



OBSERVER REPORT

BOARD OF HEALTH – 1-13-26

Hybrid Meeting, Recorded

LWVM Observer: Tom Krueger

Members in Attendance: Andrew Petty, Tom McMahon, Tom Massaro, Amanda Ritvo

Chair's report

Expanded BOH -Dr. Massaro opened the meeting by saying he had received a letter from state representative, Jenny Armeni, that the MA house had signed a bill on 12/15 and the MA senate on 12/18 permitting the BOH to expand from 3 members to 5 members. Members will be elected at the next town election on June 9th. He noted that the BOH has been working hard to build a positive perspective for MHD.

Charter Committee -He next reported about the work of the Charter Committee in particular the review of draft B, section 6.3 that pertains to the BOH. He noted that all the elected and other boards use a similar template about duties, etc. Thatcher Keezer said that the BOH is “special” because it has both executive and legislative functions. Section 111 of MA General Laws grant local BOH authority to create and enforce reasonable health regulations... and to issue emergency orders without prior public hearings. (He also relayed that towns can choose to have a BOH or not and if not, the select boards take over that function. Regardless of the form, public health and public safety often have overlaps and need to work together.) Dr. Massaro then said that a sentence might be put into Draft C reflecting that of MGL 111. Mr. McMahon questioned the word “reasonable” which could have different interpretations. After some discussion Dr. Massaro said he would get clarification from the Charter Committee and town counsel. He said that the necessity of such a statement would be for circumstances, such as, a disease outbreak, tainted water supply, etc.

Adolescent substance abuse and social hosting - Dr. Massaro reported on his two-hour meeting with the police chief, Dennis King, on 12/17/25. He noted that they agreed that the BOH and public safety have some differences but were “aligned-that responsibilities to protect the health and wellness of young people from the consequences of substance abuse.” They agreed that all benefited by public health and public safety working together. (Dr. Massaro reiterated that research that shows early use of cannabis can result in the loss of brain cortical function in adolescents.) They both agreed that enforcement is important but not how to proceed. They will be meeting again. In conclusion he had a slide that was titled “Cautious Optimism”: there is broad public interest, commitment to educating parents about the risk, that social hosting laws will be widely distributed. It has not been explained why citations for social hosting have not been made since 2017. Dr. Massaro credited Mr. McMahon with bringing this issue to the forefront. Mr. McMahon did mention one line from the MA law that (paraphrase) - enforcement has the duty to enter someone’s house if social hosting.

CAHM - Dr. Massaro reported on the progress of the data analysis of the health survey. The responses to the 42 questions yielded a 33-page report of the checked box data. (The results of the “write in” data will be available by the end of January.) The check box questions frequently had sub questions. As has been mentioned before, the health data addresses 8 different levels of wellness and each of these levels had a multilevel question. (Also, he mentioned again, one of the reasons for working with UMass Boston was that they do these surveys “well” AND have a rigorous way of protecting data.) The next steps are to take the primary data, organize it, and eventually develop strategic goals for MHD. Focus groups will be formed to help “drill down” for some of these strategic goals.

As an exercise the leadership committee for the survey was asked what stood out to them after reviewing the raw data. These were both interesting and in some cases surprising: bicycle pedestrian safety, depression/anxiety, child mental health, work life balance, substance abuse, religion/spirituality, etc.

Dr. Massaro had a slide about types of the ultimate strategic goals which included public health improvements, interface with the delivery system,

health literacy goals, improved personal navigation of the systems and resources, etc.

A question came up about how this MHD health assessment compared to those done in Swampscott and Salem. Both of these were more limited in scope. In Swampscott the over 50 were surveyed and has 2-3000 responses. (MHD had a 15+% response and surveyed the whole life cycle). Salem survey was more interested in housing issues.

Associate Chief of Waste Management

Mr. McMahon read the list of bills and costs.

Wellness Fair - the fair is planned for 2/28/26 at the community center. Mr. McMahon has a copy of all the vendors who came last year, as well as the layout, etc. He noted that last year he had done a lot of advertising for the event - going to places, taking classes, interviews, etc. He will try to revisit some and plans to ask Kim Crowley to help advertise. The event last year went for 4 hours. It was felt that 3 hours was probably better, perhaps 11am-2pm. Mr. Petty has the necessary paperwork and consent form. Other organizations were suggested that might want to participate - Bloom (perhaps a poster), farm cooperative, etc.

Landfill Closure Settlement Statement - Mr. McMahon reported back about the landfill closure settlement statement that was voted on in July. First, he lauded Mr. Petty for his excellent presentation of the project and noted that when such a project is begun, much is unknown about what will be found. This accounted for half of the cost, and something else the other half. A letter was crafted by town counsel which was a classic legal response, which did not want to put the settlement at risk. Mr. McMahon said that what was most important was to view Mr. Petty's slides and presentation - the list of complications was incredible. Parenthetically Mr. McMahon had looked at other past EPA projects and these had all gone over budget.

Associate Chair of Community Health

Flu and respiratory illness update - Dr. Ritvo reported that flu activity in MA and the US is very high, with more illnesses lasting longer. CDC has reported that much of this from Influenza A virus. ILI (influenza like

illnesses) account for 11% of office visits (3% is the usual.) The current vaccine is a mismatch for the circulating virus type, but still is useful for helping to prevent severe disease and hospitalizations. (In 2025 there have been 4 deaths in children and 66 in adults; 89% were unvaccinated.) The time-honored health measured practices of hand washing, staying home when sick, and getting early antiviral treatment are the mainstays. A question was asked about whether the HD was notified of by the schools of absentee rates - the answer is no.

Health news - Dr. Ritvo reported that the CDC under the RFK, Jr has put out a new vaccination schedule of only 11 vaccines of the previous 17. This was not done with input from the ACIP (Advisory Committee on Immunization Practices.) These exclude the following vaccines: influenza, rotavirus, hepatitis A, hepatitis B, RSV, meningococcal, and COVID-19. Getting these “rely on shared clinical decision-making.” In actual practice most clinician offices are offering the full 17, but 17 states have decided not to. (MA does follow the 17 vaccine schedule.) For information about the vaccines, she recommended the AAP, AAFP, and others websites. It was suggested the HD website include a link to the AAP or other websites.

Director's Report

Transfer station project update - Mr. Petty reported that all has gone well. The scale pit is completed, scale is in place, the lower concrete wall, etc. are done. Now it is available again for commercial and MHD. The scale house framing, roofing, etc. are done and the work that remains is on the scale house. There are 30 days left in the contract. When it is warmer, paving, line painting, fence installation, etc. will be completed. There was discovered a need for additional work to be done: new manhole, new catch basin, etc. for a cost \$5K. (This was approved by the board.) Otherwise, the license plate reader is working and new stickers for 2026 are required. There is no grace period.

Curbside collection contract update - Mr. Petty reported that all bids are due by 1/14/26. It is not required to go with the low bid but the most capable. Each of the bids will address 3 options: a) continue regular collection, b) automated arm, and c) automated with every other week for recycling. Regular collection is the most expensive and automated less. To recycle every other week residents would be given a 95-gallon receptacle. Mr. Petty noted that we will be paying much more for recycling

and urged “recycling smart” to help keep down costs. The large nationwide firms have all shown interest and only one local, independent has. The current contracts expires as follows: trash disposal, July; curbside collection, September.

The next scheduled BOH meeting will be on 1/26/26.