



# Dover Board of Health

## Assessment Study

February 2022

Prepared by:



COMMUNITY PARADIGM ASSOCIATES, LLC

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Mr. Lynch has devoted more than 40 years to guiding cities and towns toward brighter futures by focusing on the efficiency and responsiveness of organizational day-to-day operations as well as highly transformational initiatives that bring communities to a new level. He served as City Manager of Lowell, MA for eight years and as Town Manager of Chelmsford, MA for 20 years. Mr. Lynch serves on Lieutenant Governor Karyn Polito's Task Force on Workforce Skills Gap, is a Senior Fellow at Suffolk University's Moakley Center for Public Management, and is an adjunct professor at both Suffolk University and the University of Massachusetts Lowell. He earned his Master of Public Administration at University of Massachusetts Amherst and his Bachelor of Science degree in Political Science from the University of Lowell.

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## **A. Scope of Project**

Community Paradigm Associates was engaged by the Town of Dover to review and evaluate the structure, staffing, and functions of the Board of Health (BOH) and to make recommendations for short- and long-term changes to improve the core public health services the Board provides the Town. Community Paradigm was asked to conduct an organizational assessment, evaluate workload and current staffing levels, evaluate record maintenance, evaluate adherence to state and local mandates, and to benchmark other similar Massachusetts communities.

The first phase of the assessment consisted of interviewing various Town officials, including the Board of Health (BOH) members, the BOH's Administrative Assistant, the contracted septic and well agents, the Town Administrator, two members of the Board of Selectmen, two members of the Warrant Committee, the Town Clerk, and two citizens recommended by the BOH, as well as the Town of Sherborn Health Administrator. The purpose of these interviews was to attain an overview of the BOH operation, to identify areas of concern, and to obtain a fuller understanding of the various functions and services the BOH provides to the community. A second interview was conducted of the Board of Health members to elicit further information and elaboration of certain questions/issues/concerns. The Administrative Assistant was asked to provide specific documents and financial data as a follow-up to the interviews and discussions. The interviews were documented by notes but were conducted with no information being attributed to any specific individual.

A survey was sent to those identified comparable communities used by Dover as well as other Massachusetts communities with similar population size, and bordering communities to Dover (not included in either of the first two categories). The purpose of the survey was to compile and analyze organizational data for benchmark purposes that is utilized within the report.

## **B. The Community**

Located about 15 miles (24 km) southwest of downtown Boston, Dover is a residential town nestled on the south banks of the Charles River. According to the U.S. Census Bureau, the town has a total area of 15.4 square miles (39.9 km<sup>2</sup>) with a population of 5,923 at the time of the 2020 U.S. Census. Dover is bordered by Natick, Wellesley and Needham to the north, Westwood to the east, Walpole and Medfield to the south, and Sherborn to the west. Dover is a predominantly residential town with many scenic roads.

Dover was first settled around 1635 and was originally part of the Dedham Grant. It was later established as the Springfield Parish of Dedham in 1748 and incorporated as District Dedham in 1784. Dover was officially incorporated as a town in 1836.

Prior to its incorporation as a Town, the area was named Springfield because it was predominantly a farming community with open fields centered around the "bubbling springs" of Trout Brook.

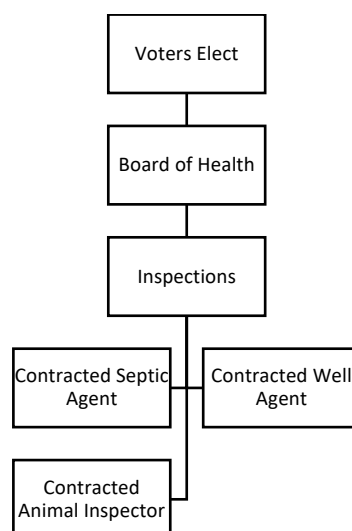
When it was incorporated as a Town in 1836, the chairman of the Springfield Parish committee chose the name “Dover” in honor of his ancestral home in England.

Dover is governed by an open town meeting and an elected three-member Board of Selectmen with an appointed Town Administrator. The Town Administrator is the chief administrative officer of the Town with general administrative authority over all departments and officials appointed by the Board of Selectmen except for the police and fire departments. Town voters elect a number of Boards/Commissions which oversee the remaining Town Departments, including the three-member Board of Health.

### **C. BOH Structure and Staffing**

The Board of Health consists of three town-wide elected members who serve staggered three-year terms. Per Dover Town Code, “the Board of Health’s duties and authority shall include, but not be limited to, those specified in M.G.L. c21A §13 and M.G.L. c111 §§26-32.” The Board of Health processes are further elaborated in the Town Code, Division 2 – Rules and Regulations, Part II – Board of Health Regulations. Local boards of health in Massachusetts are required by state statutes and regulations to perform many important and crucial duties relative to the protection of public health, the control of disease, the promotion of sanitary living conditions, and the protection of the environment from damage and pollution. The Board of Health is specifically responsible for food permits – both annual and temporary; well permits for private well owners, including water quality, installation, maintenance, and repair; septic systems and private sewage systems including installation, maintenance and repair; commercial waste haulers; sale of tobacco products; and demolition of buildings in coordination with Building Department.

The sole budgeted staff position of the Board of Health is a part-time Administrative Assistant. All other services are provided by contracted vendors: Septic Agent, Well Agent, Animal Inspector, and Visiting Nurses Association (VNA). The Board of Health also contracts with ESI Qual for food and camp compliance and permitting. The current Board of Health structure is shown in the following organizational chart:



The part-time Administrative Assistant is budgeted at 28-hours per week. However, since the inception of the COVID-19 pandemic, due to an increase in activities and in meetings of the Board of Health, sub-committees, and subsidiary committees, this staff person is averaging 35+ hours per week. The Administrative Assistant estimates she spends approximately 3-5 hours per week simply working on meeting minutes. Meeting minutes are primarily done by her from home.

The Administrative Assistant determines her weekly workload based on need. She is responsible for processing septic applications, working on covenants, burial permits (in conjunction with the Town Clerk), meeting minutes, payroll, and vendor payments. In recent months, she has also been responsible for coordinating work and office logistics for a new temporary 18-hours per week clerical staff person.

The contracted Public and Environmental Health Septic Agent has been so engaged since 2007. He is also employed part-time, as a budgeted 15-hours per week Town Engineer assigned to the Highway Department (soon to be the Department of Public Works). His current three-year contract covers the period of July 1, 2019 through June 30, 2022. The Septic Agent is on-call and used as-needed. He typically averages 20-25 hours per week on specific Board of Health duties.

The Septic Agent is responsible for review of subsurface sewage disposal systems, including soil evaluation, design plans, and inspection of construction; review of building permit applications in conjunction with the Building Department; consulting with contractors; and investigation of complaints regarding water overflows, and illegal dumping of hazardous waste. He was previously responsible for processing septic applications' paperwork but that is now done by the Administrative Assistant.

The Septic Agent is paid by the inspection as outlined in Attachment 1 of his contract with the Board of Health. Payments are either a significant portion, or the entire amount of the fee schedule promulgated by the Board of Health. As an example, the Board of Health fee for an "Alternative Gravity/Pressure System Design Review" is \$675; the Septic Agent is paid \$575 of this amount. In addition, although not specified in his contract, the Septic Agent charges the Board \$150 per hour for any extra work, such as responding to telephone queries and any other duties/work not specifically outlined in Attachment 1 of his contract. In FY21, the Septic Agent was paid just under \$62,000. For the first six months of FY22, he has been paid \$38,325.

The Well Agent is responsible for overseeing all water related issues in Town. He is responsible for reviewing permits, performing required flow tests, and conducting inspections. A 'contracted' Well Agent has been performing such duties for the past four years through a non-documented verbal agreement with the Board of Health, not a written contract. The Well Agent is on-call and typically averages 3-4 hours per week. He also fills in as the back-up building inspector in Dover. The Well Agent is employed as the full-time Inspectional Services Director in a city in Essex County, Massachusetts.

Although there is no executed contract document with the Well Agent, he is paid a significant portion of the fee schedule, promulgated by the Board of Health, and as outlined in Attachment 1 of the Septic Agent's contract. For example, the Board's fee for a "New Well" is \$575; the Well Agent is paid \$475 of that amount. In FY21, the Well Agent was paid \$16,000. For the first six months of FY22, he has been paid \$7,700.

The Dover Board of Health Animal Inspector is responsible for the inspection of barns, livestock, and waterfowl. An inspection is done annually to assess the conditions under which animals are being kept, if they appear free of contagious disease, and to check the status of disease testing and inoculation. An executed contract document with the Animal Inspector was not provided but she is paid \$3,500 per fiscal year (bi-annually in December and June) regardless of the workload and duties performed. This amount is specifically designated in the Board's operating budget.

The Board of Health has an agreement with the Natick Walpole Visiting Nurse Association (VNA), which is a nonprofit, community-based, Medicare-certified home care agency providing high quality home health, and public health programs and services to people of all ages in Dover. The VNA's nursing services include physical, occupational, and speech therapy; medical social work; home health aides; maternal and child health services; pediatric nursing; and the services of a geriatric nurse practitioner. The agency also has nurses who are certified in intravenous therapy and wound care. The agency delivers telehealth services, which encompass various technologies and tactics for delivering virtual medical, health, and education services. The VNA also provides health clinic services, which are offered through the Council on Aging to Dover's senior citizens. These include blood pressure clinics and flu immunization clinics.

The services provided by the VNA have increased with the ongoing COVID pandemic resulting in increased costs to the Board of Health beyond the regular annual fee. In FY21, the VNA was paid \$8,466. For the first six months of FY22, they have been paid \$4,233.

In compliance with the Massachusetts State Sanitary Code, all food establishments, commercial kitchens, and summer camps are required to undergo plan reviews before a food permit is issued. Commercial vendors providing food at charitable events and caterers providing food for private functions must also apply for a permit. Pending the type of permit issued, food establishments must be inspected at a minimum of twice per year, and camps inspected prior to operation. In addition, any type of complaint lodged by the public warrants an inspection. These services are provided by ESI Qual, a private company based in Stoughton, Massachusetts. An executed contract document with the ESI Qual was not provided. In FY21, ESI Qual was paid \$3,830; for the first six months of FY22, it has been paid \$3,140.



#### **D. Observations and Analysis**

The Board of Health and the administrative staff person that supports the Board has been challenged greatly with the on-going and continuation of the COVID-19 pandemic, with the sole burden of COVID falling into their purview. Prior to COVID-19, the Board of Health did not have interactions with a majority of businesses, only with businesses that they may have had statutory authority over. As the impacts of the pandemic rippled across the Commonwealth, responsibility of the Board of Health and its agents has been magnified.

The challenge with this increased capacity for regulation and authority exacerbated the normal routine operations within the staff and the Board. As previously stated, the Board of Health is required by state statute and regulation to perform specific duties relative to the protection of public health, the control of disease, the promotion of sanitary living conditions and the protection of the environment from damage and pollution. These duties include, but are not limited to:

- ✓ Records, Recordkeeping and Reports
- ✓ Health Care and Disease Control
- ✓ Housing and Dwellings
- ✓ Hazardous Waste
- ✓ Solid Waste
- ✓ Septage and Garbage
- ✓ Nuisances
- ✓ Food
- ✓ Pools and Beaches
- ✓ Camps, Motels, and Mobile Home Parks
- ✓ Miscellaneous – Pesticides, Burial Permits, Licenses for Funeral Directors
- ✓ Appointing an Animal Inspector
- ✓ Smoking Regulations

##### **1. Administrative Assistant Productive Utilization**

The Board of Health office is currently staffed by the Administrative Assistant and the temporary part-time clerical support. Prior to the onset of the pandemic, the Administrative Assistant worked 28 hours a week; and was the only employee in the Board of Health to have a set schedule. A typical week prior to COVID was 9a-3p Monday through Thursday and 9a-1p on Fridays. As a result of the COVID pandemic the Administrative Assistant is normally working 35+ hours a week. The Administrative Assistant is responsible to attend and then complete minutes for a number of meetings: a weekly COVID meeting, weekly Board of Health meetings, as well as a Water Commission meeting that is held monthly. In addition to attending meetings and completing the minutes, the Administrative Assistant serves as a liaison for the contracted agents, contractors and inspectors; triaging all the work for the agents, contractors and inspectors; processing payroll; completing all payables; maintaining the statutory records and reports; and serving as the public conduit to the Board, whether through phone calls, in person visits or emails. The part-time clerical

supports filing and answering telephone calls.

The current workload and structure create a variety of inefficiencies as the Administrative Assistant does not schedule inspections for the contracted agents. Instead, the Agents create their own inspection schedules and neither contracted agent has specified office hours. The Administrative Assistant simply acts as a conduit sharing the information with the contracted agents. This can lead to the residents feeling unsupported with their septic or well concerns/questions. With this current structure, the staff is limited in engaging with the public/residents and almost always in a reactive manner as opposed to a proactive manner. With this current workload the Administrative Assistant is also not able to participate in regional Emergency Preparedness meetings that occur monthly, nor take part in any of the educational opportunities provided through the Massachusetts Health Officer Association.

## 2. Septic Agent Limitations and Appropriateness of Contract

The contracted Septic Agent supports the Board of Health mandates and is responsible for the following:

- ✓ New Construction and Siting of Systems
- ✓ Replacement/Upgrades of Systems
- ✓ Percolation Testing
- ✓ Plan Review
- ✓ General Consulting
- ✓ Demolition and Abandonments
- ✓ Covenants and Deed Restrictions
- ✓ Title 5 Inspection Reviews

Documentation and plans are scanned and emailed (when practical) from the Administrative Assistant to the Septic Agent. Preliminary comments are provided to the applicant, and revisions requested as necessary. Once the plans have met the regulations from the Septic Agent's perspective, the recommendation for the approval is remitted to the Board of Health and discussed at a Board meeting. In addition, the Septic Agent conducts periodic inspections related to the construction and installation of a system until completed. With this current structure, there are a number of limitations:

- ✓ No ability of electronic filing for applications or ability to pay fees online.
- ✓ No plotter/printer access for emailing/scanning/printing septic plans for review.
- ✓ No coverage in the event that the Septic Agent is ill or on vacation.
- ✓ Process relies heavily on the Administrative Assistant to ensure the application is complete upon receipt, and sent to the Agent in a timely manner.
- ✓ Scheduling of the inspections is contingent upon direct communication between the Administrative Assistant and the Septic Agent.

The on-going contractual arrangement between the Board of Health and the Septic Agent is in violation of the provisions of M.G.L. c30B – the Uniform Procurement Act. The statute establishes uniform procedures for local governments to use when buying or disposing of supplies, services or real property. For the procurement of services estimated to cost more than \$50,000 per year, the governmental body is to conduct a formal, advertised competition by issuing an invitation for bids (IFB) or a request for proposals (RFP). In a bid process, the contract is awarded to the qualified bidder who meets specifications and offers the best price. In a proposal process, the contract is awarded to the offeror submitting the most advantageous proposal, taking into consideration specified evaluation criteria as well as price.

There are a number of exemptions listed in M.G.L. c30B to the procurement processes. Exemption #27 excludes “contracts or agreements entered into by a municipal hospital or a municipal department of health” [M.G.L. c 30B, §1(b)(27)]. However, in a Procurement Bulletin (Volume 16, Issue 2, June 2010), the Massachusetts Office of the Inspector General opines:

“A municipal department of health is a different statutory entity from a board of health. In order to create a department of health, a town must vote to accept the provisions of M.G.L. c111, §§26A through 26E. Upon such vote and acceptance, the municipal department of health replaces the board of health. The statute expressly limits the exemption to municipal departments of health. Therefore, contracts entered into by boards of health must comply with M.G.L. c30B.”

### 3. Well Agent Process Inefficiencies

The Well Agent for the Board of Health is a contracted agent who officially handles all water issues that are related to the local well regulation in the community. This includes reviewing permit applications, conducting inspections as well as flow tests to meet the local regulation that was updated in 2020. In addition, when available, the Well Agent participates in the monthly Water Resource Committee Meetings. Limitations to this staffing structure revolve around the residents’ access to the Well Agent. If a resident calls the Board of Health office, a message must be collected by the Administrative Assistant and then transmitted to the Well Agent, creating a potential bottleneck in customer service. The Well Regulations, and procedures and protocols are in writing, however, the flow testing process that applicants must complete is not in writing, creating an additional inefficiency and bottleneck to the residents. In addition, the Well Agent follows-up any housing complaints and assists the town’s efforts if seeking receivership through the Attorney General’s Office.

#### 4. Public Health Nursing Deficiencies

The Public Health Nursing component is currently covered by agreement with the Walpole Visiting Nurses Association (VNA). The community is assigned a public health nurse who is responsible for all communicable disease reporting and follow-up, and providing community support to residents that may be impacted by a communicable disease. In addition, the nurse supports the Town-sponsored flu clinic and conducts a great deal of contact tracing in response to the COVID pandemic as well as makes recommendations to the Board of Health on sector specific guidance in response to the COVID pandemic.

This current structure leaves a gap in the public health nursing of the community and limits the access of the vulnerable populations to this public health resource. With the addition of a public health nurse that is specific to the Board of Health, additional community outreach could occur to increase the overall health and wellness of the community. Targeted outreach to specific populations is not currently occurring – for example, blood pressure clinics for the older population and tobacco education and cessation for the younger population.

Local public health aims to create equitable, thriving and healthy environments and this would be greatly enhanced with a public health nurse housed directly within the community as opposed to contracted out. This would increase follow-up with communicable reporting and after-actions, as well as create a more robust reporting structure to the Board of Health in a more efficient and timely manner. In addition, the nurse could support the wellness of the Council on Aging community and school community with more time dedicated specifically to the BOH.

#### 5. Board of Health Funding Summary

For Fiscal Year 2022 (July 1, 2021 through June 30, 2022), the Board of Health has an approved operating budget of \$142,965. Major expenditure categories include Part-time Salaries (\$80,586), Animal Inspector (\$3,500), Professional Services (\$28,000), Water Study (\$9,000), Lyme Disease Committee (\$5,000), Hazardous Waste Program (\$4,000), and Charles River Pollution Assessment (\$5,000). Annual Town Meeting also approved four (4) revolving funds for the Board of Health:

Perk and deep hole inspection and permitting	\$40,000
Septic inspection and permitting	\$50,000
Well inspection and permitting	\$20,000
Swimming pool inspection and permitting	\$10,000

The revolving funds are funded by user generated permit fees. In FY21, a total of \$102,550 was generated in permit fee revenue. For the first six months of FY22, permit fee revenue totaled \$60,450. The revolving funds are the sole funding source for the payments to the contracted inspectors, with the exception of the Animal Inspector.

#### 6. General Observations regarding the Board of Health Role and Responsibilities

Dover is fortunate to have a full complement of elected members with a diverse, yet public health-oriented background and a desire to support the public health of the community. Much like the staff, the COVID pandemic has created an unprecedented workload for these volunteer board members, with a need to meet more frequently as well as to enact more restrictive regulations to support the public health of Dover. Board members have worked tirelessly to support the programmatic outcomes of the BOH, as well as update regulations that will improve environmental protection and water resources within the community.

However, as a policy-making Board, the Board of Health members should not be involved in the day-to-day operations and functions of the office. Currently, the BOH Chair, who is also the most senior Board member, spends significant time in the office and goes on inspections with the agents on a regular basis. The daily functions should be undertaken by the complement of staff within the office, who in turn keep the entire Board apprised of operational limitations, concerns and resident feedback. Shifting the current practice and reducing the day-to-day involvement of Board members will allow for active and meaningful dialogue at scheduled Board Meetings, as well as allow for the institutional knowledge of more seasoned members to be shared with others.

#### 7. Customer Service and Utilization of Technology

Additional observations are related to the efficiency and effectiveness of customer service from the Board of Health. With the variety of contractors in place, the response time can be a challenge to the community, especially when a resident perceives a threat to their health or environment. The current organizational structure provides few mechanisms for establishing and maintaining institutional knowledge, and current limitations in the use of technology are a barrier to exceptional customer service.

The Board of Health, similar to all other Town Departments, does not have an online permitting system nor any electronic record-keeping means to store applications, permits, documents, etc. Everything is in paper form which leads to inefficiencies in recordkeeping, document searches, and maintenance of permits, past and present. In the interviews with the Town Administrator and Town Clerk, it was relayed that the Town is undertaking a systematic approach to implementing such systems, under the auspices of the IT Director and the Town Clerk. Although not at the forefront of the project, the eventual online permitting system will include the Board of Health operations.

## **E. Community Comparison**

A survey was conducted of twenty-three (23) communities in order to ascertain the Board of Health/Health Department staffing, contracted services, and regionalized services within the respective municipality. The survey was conducted in all communities currently utilized by the Town of Dover for collective bargaining comparisons (ten communities – Ashland, Lincoln, Medfield, Millis, Norfolk, Sherborn, Sudbury, Wayland, Weston, and Westwood); Massachusetts communities similar in population to Dover (nine communities – Ayer, Bolton, Boxborough, Georgetown, Hamilton, Harvard, Newbury, Rowley, and Topsfield); and communities bordering Dover not accounted for in either of the first two categories (four communities – Natick, Needham, Walpole, and Wellesley). The complete survey results are contained in *Appendix A* of this report.

Of the 23 communities surveyed, 12 municipalities are structured as a Health Department while the remaining 11 communities are organizationally designated a Board of Health. The survey results of the twenty-three (23) communities show fifteen (15) have a three-member board and eight (8) have a five-member board. Of the eight with a five-member board, two (2) boards also appoint two additional associate members.

For comparison of staffing, contracted services, and regionalized services, the four (4) bordering communities to Dover are excluded as they each service a much larger population and have substantial regular staffing in their respective Health Departments.

Of the remaining 19 municipalities, nine (9) have a Health Agent/Inspector on staff (five full-time and four part-time), and ten (10) have a Public Health Nurse on staff (four full-time and six part-time).

Seven (7) of the communities have no contracted services according to their survey responses. Of the remaining twelve (12) communities, the contracted services include:

Animal Inspection	5 communities
Health Agent/Inspector	5 communities
Public Health Nurse	3 communities
Food Inspection	2 communities
Environmental Engineering	1 community

Twelve (12) of the surveyed communities participate in regionalized services, either through a collaborative or a Public Health Excellence Shared Services Grant. Six (6) other communities participate in some regionalized service (contact tracing, vaccination clinics, food inspections, epidemiology, and emergency preparedness).

## **F. Conclusions and Recommendations**

Dover is fortunate to have a complement of elected members with a diverse, yet public health-oriented background, and a desire to support the public health of the community; the structure of the office should reflect the same. The Board of Health has total reliance on contracted services. It is believed the Board, and the community overall, will be better served with some significant changes and additions to the regular staffing. Based upon the findings contained in Part D of this report, an analysis of peer communities as described in Part E of the report, and the professional experience of the members of the Project Team, the following recommendations are made:

- 1. Full-Time Health Agent:** The recommendation is that the duties and responsibilities of the contracted agents be consolidated into one full-time Health Agent. This full-time position would be in lieu of the contracted septic agent, the contracted well agent, and the services currently provided by ESI Qual. A full-time Health Agent would offer immediate support to the Administrative Assistant, as well as offer professional services to the community of Dover. This position would be able to meet all statutory regulations and inspections, create a more efficient practice for scheduling inspections, and provide comprehensive customer service to the residents and business owners of the community.

The full-time Health Agent would act as the primary staff liaison to the Board of Health. It is recommended the position oversee the Animal Control Inspector and office administrative staff. The position would also coordinate priorities, tasks, and activities with the Public Health Nurse (see below).

*Appendix B* contains a draft 'Health Agent' Position Description. On the Town's current salary plan, it is recommended Grade 10 (\$67,079 - \$85,629) would be appropriate in order to attract interested and qualified candidates. For the comparison communities that have a Health Agent (or similar) title on staff, the salary varies greatly from a low of \$29 per hour (\$57K per year) in Georgetown and Rowley, to a high of \$46 per hour (\$90K per year) in Wellesley. For the ten communities primarily used by Dover for comparison purposes, six (6) have a Health Agent on staff at an average of \$43 per hour (\$84K per year).

The full-time Health Agent position would be funded by the user-generated permit fees within the revolving funds. As this would be a full-time position, the question of funding of benefits would need to be addressed by the Town's administration and Board of Health.

- 2. Part-Time Public Health Nurse:** The recommendation is that in lieu of contracted services through the VNA, the Board of Health hire a part-time 25-hours per week Public Health Nurse. The Public Health Nurse would be able to hold blood pressure clinics, support flu and COVID clinics, and conduct community outreach for diabetes, mental health, tobacco cessation, tanning, arbovirus and tick-borne illnesses. This position can also support the Council on Aging, schools and overall community efforts and create a variety of public health outreach that has historically not happened in the community.





*Appendix C* provides a draft ‘Public Health Nurse’ Position Description. On the Town’s current salary plan, it is recommended Salary Grade 11 (pro-rated for 25 hours per week \$50,787 - \$64,833) would be appropriate to attract interested and qualified candidates. For the comparison communities that have a Public Health Nurse on staff, the salary varies from a low of \$27 per hour (\$35K per year at 25 hours per week) in Rowley, to a high of \$75 per hour (\$97K per year at 25 hours per week) in Lincoln. For the ten communities normally used by Dover for comparison purposes, seven (7) have a Public Health Nurse on staff at an average of \$46 per hour (\$60K per year at 25 hours per week).

The salary of the part-time Public Health Nurse can be funded through several mechanisms. The funds currently allocated in the operating budget for the VNA (approximately \$10K-\$12K) would be reclassified to the part-time salary line item. It is also recommended the Town and the Warrant Committee, through Town Meeting vote approve establishing an additional Board of Health revolving fund in accordance with M.G.L. c44, §53E½ for various health and flu clinics as well as purchase of needed medical supplies. Rather than user fees, the fund would be financed through medical insurance reimbursements. Until this revolving fund is established and creates an income stream, the balance of monies needed to fund the position would need to be appropriated in the operating budget. As this would be a benefit-eligible position under state statute, the question of funding of benefits would need to be addressed by the Town’s administration and Board of Health.

3. **Administrative Assistant:** The recommendation is that this position be increased from 28-hours a week to full-time status. With the implementation of a full-time Health Agent and eventual decrease in supplemental COVID meetings, the Administrative Assistant should be able to complete all required and anticipated administrative tasks. These administrative tasks would include periodic submission of medical insurance reimbursements based on the activities of the Public Health Nurse. The implementation of a full time Health Agent minimizes the amount of time the Administrative Assistant must act as a conduit between all contracted parties, creating a more streamlined customer service response. The recommendation is that this role meet the education and training components outlined in the Special Commission on Local and Regional Public Health as well as create access to an online permitting system. The anticipated implementation of an online permitting system creates additional efficiency from the customer service perspective.





4. **Part-time Clerical:** While the implementation of these staffing recommendations is ongoing, the current part-time clerical position should continue in order to support office operations. With the activities surrounding the pandemic response, the Administrative Assistant is, at times, overwhelmed. The part-time clerical can continue to support filing and answering telephone calls, as well as fill-in during any absences of the Administrative Assistant.

Consideration can be given to maintaining the part-time clerical position upon the implementation of the above staffing requirements. There will be anticipated additional office duties including the filing of medical insurance claim reimbursements as a result of the activities of the Public Health Nurse.

5. **Shared Services:** It is recommended the Town of Dover participate in the Shared Services Agreement for Environmental Services with Needham being the primary agency. This will enable support in routine food and camp plan reviews and inspections, as well as build overall capacity in public health outreach. Participating in these shared services would allow depth and coverage in the event that the full-time Health Agent falls ill, goes on vacation, or is absent from work for other reasons. The Public Health Nurse position could be explored as a potential shared service role as previously outlined. This cross jurisdictional sharing arrangement strengthens the service delivery and capacity of the Board of Health, as well as creates a sustainable and efficient system.

The Institute for Community Health and Boston University School of Public Health project found that although 49% of local health departments serve populations of 10,000 or less, “higher performance has been associated with health departments who serve larger populations.” There are 172 towns in Massachusetts—nearly half the state—that fall into this small population category; and historically smaller population size is consistently associated with poor performance. Dover has the opportunity to implement changes to the Board of Health and operational structure meeting the minimum recommendations crafted by the Special Commission on Local and Regional Health (see *Appendix D*) and ultimately increasing public health capacity for the community. Collaboration with the shared services model allows for future collaboration with member communities in a variety of aspects of public health, broadening the services that the Board of Health can offer, without placing an increased demand on the elected board. This model also allows for credentialed and professional staff to support the community and the elected board in all matters related to public and environmental health. Lastly, this model is currently supported by state-sponsored funding opportunities with the primary goal of increasing local public health capacity and will have a minimal impact on the budget.

An option to consider is to explore a shared Regional Public Health Nurse, possibly with the Town of Sherborn (15+ hours per week in each community). During the interview with the Sherborn Health Administrator, there was mention that their Board of Health was exploring the possibility of adding a part-time Public Health Nurse to its regular staffing. In coordination, both Towns could apply for funding to the Massachusetts Department of Public Health's "Public Health Excellence Grant Program for Shared Services". Annually, DPH's Office of Local and Regional Health seeks proposals to support public health cross-jurisdictional, shared-service arrangements. It is anticipated DPH funds will be available to advance the recommendations of the Special Commission on Local and Regional Public Health in its final report of June 2019, *"Blueprint for Public Health Excellence: Recommendations for Improved Effectiveness and Efficiency of Local Public Health Protections"*.

The Public Health Excellence Grant Program is designed to address the Commission's recommendations. Municipalities may submit proposals that fall into one of three categories which include 'to support new cross-jurisdictional sharing arrangements'. The grant program is typically posted on COMMBUYS in mid-spring.

Dover is currently part of a shared services grant for contact tracing with Needham and Medfield. Dover is also going to be part of a three-year shared services grant for environmental health services with the possibility of at least two two-year extensions.

6. **SAPHE 2.0:** To combat the current lack of resources and funding for local public health, the Massachusetts Public Health Association (MPHA) and partners have formed the SAPHE 2.0 Coalition with the goal to pass the SAPHE 2.0 Act, which stands for Statewide Accelerated Public Health for Every Community Act. This bill includes four major overarching goals:
  - a. Ensure minimum public health standards for every community
  - b. Increase capacity and effectiveness by encouraging and incentivizing municipalities to share resources
  - c. Create a uniform data collection and reporting system
  - d. Establish sustainable state funding to support local boards of health and health departments.

The Legislature passed the State Action for Public Health Excellence Act, or SAPHE Act, which was signed into law as Chapter 72 of the Acts of 2020, incorporating many of the recommendations of the Special Commission on Local and Regional Public Health. SAPHE 2.0 builds on this strong foundation to provide additional support and incentives for critical local public health infrastructure. This policy reform would ensure minimum public health standards and workforce credentialing, incentivize cross-municipal and regional collaboration, create a uniform set of data standards and reporting, and train staff to make these reforms effective and meaningful.

These are all changes that will better prepare Massachusetts' public health infrastructure for future health crises. Massachusetts local health departments have been on the front lines of the COVID-19 crisis, leading critical response efforts. These changes ensure that communities will come out of this pandemic with a stronger public health system that works for all residents. Significant funding to this effort has been dedicated, which demonstrates a commitment to allocate state and federal funds to address health disparities, enhance public health data systems, and support workforce development.

7. **Online Permitting and Electronic Recordkeeping Systems:** As previously mentioned, the Town is undertaking a systematic approach to implementing an online permitting system throughout the Town, under the auspices of the IT Director and the Town Clerk. Although not at the forefront of the project, the eventual online permitting system will include the Board of Health operations.

The Board of Health (and the Town) should explore the options of instituting an electronic record-keeping system. Such an electronic system would allow the Board to store applications, permits, documents, etc. This would lead to efficiency in recordkeeping, document searches, and maintenance of permits, past and present.

8. **Budget Impact:** With perhaps the exception of the first year, the implementation of the above staffing requirements should have minimal impact on the Board of Health's annual operating budget. Currently, the operating budget includes the salaries of the two part-time clerical positions, and the funding for the VNA services and Animal Inspector. Payments to the two contracted inspectors and ESI Qual are through the approved revolving funds.

Based on the above staffing recommendations, the salary of the full-time Health Agent would be paid through the revolving funds. As a portion of the Administrative Assistant's work is dedicated to inspection activities, the additional hours for the Administrative Assistant could also be funded through the revolving funds. The revenue in the existing revolving funds will suffice for both of these.

With the addition of a part-time Public Health Nurse, there will no longer be a need for the VNA resulting in minimal savings (+/- \$10,000) in the designated line item. This dollar amount can be moved to the salaries line item to offset the anticipated salary of the Public Health Nurse. Once the activities of the Public Health Nurse increase, and the process of medical insurance reimbursements takes place, consideration may be given to funding a portion of the salary for this position from the additional revolving fund.

The major budgetary impact for the Town will be the funding of benefits for the full-time Health Agent and the 25-hours per week Public Health Nurse.

- 9. Board of Health Membership:** During the interviews with the Board of Health members, Community Paradigm Associates was asked to assess the merits of a three-member board versus a five-member board. The survey results of the twenty-three (23) communities indicate fifteen (15) have a three-member board and eight (8) have a five-member board. Of the eight with a five-member board, two (2) boards also appoint two additional associate members.

As the COVID pandemic stretches on, the Board of Health has been tasked with offering advice and counsel on a variety of re-opening committees, taskforces, school policy, etc. With the current structure of a three-member board, this can be restrictive as only one BOH member can be present at any of these additional meetings unless the meeting is published and posted as a public meeting of the Board of Health. Often times, multiple Board members have a desire to support these meetings/taskforces in which a BOH meeting must be posted 48 hours in advance and meet a variety of other Open Meeting Law requirements. Based on the Open Meeting Law, a three-member board restricts any Town health-related conversation between any two members outside of a legally posted meeting. However, OML Decision 2021-199 promulgated, “A quorum of a public body may attend the meeting of a different public body without having to post a notice if the visiting members 1) do not deliberate, and 2) participate in the meeting in the same manner as any member of the public.”

The Dover Board of Health may benefit by increasing from a three-member board to a five-member board to reduce these challenges. Doing so is based on local preference and requires a vote of Town Meeting to modify the Town Code.

## Appendix A. Community Comparisons

### Comparable Communities (10)

#### Ashland

Structure:	Health Department		
Staffing:	Director/Agent	32.0 hours/week	\$38/hour
	Admin Assistant	32.0 hours/week	
Contracted Services:	Food, Septic, Housing		
Regionalized Services:	Hudson Regionalization (public health nurse, contact tracing, environmental agent)		
Board of Health:	5 members		

#### Lincoln

Structure:	Board of Health		
Staffing:	Admin Assistant	40.0 hours/week	
	Public Health Nurse	as needed	\$75/hour
Contracted Services:	Animal Control, Health Inspections		
Regionalized Services:	vaccination clinics		
Board of Health:	3 members		

#### Medfield

Structure:	Board of Health		
Staffing:	Public Health Nurse	37.5 hours/week	\$40/hour
	Admin Assistant	20-25 hours/week	
Contracted Services:	Health Agent		
Regionalized Services:	Needham Collaborative		
Board of Health:	5 members plus 2 associate members		

#### Millis

Structure:	Board of Health		
Staffing:	Director	40.0 hours/week	
	Public Health Nurse	10.0 hours/week	\$40/hour
	Admin Assistant	24.0 hours/week	
Contracted Services:	Food inspections, shared ACO with Medway		
Regionalized Services:	MetroWest Public Health Shared Services Collaborative		
Board of Health:	3 members		

### **Norfolk**

Structure: Board of Health  
Staffing: shared Land Use Executive Assistant  
Contracted Services: Environmental Engineering  
Regionalized Services: Metacomet Public Health Alliance (health agent and public health nurse)  
Board of Health: 3 members

### **Sherborn**

Structure: Board of Health  
Staffing: Administrator 35-40 hours/week  
Health Agent 12.0 hours/week \$65/hour  
Food/Camp Inspector 2.5 hours/week  
Admin Assistant 16.0 hours/week  
Contracted Services: VNA, Animal Inspector  
Regionalized Services: n/a  
Board of Health: 5 members

### **Sudbury**

Structure: Health Department  
Staffing: Director 35.0 hours/week  
Health Inspector 35.0 hours/week \$33/hour  
Public Health Nurse 35.0 hours/week \$44/hour  
Admin/Clerical 35.0 hours/week  
Social Worker 35.0 hours/week  
Social Worker 8.0 hours/week  
Contracted Services: Animal Inspector  
Regionalized Services: Public Health Excellence Shared Services Grant for health inspector and two nurses (with six other communities)  
Board of Health: 3 members

### **Wayland**

Structure: Health Department  
Staffing: Director 35.0 hours/week  
Sanitarian/Health Agent 35.0 hours/week \$45/hour  
Public Health Nurse 35.0 hours/week \$46/hour  
Admin Assistant 35.0 hours/week  
Contracted Services: n/a  
Regionalized Services: Greater Meadows Health District for epidemiology, nurse, and environmental inspector  
Board of Health: 5 members

**Weston**

Structure:	Health Department		
Staffing:	Director	37.5 hours/week	
	Health Agent	37.5 hours/week	\$43/hour
	Public Health Nurse	12.0 hours/week	\$35/hour
	COVID-19 Nurse Manager – temporary funded through CARES		
Contracted Services:	n/a		
Regionalized Services:	Greater Meadows Health District for epidemiology, nurse, and environmental inspector		
Board of Health:	3 members		

**Westwood**

Structure:	Health Division		
Staffing:	Director	35.0 hours/week	
	Inspector/Sanitarian	35.0 hours/week	\$35/hour
	Public Health Nurse	35.0 hours/week	\$38/hour
Contracted Services:	n/a		
Regionalized Services:	Contact tracing, epidemiology, environmental agent		
Board of Health:	3 members		

**Other Comparable Communities (9)****Ayer**

Structure:	Board of Health		
Staffing:	Admin Assistant	15.0 hours/week	
Contracted Services:	n/a		
Regionalized Services:	Nashoba Associated Boards of Health for inspectional and public health nurse services		
Board of Health:	3 members		

**Bolton**

Structure:	Board of Health		
Staffing:	n/a		
Contracted Services:	n/a		
Regionalized Services:	Nashoba Associated Boards of Health		
Board of Health:	3 members		

**Boxborough**

Structure: Board of Health  
Staffing: n/a  
Contracted Services: n/a  
Regionalized Services: Nashoba Associated Boards of Health for inspectional services  
Nashoba Nursing Services and Hospice for public health nurse  
Board of Health: 3 members

**Georgetown**

Structure: Health Department  
Staffing: Director 40.0 hours/week  
Health Inspector 20.0 hours/week \$29/hour  
Public Health Nurse 10.0 hours/month \$65/hour  
Contracted Services: Animal Inspector, COVID-19 nurses  
Regionalized Services: Health Inspector additional 20.0 in Newbury  
Board of Health: 5 members

**Hamilton**

Structure: Board of Health  
Staffing: Director 24.0 hours/week  
Public Health Nurse 14.0 hours/week \$43/hour  
Public Health Clerk 19.0 hours/week  
Animal Control 19.0 hours/week  
Contracted Services: Sanitation/Title V Inspector  
Regionalized Services: Public Health Excellence Grant with three other communities for  
Public Health Nurse  
Board of Health: 3 members

**Harvard**

Structure: Board of Health  
Staffing: n/a  
Contracted Services: n/a  
Regionalized Services: Nashoba Associated Boards of Health for inspectional services  
and public health nurse services  
Board of Health: 3 members

**Newbury**

Structure: Health Department  
Staffing: Director 35.0 hours/week  
Health Inspector 20.0 hours/week \$29/hour  
Contracted Services: Public Health Nurse  
Regionalized Services: Vaccination clinics  
Board of Health: 3 members



**Rowley**

Structure:	Health Department		
Staffing:	Director	40.0 hours/week	
	Health Agent/Inspector	35.0 hours/week	\$29/hour
	Health Nurse	8.0 hours/week	\$27/hour
	Health Secretary	16.0 hours/week	
Contracted Services:	n/a		
Regionalized Services:	Tobacco control, emergency preparedness		
Board of Health:	3 members		

**Topsfield**

Structure:	Board of Health		
Staffing:	Director	40.0 hours/week	
	Clerical Support	19.0 hours/week	
Contracted Services:	Animal Control		
Regionalized Services:	Public Health Excellence Grant with two other communities for Health Inspector (\$37/hour) and Public Health Nurse (\$50/hour)		
Board of Health:	5 members		

**Other Bordering Communities****Natick**

Structure:	Health Department		
Staffing:	Director	40.0 hours/week	
	Senior Environmental Agent	40.0 hours/week	
	Environmental Health Agent	40.0 hours/week	
	Sanitarian	40.0 hours/week	
	Public Health Nurse	40.0 hours/week	
	Executive Assistant	37.5 hours/week	
	Admin Assistant	37.5 hours/week	
Contracted Services:	Food consultants, contact tracing		
Regionalized Services:	Public Health Nurse, Health Inspector, Epidemiologists		
Board of Health:	3 members		

**Walpole**

Structure:	Health Department		
Staffing:	Director	35.0 hours/week	
	Health Agent	35.0 hours/week	\$40/hour
	Public Health Nurse	35.0 hours/week	\$41/hour
	Admin Assistant	35.0 hours/week	
Contracted Services:	Food inspections		
Regionalized Services:	NC-8 contact tracing, epidemiology, environmental		
Board of Health:	5 members plus 2 associate members		

## **Wellesley**

Structure:	Health Department		
Staffing:	Director	35.0 hours/week	
	Administrator	35.0 hours/week	
	Director, Public Health Nurse	35.0 hours/week	\$42/hour
	Public Health Nurse	35.0 hours/week	\$40/hour
	Senior Environmental Agent	35.0 hours/week	\$46/hour
	Environmental Agent	35.0 hours/week	\$40/hour
	Environmental Agent	19.0 hours/week	\$40/hour
	Health Communications	35.0 hours/week	
	Senior Social Worker	35.0 hours/week	
	Case Worker	35.0 hours/week	
	Clerical Support	19.0 hours/week	
Contracted Services:	mental health		
Regionalized Services:	NC-8 , contact tracing, epidemiology, environmental		
Board of Health:	3 members		

## **Needham**

Structure:	Public Health Department		
Staffing:	Assistant Director of Public Health (Community & Environmental Health)	37.5 hours/week	
	Assistant Director of Public Health (Public Health Nursing & Behavioral Health)	37.5 hours/week	
	Administrative Analyst	37.5 hours/week	
	Environmental Health Agent	37.5 hours/week	
	Environmental Health Inspector	17.5 hours/week	
	Administrative Assistant	15.0 hours/week	
	Program Coordinator – Traveling Meals	22.5 hours/week	
	Public Health Associate – Accreditation	19.5 hours/week	
	Public Health Associate – Special Projects	19.5 hours/week	
	Substance Use Prevention Coordinator	37.5 hours/week	
	Program Coordinator – Youth Substance	12.5 hours/week	
	Public Health Nurse	37.5 hours/week	
	Public Health Nurse	25.0 hours/week	
	Contact Tracer	37.5 hours/week	
	Epidemiologist	37.5 hours/week	
Note:	Environmental Agent	\$38/hour	
	Public Health Nurse	\$42/hour	
Contracted Services:	n/a		
Regionalized Services:	NC-8, additional grant for shared services and contract tracing that includes Dover and Medfield		
Board of Health:	5 members		

## **Appendix B. Draft ‘Health Agent’ Position Description**

**Position Title:** Health Agent – full time

### **General Statement of Duties**

The Health Agent is responsible for the enforcing and interpreting the provisions of the state and local sanitary and environmental codes, rules, regulations, and by-laws as they pertain to public and environmental health. The position will carry out a variety of environmental and public health programs to include inspections and monitoring responsibilities, assists residents in health-related issues, and assists in the normal operations of the Board of Health office, while providing advocacy for the protection of public health and safety.

### **Supervision**

The Board of Health appoints the Health Agent. The Health Agent reports to and works under the general supervision of the Board of Health. The position is required to work independently, within established policies and procedures and the requirements of federal, state, and local law (as applicable), and with minimal direct supervision.

The Health Agent acts as staff liaison to the Board of Health. The position oversees the Animal Control Inspector and office administrative staff. The position coordinates priorities, tasks, and activities with the Public Health Nurse.

### **Work Environment**

Work takes place inside and outside of the office. Constant, moderate physical effort demanded in making on-site inspections in a non-office environment including commercial, industrial, institutional, and residential environments. Hazards include adverse weather and road conditions, and exposure to communicable diseases and environmental hazards.

### **Position Functions**

*The essential functions or duties listed below are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.*

### **Essential Functions**

- ✓ Enforces state sanitary and environmental codes, performs site inspections of building lots, evaluates soil tests and percolation tests to determine suitability for sewerage disposal systems, review plans for sewerage disposal facilities, inspects installation and repair of septic systems, and performs final septic inspections.
- ✓ Inspects restaurants, food handling and processing establishments, nursing homes, childcare facilities, places of assembly, schools, and other areas required by law for compliance with state and local laws, regulations, and investigates complaints and illnesses as such facilities.
- ✓ Investigates alleged nuisances and initiates corrective measures; investigates and reports cases of disease dangerous to the public health; investigates and takes appropriate actions relative to complaints of violations in the interest of protecting the public and environmental health; and performs a variety of inspections to eliminate unsanitary conditions.

- ✓ Handles all water topics that are related to the local well regulations in the community including reviewing permit applications, and conducting inspections as well as flow tests to meet the local regulations.
- ✓ Takes corrective action, issues instructions to responsible parties regarding changes/ corrections to be made, and performs follow-up inspections to ensure compliance.
- ✓ Drafts enforcement orders to responsible parties and assists with necessary legal action.
- ✓ Conducts emergency preparedness planning and collaborates with local emergency planners to create and drill emergency plans for all hazards including but not limited to pandemics, clinics, and sheltering.
- ✓ Creates and distributes educational materials for the general public, conducts workshops and informational sessions, and serves as an informational resource on public and environmental health.
- ✓ Prepares required reports in compliance with state requirements to ensure that the Board of Health has sufficient documentation and assists in maintaining department files and information.
- ✓ Maintains knowledge and expertise of new developments in the fields of environmental and public health.
- ✓ Coordinates with other Town Departments (such as Police, Fire, Council on Aging, and Building) to approach providing municipal services in a comprehensive, cohesive, effective and efficient manner.
- ✓ Provides input to the Board of Health in preparation of the annual operating budget.
- ✓ Assists in drafting proposed new bylaws and regulations dealing with environmental and public health concerns.
- ✓ Responds sensitively and constructively to citizen complaints; provide customer service with tact, courtesy, cultural sensitivity, and discretion in all dealings with the public.
- ✓ Attends various evening meetings and events as required.
- ✓ Performs similar or related work as required or as situation dictates.

## **Minimum Qualifications**

### Education and Experience

- ✓ Bachelor's Degree in Environmental Health, Public Health, Environmental Science or similar related field; and minimum of three to five years related experience in the public health field; or any equivalent combination of education and progressively responsible experience, with additional work experience substituting for the required education on a year-for-year basis.
- ✓ Registered Sanitarian, Registered Environmental Health Specialist or Certified Health Officer in Massachusetts, or able to obtain any of these certifications within one year.
- ✓ Possess NIMS-700 and ICS-100 certifications, or obtain such certifications within a designated period of time.

- ✓ Candidate must possess or be eligible to obtain the following certifications: Certified Manager, MAPHIT Housing and Food Inspector Certification, and Massachusetts Soil Site Evaluator and Title 5 Inspector.

### **Special Requirements**

Must possess a valid driver's license and access to an automobile.

### **Knowledge, Abilities and Skills**

- ✓ Thorough knowledge of applicable state and local public health laws and regulations and ability to interpret these laws and regulations to best support the community.
- ✓ Ability to communicate effectively, both orally and in writing, to translate technical knowledge into layperson's terms.
- ✓ Ability to understand and interpret regulations and to enforce them firmly, tactfully, and impartially.
- ✓ Ability to recognize and understand Town-wide priorities and work cooperatively to support their accomplishments.
- ✓ Ability to work effectively with diverse constituencies and ensure a culturally sensitive approach.
- ✓ Ability to maintain confidentiality.
- ✓ Ability to perform a great deal of work independently.

## **Appendix C. Draft ‘Public Health Nurse’ Position Description**

**Position Title:** Public Health Nurse – 25 hours per week

### **General Statement of Duties**

The Public Health Nurse position is responsible to promote and protect the health of all individuals within the Town of Dover. Duties include performing highly responsible nursing duties in a variety of public health programs, observing and evaluating the physical and emotional conditions of patients, conducting investigations of communicable diseases, and making home visits. The position is responsible for seeking out areas of concern, and assess and implement ways through which these concerns can be eliminated or minimized.

### **Supervision**

The Board of Health appoints the Public Health Nurse. The Public Health Nurse reports to and works under the general supervision of the Board of Health. The position is required to work independently, within established policies and procedures and the requirements of federal, state, and local law (as applicable), and with minimal direct supervision.

### **Work Environment**

Work takes place inside and outside of the office. Office work includes, but is not limited to, record keeping, preparing reports, screening programs, administration of clinics and tests, counselling, and ancillary functions. Field work includes visits to homes, facilities, camps, and other settings. Hazards include adverse weather and road conditions, and exposure to communicable diseases and environmental hazards.

### **Position Functions**

*The essential functions or duties listed below are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.*

### **Essential Functions**

- ✓ Disease prevention by providing immunizations, as needed or required, or providing the necessary direction to obtain such immunization.
- ✓ Investigate all reports of communicable disease as determined by the Massachusetts Department of Public Health (MDPH) and enforce pertinent regulations, when required, to prevent spread of disease.
- ✓ Manage administrative data and records as appropriate. Complete MDPH case report, as appropriate, for each reportable disease.
- ✓ Investigate reported animal bites, evaluate status of contact victim(s), and submit completed reports to Animal Inspector.
- ✓ Collaborate with the Health Agent to inspect camps for compliance with the Massachusetts State Sanitary Code governing camps.
- ✓ Develop and implement emergency preparedness plans.
- ✓ Participate in any offered local, state or federal training programs in disaster and emergency preparedness.

- ✓ Conduct home visits to residents with health needs.
- ✓ Plan and implement public clinics, screenings, and health education outreach and awareness workshops within the community, targeting all ages and sub-population groups.
- ✓ Provide consultation, education, and resources for residents, providers, agencies, and Town employees relating to pertinent health issues through media outlets, Town website, meeting, health promotions, and health fairs.
- ✓ Collaborate with other Town departments and agencies in order to provide advocacy for residents and the community.
- ✓ Attend various evening meetings and events as required.
- ✓ Perform similar or related work as required or as situation dictates.

## **Minimum Qualifications**

### Education and Experience

- ✓ Graduation from an accredited nursing program for registered nurses, preferably with a Bachelor of Science degree.
- ✓ Possess current licensure as a Registered Nurse (RN) in the Commonwealth of Massachusetts.
- ✓ Maintenance of required continuing education units in accordance with the Massachusetts Board of Registration in Nursing.
- ✓ Current certification in BLS CPR/AED.
- ✓ A minimum of two to four years of experience in public or community health nursing or related field.

### **Special Requirements**

Must possess a valid driver's license and access to an automobile.

### **Knowledge, Abilities and Skills**

- ✓ Thorough knowledge of applicable state and local public health laws and regulations.
- ✓ Working knowledge of public health nursing principles, practices, and procedures.
- ✓ Working knowledge of community and regional organizations and resources concerned with public health, social services, and related services.
- ✓ Knowledge of the control elements of communicable diseases.
- ✓ Knowledge of health screening, office equipment, and computer programs.
- ✓ Ability to establish and maintain effective working relationships with the elderly, children, parents, community agencies, and the general public.
- ✓ Ability to complete a variety of reports which will accurately reflect the activities and functions of the Public Health Nurse.
- ✓ Ability to perform a great deal of work independently.
- ✓ Possess good communication skills, both verbal and written.

## **Appendix D – Special Commission on Local and Regional Public Health – Educational, Training and Credentialing Recommendations**



SPECIAL COMMISSION ON LOCAL AND REGIONAL PUBLIC HEALTH EDUCATIONAL, TRAINING, AND CREDENTIALING RECOMMENDATIONS			
POSITION	REQUIRED AT HIRE	REQUIRED AFTER HIRE	RECOMMENDED
MANAGEMENT – e.g., Director, Assistant Director, Deputy Director  <i>Management position does not do inspections but supervises those who do.</i>	<ul style="list-style-type: none"> <li>Registered Sanitarian or equivalent eligible*</li> <li>Master’s in relevant field or BA/BS with 5 years of relevant experience</li> </ul>	<ul style="list-style-type: none"> <li>RS or equivalent within a year*</li> <li>Foundations for Local Public Health Practice (“Foundations”) course within one year of hire</li> <li>CHO within 3 years of hire</li> <li>Complete Master’s within 5 years</li> </ul>	<ul style="list-style-type: none"> <li>Health Association membership</li> <li>LPHI Managing Effectively in Today’s Public Health Environment (“Management”) course</li> <li>Three years of experience in local or state public health</li> <li>MAVEN training within one year</li> </ul>
MANAGEMENT/AGENT	<ul style="list-style-type: none"> <li>Registered Sanitarian or equivalent eligible</li> </ul>	<ul style="list-style-type: none"> <li>Foundations course within 18 months</li> <li>RS within 18 months of hire</li> <li>Specific certifications for inspections performed, such as soil evaluator, system inspector, food inspector training, housing inspection training, certified pool operator/certified pool inspector, lead determinator within one year of hire</li> </ul>	<ul style="list-style-type: none"> <li>Health Association membership</li> <li>LPHI Management Course</li> <li>CHO within 3 years of hire</li> </ul>
INSPECTOR/SANITARIAN	<ul style="list-style-type: none"> <li>High School Diploma or equivalent</li> </ul>	<ul style="list-style-type: none"> <li>RS within 6 years of hire</li> <li>Foundations course within 18 months</li> <li>Specific certifications for inspections performed, such as soil evaluator, system inspector, food inspector training, housing inspection training, certified pool operator/certified pool inspector, lead determinator within 1 year of hire</li> </ul>	<ul style="list-style-type: none"> <li>Health Association membership</li> <li>Associates degree in science or public health, at hire.</li> </ul>
PUBLIC HEALTH NURSE	<ul style="list-style-type: none"> <li>Bachelor of Science in Nursing (BSN)</li> <li>Registered Nurse (RN), current MA license</li> </ul>	<ul style="list-style-type: none"> <li>MAVEN trained within 6 months</li> <li>Foundations course within one year of hire</li> </ul>	<ul style="list-style-type: none"> <li>MAPHN Membership</li> </ul>
CLERICAL STAFF	<ul style="list-style-type: none"> <li>Microsoft Office (or similar) applications</li> </ul>	<ul style="list-style-type: none"> <li>Modified Foundations course (Foundations course for Clerical Workers) within one year of hire</li> </ul>	<ul style="list-style-type: none"> <li>On-line permitting</li> </ul>
BOH MEMBER (NOTE: IF DOING INSPECTIONS MUST MEET REQUIREMENTS ABOVE)			<ul style="list-style-type: none"> <li>Orientation to Public Health within 3 months</li> <li>Foundations course within one year</li> </ul>

INSPECTION TYPE	REQUIRED	RECOMMENDED
<b>FOOD PROTECTION</b>	<ul style="list-style-type: none"> <li>• ServeSafe or similar</li> <li>• Massachusetts Public Health Inspector Training (MA PHIT) Food Inspection Class</li> <li>• Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Food and Drug Administration/Office of Regulatory Affairs - University (ORAU)</li> </ul>
<b>HOUSING</b>	<ul style="list-style-type: none"> <li>• MA PHIT Housing Class</li> <li>• Housing Court training (TBD)</li> <li>• Lead Determinator</li> <li>• Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Relevant LPHI Modules</li> </ul>
<b>TITLE 5</b>	<ul style="list-style-type: none"> <li>• Soil Evaluator</li> <li>• System Inspector</li> <li>• MA PHIT Wastewater</li> <li>• Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Relevant LPHI Modules</li> </ul>
<b>POOLS</b>	<ul style="list-style-type: none"> <li>• Certified Pool Operator or Certified Pool Inspector with Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Relevant LPHI Modules</li> </ul>
<b>RECREATIONAL CAMPS</b>	<ul style="list-style-type: none"> <li>• MA PHIT Camps (TBD) with Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Relevant LPHI Modules</li> </ul>
<b>TANNING/BODY ART</b>	<ul style="list-style-type: none"> <li>• MA PHIT (TBD) with Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Relevant LPHI Modules</li> </ul>
<b>NUISANCES</b>	<ul style="list-style-type: none"> <li>• MA PHIT (TBA) with Field Component</li> </ul>	<ul style="list-style-type: none"> <li>• Relevant LPHI Modules</li> </ul>

- All personnel should have at least ICS 100/NIMS 700 within one year of hire. Those who might have a leadership role should have ICS 200 and above.
- Boards of health may have stricter requirements, but must meet these requirements.
- Boards of health with current staff who have worked for local or state public health for at least 7 years, but who do not meet these requirements, may request a waiver except for inspectional trainings.
- Membership in professional organizations is deemed as critical for professional growth and development, for leadership and mentoring opportunities, and for opportunities for sharing best practices. This is recommended, but not required.

\*Management positions should meet the requirements as set forth in this document for the position. However, a request may be submitted by the Board of Health to waive the Registered Sanitarian (RS) requirement if

- 1) the Health Department has a management position and a separate full-time Environmental Health Director and
- 2) the Environmental Health Director has an RS, oversees the inspectors, and reports directly to the management position.