



Meeting Minutes: Mohawk Area Public Health Coalition Steering Committee			
Date	July 20, 2015	Location	JWO Transit Center 12 Olive St Greenfield, MA Room 104
Time	4:30-6:30 p.m.	Facilitator:	Carolyn Shores Ness, Co-Chair
Duration	2 Hours		

ATTENDEES:	
Duncan Colter, Ashfield BOH	Norene Pease, Shutesbury BOH
Mike Friedlander, Colrain BOH	Donna Gibson, Williamsburg BOH
Carolyn Shores Ness, Deerfield BOH	Doug Telling, Charlemont BOH
Nicole Zabko, Greenfield Health Director	Gina McNeely, Montague Health Director
Deb Coutinho, Shelburne BOH	Flora Sadri, Northfield BOH
ABSENT:	
John Hillman, Leverett BOH	Nina Keller, Wendell BOH
FRCOG STAFF:	
Tracy Rogers, Mark Maloni	GUESTS:
	Michael Nelson, DPH; Gail Bienvenue, DPH; Richard Calizewski, Deerfield Health Agent; Charlie Kaniecki, DPH (ret.)

Agenda Items	
1. Welcoming remarks/ agenda/introductions	Called to order at 4:37 p.m.
2. Review/approval of June 15, 2015 meeting minutes	Deb moved to accept the minutes from June as written. Seconded by Doug. Passed unanimously.
3. Roundtable updates	<p>a) <u>Vaccine Advocacy</u>. Carolyn has contacted, and left messages for, Bob Marrion, and has not yet heard back. Group hopes for some free vaccine, but notes that if not free, it would be nice for municipalities to at least be able to get the state rate for all vaccine, not just youth doses.</p> <p>b) <u>Sharps Disposal Mini-grant</u>. Underway. Outreach conducted to all county police chiefs. Nicole encourages boards to follow up. <u>Carolyn will talk with John Paciorek to ensure he brings it up at the July FC Police Chiefs Association meeting.</u></p> <p>c) District Health Officer position at DPH. No definitive answer as of yet as to whether or not Charlie Kaniecki's position will be filled.</p>

	<p>Discussion of the fact that Charlie’s position was a fallback that was immensely helpful and necessary, particularly to smaller communities that do not have full-time health agents. Charlie warned that the goal of his position was never to replace the need for local board and community capacity, and communities should be working to not need a position like the one he filled. Charlie also noted that tended to work 24/7, and while it was ok for him to be that available, the reality is even if the position is filled, it wouldn’t look the same. It is likely that if the position is filled, it will be more geared towards larger institutions (prisons etc.), and not so much towards municipalities. Group still feels the need to articulate to the state their thoughts on what the position offers the region. Charlie offered to sit down with people for a bit to flesh out what he did. <u>Norene moved to generate a letter to DPH on region 1 district needs and thoughts. Seconded by Carolyn. Passed unanimously.</u></p>
<p>4. DPH Updates</p>	<p>a) All updates pertain to HMCC and BP4 deliverables. Michael deferred to remainder of agenda, and will fill in gaps as needed.</p>
<p>5. Old Business a) Staff reports b) BP3 Completion report c) Health and Medical Coordinating Coalitions</p>	<p>a. Staff report as written, no questions. Update on new hire. Greg Lewis, will start the 27th of the month. Recent MRP grad with an interest in climate change and hazard mitigation. Great technical and soft skills. Excited to have him on board.</p> <p>b. BP3 is complete, all deliverables achieved and submitted. Onward to BP4!</p> <p>c. HMCC development continues. Note the overlap between coalition deliverables and HMCC deliverables. Big task for the foreseeable future is governing body development. RFR out to bid to a third party contractor to facilitate the process. Questions on representation and voting rights will be addressed. In the future BPs, budget allocations will be decided upon by the board, not DPH, so PHEP coalitions should be at the planning table to represent, and should also be considering who can represent on the governing body in the next year(s). This will not just be another meeting to attend, but will likely require some clear communicating and coordinating with Mark and other regional coalitions. The PHEP reps will need to be able to put in some time beyond meetings. An initial convening will be held in the second week of September.</p>
<p>6. New business a) Review of BP4 Deliverables b) Agenda Ideas for BP4 Program Year c) Election of officers for BP4</p>	<p>a. Review of BP4 Deliverables: i. Deliverables this year are not very onerous to allow for coalitions to participate in the formation of the HMCC structure. ii. <u>Projects</u>. One is an HMCC-level collaborative project that DPH will take the lead on. The other project, proposed at</p>

the last WAG meeting, is to continue with the closed pod project we collaborated on with 1C in the last budget period. Our part would be to finish up the closed pod project planning with Stoneleigh-Burnham School, and identify other vulnerable population partners to approach. Moved by Norene, seconded by Gina, to accept the WAG proposal for a region 1 effort to further closed pod planning. Passed unanimously. Mark will work with Mary to ensure the Project ID form is submitted by deadline.

- iii. Trainings. Again, DPH will take on some of the work this year to organize regional and multidisciplinary trainings on ESF8. The other deliverable is to document NIMS and ICS trainings in all member communities by the end of Q1.
- iv. Drills and Exercises. The same web-based and EDS drills we do regularly. HHAN, staff activation, site notification, and throughput. Assist DPH in the coordination and publicizing of a series of workshops that support the efforts of the HMCC model.
- v. Technical Assistance. EDS reviewing for the year. Mark recommends a focus on communications planning, but each EDS group will certainly have the ability to set some priorities for plan continuous improvement.

b. Agenda Ideas for BP4 Program Year

- i. Social media and emergency preparation, response, recovery. This idea is augmented by likely regional JIS/PIO work, and the WRHSAC re-rolling of their online training series. This also dovetails with communications planning for EDS.
- ii. Volunteers. Particularly if no flu clinics, how to keep them engaged? What can we offer to volunteer bases over the year to keep them in the loop and feeling they are offering meaningful service? What can we do to get new volunteers?
- iii. Well tagging initiative with the GPS units acquired last year. This could be something we do to pull volunteers in?
- iv. PERLC's. A wealth of stuff offered through them. Review, overview, selection of some ideas from the PERLC's.
- v. NIMS and ICS training offered in the region.

	<ul style="list-style-type: none"> vi. <u>Overview of DPH supports and resources</u> – who to call; office of local and regional health; bureau of environmental health, etc. vii. <u>Trigger checklists</u> – when do incidents trigger a public health response? <i>(Note to Mark and Greg – this might tie in with Drexel U planning guide)</i> <p>c. Election of officers for BP4.</p> <ul style="list-style-type: none"> i. Brief discussion of what chairing or co-chairing entails. Nicole and Carolyn are willing to continue serving, and are willing to cede the seat(s) to others if anyone wishes to serve. Noted that having Nicole serve is advantageous for signing documents, etc., given the proximity of her office and COG office. <u>Moved by Norene to nominate Carolyn and Nicole to co-serve for another term.</u> <u>Seconded by Mike. Passed unanimously.</u>
7. Business not reasonably anticipated 48 hours prior to the meeting.	a) None
8. Goodbye to Charlie Kaniecki.	Adjourned meeting first, then held informal goodbye with reminiscences and appreciations for Charlie.
9. Wrap up and adjourn.	Deb moved to adjourn. Seconded by Doug. Passed unanimously. Meeting adjourned at 6:10 p.m.