



Norfolk County-8 Coalition December 2nd, 2024 Meeting Agenda



Time: 11:00 am – 1:00 pm
<u>Hybrid Meeting</u> In person: 50 Carby Street, Westwood MA 02090 Meeting link for virtual attendees: https://us06web.zoom.us/j/81707867739

Attendance Roll Call

Voting members present:

- Meg Goldstein, Canton (in person)
- Katie Paciorkowski, Dedham (in person)
- Caroline Kinsella, Milton (in person)
- Stacey Lane, Norwood (in person)
- Melissa Ranieri, Walpole (virtual)
- Lenny Izzo, Wellesley (virtual)
- Jared Orsini, Westwood (in person)

Non-voting members present:

- Aine Studdert-Kennedy, BME Strategies (in person)
- Cynthia Baker, BME Strategies (in person)
- Jackson Lieb, BME Strategies (virtual)
- Abbie Atkins, Norwood (in person)
- Jhana Wallace, Wellesley (virtual)
- Kristen McIntire, Regional Public Health Nurse (in person)
- Trish Fisher, Walpole (virtual)

7/7 communities present, quorum met.

Opening

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

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



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The regular meeting of the NC-8 Local Public Health Coalition was called to order by Cynthia Baker at 11:05 AM on December 2nd, 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 September 2024 Coalition Meeting. Jared Orsini seconded the motion.

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

Motion passes.

II. Announcements and Reminders

The coalition welcomed Kristen McIntire, the NC-8 Public Health Nurse, on her first day of work with the coalition.

BME shared the results of the first triannual PHE reporting period. The coalition spent 27.8% of its total funding (\$148,519.40) July 1-Oct 31st, 2024.

COVID test kits have been ordered. BME will reach out to communities to schedule pickups once the product has been received by Norwood. The state contract for test kits will expire at the end of the calendar year - any communities interested in ordering more kits should reach out to BME to coordinate.

BME also shared a newly posted grant funding opportunity from the Toxics Use Reduction Institute (TURI). Municipalities are encouraged to apply for project funding averaging \$20,000-\$30,000 for reduction or education efforts to reduce use of toxic chemicals. The application deadline is December 2024. Projects should conclude during summer 2025. BME will circulate further information along with the meeting minutes and offered to assist communities interested in applying.

III. MRC Updates

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Jackson Lieb presented recent updates on the MRC.

1. Funding
 - a. After voting on funding priorities, Jackson wrote the 2025 ORA grant application. The application is currently going through a final round of edits before it is submitted in the next few days.
 - i. The group decided to purchase tabling supplies with remaining 2024 ORA funding. Towns should expect to receive their tabling baskets early next year.
 - b. Training
 - i. Jackson thanked all communities who volunteered responses regarding training spaces for volunteers.
 - ii. Jackson identified several MRC volunteers who have trainer certifications and will be working with them to conduct training in the new year. Jackson will also be looking for opportunities to get several volunteers trained through Red Cross Train the Trainer opportunities.
 - iii. Region 4AB is starting to host training for our volunteers, including ICS 100. This will expand into family preparedness and may also extend to sheltering drills next summer.
 - c. Jackson won a travel award to go to the NACCHO MRC workshop and preparedness conference next spring. This will be a five day event and will give Jackson the opportunity to connect with innovative units from across the country.

IV. Regional Staff Updates

a. Public Health Nurse Onboarding Overview

Aine Studdert-Kennedy shared a high-level summary of the onboarding plan for the NC-8 Regional Public Health Nurse. BME created a detailed onboarding guide and checklist to prioritize required trainings, context-setting, and guide the new hire through the first 30-90 days on the job.

- **Week 1:** The first week will focus on **general onboarding and team integration**. Kristen will be setting up key administrative tools, including her municipal email and shared calendar. This week will also involve her starting the **Foundations in Local Public Health** coursework to build a strong foundational knowledge base.
- **Month 1:** The primary focus for the first month will be **MAVEN training and community engagement**. Kristen will dive deep into the MAVEN system and begin community outreach to each of you. Additionally, we would like her to connect with each community's Public Health Nurse (PHN) and shadow them for a day to better understand the different teams and roles within the NC-8 region.
- **Month 2:** The second month will have a theme of **case investigations and SOP development**. Kristen will start conducting hands-on case investigations and begin refining the



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Standard Operating Procedures (SOPs) that Sanskruti started. She will also engage in community health events to put what she's learning into practice.

- **Month 3:** By the third month, we hope Kristen will be wrapping up her Foundations in Local Public Health coursework and working on a **case study** focused on an NC-8 community need, grounded in her engagement with each of you and your nursing staff. This month will also mark the beginning of Kristen's transition into a more independent role, taking on increased responsibility and ownership of her work.

b. Regional Epidemiologist Hiring Next Steps

Aine Studdert-Kennedy shared updates regarding efforts to rehire the Regional Epidemiologist position. The posting is live on Norwood's website, MMA, MEHA, MHOA, Handshake, and Idealist. **Monday, December 16, 2024, at 5:00 PM EST.** The hiring subcommittee will convene to review applications on **Thursday, December 19**, following the application deadline, to determine which candidates to advance for phone interviews.

c. Contractor Support Updates

Aine Studdert-Kennedy reported on next steps regarding contractor support. Aine and Cynthia Baker have been working with Norwood's procurement team to finalize SOWs to issue RFQs to qualified contractors for Food Protection, Title 5, and Housing support. The team identified 3 vendors for Food Protection and 2 vendors for Title 5. To issue the RFQ three are needed for each category. Aine requested suggestions from the coalition for all three categories. Jared Orsini shared information for a Title 5 vendor (Innovative Septic Designs) to include. The group also discussed deprioritizing Housing support for release of RFQs. Aine and Cynthia will work with Jason to issue the RFQs for Food Protection and Title 5 support by the end of the week.

d. Regional Inspector Regroup

Aine Studdert-Kennedy led a discussion regarding the rehire of the Regional Inspection Associate/Regional Inspector role. Given the variance in stated needs for additional inspection support, and the struggle to facilitate a clear decision on rehiring since Kerry's departure, BME invited the group to consider the key question of whether another full time inspector is needed to support the group. If there is still an appetite to provide additional inspectional capacity, the coalition could consider a 0.5 FTE. A part-time role could provide a better reflection of the actual need amongst communities. Further, a part-time role could afford the coalition more seasoned candidates to consider due to the flexibility in terms of hours and additional wiggle room for higher compensation, versus hiring a newer candidate for a full-time position and a greater need for training investment. Meg Goldstein shared that Canton does not currently have a sanitarian and therefore would not be able to assist with training a newer candidate. Jared Orsini echoed similar concerns for Westwood due to a recent new hire on the team. Meg added that

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their current part-time inspector has another full-time role, and supports Canton with additional hours; Meg offered that more seasoned candidates would be more likely to apply if the hours offered were flexible (ex., nights and weekends). This raised the question of budgeting for a 0.5 FTE or billing for hours. Cynthia replied that the budgeting/billing approach would need to be discussed with DPH. Stacey Lane stated that the host community's rules would need to be followed in terms of total number of hours and employment status. Prioritizing nights and weekends may also result in a higher concentration of inspectors who specialize in Food Protection, to the detriment of other inspectional areas. Caroline Kinsella asked to verify the total number of hours discussed for contractor support; Stacey replied that the coalition roughly decided on 40 hours per month. Melissa Ranieri asked what other regions do to attract and retain their inspectional staff, particularly for SSAs hiring entry-level candidates. Jared Orsini shared that in previous consulting roles he was paid a training rate to train incoming staff. Stacey Lane shared that some communities consider training part of the typical job description, and that host communities may not be able to separate out a stipend for employees training new hires. Jared shared that he would also be looking for support completing regulation reviews. Stacey also proposed looking at another position altogether, such as a Community Health Worker or Resource Coordinator. Cynthia echoed that Community Health Workers are increasingly being utilized across the Commonwealth for outreach, including by SSAs. Stacey added that outreach support would be helpful for use of opioid funding as well. Lenny proposed getting the contractor hired and working in all communities as a starting point for assessing true need for inspector support. Lenny further iterated concerns over the tight labor pool for multiple position types (Social Workers and Sanitarians included) as other SSAs are all looking for the same staff.

The group agreed to focus on release of the RFQs as the primary goal, with the understanding that the coalition will circle back to this staffing decision based on successful integration of contractor support. Further, BME will engage other SSAs to learn more about their approaches to hiring and retaining inspectors.

V. FPHS Review

Cynthia Baker presented on the Foundational Public Health Services review:

What is the FPHS Review? What is the goal of the Review and why are we being asked to complete this?

- The Foundational Public Health Services framework defines a minimum set of public health services that must be available in every municipality.
- The goal is to review **what services are available** within each community (either through local public health or entities) and to see what exists in Massachusetts local public health. This is not an assessment but rather an information gathering and review process through 2 parts: The Cost Tool and The Service Delivery Tool:



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- The Cost Tool: collections information on resources (labor, revenue, contracts, etc.) each local public health entity is spending on FPHS-related activities
- The Service Delivery Tool: captures current services provided, shared, and the overall capacity and staff expertise to fulfill FPHS-related activities
- Participation and completion in the FPHS Review is a PHE Grant Requirement for FY25 not related to the workplan.

What is the timeline for the Review?

- The Review process will begin in January however the planning and preparation starts now!
- All participating municipalities will be introduced to the FPHS Review process on January 14.
- Municipalities will be asked to complete two components:
 - The Cost Tool:
 - Will be introduced to LPH in January
 - Will be completed throughout January and February
 - The Service Delivery Tool:
 - Will be introduced to LPH in February
 - Will be completed throughout February and March
- We expect further information about FPHS to be reviewed and shared in the LBOH webinar tomorrow, Tuesday 12/3 at 3PM.

Who will be engaged during the Review? How will my SSC support our coalition during the FPHS Review?

- Each SSA will be supported by a team consisting of: your SSC, your Program Coordinator, and a BME team member
 - Your SSC will coordinate efforts and collaborate with your SSA to promptly complete the FPHS Review. SSC's will share communication regarding the Review and will lead discussions during coalition meetings. SSC's will also support municipalities by connecting them with further support staff (i.e. technical assistance, document gathering)
- Each local public health entity (Health Department, ISD) will complete their own Cost Tool.
 - We encourage you to reach out to your accounting departments, administrative assistants, and Directors prior to the Review
- Each SSA will complete The Service Delivery Tool and each member municipality will fill out their own section within the tool
 - We encourage you to reach out to your staff including inspections, nurses, social workers, agents, epidemiologists, etc.

How will I learn about the Review and what I will need to do to complete the requirements?



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- Attend the FPHS Introduction webinar to LPH on January 14 and all subsequent webinars (more dates to come)
- Engage with your SSC and discuss FPHS Review at coalition meetings
- [Subscribe](#) to the FPHS Newsletter to receive updates and information
- Look out for additional resources and announcements from OLRH (to be shared by BME)

VI. FY25 Budget Review: CTC

Aine Studdert-Kennedy provided a recap of the discussion from the October coalition meeting starting with a review of CTC funding and spending risks. The group reviewed a summary of level funding from CTC for fiscal years 2025-2026 and approximate spending at risk previously allocated to the Public Health Associate, totaling \$166,203.69 inclusive of salary and fringe. With the anticipated gap in spending on epi salary and fringe, the coalition can assume an additional \$20,000-\$30,000 in additional unallocated funding assuming a rehire date of March-April.

In previous discussion, the coalition ruled out the prospect of hiring additional staff given the shortened grant term. The group reviewed other project options for spending funds, including exploring a regional CHA/CHIP, and developing a regional emergency communications plan along with a suite of tabletop exercises. BME revisited the idea of funding for individual community projects with Hillary Johnston at DPH and confirmed that projects do not need to be explicitly regional in nature, though regional collaboration is encouraged. At the expected funding threshold, communities would not be able to fund their own individual community health assessments or improvement plans (est. \$26-27k). Aine reviewed the opportunities associated with completion of community health assessments, including data-informed regional and municipal programming, strengthening of Foundational Public Health Services, and supporting communities pursuing accreditation. Aine also reviewed an outline for a regional communications plan and package of tabletop exercises spanning different health topics. Such a plan would strengthen coordination amongst municipalities post-COVID, create a structure for how communities would work together to align messaging efforts across the region, and incorporate engagement of the MRC to support emergency response and communications.

Stacey Lane shared her support for the communications plan and tabletop exercises. Meg Goldstein added that Canton would appreciate help with risk communication. Jackson Lieb added that communities previously expressed an interest in leveraging the MRC for disaster communication and could see this project advancing this issue productively. Melissa also shared her support for the communications plan and tabletop exercise option. Jackson also offered his support connecting the coalition to appropriate vendors.

Caroline Kinsella asked the group whether other communities were pursuing accreditation



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or had conducted a CHA/CHIP. None of the other towns have started the process. Caroline expressed interest in having a presentation on accreditation in a future meeting.

Stacey Lane made a motion to approve the Regional Communications Plan and Tabletop Exercise Series approach for use of FY25-FY26 CTC funding. Melissa Ranieri seconded the motion.

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

Motion passes.

VII. PHE Workplan Review

Cynthia Baker led a brief review of PHE workplan objectives in need of revision due to the Regional Inspection Associate vacancy.

- Performance Standard 1: Enhance staff capacity to effectively meet mandated inspectional requirements and enforce regulations, in alignment with the Performance Standards for Local Public Health
 - Outlines hire and onboarding of RIA
 - Suggested update(s)
 - Engage a contractor to promote continuous inspectional coverage across participating communities in the coalition.
 - Reassess Regional Inspection Associate job description and planning to ensure coalition is aligned on position goals and sustainability.
 - Suggested from DPH: Leverage technical assistance to conduct backup documentation review in _____ (inspectional domains)

The coalition came to a consensus to pursue updates 1 & 2. Cynthia Baker and Stacey Lane will discuss the prospect of documentation review with the Program Coordinator.

- Performance Standard 3: Improve inspectional requirements and enforce regulations, in alignment with the Performance Standards
 - Describes engagement with MHOA/MTCP to develop additional work plan goals to continue successful tobacco enforcement and education
 - Satisfied initial requirements of this objective:
 - Attended call with MHOA/MTCP; filled out survey

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- Had follow-up call with Sarah McColgan to discuss next steps for development of additional objectives
- Unfunded communities: Canton, Milton, Walpole, Wellesley, Westwood [Dedham unconfirmed]
 - Discussed support for compliance checks, training for retail inspections, opportunities for technical assistance to ensure community regulations are up to state code, TA for merchant education
 - Discussed lower number of vendors (~50) among non-funded municipalities - cost for compliance checks would be relatively low, estimated 10 hours. Municipalities in the Framingham area were able to create a MOU that allowed them to contribute a portion of their permitting fees to put towards funding for compliance checks.
 - More guidance and engagement forthcoming once MHOA reviews feedback from all participating coalitions
- Otherwise, the objective as written really leverages the RIA to execute MHOA recommendations.

The coalition decided to keep the objectives as presently written, with shifts in primary responsible party (shifting away from Regional Inspection Associate, and tagging in Shared Services Coordinator / NC-8 Coalition at large).

- Sustainability 1: Explore opportunities for expanded sharing of services
 - Emphasis on creating structure for consolidation of mobile food establishment inspections
 - RIA cast as the primary vector for bringing these efforts together; we can still tackle this objective regardless as long as folks have the capacity to engage

The coalition reiterated its interest in moving forward with this objective, with the expectation that a staff member will eventually be hired to more comprehensively engage and manage this objective.

VIII. Community Updates

The coalition discussed body art regulations with respect to tattoo removal and body art practitioner credentials.

IX. Meeting Closure

The next coalition meeting will be held virtually on Monday, January 6th 11AM-1PM.



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Stacey Lane motioned to adjourn the meeting. Meg Goldstein seconded the motion.

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

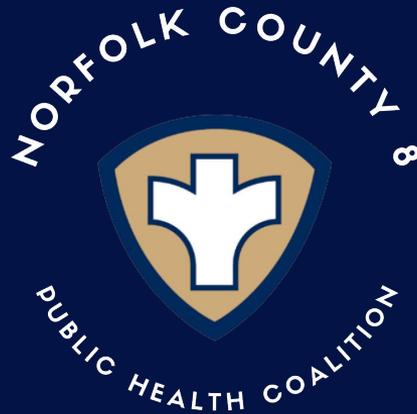
The meeting adjourned at 1:08PM.

Documents used or referenced during the meeting:

NC-8 December Meeting Slides
NC-8 Annotated Workplan
RPHN Onboarding Guide
RPHN Onboarding Checklist
RFQ for Title 5 Support
RFQ for Food Protection Support
RFQ for Housing Support

NC-8 Local Public Health Coalition Monthly Meeting

December 2024



Agenda

- I. Welcome
- II. Announcements and Reminders
- III. MRC Updates
- IV. Regional Staff Updates
- V. FPHS Review
- VI. FY25 Budget Discussion: CTC
- VII. PHE Work Plan Review
- VIII. Community Updates
 - a. MHOA Report Out
- IX. Meeting Closure

Approval of November 2024 meeting minutes;
Regional Position Approval minutes

Announcements and Reminders

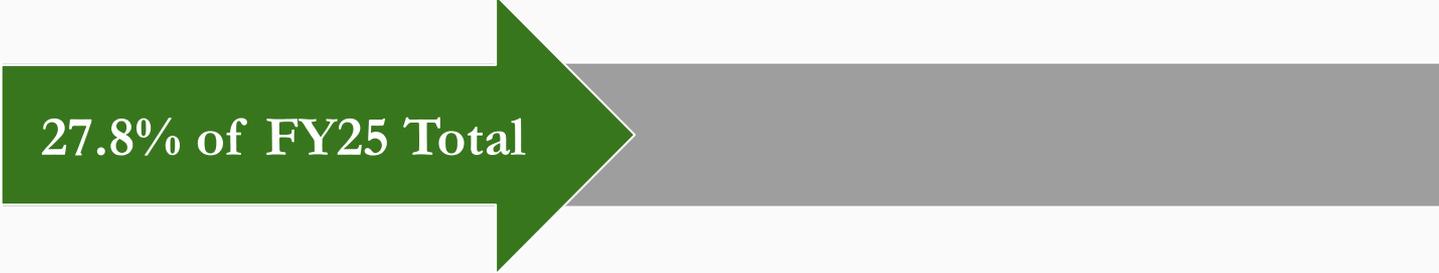
Welcome, Kristen!

NC-8 Regional Public Health Nurse

Announcements and Reminders

First triannual PHE report is complete:

- \$533,971.62 FY25 contract total
- \$148,519.40 spent to date (July 1-Oct 31)
- \$385,452.22 remaining



27.8% of FY25 Total

Announcements and Reminders

COVID-19 test kit PO has been placed

- Communities will be notified once received by Norwood
 - Work with Jen to schedule a pickup appointment
 - **Please note:** state contract expires 12/31/24

Announcements and Reminders

TURI Funding Opportunity: **Toxics Use Reduction Grants**

- Deadline: December 20th, 2024
- Funding timeline: Winter 2025-Summer 2025
- Average award: \$20,000-\$30,000
- Municipalities encouraged to apply

MRC Updates

- ORA Grant application to be submitted this week
- Working on training for 2025
 - Town training spaces
 - MRC trainers
 - 4AB Training opportunities
- NACCHO Preparedness Conference and MRC Workshop

Regional Staff Updates

Regional Staff Updates: PHN Onboarding

Week 1	Onboarding & Integration	Administrative setup, introductions, and foundation knowledge acquisition
Month 1	MAVEN Training & Community Engagement	Dive into MAVEN, start community outreach and shadowing
Month 2	Case Investigations & SOP Development	Start hands-on case investigations, refine SOPs, and engage with community health events
Month 3	Wrap-Up & Advanced Training	Complete foundational coursework, finalize case study, and prepare for full role transition

Regional Staff Updates: Epi Hiring Next Steps

Regional Epidemiologist Job Ad Posting Locations:

- MMA
- MEHA
- MHOA
- Handshake
- Idealist

Application Deadline: **Monday, December 16, 2024 5PM EST**

Regional Epi Hiring Subcommittee Next Meeting: **Thursday, December 19, 2024**

Regional Staff Updates: Contractor Support

Inspection Support Category	Chosen Contractors for Quotes
Food Protection	<ol style="list-style-type: none">1. MoJin Solutions2. ALSCO Food Check Group3. Berger Food Safety Consulting
Housing	
Title 5	<ol style="list-style-type: none">1. Landtech Consultants2. Mill River Consulting3.

Regional Inspector Associate (RIA) Regroup

- Evaluate RIA next steps
- If rehiring, determine optimal capacity: 0.5 vs. 1.0 FTE
 - Assess demand based on contractor utilization
 - Identify key areas for support and workload feasibility

FPHS Review

FPHS Review - How we got here

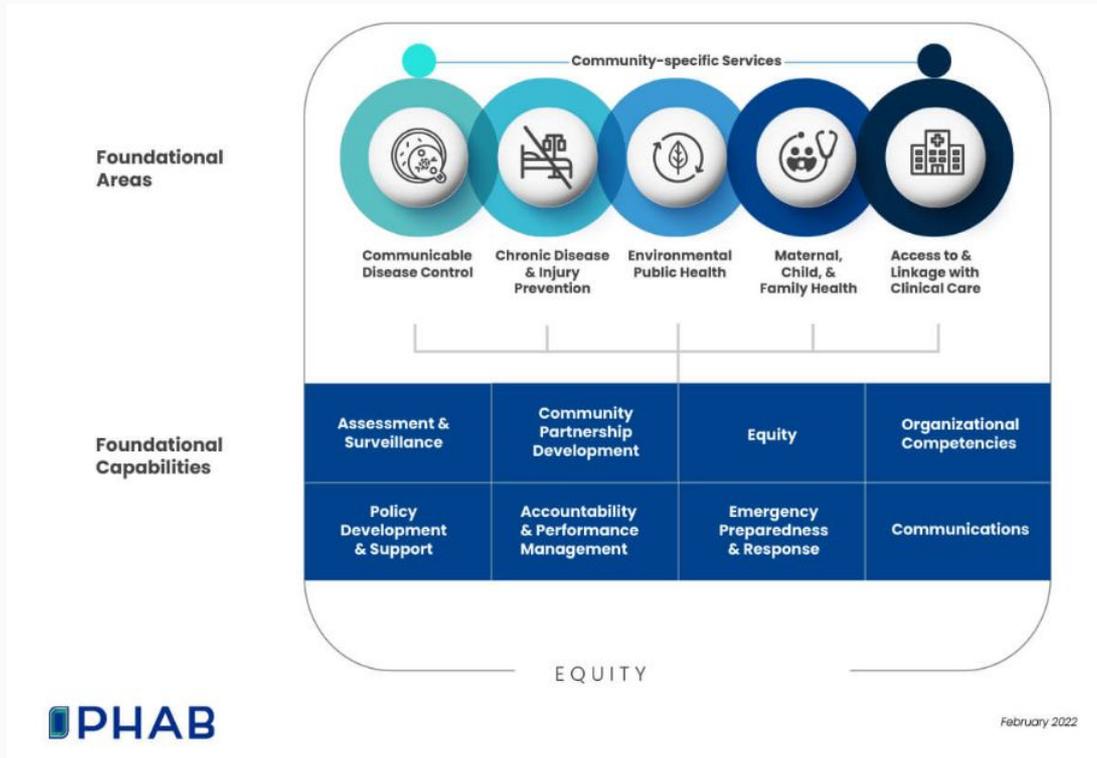
The 2019 Blueprint for Public Health Excellence



"To improve, the local public health system must first have clear, comprehensive, uniform, and quantifiable goals. **The nationally accepted FPHS, a set of cross-cutting capabilities and program areas that all health department should have, is best suited to elevate standards in Massachusetts.**"

FPHS Review - How we got here

The Foundational Public Health Services framework defines a minimum set of public health services that must be available in every municipality.



The goal of FPHS Review is to learn **what services are available** within each community (either through local public health or entities) and to see what exists in Massachusetts local public health. This is not an assessment but rather an information-gathering and review process.

What will FPHS Review look like?

Starting in January 2025, the FPHS Review will be a structured data collection and planning process to document existing Massachusetts local public health resources and services.

Data will be collected in two places for each municipality:

- **The Cost Tool** *(hosted by Excel via Sharepoint)*
 - Collates information on the resources (ex., labor, revenue, contracts, etc.) each local health entity is spending on FPHS-related activities.
- **The Service Delivery Tool** *(hosted by Excel via Sharepoint)*
 - Captures current services provided, services shared, and overall capacity and staff expertise to fulfill FPHS across SSAs and their participating municipalities.

What will FPHS Review look like?

Pre-Review		Review				Post-Review
November	December	January	February	March	April	May
Introduction to FPHS for SSCs	LBOH Monthly Webinar	Introduction to FPHS For Municipalities	Introduction to Service Delivery tool for LPH			
		Introduction to Service Delivery tool for SSCs	Service Delivery tool Completion			SSA Meeting to review Service Delivery tool Results
			SSA Staff Service Delivery tool completion			
			Introduction to Cost tool			
			Cost tool Completion			

What types of FPHS support will be available?

BME Point of Contact

Host webinars, meetings, and SSA meetings, Monitor tool completions and Respond to and triage requests for assistance.

MHOA Subject Matter Experts

Attend required webinars and trainings, and Respond to requests for assistance by assigned topic area



SSA Shared Service Coordinator

Complete the Service Delivery Tool, Attend required webinars and meetings, Monitor tool completion, and Triage requests for assistance

OLRH Program Coordinator

Share contacts of TA Support Teams, Attend required webinars and trainings, and Triage requests for assistance.

Planning to Complete the FPHS Review

We want to ensure everyone is aware of the timeline, commitment, and data that we will be asked to contribute in the coming months so capacity can be managed.

- Who in your municipalities will you need to work with, or connect us to, to help compile this information?
 - How can we support making these connections now so the lift is lighter in January?
 - What other questions do you have?

Additional resources with specific information about the types of documentation required will be shared in the coming weeks.

Introduction to FPHS for Health Directors

Save the Date: January 14th, 3-4PM

- BME will send a calendar hold & share additional resources

Please also attend the LBOH Webinar on **Tuesday, 12/3 at 3PM** for more information on FPHS

FY25 Budget Discussion: CTC

CTC FY25-FY26 Funding Snapshot

FY24 Rollover
\$220,876.90

FY25 Voucher Payment
\$100,000

FY26 Voucher Payment
\$170,000

Spending Risk
Regional Public Health Associate
Salary & Fringe (FY25-FY26)

MIN: \$166,203.69

CTC Project Possibilities

~~Additional Staff~~

Regional CHA/CHIP

Tabletop Exercise Series

All funds must be expended by June 30th, 2026

CTC Funding

CHA or Similar Assessment Options

- Use of funding for such this option need not be exclusively regional
 - Regional strengthening & collaboration is still highly encouraged
 - Funding divided by individual community (\$26-27k) likely insufficient for a major community health assessment and/or improvement plan
 - A region-wide assessment with individual community report-outs and data analysis could optimize this funding
 - Foundation for continued coalition programming, regional efforts AND individual communities pursuing additional grants; supports future accreditation projects

CTC Funding

Regional Emergency Communications Plan  Tabletop Exercise

- **Leverage regional planning agency or similar to develop coalition-level emergency comms plan**
 - Develop a step by step process of how information will be received by the coalition and converted to effective communication which can be utilized by the end user. Examples of communication include:
 - Order to cancel outdoor activities
 - Boil water orders
 - Mass vaccination
 - Tick safety alert
 - Include SOP for mobilization of the Medical Reserve Corps (MRC) and engagement of relevant municipal partners

PHE Work Plan Review

PHE Work Plan Review

Goal: Reassess objectives and timelines involving Regional Inspection Associate

- Performance Standard 1: Enhance staff capacity to effectively meet mandated inspectional requirements and enforce regulations, in alignment with the Performance Standards for Local Public Health
- Performance Standard 3: Improve inspectional requirements and enforce regulations, in alignment with the Performance Standards
- Sustainability 1: Explore opportunities for expanded sharing of services

Community Updates

Adjournment

Next Meeting

January 6th, 2025 (virtual): 11AM-1PM