

BOARD OF HEALTH MINUTES  
JUNE 29, 2020  
TOWN BUILDING- COUNCIL ON AGING

The meeting was called to order at 5:40 p.m. Present by remote roll call were Susan Green (SG), Chair, Arne Soslow, M. D. (AS), John G. Schuler M. D. (JS), Robert DeFrancesco, D.MD. (RD), Brian McNamara (BM), Julia Junghanns, (JJ) Director of Public Health, Ruth Mori MSN, RN (RM) Public Health Nurse/School Nurse Leader , Darren MacCaughey, (DM) Health Agent/Sanitarian and Patti White Department Assistant

SG: Roll call to open meeting: BM - yes, RD - yes, JS - yes, AS – yes and SG – yes

SG: In compliance with revised Open Meeting Law requirements, we will live stream the meeting on WayCAM, Public Comments will be received by phone at 508-358-6812 for this meeting. The phone number will be active during the public comment portion of the meeting. Thank you in advance for your patience; we intend to address all calls that come in during the public comment period.

**5:30 p.m.      Animal Keeping Application and hearing to keep chickens at 4 Dairy Farm Rd. Owner Scot Furlong and Amelia Furlong**

The Furling family are requesting a permit to keep 6 hens, no roosters, they will be using an existing shed as a coop. They have notified their abutters and the green cards for return receipt have been received. We have received updated plans with distances to lot lines and abutting residences. JJ did a site visit and reviewed the location.

BM: Which abutting property is at is 104 ft. and 19' property line. SF: That is the Hamilton property at 54 OCP we have spoken multiple times and they support the project, (the Health Dept does not have a formal response from this property owner). This is a well treed lot on both areas where coop is near the property line. JS: where is the run? SF: The run is to the west of the shed 8' x 6'. JS: just 6 hens? SF: Yes that is the maximum we are requesting, these are for our daughter Amelia who wants to have the chickens.

**BM: Motion to approve the application for up to 6 chickens no roosters at 4 Dairy Farm Road, as per the drawing as sent. No comments from abutters JS: mentioned the variances? BM: inclusive of the variances for the setbacks. Second: JS. BM yes, DR yes AS: yes, JS yes and SG yes**

All in favor 5-0

**5:50 p.m.      Discuss situation and license renewals, Septage Hauler and Septic Installer for Ryan Boyd.**  
Ryan Boyd has joined the meeting. We had a board meeting where we discussed problems with Title 5 reports many months back and owners that were calling, looking for who did their reports that were never filed with the Health Dept. We have not been receiving pumping slips as well. Staff sent a letter and had a meeting with Mr. Boyd, staff felt the meeting went well, Mr. Boyd was to provide us with the outstanding paperwork,

DM: Since the meeting, Ryan provided some of the outstanding Title 5 inspections and pumping records. We have heard from realtors and homeowners that there are some additional Title 5 reports that have been done and were not filed with the Health Dept.

RB: I have all the reports and a check for the reports that will be brought to the Town Building by Wednesday. Septic pumping has been minimal this year, I have two trucks, one licensed in Wayland and one in the shop for repairs, this main pump truck has been down since February for a motor rebuild and then back to the shop and I am still waiting for parts, not much if any pumping being done. I did get the pumping slips out of the truck at the dealership. BM: how many T-5 reports are we talking about? RB: about 20, I am no longer doing Title 5

inspections, I cannot keep up with the paperwork. I have hired a Title 5 inspector and a new pump crew to start when truck is ready. JS: how long have you owned this business? RB:I purchased Butler Pumping in 2016. JS: How many other towns do you work in? RB: Holliston and Upton; most installations are in Holliston now. JS: Are you in arrears with other Towns as well? RB: yes in Weston, I am behind on paperwork. JS: Are you looking to continue to work in Wayland RB: I would like to continue the Septic Pumping in Wayland; when I purchased Butler Pumping it was much more work than I expected and I had thought the prior owner was to stay and help out. Running two businesses has become overwhelming and I am in the process of consolidating to become manageable. SG: What business are you doing? RB: My Title 5 inspector will do the inspection and reporting, I will be pumping the system for the inspection. BM: If you are doing work in Wayland, be punctual and turn in your work, it creates a lot of confusion and extra work for the office and homeowners. JS: Do you have manpower to now take care of the paperwork? RB: My Title 5 inspector will just be doing just that part of the business, he worked for previous owner, now every Friday, even if not paid, we will turn in our reports and deal with payment issues separate, to avoid buildups. I have a new pumping driver and every Friday he will drop off the pump records at the Board of Health. This driver is experienced and familiar with the local BOH offices and knows how to handle the paperwork. JS: If you continue to not submit, I would recommend enforcement. AS; what are out options? JJ: His annual license renewal is currently on the plate; we had hoped to have this resolved by now. AS: So he is not currently licensed for pumping? JJ: Renewals for the new year (July 1 to June 30<sup>th</sup>) have been sent out, he has not submitted the applications. RB: the renewal application for pumping is in the packet being submitted. JJ: We want the board's input and to put him on notice to be sure he is following the Title 5 guidelines; which state that the reports are to be filed with the Health department within 30 days from the date of inspection. We do not license him for Title 5 inspections, which is a state license. We do license him for Septic installations and Septic pumping. AS: Has the state been informed of this situation? DM: They were informed when we started having problems, I called several towns locally, Weston as well, had issues with items, glad he is turning it around. AS: What are our expectations? BM: He is to submit the packet with his renewal application along with the 20 Title 5 reports up to date, and continue to deliver them in a timely fashion; most realtors are chasing us for the Title 5 reports. JS: anything else? JJ: I think we need to follow up in a few months and see where we are at. AS: These are the terms, sort of on probation, having good faith? Let us know when he is doing a title 5 report. JJ: the report has to be submitted within 30 days. DM: If he makes a records request or file research, we ask that you provide a written request via email and we then have a record of the property to be inspected. RB: For a number of the properties, I have the records from previous title 5 inspections, if we have the records, we will send a note that we have a schedule of the time and date.

BM: follow for next meeting to be sure all was received.

**6:00 p.m.        Human Relations Service update of work this year – Mark Kline,(MK) Psy.D, Executive Director and Lindsay Steinsieck,(LS) Psy.D. Associated Director**

Mark Kline: Has been involved with meeting with Wayland BOH for up to 20 years, We are both clinical psychologists, this is my first year as director, we service the towns of Wayland, Wellesley and Weston. Board of Health funding is essential for access to services for Wayland residents, just the three towns. Many people from other towns are asking for assistance. The problem with mental health care, is that many are in need. We are providing services to all residents. Many days we are in zoom meetings from 8am till some evenings. March 12, was start of problem for person to person work. The HRS campus consists of 2 old houses, with beautiful grounds, where phycologists and clients can walk the property as they talk. It was difficult to move to the telehealth system, we had to learn to access the tele-health portal, purchase computers, get them set up and obtain experienced and senior clinicians. Some have 10 to 20 years of experience. It was a challenge to work on getting a tele-health portal and setting up zoom hours. Hours were down a bit in March, but rebounded, and telehealth has a lot of applicability, and is working for some better than others. This approach is viable as long as insurers reimburse for telehealth. We are hoping the Governor will support the program. Many staff are older and many clients are vulnerable. They have developed new Covid protocols. We have community support forums, and we are reaching out to residents. We have many parents of elementary

school children and parents of varied ages of high school students. Many are for covid related situations, taking care of survivors, hoping to get a survivor group and how to handle the grief for losses during covid. There are tremendous challenges for the schools. We provide consultations of staff and emergency psychiatric services to the schools.

Our projection is that fy 20 hours will be same as fy19, with a short fall before getting telehealth started. They are a town provider for three towns, any person in those towns will be provided with service regardless of ability to pay. They will see people for as little of \$5.00 per hour. As an overview value of services, there is a shortfall this year of \$65k. They do not expect the town to cover the full value, grants and fund raising are in place to cover these shortfalls. The funds from towns guarantee town services and funds from the Metrowest Health foundation and Wellesley Covid 19 fund.

AS: how are you handling new intakes? LS: the intake process was started by phone call, triage is done by the Sr. clinician. Questions are asked; what are needs, some paperwork is involved, (a reduced fee is identified), demographics. Information is brought to the intake meeting, and a team discusses the cases and assigns cases; what has changed, signing of paperwork, electronically prior to treatment. AS: face to face with trouble school student? MK: It's always done by phone by intake workers, licensed psychiatrics to start the process. AS: recommends the current rate of finances until we understand future of town support. MK: We appreciate your understanding. JS: The numbers have been stable over the last few years, MK felt that fy18, looks similar. We were doing counseling for Babson College, that program was skyrocketing and we could not fully support the three towns, we were not as available as we wished. LS: last year were the highest Wayland numbers. JS: what is the ratio of students to adults in Wayland? LS: 44 hours for sped plans, the majority of new cases this year were under the age of 11. MK: of our 1143 direct service hours, probably 800 to 900 hours were for students. JS: the other questions we have, kids junior high and high school, is it drug and marijuana related? MK: my perception as consultant, vaping as ubiquitous, huge issue for staff. Part of the evaluation we ask those questions, is there a substance abuse issue? We will bet a substance abuse specialist. We can assist the families to understand the issue. JS kids under 18k has that gone up? MK: In another town as an example, kids vaping nicotine and marijuana, parents are having a hard time. The Covid crisis has been a solution if kids are home parents know more of what they are doing. SG: last year you talked about anxiety, what is happening? MK: no doubt that there is anxiety with elementary students, there is a lot of ADHD. He is somewhat biased, as his wife is a school psychologist at HH and Claypit, working with kids to teach techniques for working in school, if school support are not working and more is needed, then to HRS, ADHD and coping problems, occasional pharmacology is needed. Covid settled some issues, but they have started to ramp up towards the end of the year. Thank you for providing this update.

#### **6:35 p.m.      Updates and discussion Coronavirus (Covid-19) situation**

RM: We continue to trend down, and as of today, we don't have any new cases. We have had an additional probable and we are still at 106 positive confirmed. We have been in contact with our assisted livings and nursing home, and they are maintaining protocols for prevention. Wayland submitted requests to DPH, to require there be ongoing testing of residents and staff in long term care. RM requested additional guidance from DPH; recommends guidance be written and disseminated, due to the additional funding that ongoing testing, be done. Without guidance from DPH the numbers will go up, this age group had equally effected everyone, there are not race/ethnicity lines here.

JS saw an interview with Fla governor, how did they keep things long term? In March they were checking staff 1 to 2 times a week, Florida assisted livings/nursing home numbers were very low due to continued testing, I believe.

AS: what is current operation for visitor rules? Each assisted living, makes their own decision, most are doing outside visits, they are starting to look at inside visiting, looking at how to keep social distancing. Residents in assisted livings are going outside more, working to provide some normalcy. AS: Are all parties, visitors, residents and staff all wearing masks? RM: if they are going out of their unit, I have been informed that residents are

masking, and staff and visitors. RM: currently managing the maven myself, working with the Town Administrator if we need additional support, community nurses are on vacation as of last week, but will assist. In the fall they will be back in the school. We are working to develop ongoing support for Covid needs. JS: what are the contingency budget for finances? Rm: we have Covid 19 related funds from the Cares Act, we can utilize those funds to ensure coverage. JS: PPE for schools? RM: the PPE for schools is coming from school budget. Through grant funds we have obtained PPE for nurse's offices, including gowns, n95s, pedi surgical and adult for health rooms. We are purchasing goggles, we will be meeting with Arthur U for other items, to be sure what is being purchased for schools. AS: Are the nurses comfortable going back into a school setting? JJ: So far everyone is returning and no one is retiring. JS: They are seeing that transmission is lower in schools. SG: state school opening plans say that. RM: when you read the school opening plan, there are numerous reports regarding the pediatric populations. That was just sent out. JS: state asks for isolation room at each school. RM: we are part of the team, the WHS nurse who is retiring has identified a room at whs. Arthur will be working with nurses, they are great Covid info resources. Any rooms chosen I will make sure that the nurses and I will review them. There are many rooms that may not have windows, relating to air quality. SG: separate rooms for seasonal flu? RM: the dept. of elementary and secondary education, is just providing guidance for how we might manage a potential positive and quarantine, that info will be coming soon. The idea is to have a coordinated response state wide. SG: one probable case? RM: individual antibody tested, says they have antibodies. They are called and questions are asked, any probables are ones we know about, clinical confirmed. The bulk of probable are antibody. Sg; until you resolve the case with that probable, it will be active? RM: We are not able to take them off the radar, we need to communicate similar to confirm. SG; read yesterday with advanced contract tracing in MA still only 50 % of the people are being reached, that is not great news. Most of the individuals are residents, I think we have a more personal touch, as opposed to just random people handling this job from the state. We are fortunate to have our trained Community Health Nurses.

#### **6:45 p.m.      Updates and discussion on Governor Baker's Phased reopening plan**

JJ: we now have the recommendations from state regarding school reopening guidance. A team of people, will meet with the School Superintendent to begin discussions. RM, JJ, AS, JS and LM to discuss summer programs and fall school opening. Wayland will submit a report to the school committee. RM: there will be a discussion. JJ and Ruth are reviewing through the document. JS: it will be a dry run for the schools with camps. RM: we are just starting camp inspections now, this may be a precursor; camps outside, schools inside. We all think camps will assist with setting up for school reopening. JJ: will advise of a time for our Wednesday meeting. RM: additional guidance will be forthcoming from either DPH or school/state. JJ: the meeting for schools is not a board meeting but we can have several board members that can attend. SG: any other phased reopening? JJ: we have our intern working on reaching out with the local businesses. I am also reaching out to a couple of the other inters that were suggested. We are getting lots of phone calls, questions and complaints, it's taking a lot of our time. Some of the work is following up with restaurants regarding indoor dining/questions, and doing site visits. JJ; we have received some complaints, we reach out to find out the details, we educate and reference the guidance and protocols at this time we are giving verbal warnings, some cases are he said – she said. AS: what are issues? JJ: it seems like every day there is a complaint. Calls come in, Patti determines what the issue is, then usually either Darren or I speak to complainants, then call business, they call back and sometimes it involves more. Site visits, follow ups etc. AS: Can we use interns, can intern assist with that? AS; is there a trend of complaints or anyone else who can handle? JJ: I like to know what is happening in the community, and if I do return a call, they usually listen to me. People are getting out of the house now, and thinks look different

then before. BM: more than one per day? It really varies. We have gotten many calls from camps, they have a lot of questions, Ruth and I are working closely with camps and pools in town.

6:55 p.m. General Business  
Approve bills and minutes there were none.  
Set next meeting dates July 6<sup>th</sup>, (school meeting 71) 5:30 p.m.

7:10 p.m. AS had left the meeting.

7:00 p.m. Topics not reasonably anticipated by the chair 48 hours in advance of the meeting if any

7:10 p.m. Public Comments phone are open to public comments

**SG: Motion to close the meeting, second BM roll call BM yes js yes rd yes sg yes.**

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