitals) from employing someone to perform surgical technology services, unless the person meets specified training or experience requirements, such as (1) successfully completing a nationally accredited surgical technology program and having a surgical technologist certification, or obtaining it within 18 months after completing the program; (2) working as a surgical technologist in a hospital or outpatient surgical facility on or before October 1, 2023; or (3) successfully completing a surgical technology training program in the U.S. armed forces, National Guard, or U.S. Public Health Services ([PA 23-195](#), § 1).



Hospital Safety and Related Topics

Assault of a Health Care Employee

Under existing law, a defendant who commits the crime of assaulting a health care employee may claim as a defense that the conduct was a clear and direct manifestation of the defendant's mental, physical, or intellectual disability. A 2017 law made two changes to this defense. First, it provided that the defense is an affirmative defense (and thus, a defendant has the burden to establish the defense by a preponderance of the evidence). Second, it provided that an abnormality manifested only by repeated criminal or antisocial conduct is not a qualifying mental disability for purposes of this defense ([PA 17-216](#), § 3).

Health Care Associated Infections

A 2018 law made several changes to the Department of Public Health's (DPH) mandatory reporting system of health care associated infections, including (1) expanding the system's scope to include antimicrobial resistance and a broader range of health care facilities, (2) requiring the system to be based on nationally recommended standards, (3) adding to the membership of a related advisory committee, and (4) requiring DPH to annually post certain related information online rather than annually reporting on the system ([PA 18-168](#), §§ 12 & 13).

Health Professional Safety

A 2024 law required DPH to develop a marketing campaign and make monthly public service announcements on its website and social media accounts for at least two years that (1) discourage aggressive or violent behavior towards health care providers in any health care setting and (2) provide information on grant opportunities for building security infrastructure through an existing program and any other programs that offer nonprofit hospitals the opportunity to enhance patient and employee safety ([SA 23-29](#)).

Health Care Facility Worker Safety

In 2024, the legislature enacted a law requiring hospitals and certain other Medicaid-certified facilities to adopt and implement workplace violence prevention standards consistent with those set by the Joint Commission or other applicable certification or accreditation agencies. The social services commissioner may require these facilities to provide evidence that they adopted and implemented the above standards to continue receiving Medicaid reimbursements ([PA 24-19](#), § 5).

Hospital Cybersecurity Disruption Audits

2024 legislation requires hospitals (except for those exclusively state-operated) to take certain actions annually related to cybersecurity. Specifically, they must (1) have their cybersecurity plans and processes audited to determine if they are adequate or need improvements and (2) on a confidential basis, make the audit results available to DPH and certain other state agencies as well as any steps they are taking to implement recommended improvements ([PA 24-19](#), § 20).



Protecting Patients and Healthcare Workers

Reporting on Stab and Gunshot Wounds

Under a 2016 law, hospitals, outpatient surgical facilities, and outpatient clinics must report to the police when they treat patients for serious stab wounds, just as they must already report treatment for gunshot wounds. Among other things, this law also (1) sets requirements for how these facilities must handle evidence related to either type of injury and (2) generally provides immunity for these facilities and their employees related to this reporting ([PA 16-90](#)).

Trauma Activation Fee Reporting

A 2019 law requires general and children's hospitals to annually report information that the Office of Health Strategy prescribes on trauma activation fee charges (fees hospitals may charge when they assemble physicians and other staff to respond to serious injuries) ([PA 19-117](#), § 245).

Intimate Patient Examinations

A 2022 law requires hospitals and outpatient surgical facilities to develop and implement procedures to obtain a patient's express written consent to an "intimate examination" (pelvic, prostate, or rectal examination). It also generally requires these facilities to obtain a patient's separate written consent if a medical student, resident, or fellow performs an intimate examination exclusively for training purposes and not as part of clinical care ([PA 22-33](#), § 1).



HB 5003 AN ACT CONCERNING WORKFORCE DEVELOPMENT AND WORKING CONDITIONS IN THE STATE

Supporting Teachers, Nurses & Blue-collar Workers

NURSES

- Protects health care employees when they get hurt on the job
- Protects lost wages and benefits
- Pays out-of-pocket expenses
- Stops employers from requiring workers to use their accrued time off to cover their missing time

Lays the groundwork for giving visiting nurses the info they need when they're treating patients with a history of violence

workforce bill

NURSES

5003

PROTECT HEALTH CARE EMPLOYEES WHEN THEY GET HURT ON THE JOB

- PROTECT LOST WAGES AND BENEFITS
- PAYOUT-OF-POCKET EXPENSES
- STOP EMPLOYERS FROM REQUIRING WORKERS TO USE THEIR ACCRUED TIME OFF TO COVER THEIR MISSING TIME

REQUIRE HOSPITALS TO ADOPT AND PUBLISH NURSE STAFFING PLANS TO ENSURE AN ADEQUATE LEVEL OF CARE ACROSS EACH HOSPITAL

LAY THE GROUNDWORK FOR GIVING VISITING NURSES THE INFO THEY NEED WHEN THEY'RE TREATING PATIENTS WITH A HISTORY OF VIOLENCE

CT HOUSE DEMS

Questions and Answers

You have the ability affect change through the legislative process. I hope that everyone will use this resource to share your stories. Lawmakers are looking forward to hearing your voice.

As always, please do not hesitate to reach out to me if I can be of any further assistance to you.

Email: Liz.Linehan@cga.ct.gov

Phone: 860-240-8568

