Commonwealth of Massachusetts
Town of Lanesborough

NEWTON MEMORIAL TOWN HALL
POST OFFICE BOX 1492
83 NORTH MAIN STREET
LANESBOROUGH, MA 01237

TELEPHONE: (413) 442-1167 FAX: (413) 443-5811
www.lanesborough-ma.gov

JOHN GOERLACH, Chairman
GORDON HUBBARD
MICHAEL MURPHY
JOSH LANG
Town Administrator

SELECTMEN’S MEETING AGENDA
Joint Meeting with the Ambulance Enterprise Committee

Selectmen’s Office: March 14, 2022
6:00 P.M.

I. CALL TO ORDER

II. ROLL CALL OF MEMBERS

___ John Goerlach, Chairman
___ Gordon Hubbard
___ Michael Murphy

___ Agenda Properly Posted

III. EXECUTIVE SESSION
Anticipated executive agenda in accordance with G.L. c. 30A, §21(a)(1) to discuss complaints against a public officer, employee, staff member or individual.

IV. PUBLIC COMMENTS

V. OLD BUSINESS
a. Mask Update
b. Berkshire Mantiques

VI. NEW BUSINESS
a. Committee Appointments
   a. Courtney DiCicco

b. Permits/Licenses
   a. Drive way Permit—Chichatobot Avenue
   b. Road Opening Permit—Stormview Road. Parcel number 235.23
   c. Entertainment License for Lanesborough Local (General Store Inc.)
d. **Annual Town Meeting**
   a. Discussion of Warrant Article: “To see if the Town will vote pursuant to General Laws Chapter 268A, §21A to authorize the Board of Selectmen to appoint a current Board member to the position of DPW Director.”

c. **Organizational Management**
   a. COVID Policy
   b. TV Quote and attendance of Planning Board Meetings—Clayson Creative. Agenda item requested by Selectmen Hubbard.
   c. Appointment of Administrative Assistant

f. **Contracts/Agreements**
   a. FY23 Comprehensive Public Health Nursing Services Contract (2%/$350 increase from last year.

g. **Finance**
   a. Discussion on Warrant dated 3/10/2022 in the amount of $193,790.15

h. **Joint Meeting Discussion**
   a. Paid Staffing Discussion with Ambulance Enterprise Fund

i. **Other Items**
   a. Linda Pruyn-Discussion about Senior Tax Exemption

**VII. SELECTMEN COMMENTS/ANNOUNCEMENTS**
   a. Date of next Selectmen’s Meeting – March 28, 2022 6:00 p.m.
   b. April 4, 2022 Open House from 5:00 p.m. to 7:00 p.m.

**VIII. ADJOURNMENT**

Join Zoom Meeting
https://us02web.zoom.us/j/86268691370

Meeting ID: 862 6869 1370
One tap mobile
+13126266799,,86268691370# US (Chicago)
+16465588656,,86268691370# US (New York)

Dial by your location
+1 312 626 6799 US (Chicago)
+1 646 558 8656 US (New York)
+1 301 715 8592 US (Washington DC)
+1 346 248 7799 US (Houston)
+1 669 900 9128 US (San Jose)
+1 253 215 8782 US (Tacoma)

Meeting ID: 862 6869 1370
Find your local number: https://us02web.zoom.us/u/kb50cemPCJ
Rules of Procedure for Board Meetings of Lanesborough Board of Selectmen Meetings

I. AGENDA
   A. The Town Administrative Assistant, in consultation with the Town Administrator and Chairman of the Board of Selectmen shall prepare an Agenda for Board of Selectmen meetings.
   B. Any requests for matters to be placed on the agenda shall be submitted in writing to the Town Administrative Assistant by noon three business days prior to regularly scheduled meetings. Anyone requesting items be placed on the agenda shall provide the topic of the item and sufficient information and detail so as to provide a reasonable notice of the nature and purpose of the agenda item.
   C. Agendas will be posted a minimum of 48 hours in advance of any meeting on our Town website, bulletin board and at the entrance door closest to the Library.
   D. Those wishing to speak in the public comment portion of the agenda shall provide their name and the topic of their comment. Public comments shall relate to items listed on the agenda. Topics shall be limited to matters of concern, official action or deliberation which are or may be before the Board of Selectmen.

II. MEETINGS
   A. Public Notice of the meetings shall be advertised and posted by the Administrative Assistant as required by law.
   B. The Chairman of the Board of Selectmen shall direct the meeting. In the absence of the Chairman, the senior member of the Board of Selectmen shall direct the meeting and shall have all powers and duties of the Chairman.
   C. The Modern Rules of Order shall be used to conduct the meeting unless otherwise modified by these Rules or waived by the Board of Selectmen. The Lanesborough Board of Selectmen shall be addressed by their respective titles.
   D. Residents and/or taxpayers may use audio or stenographic recorders to record all or any portion of the meeting. Said recorders shall be operated from the area set aside for the general public seating and may not be placed on the Board of Selectmen’s table without prior consent of the Chairman.
   E. Video recorders may be used to record all or any portion of a public meeting. The operator of the recorder shall remain seated in the area set aside for the general public or stand in the rear or to the side of the general public seating area so as to not interfere in any way with the activities of the Board of Selectmen or the ability of the general public to observe the Board.

III. PUBLIC COMMENT
   Residents and taxpayers of Lanesborough shall have the right to speak in the meetings during the Public Comment portion of the agenda. In order to conduct meetings in an orderly and productive manner the following rules and regulations shall govern such speakers:
   A. Comment from residents/taxpayers shall be received only after the speaker is recognized by the Chairman.
   B. The speaker shall announce his or her name and address prior to addressing the Board of Selectmen.
   C. The Chairman may rule out-of-order scandalous, impertinent, irrelevant, and redundant comments, or comments that attempt to disrupt or needlessly protract the proceedings of the meeting.
   D. The Chairman may request any individual to leave the meeting and may contact security to that end when that individual does not observe reasonable decorum. Further, the Chairman may request the assistance of law enforcement officers to remove a disorderly person when his/her conduct interferes with the orderly progress of the meeting.
   E. The Chairman may call a recess or adjournment to another time when the lack of public decorum interferes with the orderly conduct of the meeting.
   F. The Chairman may allocate available time among individuals wishing to comment.
   G. Time allocated for the public comment period at each meeting shall not exceed thirty (30) minutes and limited to citizens of Lanesborough unless prior approval is granted by the Lanesborough Board of Selectmen. Each speaker will be allotted three (3) minutes to present his or her topic. Said time limitations may be altered or waived at the Chairman’s direction.
   H. At the discretion of the Chairman conducting the meeting, a group of citizens registered to address the Board of Selectmen on the same issue may be required to designate a spokesperson.
ADVISING REGARDING FACE COVERINGS

This Advisory has been updated as of March 1

The Department of Public Health urges all eligible residents to get vaccinated and stay up to date on COVID vaccinations including when eligible for booster doses. Vaccination remains the most effective protection against serious illness, hospitalization, and death.

Recognizing that Massachusetts is a national leader in vaccine acceptance, and in light of recent positive progress on COVID-19 indicators, the Department of Public Health now advises that a fully vaccinated person should wear a mask or face covering when indoors (and not in your own home) if you have a weakened immune system, or if you are at increased risk for severe disease because of your age or an underlying medical condition, or if someone in your household has a weakened immune system, is at increased risk for severe disease or is unvaccinated.

As a reminder, there are multiple conditions that may put someone at higher risk for severe disease; information on those conditions can be found on the Centers for Disease Control and Preventions website [https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html). Your primary care physician can advise you whether you are at increased risk.

For individuals who are not fully vaccinated, it is important that you continue to wear a face covering or mask to help prevent you from spreading COVID-19 to other people.

Individuals who are considered close contacts or who have tested positive must follow the isolation and quarantine guidance which includes wearing a mask in public for 5 more days after they leave isolation or quarantine on day 5, regardless of vaccination status.

All people in Massachusetts (regardless of vaccination status) are [required to continue wearing face coverings in certain settings](https://www.mass.gov/maskrules), including some transportation and health care facilities. As of February 25th, the CDC is no longer requiring that masks be worn on school buses or vans for K-12 students and children in childcare programs. The Departments of Elementary and Secondary Education (DESE) and Early Education and Care (EEC) have since updated their guidance. Please see [www.mass.gov/maskrules](https://www.mass.gov/maskrules) for a complete list of venues where face coverings have remained mandatory since May 29, 2021.

When you wear a face covering or cloth mask, it should:
• Be the highest quality mask that is comfortable and that you will wear consistently,
• Fit snugly but comfortably against the side of the face,
• Be secured with ties or ear loops,
• Include multiple layers of fabric,
• Allow for breathing without restriction, and
• Be able to be laundered and machine dried without damage or change to shape.

For more information, please refer to the CDC at: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html This advisory may change based on public health data and further guidance from the CDC.
Employee Contraction or Exposure to COVID-19

**Purpose:** The purpose of this policy is to follow the Center for Disease Control (CDC) by following the guidelines set for best-practices to address public and staff health safety and security initiatives such as infection mitigation and response action.

**Guidelines:** The health and welfare of Town employees is paramount. The Town expects all departments and staff to take appropriate action in response to reports of potential COVID-19 or other pandemic disease exposure.

**When an Employee Tests Positive for COVID-19 or Other Pandemic Disease**

The employee should immediately contact his or her department director/supervisor and the Town Administrator to report their condition. Employees are encouraged to contact their primary health care physician for a copy of their test results to furnish to their direct supervisor and Town Administrator. If an in-home test is used a documented picture will suffice for this requirement.

**Contraction of COVID-19**

Require the employee to self-quarantine and not return to work for five (5) days (as updated by the CDC on December 27, 2021) and require an in-home negative test or physician’s note stating a negative test and that the employee no longer has COVID-19. Then the employee may return to work.

**When an Employee is Exposed to COVID-19 or Other Pandemic Disease**

If the infected employee believes he or she was exposed to COVID-19 or other pandemic disease in the course of their employment and/or at home or in public, and believes he or she contracted the disease (follow step listed above) or has come into direct contact with someone who has contracted COVID-19 or someone who is suspected to have COVID-19, or someone who is exhibiting symptoms of COVID-19, employees will notify their department director/supervisor and the Town Administrator immediately and before coming into work. If the Employee is already at work the employee will notify their department director/supervisor and the Town Administrator who will then evaluate sending the employee home to self-monitor. The employee can work remotely, if possible.
Exposure to Covid-19 *

Require the employee to self-quarantine and not return to work for five (5) days (as updated by the CDC on December 27, 2021). The employee can work remotely, if possible.

*If an employee has been directly exposed to someone who has contracted or is exhibiting signs of COVID-19 and the employee is fully vaccinated the employee does not have to be sent home if the employee is not exhibiting symptoms themselves but must wear a mask and practice social distancing for five (5) days.

Paid Time Off for COVID-19 Contraction and/or Quarantine

Under the Families First Coronavirus Response Act: Employees may receive paid time off for their quarantine period. See the attached Act for explanation.

1. If an employee becomes sick during the workday, the person will be sent home immediately.

2. Contact the local Board of Health about suspected or confirmed COVID-19 or other pandemic disease cases or exposure if more guidance is needed.

3. Inform the employee of available sick and vacation leave options, along with enhanced paid sick leave offered by the Families First Coronavirus Response Act (FFCRA).

4. The concurrent use of sick/vacation time with FFCRA paid leave is at the discretion of the Town Administrator.

5. Explain ADA privacy rules and assure the employee that he or she will not be identified by name to their co-workers as having contracted the virus or exposed to the virus.

   a. The ADA (Americans with Disability Act) prohibits employee disability-related inquiries or medical examinations unless they are job-related and consistent with business necessity when an employer has a reasonable belief, based on objective evidence, that

      i. An employee’s ability to perform essential job functions will be impaired by a medical condition; or

      ii. An employee will pose a direct threat due to a medical condition.¹

   b. This reasonable belief must be based on objective evidence obtained, or reasonably available to the employer, prior to making a disability-related inquiry or requiring a medical examination.²

   c. All information about applicants and/or employees obtained through disability-related inquiries or medical examinations must be kept confidential. Information regarding the medical condition or history of an employee must be collected and maintained on separate forms and in separate medical files to be treated as a confidential medical record.³

6. Contact tracing for office staff without disclosing the infected or exposed employee’s identity, advise them that an individual that has been physically present in their work area has tested positive for or been directly exposed to the virus. Advise them, out of an abundance of caution, the Town is encouraging them to self-monitor. If possible, allow the employees to work remotely. Encourage the impacted employees to reach out to their primary care physician to seek advice as to what additional steps they should take.

7. The Department Director will decide as to how long and if necessary, an area of the office/department needs to shut down until the office can be deep cleaned and sanitized.

8. The infected or directly exposed employee will not be allowed to return to work until he or she has been cleared by a physician (if-contracted), has a negative in-home test (if-contracted), or has quarantined for five (5) days without showing symptoms of COVID-19.
Families First Coronavirus Response Act: Employee Paid Leave Rights

The Families First Coronavirus Response Act (FFCRA or Act) requires certain employers to provide employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19. The Department of Labor’s (Department) Wage and Hour Division (WHD) administers and enforces the new law’s paid leave requirements. These provisions will apply from the effective date through December 31, 2022.

Generally, the Act provides that employees of covered employers are eligible for:

- **Two weeks (up to 80 hours) of paid sick leave at the employee’s regular rate of pay** where the employee is unable to work because the employee is quarantined (pursuant to Federal, State, or local government order or advice of a health care provider), and/or experiencing COVID-19 symptoms and seeking a medical diagnosis; or

- **Two weeks (up to 80 hours) of paid sick leave at two-thirds the employee’s regular rate of pay** because the employee is unable to work because of a bona fide need to care for an individual subject to quarantine (pursuant to Federal, State, or local government order or advice of a health care provider), or to care for a child (under 18 years of age) whose school or child care provider is closed or unavailable for reasons related to COVID-19, and/or the employee is experiencing a substantially similar condition as specified by the Secretary of Health and Human Services, in consultation with the Secretaries of the Treasury and Labor; and

- **Up to an additional 10 weeks of paid expanded family and medical leave at two-thirds the employee’s regular rate of pay** where an employee, who has been employed for at least 30 calendar days, is unable to work due to a bona fide need for leave to care for a child whose school or child care provider is closed or unavailable for reasons related to COVID-19.

**Covered Employers:** The paid sick leave and expanded family and medical leave provisions of the FFCRA apply to certain public employers, and private employers with fewer than 500 employees. Most employees of the federal government are covered by Title II of the Family and Medical Leave Act, which was not amended by this Act, and are therefore not covered by the expanded family and medical leave provisions of the FFCRA. However, federal employees covered by Title II of the Family and Medical Leave Act are covered by the paid sick leave provision.

Small businesses with fewer than 50 employees may qualify for exemption from the requirement to provide leave due to school closings or child care unavailability if the leave requirements would jeopardize the viability of the business as a going concern.

**Eligible Employees:** *All employees* of covered employers are eligible for two weeks of paid sick time for specified reasons related to COVID-19. *Employees employed for at least 30 days* are eligible for up to an additional 10 weeks of paid family leave to care for a child under certain circumstances related to COVID-19.

**Notice:** Where leave is foreseeable, an employee should provide notice of leave to the employer as is practicable. After the first workday of paid sick time, an employer may require employees to follow reasonable notice procedures in order to continue receiving paid sick time.
Qualifying Reasons for Leave:

Under the FFCRA, an employee qualifies for paid sick time if the employee is unable to work (or unable to telework) due to a need for leave because the employee:

1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;
2. has been advised by a health care provider to self-quarantine related to COVID-19;
3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;
4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2);
5. is caring for a child whose school or place of care is closed (or child care provider is unavailable) for reasons related to COVID-19; or
6. is experiencing any other substantially-similar condition specified by the Secretary of Health and Human Services, in consultation with the Secretaries of Labor and Treasury.

Under the FFCRA, an employee qualifies for expanded family leave if the employee is caring for a child whose school or place of care is closed (or child care provider is unavailable) for reasons related to COVID-19.

Duration of Leave:

For reasons (1)-(4) and (6): A full-time employee is eligible for 80 hours of leave, and a part-time employee is eligible for the number of hours of leave that the employee works on average over a two-week period.

For reason (5): A full-time employee is eligible for up to 12 weeks of leave (two weeks of paid sick leave followed by up to 10 weeks of paid expanded family & medical leave) at 40 hours a week, and a part-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

Calculation of Pay:

For leave reasons (1), (2), or (3): employees taking leave are entitled to pay at either their regular rate or the applicable minimum wage, whichever is higher, up to $511 per day and $5,110 in the aggregate (over a 2-week period).

For leave reasons (4) or (6): employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage, whichever is higher, up to $200 per day and $2,000 in the aggregate (over a 2-week period).

For leave reason (5): employees taking leave are entitled to pay at 2/3 their regular rate or 2/3 the applicable minimum wage, whichever is higher, up to $200 per day and $12,000 in the aggregate (over a 12-week period).
Certain provisions may not apply to certain employers with fewer than 50 employees. See Department FFCRA regulations (expected April 2020).

Under the Act, special rules apply for Health Care Providers and Emergency Responders.
March 2, 2022

Dear Lanesboro Board of Health,

The Berkshire Public Health Alliance and its Public Health Nursing program had another busy year in 2021! The Public Health Nursing staff handled almost 5,500 positive COVID cases in 2021 -- plus thousands more as Omicron hit in January and February 2022 -- along with the associated contact tracing, quarantine and isolation, and epidemiological investigation to identify sources of infection. As 2021 began, and vaccines became available, the Alliance was a lead partner in the Berkshire Vaccine Collaborative, which provided more than 90,000 COVID-19 vaccinations between January and June 2021. The Alliance also provided pediatric COVID-19 clinics at county elementary schools and several large booster clinics in December 2021 and January 2022.

Despite the work associated with COVID, the normal infectious disease reporting, case investigation and follow-up were remained as priorities during this time. The public health nurses checked the MA Virtual Epidemiological Network (MAVEN) every day and followed up on all reportable diseases as necessary. Diseases seen in 2021 included zoonotic diseases (including tick-borne illnesses), food and water-borne illnesses like salmonella, campylobacter, listeria and giardia, vaccine-preventable illnesses like pertussis (whooping cough) and chicken pox, and many others including Hepatitis B and C, influenza, meningitis and more. The Public Health Nurses also provided case management and medication oversight to any active tuberculosis (TB) patients in the towns they cover. As always, all infectious disease management by the PH Nurses is designed to keep the rest of the community safe and prevent disease from spreading.

Fortunately, the Alliance’s successful Public Health Excellence (PHE) Grant Application to the state DPH Office of Local and Regional Health allowed for the hire of full-time Public Health Nurse Nancy Slattery in July 2021. Nancy joined long-term Public Health Nurse Leslie Drager and the two of them make a formidable team! The PHE grant also permitted the Alliance to hire a Coordinator, Lydia Shulman, who is your point of contact for any administrative questions related to Alliance services. In addition, the Alliance received a grant from DPH’s Bureau of Infectious Disease Services, which allowed for the hiring of additional COVID-19 contact tracers when caseloads became unmanageable, and a Data Specialist/Epidemiologist, Jennifer Scott, who joined the Alliance/BRPC in late January 2022.

As 2022 begins, and we all learn to live with COVID-19 as an endemic disease, we are hoping to return to prevention and wellness activities in the Public Health Nursing program. We are interested in hearing from our local Boards of Health about the issues and needs you see in your communities and where you would like to see public health nursing resources dedicated. We will be reaching out to you over the next couple of months by survey, in person or both to gather your insights so that we can provide what your community needs most. As always, we would be happy to come join a Board of Health meeting – please feel free to contact us and set up a time!

Attached please find your public health nursing contract for FY 2023. Please return a signed copy of the contract before July 1, 2021, to avoid an interruption in services.

413-442-1521, x37, Fax: 413-442-1523
http://www.berkshireplanning.org/major-initiatives/berkshire-public-health-alliance/
Berkshire Public Health Alliance
1 Fenn Street Suite 201, Pittsfield, Massachusetts 01201

You should always feel free to contact Leslie or Nancy with any public health nursing questions. Leslie can be reached at ldrager@berkshireplanning.org or (413) 822-6236 and Nancy at nslattery@berkshireplanning.org or (413) 441-3524. For administrative questions, please contact Lydia at lshulman@berkshireplanning.org. Any other questions or concerns, please feel free to reach out to me directly at lkittross@berkshireplanning.org.

We look forward to continuing to work with your community in FY 2023!

Sincerely,

Laura Kittross
Public Health Program Manager, Berkshire Regional Planning Commission
Director, Berkshire Public Health Alliance

413-442-1521, x37, Fax: 413-442-1523
http://www.berkshireplanning.org/major-initiatives/berkshire-public-health-alliance/
Agreement Between

Berkshire Regional Planning Commission
(Host Agency)
One Fenn St
Pittsfield, MA 01201
(On Behalf of the Berkshire Public Health Alliance)

And

The Town of Lanesborough
83 N. Main St.
Lanesborough, MA 01227

This AGREEMENT, made as of July 1, 2022, is by and between the Berkshire Regional Planning Commission, hereafter the “COMMISSION” as Host Agency on behalf of the Berkshire Public Health Alliance, hereafter “ALLIANCE”, and the Town of Lanesborough, hereafter “MEMBER,” jointly referred to as the parties.

Whereas, municipalities in Berkshire County have entered into an Inter-municipal Agreement (IMA) to create the ALLIANCE, with the COMMISSION as Host Agency,

Whereas, public health nursing services are sought by the MEMBER, and the MEMBER agrees that Alliance staff providing the service(s) are acting under the direction and control and on the behalf of the Member Board of Health, and shall be appointed as Public Health Nurses by the Member Board of Health,

Now, therefore, the parties agree as follows:

I. The ALLIANCE agrees to provide the following public health nursing services under this contract:

1. Massachusetts Virtual Epidemiologic Network (MAVEN) surveillance, investigation and follow-up (105 CMR 300): Receive and process information for reportable and communicable disease through the use of MAVEN and to implement appropriate follow up measures and interventions;

2. Disease outbreaks: investigation and implementation of follow up measures and interventions. In the case of an active tuberculosis case or other large-scale outbreak this includes the initial disease investigation and the establishment of a community plan to address direct care observation mandates and other obligations required by the State Department of Public Health;

3. Health Promotion and Community Wellness and Assessment: To provide accessible monitoring of health risks to the community, community health education programs, health promotion and screening as necessary in accordance with accepted standards of care, and social services support for the Member Board of Health, to include 1-3 wellness events at town hall or another location. The Town of Lanesborough will also be given priority for all
grant-funded public health nursing activities such as Matter of Balance classes, tick testing services through UMASS Amherst, or other grant opportunities that may arise.

4. Flu Clinics: Address community health through administration of vaccinations, including public flu clinics. Recipients may be asked for insurance information. At least one flu clinic will be held annually under this contract in the Member community. Flu clinics will be scheduled in conjunction with the Board of Health and other departments or organizations as requested, and may be directed to specific sub-populations (e.g., elderly, school children, municipal employees, etc.) or locations if requested;

5. Reporting: Provide the Member Board of Health with statistics regarding members of the community served through quarterly reporting. At a minimum, information provided will include: number of reportable diseases and follow up, number of flu shots given and other health promotion statistics. Regional statistics as available will also be provided.

II. Terms of Agreement

This AGREEMENT shall be in effect from July 1, 2022 through June 30, 2023. The ALLIANCE will bill the Town of Lanesborough $976.80 on a quarterly basis, for a total of $3,907.20 annually from July 1, 2022 to June 30, 2023. The first quarterly payment shall be due on July 1, 2022. Subsequent payments shall be due on October 1, January 1, and April 1. Full payment may be made at any time at the discretion of the MEMBER.

This AGREEMENT may only be amended as agreed to in writing by the parties.

Withdrawal from this contract may be made by either party upon 90 days written notice. In case of withdrawal by the MEMBER, the COMMISSION shall be entitled to compensation for services provided to the date of withdrawal.

In witness thereof the COMMISSION (on behalf of the ALLIANCE) and the MEMBER have executed this agreement as of the date above written.

BRPC (COMMISSION):

By _______________________________ Date: _______________

Thomas Matuszko, Executive Director
One Fenn St
Pittsfield, MA 01201

Town of Lanesborough (MEMBER):

By _______________________________ (title) Date: _______________

83 N. Main St.
Lanesborough, MA 01237
Comprehensive Public Health Nursing Services FY22: $3907.20

Includes:

- Massachusetts Virtual Epidemiologic Network (MAVEN) checked daily for community-specific disease reports, including COVID.

- Mandated disease report surveillance, follow up and investigation, including contact tracing for all COVID cases.

- Tuberculosis (TB) contact follow ups and oversight/management of therapy for active cases as required by law. Note: BOH may be required to provide some directly observed therapy under direction of the public health nurse.

- Disease outbreak management/contact vaccinations.

- Rabies exposure management.

- Flu vaccination clinics, 1-3 per year, based on population and need. Pneumococcal, Hepatitis A or other vaccinations may also be offered as appropriate and available. COVID-19 vaccination clinics should a vaccine become available.

- Wellness/educational programs (1-3 per year, based on population and need) – educational programs can be directed at the general public or specific populations (elderly, schools, at risk). Specific programs chosen in conjunction with the Board of Health - some examples are mosquito & tickborne diseases, fall prevention in elderly, chronic disease self-management, opioid (use and overdose) prevention education, cardiovascular health, nutrition, mental health, flu care at home, etc. Blood pressure clinics may be substituted upon request of the BOH. In FY 21, wellness programming will depend on COVID caseloads.

- Attendance at at least one Board of Health meeting annually, to discuss priorities and activities. Depending on COVID restrictions, this attendance may be virtual.

- Priority for other Alliance wellness activities funded through other grants, such as Matter of Balance (fall prevention classes).

- Materials/literature on health and wellness topics to distribute in municipal and other public buildings.

- Wellness checks in conjunction with housing inspector (when housing inspector/BOH has reason to be concerned about a health risk in a home).

- Participation in other health related programs in the community (school related wellness, Mass in Motion towns, community wellness efforts, etc.)

- Quarterly reports to the Board of Health.