

Buckland Board of Health  
Meeting Minutes  
June 12, 2019 7:00 p.m.  
Buckland Town Hall

## **AGENDA**

1. Open the meeting.
2. Health Director's report.
3. Review May minutes and approve.
4. Nuisance burning in village.
5. Green burial/private burial plot requirements.
6. SAPHE endorsement.
7. Short term rental permitting options.
8. Update: Clesson Brook roosters.
9. Open and process mail.
10. Any other items not reasonably anticipated by Chair 48 hours prior to meeting.
11. Public comment.
12. Adjourn the meeting.

## **ATTENDEES**



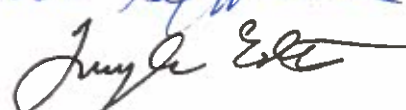
Richard Warner, Chairman  
Terry Estes, Member  
Marti Taft-Ferguson, Member  
Andrea Crete, Heath Agent, FRCOG  
Mary Bolduc, Board Clerk

## **MEETING**

1. Open meeting - Meeting opened at 7:05 p.m
2. Health Director's Report -
  1. Report on licensing of short term rentals led to discussion which included:
    1. Some districts are not licensing; not state mandated to do so.
    2. MGL Ch331 stipulates BOH's can have own regulations. There is no state mandated inspection.
    3. Taxes on rooms per DOR.
    4. Andrea reported short term rental facilities will be required to register with the DOR and the registry will be available online. It will thus serve as a "directory" to locate short term rentals in Buckland.
    5. Marti added that it is a consensus among area towns that no real decisions be immediately made regarding licensing of short term rentals.

6. Short discussion on whether or not fines could be levied for not registering.  
However, since registration is state requirement, town would have no authority to impose fines.
7. Terry suggested we wait for next meeting or two to make any decisions regarding short term rentals.
3. Review May minutes and approve - May minutes were reviewed. Rich moved to approve. Marti seconded. Vote to approve unanimous.
4. Nuisance burning in village - Letter was received from Attorney Alan Seewald to attend a Buckland BOH meeting with or on behalf of his client regarding nuisance burning in village, wood smoke, etc. Will respond to Atty. Seewald and confer with Town Administrator and Town Counsel for advice on proceeding.
5. Green burial/private burial plot requirements -
  1. Subject was recently brought to light in May for Buckland resident whose burial was requested to be green. Buckland does not currently have green certified cemeteries.
  2. Determination is made by cemetery association(s). Rich suggested that BOH take steps to get Buckland cemeteries certified.
    1. Series of soil tests need to be conducted with a time frame of several weeks for completion of tests and results.
    2. Short discussion of other factors involved in green/private burial requirements, other local cemeteries already certified, and state regulations.
6. SAPHE - Discussion for support of State Action for Public Health Excellence (SAPHE) Program (H1935/S1294)
7. Short term rental permitting options - Covered in discussions of Agenda Item #2
8. Update, Clesson Brook Roosters - Private nuisance between neighbors. Send letter about select board determination, no action.
9. Open and process mail - Mail opened and processed.
10. Any other items not reasonably anticipated by Chair 48 hours prior to meeting - Terry inquired about a contact person regarding stove replacement program.
11. Public comment - N/A
12. Adjourn the meeting - Marti moved to adjourn. Rich seconded. Vote to adjourn unanimous. Meeting adjourned at 8:35 p.m.

Submitted MLB 7/10/19

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## Establishing the State Action for Public Health Excellence (SAPHE) Program

Please support H1935/S1294 by Representatives Kane and Garlick & Senator Lewis and dedicate \$1,700,000 within line-item 4510-0100 for the SAPHE Program

H1935/S1294 will advance the goals identified by the Special Commission on Local and Regional Public Health by:

1. **Ensuring that all members of the local public health workforce have access to essential training.** Directs the Department of Public Health to hold the Foundations of Public Health Course free of charge at least four times a year in geographically diverse areas of the state.
2. **Creating an incentive grant program to support more effective and efficient delivery of services by increasing sharing across municipalities.** Creates the SAPHE Program, a grant program that incentivizes health departments to adopt best practices including workforce standards, data reporting, and sharing of services across municipalities to increase capacity and ability to meet statutory requirements.
3. **Moving Massachusetts toward national standards for a 21<sup>st</sup> century public health system.** Directs the Special Commission on Local and Regional Public Health to determine and assess a foundational standard for local public health services in Massachusetts in alignment with national standards.



The 25-member Special Commission on Local & Regional Public Health, created by the legislature in 2016, includes representatives of the legislature, local public health workforce, Executive Office of Administration & Finance and other executive branch agencies, MA Taxpayers Foundation, MA Municipal Association, health care providers, and academia. The Special Commission released an interim report in May 2018 and will release its final report in Spring 2019.

### CHALLENGES OF THE LOCAL PUBLIC HEALTH SYSTEM

Massachusetts has 351 boards of health at the municipal level that provide many of the core public health protections that we all rely on:

- Ensuring food safety in restaurants and public kitchens
- Ensuring the safety of children's recreational camps
- Preventing the spread of communicable disease including tuberculosis
- Ensuring municipal readiness to respond to potential public health emergencies
- Enforcing tobacco and lead regulations
- Responding to reports of housing code violations
- Ensuring proper installation of septic systems
- Monitoring water quality at public swimming pools and beaches

The local public health system faces significant challenges meeting statutory responsibilities which include:

- **Inconsistency across municipalities.** With no recommended funding levels, municipalities with the same population have widely varying levels of staffing and quality of services.
- **Small towns struggle.** Of the 105 towns with fewer than 5,000 residents, 78% lack full time staff and 58% have no health inspector. Of western Massachusetts communities with little or no staff, 22% don't keep records of reportable diseases, compared to 1.6% of metro Boston communities.
- **Variability in staff credentials.** The education levels and credentials of local health department staff members vary widely, with no current standards or requirements.
- **Shared services proceeding slowly.** Efforts to promote sharing across municipalities, which has been shown to increase capacity, have proceeded slowly and federal funds to support collaboration have dried up.
- **Inconsistent data reporting.** Compliance with mandated data reporting to the state is inconsistent across municipalities, creating difficulty in assessing the ability of Boards of Health to meet statutorily required services.

For more information, contact Melanie O'Malley, Massachusetts Public Health Association, at: [momalley@mapublichealth.org](mailto:momalley@mapublichealth.org) or (857) 302-7238.