



**BOARD OF HEALTH**  
**Topsfield Town Hall**  
**8 West Common Street, Topsfield, MA 01983**  
**\*\*\*VIDEO/TELE CONFERENCE\*\*\***

February 17, 2021

6:30 PM

Board Members present: Chairperson Sheryl Knutsen RN and Board Members Larry Fixler RPh, Mark Rizza and William Hunt Esq. Anthony Alley RN was not in attendance. Also in attendance: Health Director Wendy Hansbury, Senior Administrative Assistant Susan Winslow.

**COMMONLY USED ABBREVIATIONS:**

ADA: Americans with Disabilities Act

BOH: Board of Health

BOS: Board of Selectmen

MAVEN: Massachusetts Virtual Epidemiology Network

MDEP: Massachusetts Department of Environmental  
Protection

CDC: Center for Disease Control

MEMA: Massachusetts Emergency Management Agency

CEU: Continuing Education Unit

MRC: Medical Reserve Corps

CEMP: Comprehensive Emergency Management Plan

COIN: Community Outreach Information Network

DESE: Department of Elementary and Secondary Education

DPH: Department of Public Health

NEMMC: Northeast Massachusetts Mosquito Control

EEE: Eastern Equine Encephalitis

EDS: Emergency Dispensing Site

PHEP: Public Health Emergency Preparedness

ESHWT: Estimated Seasonal High Water Table

POD: Point Of Dispensing

EP: Emergency Preparedness

RN: Registered Nurse

FDA: Food & Drug Administration

RS: Registered Sanitarian

HHS: Health and Human Services

SAS: Soil Absorption System

HMCC: Health & Medical Coordinating Coalition

TBOH: Topsfield Board of Health

LSAC: Local State Advisory Committee

TRMRC: Topsfield Regional Medical Reserve Corps

MDPH Mass. Dept. of Public Health

VNA: Visiting Nurse Association

WNV: West Nile Virus

**CALL TO ORDER**

Chair Sheryl Knutsen called the meeting to order at 6:30 pm.

**ANNOUNCEMENTS**

Chair Sheryl Knutsen made the following announcements:

Pursuant to Governor Baker's March 12, 2020 Order Suspending Certain Provisions of the Open Meeting Law, G.L. c. 30A, §18, and the Governor's March 15, 2020 Order imposing strict limitation on the number of people that may gather in one place, this meeting of the Topsfield Board of Health will be conducted via remote participation to the greatest extent possible. Specific information and the general guidelines for remote participation by members of the public and/or parties with a right and/or requirement to attend this meeting can be found on the Topsfield Town Website at [www.topsfield-ma.gov](http://www.topsfield-ma.gov). For this meeting, members of the public who wish to listen to the meeting may do so in the following manner: join the ZOOM audio-video conference call (see information below). No in-person attendance of members of the public will be permitted, but every effort will be made to ensure that the public can adequately access the proceedings in real time, via technological means. In the event that we are unable to do so, despite best efforts, we will post on the Topsfield Board of Health website an audio or video recording, transcript, or other comprehensive record of proceedings as soon as possible after the meeting.

Topsfield Town is inviting you to a scheduled Zoom meeting.

Topic: Board of Health

Time: Feb 17, 2021 06:30 PM Eastern Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/82252632777?pwd=d1U2YVg3aFNlZVhld2VMsUs2SGFaUT09>

Meeting ID: 822 5263 2777

Passcode: 112308

Dial by your location

+1 929 205 6099 US (New York)

Boxford Cable Television is recording this meeting and Susan Winslow is taking notes for Minutes of this Meeting. Is there anyone else who wishes to record this meeting?

(There was no-one else who wished to record the meeting.)

PUBLIC HEARING TO BE CONTINUED The Public Hearing on R: 1-2 Supplemental Regulations to 310 CMR 15.00 The State Environmental Code duly advertised in the January 16, 2020 and January 23, 2020 and opened at the February 19, 2020 Board of Health Meeting will be continued per Section 17 of Ch.53 of the Acts of 2020 to the first hearing date following the termination of the state of emergency or to a date otherwise prescribed by law.

## **APPOINTMENTS**

There were no appointments at this meeting.

## **MEETING MINUTES**

January 20, 2021

*VOTE: Mr. Fixler made a motion to approve the January 20, 2021 Meeting Minutes as written. Seconded by Mr. Rizza. Chair Knutsen called for a roll-call vote after determining that there was no further discussion:*

*Knutsen – yes*

*Fixler - yes*

*Rizza – yes*

*The motion passed in a vote of 3-0.*

Mr. Hunt joined the meeting.

**COVID-19**

COVID Command Center Conference Calls

Chair Knutsen gave the Board an update on the COVID Command Center Conference Calls she has participated in since the January 20, 2021 Board of Health Meeting. Chair Knutsen read the following information into the record:

For 02/17/2021 TBOH meeting: Inter-agency Local Boards of Health COVID-19 webinars

*There have been eight Inter-agency Local Boards of Health COVID-19 webinars since our last Topsfield BOH meeting. From 400 to 700 people join these calls every Tuesday and Friday. The following is a summary of my notes from these calls.*

*1/22/21 Effective January 25th, the Stay-at Home Advisory between the hours of 10 p.m. and 5 a.m. and also the mandatory Early Closure of Businesses Order are rescinded. The Statewide Isolation and Quarantine Food Security Program is now accepting food box requests; local Emergency Management Directors (in Topsfield that is the Fire Chief) and Local Health Departments should collaborate to assess need and coordinate logistics prior to requesting food boxes. The Advanced Technology Working group has recommended an accelerated pilot test of Exposure Notification Express solution (ENX), a voluntary smartphone-based service that can notify users of possible exposures to COVID-19. This anonymous, opt-in system does not replace contact tracing, but serves as an early warning system to help facilitate swift testing and self-quarantine of potential exposures. A new system will go into effect for ordering vaccine for LBOH clinics: a weekly survey will determine the number of doses that will be shipped, by assessing doses on hand and weekly vaccination capacity. The minimum allotment that will be shipped is 100 doses. The CDC has indicated there is some flexibility in the timing of administering second doses. LPH clinics will be depicted by yellow stars on the state interactive COVID-19 Vaccination Locations map.*

*1/26/21 In response to calls from seniors, the Governor re-ordered the priority vaccination phases. Beginning February 1st all individuals age 75 and older will be eligible to receive vaccinations. Next up will be Individuals age 65 and older and those with 2+ comorbidities. MA continues to build vaccination capacity by adding more vaccination mega-sites in Springfield, Danvers and Roxbury, in addition to mega-sites at Gillette Stadium and Fenway Park. Many new pharmacy and retail locations will open in the next few weeks. Topsfield and many other LBOH clinics will now be capped at a maximum of 100 doses per week. Second-dose vaccines will be sent automatically. The state assumes that LBOHs can use Medicare Reimbursement monies to pay for costs associated with providing clinics. There is no requirement for people to be a state resident in order to be vaccinated in MA. The electronic sign-up and recordkeeping software system PrepMod contains an Attestation Form which people will sign*

to attest that they are a member of the current priority group. An 800 number will be added to 2-1-1 to help people register for appointments and Councils on Aging will be asked to assist seniors who need help with the registration process. LHD doses can be used to vaccinate homebound seniors.

1/29/21 The state gathers data on COVID clusters and posts it to the weekly data dashboard. By far, the most number of clusters are in household settings. Hockey accounts for the most clusters in sports, although basketball clusters are increasing. Overall cases in MA are declining. Many schools will be participating in pooled testing which will identify cases earlier. RNA viruses such as COVID constantly change through mutations. Three new global variants of concern have recently emerged: B.1.1.7 emerged in the United Kingdom in September; B.1.351 emerged in South Africa in October; and P.1 has been found in Japan in travelers from Brazil. To date there have been 3 cases of B.1.1.7 found in MA but there is no evidence of widespread community transmission. Standard prevention measures remain the same. Planning has begun for administering COVID-19 vaccinations in Public and Private Low Income and Affordable Senior Housing Settings. Owners/managers are encouraged to contact existing health care partners to determine if these partners have the capacity to operate a vaccination clinic on-site at the housing property. One option is to partner with the Local Board of Health. The vaccine allotment for these clinics would be over and above the normal 100 dose per week allotment for LBOHs. Scheduling and logistics are the responsibility of the housing owner/manager.

2/2/21 Details about the roles of LBOHs and Emergency Managers in the Department of Transitional Assistance's Isolation and Quarantine Food Program were delineated. Details about the process and timelines for LBOHs to request COVID vaccines were updated. Second doses will no longer be sent automatically; they must be ordered according to a specific timeline as shown in a sample calendar. New guidance from the CDC about how to pack vaccines for transport (to the homebound) was shared. Vaccine supply remains limited nationally and internationally. Everyone needs to adhere to the vaccination priority groups. The timeline for moving through these groups remains uncertain.

2/5/21 Emergency Order #62 which limited capacity at certain places such as gyms, libraries, and places of worship will expire on 2/8, and capacity limits will return to 40%, however the gatherings limit will remain at 10 people indoors, 25 people outdoors. MA has detected 7 instances of the B.1.1.7 variant strain of COVID-19. Concerns were raised about whether COAs can legally fill out vaccination registration forms on behalf of senior residents; MAHB believes they can, and that they have liability protection under the Federal PREP Act. The State has created a Vaccine Scheduling Resource phone line, for people ages 75 and older, reachable by calling 2-1-1. Unpaid Essential Caregivers who care for certain medically complex individuals are now eligible to receive vaccine. Starting 2/5, vaccine providers will not receive new vaccine allocations if they have not administered 85% of the cumulative doses shipped. MA has launched a public awareness campaign to improve confidence in the vaccine; LBOHs are encouraged to use materials provided in a toolkit.

2/9/21 Youth and Adult sports guidance has been updated with regard to number of spectators allowed and removing limits of 25 players per playing surface. Details of the MA "Trust the Facts Get the Vax" campaign were shared. LBOHs are reminded to report within 24 hours vaccination doses administered; failure to do so makes it look like the vaccine is not being effectively utilized. Questions about the ability to draw up extra doses of vaccine, and the use of 'low dead-volume' syringes were raised. The State acknowledged that there is pressure to provide local clinics, however they find the mega-sites are the most efficient at vaccinating people as quickly as possible. Currently there is 4 times the number of requests for vaccination as there are vaccines available. LBOHs are encouraged to partner regionally, especially if they are not located near a mega-site.

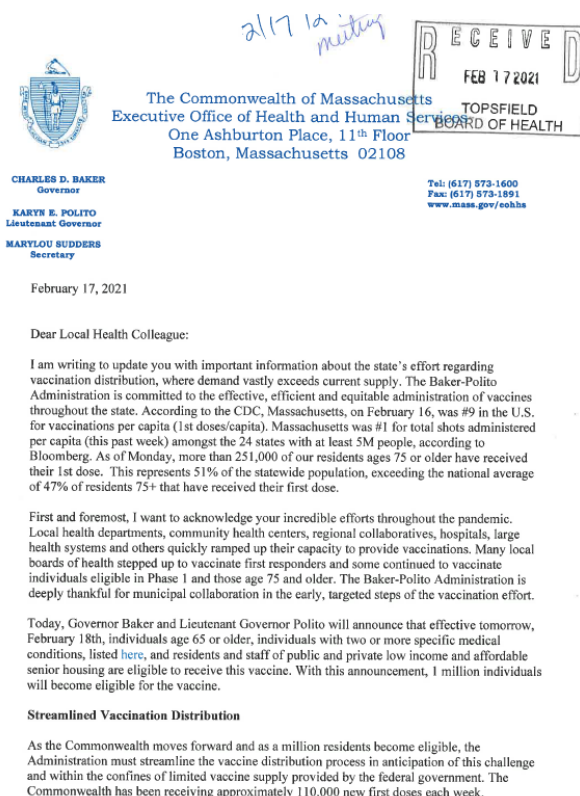
2/12/21 The State announced a competitive "Public Health Excellence Grants Program" to increase the number and scope of public health districts and shared services agreements in order to strengthen the service delivery capabilities of the local public health system. \$10 million in the State FY2021 budget will provide funding for up to 30

groups of municipalities to expand shared services arrangements and support new cross-jurisdictional sharing arrangements. This new initiative will implement the recommendations of the Special Commission on Local and Regional Public Health (Blueprint for Public Health Excellence report, June 2019). School Transportation Guidance has been updated, with a focus on physical distancing requirements and bus capacities. School districts are encouraged to work with their LBOHs if they have concerns. The CDC released new guidance about masking, emphasizing fit and recommending double-masking as a way to improve the fit of a mask. State Public Health Nurses were on hand to answer vaccine clinical questions about extra doses and low dead volume syringes. The CDC released new guidance about Vaccinating Homebound Persons with COVID-19 Vaccine, which presents unique storage and handling challenges. The state now issues weekly vaccination provider bulletins and has set up live Q&A sessions for vaccinators.

2/16/21 The Executive Office of Elder Affairs provided more details about vaccination clinics in partnership with Senior Affordable Housing. It is up to the local Housing Agency to find a vaccine provider with which to partner, complete a planning survey, educate residents, review space needs, identify staffing needs, and develop an appointment system. They must then wait until Priority Group 2 is activated by the Governor. The Vaccine provider will then request doses from MDPH. The order might be modified, delayed or denied by MDPH depending on multiple factors. Vaccine for these clinics will come out of a separate 'congregate care facilities' allotment. Lately stormy weather has been a factor in vaccine shipment delays. Twenty-nine (29) new cases of the B.1.1.7 COVID-19 variant have now been identified in MA, and none of these were linked to travel, which tells us that it is circulating in the community.

Board Members thanked Chair Knutsen for the time and effort she has put into attending and reporting on these meetings.

Chair Knutsen read into the record a letter received 2/17/21 from Marylou Sudders, Secretary of the Executive Office of Health and Human Services:



High-capacity throughput vaccination, available across the Commonwealth, is important to ensuring vaccines do not sit idle. To avoid confusion and increase access, vaccination locations must be available to all residents and not narrowly restricted by geography. Currently, almost 95% of our population lives within a 45-minute drive of a mass vaccination site or within 30 minutes of a regional site. This is in addition to the growing number of pharmacies and other retail locations administering doses, currently numbered at 105.

#### Equity

In addition to increasing efficiency in administering the vaccine, the Commonwealth must ensure that the program is equitable and meets the needs of communities that have been most disproportionately impacted by COVID-19. Utilizing the social vulnerability index as a starting point, the Department of Public Health has identified 20 municipalities that have had the greatest COVID burden and have the greatest percentage of non-white residents. These municipalities are: Boston; Brockton; Chelsea; Everett; Fall River; Fitchburg; Framingham; Haverhill; Holyoke; Lawrence; Leominster; Lowell; Lynn; Malden; Methuen; New Bedford; Randolph; Revere; Springfield; and Worcester.

Public Health Commissioner Monica Bharel has reached out to these municipal leaders to assist with increasing awareness, to address vaccine hesitancy and to mitigate barriers to vaccine access. These municipalities will continue to distribute vaccine at the local level, are prioritized for the retail pharmacy program, and are served by community health centers, hospitals and other health care providers administering vaccine in the community.

#### Serving the most vulnerable

The Commonwealth is fortunate that so many local public health officials want to help vaccinate their residents. Given the constraints on vaccine supply, the Administration is asking our local officials to focus efforts around outreach to vulnerable, hard to reach populations, including homebound seniors, individuals who participate in 'meals on wheels' and others who are eligible but not able to travel to a vaccine site. Local officials are more adept at identifying and meeting these high need populations and can arrange for them to be vaccinated either by the local board of health, connect them to community providers or refer to the State's vaccination program for homebound individuals, which will launch in the coming weeks.

#### Regional Collaboration

Additionally, municipalities may propose regional collaborations that meet specific geographic needs identified by the state and must meet specific requirements including:

- Have the capacity to vaccinate minimally 750 individuals per day, 5 days per week;
- Serve unmet need geographically, as identified by the Department of Public Health;
- Meet an administration rate threshold of 85% and report doses within 24 hours;
- Serve all residents of the Commonwealth; collaborations may focus outreach efforts towards those who live or work in the area but must be open to all Massachusetts residents; and
- Provide public links for vaccine appointments on Mass.gov/COVIDVaccine.

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Other important ways for municipalities to engage in the Commonwealth's vaccine program include:

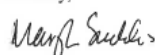
- Promote vaccine acceptance by establishing COVID ambassador programs, providing tele-townhalls or developing messaging campaigns in multiple languages;
- Encourage and assist residents to utilize mass vaccination sites and retail pharmacies for vaccination;
- Plan, develop or coordinate vaccine programs for residents living in public and private low income and affordable senior housing; or
- Identify, plan and organize vaccination of homebound residents who are unable to access any other vaccination program as they become eligible.

Effective the week of March 1st, the state will no longer provide first dose vaccines for individual municipal clinics, except for the twenty disproportionately impacted communities and established and approved Regional Collaboratives. Municipalities will receive second doses to ensure that all residents have been fully vaccinated by individual local board of health clinics.

On Friday, February 19th, at 9 am, the Department of Public Health will hold a webinar for local boards of health to review the opportunities to distribute vaccine as outlined above. The Department will answer questions and provide a specific how-to-guide for municipalities to reach the most vulnerable residents.

This is a shared responsibility and herculean effort to offer safe and effective vaccines to millions of Massachusetts residents. Working together, state and local government along with our health care partners can meet this challenge and ensure that every Massachusetts resident will have the opportunity to be vaccinated.

Sincerely,



Marylou Sudders

Chair Sheryl Knutsen informed the Board that Governor Baker announced at a Press Conference on 2/17/21 that Local Boards of Health will no longer be included in the vaccine first dose roll-out unless they can meet the criteria outlined in Ms. Sudders' letter, with the possible exception of hosting local clinics for Elderly Low / Moderate Income congregate housing and home-bound residents. Details are still to be determined by the Governor's office.

Health Director Wendy Hansbury informed the Board that the Topsfield Board of Health COVID-19 Vaccine Clinics have been responsible for administering over 1,200 COVID-19 Moderna vaccines. The Governor's office is allowing Local Boards of Health to administer second doses for those who have received their first vaccine. Approximately 300 Court Officers and Sheriff Department employees are scheduled to receive their second dose. Ms. Hansbury reported that a portion of Topsfield's 75+ population have been vaccinated, and there has been one vaccine clinic held at Little Brook Village for residents 75+.

Ms. Hansbury expressed thanks to the following for their assistance with the vaccine clinics:

- Topsfield Fair Grounds Management and Staff
- Topsfield Fire Chief Jenifer Collins-Brown
- Topsfield Board of Health Chair Sheryl Knutsen RN
- Topsfield Board of Health Member Mark Rizza
- Hamilton Public Health Nurse Rachel Lee RN
- Hamilton Fire Chief Ray Brunette
- Topsfield Board of Health Sr. Administrative Assistant Susan Winslow
- Council on Aging Director Kathleen Barbarisi and the Topsfield Council on Aging
- The Northern Essex County Regional Medical Reserve Corps and Coordinator Liisa Jackson

Mr. Fixler suggested that CARES Act funding could be used to expand the hours for the Administrative Assistant position in the Board of Health. Ms. Hansbury explained that the Town has already spent down the CARES Act funds so there are no funds for this. Ms. Hansbury informed the Board that there is \$30,000 still available in funding to be used for the COVID Response Nurse.

## **OLD BUSINESS**

### FY22 Budget

Health Director Hansbury informed the Board that she and Chair Knutsen recently met with the Topsfield Finance Committee regarding the following:

- Request to regain 2 hours taken from the Administrative Assistant position in 2017
- Request to re-fund the Minutes Secretary position
- Increase funding for sharps disposal
- Increase funding for vaccine purchase
- Increase funding for Dead Animal Disposal

Ms. Hansbury reported that the request to place the Septic Loan Program on the Town Warrant was rejected by the Selectmen, so it did not go before the Finance Committee. Ms. Hansbury and Ms. Knutsen presented a request for a Revolving Fund before the Selectmen prior to the meeting with the Finance Committee, and they are working on the request with Finance Committee Member Jon Guido. Mr. Hunt offered his assistance with this endeavor.

#### 2021 NEMMC Best Management Practice Plan

Board Members reviewed the 2021 NEMMC Best Management Practice Plan for Topsfield. Chair Knutsen informed the Board that this year's cost will be \$48,389.00 which comes from the Town's Cherry Sheet. The Board discussed the past year mosquito management activity and the resident exclusion request process.

*VOTE: Mr. Fixler made a motion to authorize Health Director Wendy Hansbury to approve larviciding, adulticiding, barrier treatments and pesticide spraying as recommended by NEMMC and to notify the Board of Health immediately upon making such decisions. Seconded by Mr. Hunt. Chair Knutsen called for a roll-call vote after determining that there was no further discussion:*

*Fixler – yes*

*Rizza – yes*

*Hunt -yes*

*Knutsen – yes*

*The motion passed in a vote of 4-0.*

*VOTE: Mr. Rizza made a motion to approve the 2021 NEMMC Best Practice Management Plan for Topsfield. Seconded by Mr. Hunt. Chair Knutsen called for a roll-call vote after determining that there was no further discussion:*

*Fixler – yes*

*Rizza – yes*

*Hunt – yes*

*Knutsen – yes*

*The motion passed in a vote of 4-0.*

#### Board of Health Annual Report

Ms. Winslow has created a draft of the report which is due in the Select Board office on March 1, 2021. Chair Knutsen and Health Director Hansbury will be working from the draft to create the final report.

#### Public Health Excellence Grants Program

New funding in the amount of \$10 million will become available to implement recommendations of the Special Commission on Local and Regional Public Health. This is an effort to increase the scope of public health shared services agreements and strengthen the delivery capabilities of local Boards of Health. Information will be posted on COMMBUYS.

#### **CORRESPONDENCE**



Senate Bill #2446

Health Director Hansbury explained that this Bill requires that municipalities must give the local Agricultural Commission a 45-day period to review and comment on any proposed regulations that impact farmers markets, farms, the non-commercial keeping of poultry, livestock and bees as well as the non-commercial production of fruit, vegetables and horticultural plants. The Agricultural Commission may then hold a public meeting. The Agricultural Commission may also vote to waive the 45-day review period. Ms. Hansbury has reached out to the Topsfield Agricultural Commission and will be attending their next meeting.

Email from Kate Murphy

The Board reviewed an email from Kate Murphy thanking the Board of Health for their efforts during the COVID-19 pandemic.

**HEALTH AGENT REPORT**

Ms. Hansbury informed the Board that, in addition to planning and executing numerous COVID-19 Vaccine Clinics, business remains brisk at the Board of Health including but not limited to:

- Attendance at ZOOM Public Meeting re PFAS
- Presenter at Council on Aging Coffee & Conversation on COVID-19 and vaccine
- Participated in walk-through of schools prior to reopening
- Percolation and Deep Hole Testing for septic repairs
- Review of Septic Applications
- Review Title 5 Inspection Reports
- Answering questions and follow-up with residents
- Annual permit and license renewals

Update on Proposed Concert Venue

Mr. Hunt informed the Board that he heard that the proposal for a concert series on property owned by the Essex Agricultural Society on Route 1 across from Garden Street has been withdrawn.

**ADJOURN**

*VOTE: Mr. Hunt made a motion to adjourn at 8:35 PM. Seconded by Mr. Rizza. Chair Knutsen called for a roll-call vote:*

*Fixler – yes*

*Rizza – yes*

*Hunt – yes*

*Knutsen – yes*

*The motion carried in a vote of 4-0.*

Respectfully Submitted,

Susan Winslow

Recording Secretary

Items distributed:

1. Revised Agenda
2. Board of Health Meeting Minutes of January 20, 2021
3. Inter-agency Local Boards of Health COVID-19 webinars report from Sheryl Knutsen RN
4. NEMMC 2021 Best Management Practice Plan - Topsfield
5. NEMMC Public Meeting Notice and Agenda for 2/11/2021 Meeting
6. Letter dated 2/17/2021 from Marylou Sudders, Secretary of the Executive Office of Health and Human Resources
7. 2/15/2021 Email from Sheryl Knutsen RN with link to 'Blueprint for PH Excellence' information
8. Senate Bill No. 2446
9. 2/9/2021 Email from Kate Murphy

*These Meeting Minutes were accepted at the March 17, 2021 Board of Health Meeting.*