





Time:

11:00 am - 1:00 pm

Hybrid Meeting Location

Virtual: https://us06web.zoom.us/j/81707867739
In person: 135 School Street, Walpole MA 02081

Attendance Roll Call

Voting members present:

Barbara Reardon, Canton (in person; joined late)

Kylee Sullivan, Dedham (virtual)

Emily Conners, Milton (virtual)

Stacey Lane, Norwood (in person)

Melissa Ranieri, Walpole (in person)

Lenny Izzo, Wellesley (in person)

Jared Orsini, Westwood (virtual)

Non-voting members present:

Aine Studdert-Kennedy, BME Strategies (in person)

Angie Truesdale, BME Strategies (virtual)

Cynthia Baker, BME Strategies (in person)

Jackson Lieb, BME Strategies (in person)

Dawn Sibor, BME Strategies (virtual)

Katie Paciorkowksi, Dedham (in person)

Sarah McColgan, MHOA (virtual)

Clariese Natal, MHOA (virtual)

Virginia Chacon-Lopez, Needham (in person)

Abbie Atkins, Norwood (in person)

Trish Fisher, Walpole (in person)

Jhana Wallace, Wellesley (virtual)

Sanskruti Madan, Regional Epidemiologist (virtual)

Voting members absent:

Caroline Kinsella, Milton

6/7 communities present, quorum met.

Opening

Melissa Ranieri made a motion to start the meeting. Stacey Lane seconded the motion.





Canton: not present

Dedham: Y
Milton: Y
Norwood: Y
Walpole: Y
Wellesley: Y
Westwood: Y

The regular meeting of the NC-8 Local Public Health Coalition was called to order by Cynthia Baker at 11:05 AM on September 9th, 2024.

I. Welcome

BME provided an overview of the agenda to start the meeting.

Stacey Lane made a motion to approve the minutes from the August 2024 Coalition Meeting. Melissa Ranieri seconded the motion.

Canton: abstained

Dedham: Y Milton: Y Norwood: Y Walpole: Y Wellesley: Y Westwood: Y

II. Announcements and Reminders

BME welcomed a new staff member to the NC-8 Coalition: Jackson Lieb, who will be serving in the NC-8 Medical Reserve Corps Coordinator role.

The coalition reviewed recent Training Hub announcements regarding fall course offerings. Housing training will be offered on Tuesday, Nov 12th 8AM-3:30PM at the Marriott Hotel in Springfield (in person component) with virtual sessions 11/20, 11/21 and 12/4 8:30AM-12:30PM. Food Protection will be offered virtually 10/15 - 10/17 8:30AM-12:30PM with in-person instruction Wednesday Oct 23-Thursday Oct 24th 8AM-3:30PM at the New Bedford Health Department. Applications are due 9/16 by 11:00am, with notification of acceptance anticipated by 9/30. The group reviewed the reduced prerequisites for Food Protection - specifically around the FDA standards pre-course work. BME shared a reminder that the FDA is sunsetting ComplianceWire





on 9/15. Training modules are being migrated to LearnED, and previous learners using ComplianceWire should transfer their certificates of completion for record-keeping.

Westwood shared that they are close to hiring a new inspector and would like to explore options to pre-enroll them in the Training Hub courses. Cynthia Baker will follow up with Sam Menard to see if this is a possibility.

The coalition also reviewed a spending request from the Canton Public Health Nursing team to support their CPR and First Aid training curriculum. The team requested the following items for purchase with PHE funds for a total of \$693.78:

- i. Prestan AED UltraTrainer (4pk) \$462
- ii. Kerlix Gauze Bandage Rolls \$33.99
- iii. Tourniquet Set \$32.99
- iv. BLS Instructor Bundle \$164.80

Stacey Lane made a motion to approve the Canton nursing supply request. Jared Orsini seconded the motion.

Canton: Y
Dedham: Y
Milton: Y
Norwood: Y
Walpole: Y
Wellesley: Y
Westwood: Y

BME shared a final update that the IMA has received approval from all communities. Once final signed copies from remaining municipalities are received, BME will update documentation on file and share with DPH.

III. MRC Updates

Dawn Sibor and Jackson Lieb provided an overview of the MRC coordination and management transition. Dawn shared the recent trajectory of activities completed on behalf of the MRC, including a volunteer database audit, creation of an updated recruitment toolkit and onboarding package, development of 4 training opportunities for volunteers including Stop the Bleed, a MEMA tour, a training day facilitated by the ORA grant, and a volunteer needs assessment. Jackson described his initial list of onboarding activities which consist of updating contact lists, representing the NC-8 MRC at meetings, researching and reviewing other units' best practices, consolidating organization of NC-8 MRC associated accounts, conducting MA Responds maintenance,





and meeting reporting requirements. Jackson also noted the reorganization of accounts already led to the recruitment of a new MRC member.

Additionally, Jackson shared a shortlist of key upcoming priorities. In the next week, the MRC Coordinator will release the quarterly drill and begin in-person event planning outreach. Priorities for later in the month include individual meetings with municipal stakeholders to review needs assessment data and gather feedback, and convening the NC-8 MRC steering committee. In October and beyond, the MRC Coordinator plans to offer support for vaccine clinics, host a full Training Day, and initiate next steps to support larger initiatives for the fiscal year. Jackson requested that communities currently working independently with their own MRCs (either sending them out or requesting support) please notify the Coordinator to ensure unit tracking and reporting to meet funding requirements.

Virginia Chacon-Lopez asked about public engagement strategies moving forward to let communities know about ongoing projects and recruitment efforts, noting that most constituents use Instagram and Facebook but no longer use Twitter. Jackson responded that engagement and outreach strategization will be an October priority following stakeholder interviews with health directors and collaborators to understand how to best operationalize the volunteer base and work directly with communities. Trish Fisher noted the active volunteer base in Walpole, and that they are less engaged with MA Responds. Trish also noted that MRC flu clinic support would be an immediate priority.

IV. Regional Staff Updates

a. Public Health Nurse Hiring Updates

Aine Studdert-Kennedy provided an overview of recent activities in support of the Public Health Nurse hiring search. The job description was reposted on 8/15 with a deadline of 9/15 on a variety of LPH partners' platforms. The BME team will review new candidates and reconvene the hiring subcommittee to identify applicants for phone screening.

b. Regional Inspection Associate Transition

Aine Studdert-Kennedy summarized recent efforts to work with Kerry Mackay on transitional tasks prior to her departure. Kerry has reviewed the Regional Inspection Associate onboarding guide and provided feedback to improve the document for the next hire. BME also requested an overview of completed projects and the main tasks associated with the RIA role to date. Those projects and topic areas consisted of housing inspection and pool inspection support, seasonal camp inspections and process improvement, tobacco control and retailer education, and documentation support. From the highlighted core activities, BME provided a summary of ongoing opportunities to provide and strengthen regional capacity, including: 1) process optimization for





scheduling inspections and coordinating additional logistical follow-ups (including reinspections) 2) additional investment in health communications projects and coordinated messaging across the coalition and 3) continued consolidation of tobacco control resources, compliance support, and retailer education.

V. Hiring Next Steps

Aine Studdert-Kennedy facilitated a discussion regarding the coalition's desired next steps for backfilling the Regional Inspection Associate Role. Stacey Lane prompted the group to confirm an inspector position was the best fit for the coalition, or to consider if another type of role would be most useful. Lenny Izzo stated that Wellesley did not utilize the RIA as much and recently lost 2 municipal inspectional staff members to the state after having provided training investment and support. Lenny noted less interest in training someone new only to have them leave. Stacey clarified that the Associate-level position listing may be viewed as a stepping stone rather than a longer term position. Aine provided a salary range for similar roles throughout the state. Cynthia Baker asked the group if the position could be advertised at a higher level and salary to attract candidates with more experience. Jared Orsini shared that Westwood's recent inspector search mostly attracted candidates with very little public health experience, and shared concerns about a regional role at a higher salary potentially undermining open municipal positions. Jared also noted that Westwood's chief area of inspectional need is Food Protection. Lenny asked if the group might benefit from hiring a food consultant. Stacey asked the group if they would prefer hiring a full sanitarian. Cynthia asked if the group might benefit from a specialized inspector role with a core area of expertise, such as Food Protection. Melissa Ranieri responded that Food Protection may not be a common area of need across all municipalities. Cynthia asked if regional Food Protection capacity might be leveraged so communities might rebalance their existing inspectional load to free up municipal inspectors to deal with more time-consuming inspections or intermittent changes in overall caseload. Stacey noted that having expertise in areas other than just Food Protection would be more beneficial. Melissa asked how other coalitions handle similar issues. Cynthia provided an example of a coalition that shares a regional inspector to primarily cover Food Protection, Housing and Recreational Camps with primary responsibility for two towns, and occasional surge coverage for the other two participating towns. The group further discussed starting salary rates, and the need to stay competitive while ensuring parity with municipal salaries.

Cynthia Baker suggested the hiring subcommittee reconvene to review and update the job description for presentation back to the coalition in the October meeting, highlighting the need to address funding allocated towards the RIA salary. Jared also suggested exploring contractors to assist with routine Food Protection inspections in the interim. Kylee Foley expressed interest in exploring additional contractor options as a stop gap measure. Melissa Ranieri shared that Walpole currently receives similar support





from Mojin Solutions, but Mojin does not use FoodCode Pro. Cynthia suggested the hiring subcommittee also discuss possible contractor solutions at the next convening.

VI. Tobacco Control: Intro to Post

Sarah McColgan (MHOA) provided an overview and demo of POST (Point of Sale Toolkit), a web-based platform to streamline data entry and collection for tobacco sale tracking and inspections in MA. All boards of health funded through MTCP are required to enter tobacco inspection data through POST. Communities who do not receive MTCP funding are not obligated to leverage POST, but are welcome to use it. POST can organize retailer data over time, track violations at the municipal and regional levels, and can be used for routine inspections and compliance checks. Individuals using POST can select what aspects of the inspection data sheet are shared with the retailer and upload photos to support evidence collections. Tobacco violations can be closed when fines are paid or when a suspension hearing has taken place. POST allows users to generate and export reports and print and send forms instantaneously to share with recipients. POST also offers helpful functionalities to support compliance checks, such as deidentification of young folks and the ability to assign inspections to different individuals, add users, and create inspectional 'campaigns' to track project work across different inspectors and retailers.

Questions:

- 1) Is POST free? How might communities not funded by MTCP access this platform?
 - a) POST is free for local boards of health and municipalities to use (though DPH funds use of the platform). Interested municipalities can follow up with Sarah for setup and training. POST has a help desk feature for assistance and troubleshooting.
- 2) Can MHOA make any type of referrals or connections for municipalities looking for support around compliance checks (specifically for having youths enter establishments to attempt purchases)?
 - a) MHOA has a contract to support 15 specified SSAs. NC-8 may not be among them, but Sarah can assist with locating a contractor.
- 3) Does Post offer any customization for municipalities who have specific bylaws concerning tobacco sales?
 - a) The platform itself is not customizable, but during an inspection there is an 'Other' option on the data sheet to list local policy violations. haven't seen a need for it. Generally everything is covered in the post data sheet.

BME will share Sarah's contact information with the coalition and follow up with communities to gauge interest in using the platform.

VII. Opioid Abatement Next Steps

a. Expansion of Regional Access to Narcan





Sanskruti Madan made a proposal to combine efforts assisting municipalities interested in accessing Narcan, providing overdose rescue kits, and educating community members. Sanskruti noted several communities expressed initial interest and would like to explore a regional effort. Some initial implementation ideas were shared including collaboration with local partners to identify strategic locations for overdose rescue kits, training coordination across NC-8 (leveraging the HRiA ToT sessions), development of outreach strategies to educate residents about the kits and how to use them, and establishment of a maintenance plan. Jackson Lieb also added that the MRC could possibly be utilized to support this initiative. Sanskruti asked the Wellesley team if they would be open to an informational interview to understand their process for a similar project. Canton and Norwood had previously expressed interest in working with Sanskruti on Narcan. Walpole and Dedham would also like to work on this.

Sanskruti will reach out to interested communities to schedule 1:1 conversations and take next steps, including initiating outreach to CARE MA for technical assistance. Wellesley will also connect with Sanskruti to share best practices.

b. Review of NC-8 x Riverside Community Care Proposal

The coalition reviewed the most recent update to the RCC proposal which provided further detail on the following topics:

- i. Further contextualizes the proposed caseload cap and potential mitigation options to ensure residents receive continuity of care
- ii. Starting suggestions for creating balance between enrolled residents among different communities
 - 1. Evenly allocate caseload by community, but offer other ways to support individuals (beyond 1:1 intensive recovery coaching) such as support groups
- iii. Additional detail concerning options for group-style supports and/or coaching, an outline of the contract cycle, and a cadence adding additional services, and for evaluation of existing services.

Melissa Ranieri and Stacey Lane agreed the proposal is a good starting point as long as there are opportunities to finetune approach and add capacity. Multiple communities expressed interest in getting the project started. Stacey asked if any other communities were able to report use of funds for FY24. Melissa shared that Walpole allocated \$10,000 towards a consultant to engage the community for feedback. Jared Orsini shared that following conversations with human services, Westwood is interested and would be open to shifting the funding level higher to make adjustments to planned capacity. Stacey asked whether the additional community would affect the caseload cap. Cynthia reiterated that the 20 person caseload is a starting point for 1.0 FTE, but there might be options to either start there and build as the program develops, or start with a 1.5 FTE if





Riverside has the appropriate capacity. The group expressed interest in starting with the proposal as written with the understanding that expansion of the caseload would be highly likely. Melissa and Lenny reiterated the need for regular meetings to review data and adjust programming. Stacey asked how quickly it would be feasible to start. Cynthia shared that communities could be billed individually and asked to confirm participation.

Canton: N
Dedham: Y
Milton: Y
Norwood: Y
Milton: Y
Walpole: Y
Wellesley: Y
Westwood: Y

c. HRiA Training of Trainers Proposal Update

Cynthia Baker shared that 4 communities have confirmed interest in participating and will train 13 employees in overdose rescue training facilitation. The training sessions will be planned for the end of October / early November.

VIII. Community Updates (12:45-12:55)

Cynthia Baker polled the coalition's interest in purchasing additional COVID-19 test kits with CTC funds. The group indicated that they would like to revisit this each month with particular interest in stocking up prior to the holidays. BME will add this as a recurring meeting agenda item. Walpole and Needham shared that they had not yet received their free tests from the state.

The group discussed local regulation of nicotine pouch and nitrous oxide sales. Stacey Lane asked the group about body art regulations. Jared Orsini asked how other communities are planning for controlling EEE and WNV risk, and proposed an informal discussion or working group to ensure towns have similar approaches. Melissa Ranieri highlighted recent conversations with Dave Lawson from Norfolk County Mosquito Control; Lenny stated the state has specific steps outlined for municipalities in the arbovirus response plan. Sanskruti Madan offered to poll the Regional Epidemiologist group and share any ideas or best practices used in other communities. Jared asked other coalition members to reach out if they would like to discuss further and collaborate informally on mosquito control discussions.

IX. Meeting Closure

The next coalition meeting will be held virtually on Monday, October 7th 11AM-1PM.





Stacey Lane motioned to adjourn the meeting. Melissa Ranieri seconded the motion.

Canton: Y
Dedham: Y
Milton: Y
Norwood: Y
Walpole: Y
Wellesley: Y
Westwood: Y

The meeting adjourned at 1:20PM.

Documents used during the meeting:

RCC x NC-8 Proposal

NC-8 Local Public Health Coalition Monthly Meeting

September 2024



Agenda

- I. Welcome
- II. Announcements and Reminders
- III. MRC Updates
- IV. Regional Staff Updates
- V. Hiring Next Steps
- VI. Tobacco Control: Intro to Post
- VII. Opioid Abatement Collaboration Next Steps
- VIII. Community Updates
 - IX. Meeting Closure

Approval of August 2024 meeting minutes

Welcome, Jackson! NC-8 MRC Coordinator

Application
Deadline:
9/16 at
11AM

MASSACHUSETTS LOCAL PUBLIC HEALTH TRAINING PROGRAM

HOUSING AND FOOD INSPECTION COURSES

Two great training opportunities informed by a collaborative group of local public health professionals.

Boston University will be providing Tier 2 Training Opportunities

Housing

Total Learning Time: 18 hours

In Person Date & Time: (6 hours + Lunch)

Tuesday, Nov. 12th, 2024 at 8am-3:30pm

Location: Marriott Hotel in Springfield, MA

Virtual Dates: (4 hrs/each)

Nov. 20th, Nov. 21st, and Dec. 4th at 8:30am-12:30pm

Food

Total Learning Time: 24 hours

Virtual Dates and Times: (4 hrs/each)

Oct. 15th, 16th, 17th at 8:30am-12:30pm

In Person Dates: (6 hrs/each + Lunch)

Wednesday, Oct. 23rd at 8am-3:30pm

Thursday, Oct. 24th at 8am-3:30pm

Location: New Bedford Health Department

- Reduced and streamlined Training Hub Food Protection prerequisites (specifically FDA Standards coursework.)
- FDA is decommissioning their previous learning platform (ComplianceWire) on 9/15 and moving modules to the LearnED
 - Transcript info on ComplianceWire will remain accessible to download

- CPR and First Aid Training Procurement Request (Canton)
 - Prestan AED UltraTrainer (4pk) \$462
 - Kerlix Gauze Bandage Rolls \$33.99
 - O Tourniquet Set \$32.99
 - BLS Instructor Bundle \$164.80

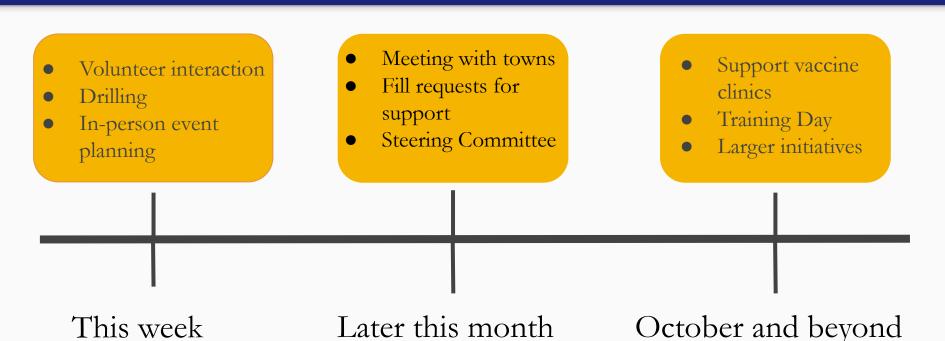
Total: \$693.78

- IMA amendment pending finalization
 - Waiting on signed copies from remaining communities, but received confirmation that the amendment was accepted

MRC Updates: Current Actions

- Update points of contact
- Represent NC-8 MRC at meetings
- Review best practices from other MRCs
- Organize and maintain NC-8 MRC associated accounts
- Conduct MA Responds maintenance
- Meeting Reporting requirements

MRC Updates: Looking Ahead



Regional Staff Updates

Regional Staff Updates: PHN Hiring Process

- Relaunched PHN job posting
 - Reposted 8/15, deadline 9/15
 - Updated posting locations
 - 13 new applicants to date

Regional Staff Updates: Transition Summary

Core Inspectional Areas

- Pool inspection support and software onboarding
- Housing support pre-occupancy inspections and complaints
- Seasonal camp inspection support and documentation process improvement
- Tobacco inspections and operator outreach/education

Regional Staff Updates: Transition Summary

Ongoing Regional Opportunities

- Optimize process for scheduling inspections and coordinating follow-up logistics (ex., re-inspection fees) across communities
- Further investment in health communication projects and coordination of messaging across the coalition
- Continue consolidation of tobacco control resources, compliance support, and education

Hiring Next Steps

Hiring Next Steps

- Confirm coalition support
- Review hiring process
- Evaluate position level
- Reconvene subcommittee

Tobacco Control: Intro to Post Sarah McColgan, MHOA

Opioid Abatement Collaboration Next Steps

- Regional Proposal: Expansion of Narcan access and training
- Review: updated RCC one-page proposal for recovery coaching
- Update: HRiA ToT next steps for confirmed communities

Community Updates

Adjournment

Next Meeting

October 7th, 11AM-1PM (virtual)