

March 11, 2025 Meeting Minutes

11:00 am - 1:00 pm EST

Virtual: <https://us06web.zoom.us/j/87533291697>

Voting members in attendance:

Kristel Bennett, Billerica (joined late)
Donna Greenwood, Chelmsford (partial attendance, virtual)
Shannon Gillis, Tewksbury (virtual)
Kerri Oun, Tyngsborough

Non-voting members in attendance:

Cynthia Baker, BME Strategies (virtual)
Haleigh Schultz, BME Strategies
Darcy Beall, Chelmsford
Taryn Angel, Chelmsford
Ashley Pavlakos, Regional Public Health Nurse
Angela Lemire, Tyngsborough

Non-member attendees:

Janice Chen, BME Strategies (virtual)

I. Opening

3/4 voting members present, quorum was met.

Motion to start the meeting

Kerri Oun made a motion to start the meeting. Shannon Gillis seconded the motion.

Billerica: Not Present

Chelmsford: Y

Tewksbury: Y

Tyngsborough: Y

All in favor.

Haleigh Schultz called the meeting to order at 11:07 am.

II. FPHS Review Check-In with Janice Chen

Janice Chen, NEPHA's FPHS Contact, joined the coalition for an open discussion about the FPHS Review process and a reminder of upcoming deadlines. Should communities need assistance, Janice is available for 1:1 support. The FPHS Cost Tool is due on March 14th, and the FPHS Service Delivery Tool is due on April 18th. Haleigh Schultz will share Janice's scheduling tool and cell number to coalition members for any support or follow-up. An additional suggested completion timeline for the Service Delivery Tool can be found in the slides.

Donna Greenwood asked how different expenditures should be allocated across FPHS areas when entering 'other costs' information. Janice recommended using your best judgement. For example, if costs are for day-to-day operations, the expenditure can be classified as "Organizational Competencies." Donna asked whether each line item within subaccounts needs to be broken out for FPHS allocation. Janice said no – high level estimates are fine for FPHS allocation.

In preparation for completion of the Service Delivery Tool, which is due on April 18th, Janice recommended scheduling time for a 1:1 meeting in early April. Additionally, as the SSA will meet with the BME and OLRH team in May to review the results of the FPHS Review, municipalities are asked to consider what data they would like to see. Folks are invited to send requests to Janice.

III. Announcements & Reminders

A. Approval of outstanding NEPHA meeting minutes

Kristel Bennett motioned to approve the following meeting minutes: January 6th, January 9th, January 15th, February 13th, February 15th. Kerri Oun seconded the motion.

Billerica: Y

Chelmsford: Y

Tewksbury: Y

Tyngsborough: Y

All in favor.

B. MAHB Annual Certificate Program

Registration is now open for MAHB's annual certificate program. Three identical sessions will be offered on the following dates:

- April 5th: Plymouth, MA
- April 26th: Northampton
- May 10th: Marlborough

This is a PHE-approved expense for not only Health Department staff, but for Board of Health members as well. Attendance is encouraged. Session topics include: Legal Authority of Boards of

Health; Hearings, Orders, and Enforcement; Case Studies in Tobacco, Cannabis, and Synthetics; Opioid Settlement Updates; Environmental Case Studies; Governance; and more.

Shannon Gillis asked how Board members can be reimbursed. Cynthia Baker noted that each participant will select their municipality at the time of registration and should select the “Mail check to MAHB” option for invoicing. MAHB will then batch all SSA attendees for streamlined invoicing through the lead municipality.

Cynthia highlighted the opportunity for CEUs and additional guidance across important administrative functions within Health Departments and Boards of Health. The SSCs will continue to push Training & Credentialing opportunities throughout the remainder of the fiscal year. Opportunities are for coalition members, but department staff as well.

C. Upcoming Tier 2 Housing Training

An upcoming hybrid Tier 2 Housing training opportunity was announced for the Spring. The in-person component will take place on May 7th in Marlborough, from 8:00am - 3:30pm, followed by virtual sessions on May 20th, 21st, and 22nd, from 8:30am - 12:30pm. Applications are due at 5:00PM on April 2nd. Applicants will be notified on April 16th.

Some new changes have been made to the Tiered training system. There is a new registration link, which all applicants are required to fill out. For those who have applied in the past, the waitlist position will not change, but completion of the new form is required. In preparation for any Tier 2 training course, all Tier 1 prerequisite coursework must be completed ahead of the application deadline. Once registered, participants are required to attend all sessions and at least 90% of instructional time to receive credit for the course and move on to Tier 3 training.

D. MAPHN Annual Conference

The 2025 MAPHN Conference will take place in Wakefield on May 14th and 15th. Registration is now open! This is a great opportunity to leverage PHE funds, especially as the price has gone up. Registration covers attendance for both days.

IV. FY25 Planning

A. Regional Inspector Check-In

Contractor coverage: The group reported out on their progress with MoJin Solutions. Tyngsborough and Tewksbury are already receiving inspectional support. The Chelmsford team just received approval from the Board. Kerri Oun inquired as to whether MoJin could cover Tobacco inspections. They don't offer the service at this time, but have committed to training their inspectors and offering coverage in the future. Kristel Bennett requested a training for municipal inspectors for plan review. Haleigh Schultz will reach out to the MoJin team to inquire.

Hiring updates: Haleigh continues to screen incoming Regional Inspector applications. She spoke with Tyngsborough HR this morning to assess options for advertising, hiring, and multiple roles. The hiring subcommittee will meet following the coalition meeting to identify candidates for first-round phone screen interviews.

Regional Public Health Specialist role direction: In the last hiring conversation, the group was awaiting clarity on municipal staff interest in providing “Regional Public Health Specialist” (RPHS) coverage. Haleigh and Cynthia Baker were able to talk to the potential candidate, who expressed interest in taking on additional hours in a regional capacity. Haleigh cleared the idea with Tyngsborough HR. To move forward, BME will put together a short job description to be circulated internally.

Given the RPHS expansion role will likely encompass 10 hours a week and the group’s primary need for inspectional capacity, there is still flexibility to hire a second regional inspector. The group decided to table the conversation for a future meeting as needs continue to evolve. Shannon Gillis and Kerri Oun confirmed that 10 hours a week should be sufficient to fulfill the desired RPHS responsibilities and provide adequate support to ongoing regional projects.

Motion to proceed with a part-time hourly role to backfill RPHS capacity in the coalition

Kristel Bennett motioned to proceed with pursuing a part-time hourly role to backfill RPHS capacity in the coalition. Kerri Oun seconded the motion.

Billerica: Y

Chelmsford: Y

Tewksbury: Y

Tyngsborough: Y

All in favor.

Coverage while Shannon is on maternity leave: Given Shannon’s upcoming maternity leave, the group discussed opportunities to provide additional support to the Tewksbury team. As Siobhan LaFreniere is still new to the Health Agent role, Shannon requested support for septic inspections, temporary food, pools, and housing complaints. Kristel noted that Siobhan is welcome to shadow the Billerica inspection team anytime, especially for septic. Even if the inspections are different, she can provide additional education as applicable. Kerri also offered support – Siobhan is welcome to reach out.

While Shannon is out, Siobhan will serve as the alternate voting member for Tewksbury.

Motion to approve Tewksbury alternate voting member

Kristel Bennett motioned to approve Siobhan LaFreniere as Tewksbury's alternate voting member. Darcy Beall seconded the motion.

Billerica: Y

Chelmsford: Y

Tewksbury: Y

Tyngsborough: Y

All in favor.

B. Spend Down & Budget Planning

Though the group has started the spend-down planning conversation at previous meetings, Haleigh Schultz highlighted the importance of critically assessing spending to date, taking a look at the budget, and strategizing for end-of-year spend-down. Given the unexpected hiring changes within the coalition this year, NEPHA is anticipating leftover funding. Early conversations are critical for appropriately reallocating additional funds and discussing meaningful, sustainable spending opportunities.

Term 2 just ended on February 28th. In Term 1, the group spent just under \$122,000, or 26.1% of the total grant award. Anticipated Term 2 spending is closer to \$80,000, which puts the group at a total of \$202,000, or ~43% of the total grant award. Given that the group is now in the final trimester of the fiscal year, there is a lot of planning and decision making necessary to effectively spend down the remaining 57% of the grant award. Initiating the spending conversation now will hopefully spare the usual last-minute hustle at the end of the fiscal year, especially as folks take vacation time.

Given the anticipated leftover funding, Haleigh proposed a budget modification. Haleigh walked the group through the proposed modification, which reallocates additional funding from the "Staffing" section to the "Programmatic Costs" and "Training" sections of the budget. The group proposed no additional changes or feedback.

Motion to approve the proposed Budget Modification

Kerri Oun motioned to approve the Budget Modification as proposed. Kristel Bennett seconded the motion.

Billerica: Y

Chelmsford: Y

Tewksbury: Y

Tyngsborough: Y

All in favor.

C. Spending Options and Brainstorming

In preparation for the meeting, the group received a spending ideas list from Haleigh Schultz. Haleigh walked the group through a supply request tracking tool that the group can leverage in upcoming spending conversations. The group discussed a reasonable timeline for gathering and submitting all spending requests. Requests will be due one week prior to the next coalition meeting, which is currently scheduled for April 10th. Once Haleigh receives all supply requests, she will consolidate each town's list for discussion and approval at the April meeting.

Haleigh noted that as long as the coalition has active job postings, the group can preemptively order supplies for anticipated hires, whether they are hired in FY25 or FY26. She requested that the group consider supply "starter packs" for incoming inspectional staff. Each town is encouraged to meet with their municipal nurses, inspectors, and department staff to discuss municipal supply requests.

Kerri Oun noted that ordering is easiest through Amazon. Haleigh will work on updating the spending ideas list and tracking spreadsheet with Amazon links.

V. Strategic Planning

A. Introduction to Strategic Planning

In a previous meeting with the Health Directors, the group expressed interest in learning more about the strategic planning process. Cynthia Baker walked the group through an introduction to strategic planning, outlining the process, potential deliverables, and frequently asked questions.

While it might not be realistic to pursue strategic planning in FY25, having this conversation now allows the group to plan for FY26. Given the level of collaboration and participation that a formal strategic planning process takes and Shannon Gillis' upcoming leave, it's important to have this conversation with all Health Directors in the room. This conversation is meant to provide additional information and give context to shape upcoming discussions about the group's FY26 and FY27 trajectory.

A strategic plan is a comprehensive process, and resulting document or documents, that helps an organization define its identity, its shared goals, clarify its objectives, and understand how it will work together to achieve its objectives over time (typically a 3-5 year period). How is this different from a workplan? The PHE work plan helps the coalition guide activities year to year and satisfies grant requirements. A strategic plan is higher level, and attempts to answer the following questions:

- What is the collective impact we are trying to make?
- How do we decide collectively what to focus on as a group, and when?
- How do we make sure that year to year our objectives are building on something, as opposed to coming up with something new each year?

- How can we make the annual work plan development process easier, have a guide for what we want to do, so we don't start from scratch each year?

PHE coalitions are encouraged to invest in strategic planning processes because of the value this type of project can bring to coalitions who, a couple years into the PHE grant, are still ironing out some of the big picture elements of how to collaborate, develop shared processes, and operate sustainably.

Additionally, strategic planning is an integral part of the PHAB accreditation process. PHAB is the gold standard for public health service delivery in the country, and is a lengthy process by which municipalities engage in multi-tiered community assessment, action planning, strategic planning processes, and audits of their readiness to meet specific benchmarks for operational capacity. Though going through this process as a coalition would not count towards individual municipalities' future accreditation efforts, if there is interest, it would give folks an important context for this type of effort.

Possible deliverables or components a strategic plan typically consists of the following:

- Overview of how the inputs fit together
- The mission, vision, and guiding principles are overarching
 - Mission: what you do, who you serve
 - Vision: the change you intend to make
 - GP/V: How you do your work
- How the priorities, goals, objectives, and activities align with each other
 - Priorities and Goals may or may not have a 1 to 1 relationship. 3 to 5 year goals
 - Short-term objectives to meet goals
 - Discrete activities that are accomplished within a fiscal year to accomplish objectives

How much the group would get into activities depends on the scope of the project, and starts to get into implementation. The implementation and performance management processes and cadence – this is what turns the strategic plan from a pretty document into something actionable.

Cynthia walked the group through anticipated FAQs.

- **How long does a strategic planning process take?** A full effort usually takes 6 months, but it can be condensed or extended depending on the organization's desired deliverables, capacity, or intended purpose.
- **How much time and effort is required?** Facilitators of the strategic planning process lead the information gathering, logistics, framework development, and design of deliverables. However, participation and input from the organization (and its stakeholders) is critical to

the success of the planning process. The average commitment is 2-4 hours per month during the engagement period.

- **What are the benefits of strategic planning?** Documentation, resources, and processes that increase operational efficiency, develop a shared vision for the future, enhance collaboration, chart organizational direction, and promote sustainability.

Kristel Bennett expressed interest in the process, but acknowledged that it's a lot of information. She asked whether NEPHA would have to come up with a vision right now. Cynthia noted that this would be an investment for future years and is not something that the coalition has to start right now. The process is strongest when all staff can be involved. It does not make sense to start while Shannon Gillis is on leave, and it might be beneficial to wait until anticipated regional staff are hired and onboarded.

Kristel also noted that DPH is encouraging strategic planning for strengthening coalition and municipal work, and asked if they are also standardizing or requiring accreditation. Cynthia answered not right now, but if folks are interested in exploring accreditation, BME can provide additional information. Notably, PHE funds cannot fund accreditation, but there is plenty of value.

VI. Community Updates

Kristel Bennett noted Billerica's upcoming Health Fair, which will take place on April 12th. Bethany Slack has been part of the planning team and has worked hard to put together the fair, as Billerica hasn't held one in a long time. Ashley noted Tewksbury's upcoming Health Fair on April 9th.

VII. Adjournment

The next regular coalition meeting will be held in-person in Chelmsford on Thursday, April 10th, from 11AM-1PM.

Motion to adjourn the meeting

Kerri Oun motioned to adjourn the meeting. Kristel Bennet seconded the motion.

Billerica: Y

Chelmsford: Y

Tewksbury: Y

Tyngsborough: Y

All in favor.

Meeting adjourned at 1:16 PM.

Documents referenced during the meeting:

NEPHA March Meeting Slides

Proposed Budget Modification - 3.11

NEPHA FY25 Supply Requests & Spending Planning

NEPHA Coalition Meeting



March 11th, 2025



BME STRATEGIES

Meeting Opening

Agenda

- I. Opening
- II. FPSH Review Check-In
- III. Announcements & Reminders
- IV. FY25 Planning
 - A. Regional Inspector Check-In
 - B. FY25 Budget & Spending Planning
- V. Strategic Planning Discussion
- VI. Community Updates
- VII. Adjournment

FPHS Review Check-In with Janice

FPHS Reminders

The first FPHS deadline is approaching!

To request support, please:

- Reach out to Haleigh
- Reach out to Janice or book a 1:1 appointment for assistance

Additional resource can be found in the SharePoint folder titled “Technical Assistance Resources”:

- Tool instructions and cheat sheets

Cost Tool Due:

March 14th

Service Delivery
Tool Due:

April 18th

Suggested Timeline - Service Delivery Tool

Week of 2/17 - 2/21: Environmental Public Health; Emergency Preparedness & Response

Week of 2/24 - 2/28: Access to & Linkage with Clinical Care; Maternal, Child, and Family Health

Week of 3/3 - 3/7: Accountability & Performance Management; Organizational Competencies

Week of 3/10 - 3/14: Chronic Disease & Injury Prevention; Communicable Disease Control

Week of 3/17 - 3/21: Community Partnership Development; Equity

Week of 3/24 - 3/28: Communications; Policy Development & Support

Week of 3/31 - 4/4: Assessment & Surveillance

FPHS Review Process Overview

Data Collection Period												Post Data Collection										
January				February				March				April				May						
Introduction to FPHS Webinar (1/14)				SSA-wide meeting #1 FPHS check-in (Date TBD)												SSA wide meeting #2 Discuss actionable results (Date TBD)						
Intro to Service Delivery Tool for SSCs (1/15)		Service Delivery Tool completion for SSCs (Deadline: 2/28)																				
		Intro to Service Delivery Tool for LPH (1/21)		Service Delivery Tool completion for LPH (Deadline: 4/18)																		
		Intro to Cost Tool for LPH (1/28)		Cost Tool completion for LPH (Deadline: 3/14)																		
				Intro to ISD Tool Webinar (2/12)		ISD Tool completion for ISDs (Deadline: 4/11)																

Meeting Minute Approval

- January 6th: NEPHA regional hiring discussion
- January 9th: NEPHA coalition meeting
- January 15th: MoJin Solutions quote review
- February 13th: NEPHA coalition meeting
- February 25th: Regional staff planning meeting

Announcements & Reminders

Announcements & Reminders

MAHB Certificate Program

Registration is now open for MAHB's annual certificate program! Sessions will take place 8:30 am - 4:00 pm in the following locations:

- April 5th – Hotel 1620, Plymouth, MA
- April 26th – Hotel Northampton, Northampton, MA
- May 10th – Courtyard Hotel, Marlborough, MA

Session topics include Legal Authority of Boards of Health, Hearings, Orders, and Enforcement, Governance, Case Studies in Tobacco, Cannabis, and Synthetics, Opioid Settlement Updates, Environmental Case Studies, and more!

Announcements & Reminders

Hybrid Tier 2 Housing - Spring Session

A Tier 2 Housing training opportunity was just announced for May. Sessions include:

- In-person session: May 7th, Marlborough (8:00am - 3:30pm)
- Virtual sessions: May 20th, May 21st, and May 22nd (8:30am - 12:30pm)

Applications are due at 5:00pm on April 2nd.

MAPHN Annual Conference

The 2025 MAPHN Conference will take place in Wakefield on May 14th & May 15th. More information and registration can be found [here](#).

FY25 Planning

NEPHA Regional Inspector Check-In

- MoJin Solutions check-in - how is everything going?
- Hiring updates
- Coverage in Tewksbury when Shannon is on maternity leave
 - Support requested
 - *Alternate voting member approval*

FY25 Spend Down Planning

Term 1 Expenditure:

\$121,743.65

26.1% of grant award

Term 2 Expenditure:

~\$80,500

Spending to Date:

~\$202,244

43% of grant award

Budget Walkthrough & Proposed Budget Modification

Budget Modification Approval

Supplies Walkthrough

Spend-Down Options

- Inspection supplies
- Nursing supplies
- Health communications
 - Additional translation of Community Resource Guide
- Additional training and credentialing opportunities
- Technology hardware

Strategic Planning Discussion

A strategic plan:

- Results from a deliberate decision-making process to define where an organization is going and align around a common understanding of mission, vision, goals, and objectives
- Provides a local health department or shared services arrangement (SSA), and its stakeholders a clear picture of -
 - Where it is headed
 - What it plans to achieve
 - The methods by which it will succeed
 - How it will measure and monitor progress
- Is an allowable expense of PHE funds to help SSAs further develop their operational efficiency, collaboration, and identity to support sustainability
- Is a prerequisite for LHDs seeking national accreditation through the Public Health Accreditation Board (PHAB)

Strategic plans may consist of the following components:

Mission, Vision, & Guiding Principles/Values

Strategic Priorities

Goals and Objectives, including measurable & time-framed targets

Identification of external trends, events, or other factors impacting community health

Formal Analysis of the organization's strengths & weaknesses

Implementation Plan

Strategic Plan FAQs

- How long does a strategic planning process take?
 - A full effort usually takes 6 months, but can be condensed or extended depending on the organization's desired deliverables, capacity, or intended purpose
- How much time and effort is required?
 - Facilitators of the strategic planning process lead the information gathering, logistics, framework development, and design of deliverables. However, participation and input from the organization (and its stakeholders) is critical to the success of the planning process.
 - Average: 2-4 hours per month during the engagement
- What are the benefits of strategic planning?
 - Documentation and process that increases operational efficiency, develops a shared vision for the future, enhances collaboration, charts organizational direction and promotes sustainability

Community Updates

Meeting Adjournment

Next Meeting

Thursday, April 10th

11AM-1PM

Volunteer to host?