

TONY JUDGE - Chair  
CHRISTINE McKIERNAN, M.D., Vice-Chair  
KAREN WALSH PIO - Clerk  
JESSICA COLLINS  
STEPHEN FRANTZ

SHARON HART, Director of Public Health

**NOTICE**

**BOARD OF HEALTH MEETING  
(Hybrid – attend via Zoom Webinar or in person at South Hadley Library)  
&  
AGENDA**

**February 14, 2023**

**6:00 p.m.**

Join Zoom Webinar from your Computer:  
Please click this URL to join:

<https://us02web.zoom.us/j/84213856018?pwd=MHE4dCtOQ2MwV2ozNzdJT1BUN25iZz09>  
Passcode: 839918

Or join by phone:  
US: +1 309 205 3325  
Webinar ID: 842 1385 6018 Passcode: 839918

**NOTE: Not all the topics listed in this notice may actually be reached for discussion. In addition, the topics listed are those which the Chair reasonably expects will be discussed as of the date of this notice.**

**To: Board of Health Members**

**From: Sharon D. Hart, Director of Public Health**

**Re: A Board of Health Meeting (Hybrid) will be held on Tuesday, February 14, 2023 at 6:00 p.m. at the South Hadley Library.**

**1: Chair to Call the Meeting to Order**

**2: Acceptance of the Minutes of the January 10, 2023 meeting.**

- 3: **Announcements and Open Forum (10 Minutes) – NOTE: Persons wishing to submit written comments/questions regarding items which are not a subject of a public hearing are encouraged to use the following Google form:**

<https://forms.gle/RpGAMgH1zBGm77T89>

4: **New Business:**

- (a): **COVID-19 Update**
  - **COVID-19 Report (Sharon)**
    - **Wastewater testing**
    - **Vaccine clinics**
- (b): **Director's Report**
- (c): **Health Equity Policy Framework**
- (d): **Overview of Buttery Brook Watershed Restoration Reports from Fuss & O'Neill, Inc.**
- (e): **Skinner Woods Estates – Update on septic systems**
- (f): **What is going on Regionally with the Cannabis Industry and Overview of the Cannabis Control Commission.**
- (g): **Review and discussion of Rental Registry Regulation**

5: **Old Business:**

- (a): **Master Plan - Status**
- (b): **Board Member Sign-off on Glufosinate/Glyphosate Regulation**
- (c): **South Hadley Human Rights Commission Appointment – Status**

6: **Adjourn Meeting**

\*\*\* Please note: Meetings are recorded\*\*\*

TONY JUDGE, Chair  
CHRISTINE MCKIERNAN, MD, Vice-Chair  
KAREN WALSH PIO, LICSW, LADC 1, Clerk  
JESSICA COLLINS  
STEPHEN FRANTZ

SHARON D. HART, Public Health Director

## Board of Health Minutes

January 10, 2023

--Draft-- --Draft-- --Draft-- --Draft--

Present: Tony Judge, Chair; Dr. Christine McKiernan, Vice Chair; Jessica Collins, Board of Health Member; Karen Walsh Pio, Board of Health Clerk; Sharon Hart, Public Health Director; Jennifer Jernigan, Assistant Public Health Director; Monasia Ceasar, Health Compliance Specialist, Maureen Couture, Public Health Nurse

***The Board of Health Meeting was called to order at 6:02 p.m. by Chair Judge.***

### 1. Acceptance of the Minutes of the November 11, 2022, Meeting:

Chair Judge introduced the minutes from the 11/11/22 meeting and questioned if there were any comments or changes to be made. No changes were brought forth to the Board. Walsh Pio made a motion to accept the meeting minutes and Collins seconded it. A roll call was taken, Collins, Judge, and Walsh Pio approved the minutes. Dr. McKiernan abstained as she was not present at the meeting and could not verify the accuracy of the minutes.

### 2. Announcements and Open Forum:

Hart introduced Maureen Couture, the newly appointed public health nurse. Couture outlined her primary duties for the Department and highlighted her efforts in disease surveillance and COVID-19 follow up. Hart noted that the Department does disease surveillance for over 90 communicable diseases and is actively following up on positive COVID cases of those who are 65 years of age and older. The Department receives notification from the state regarding positive PCR test results for follow up. Hart noted that she sends out a weekly report to Town Administration regarding case numbers and such. There has been a total of 74 COVID related deaths in Town since March 1, 2020.

The Town has received 9,000 COVID test kits that have been distributed to the COA, libraries, and other town buildings for public access. Test kits have also been delivered to positive cases upon request by the public health nurse. Walsh Pio noted that those 65 and older have access to 8 free test kits a month through Medicare. It was also mentioned that people should be mindful of the test kits expiration date prior to administering the test. Judge questioned if a new vaccine will be available soon. Hart noted the State is getting together to discuss what that looks like. There will be an analysis of the prevalence of strains to decide which strains should be included in the new booster.

Collins shared that the Public Health Institute will be hosting a webinar on January 20, 2023 at 12 pm about long COVID. Dr. McKiernan noted that Baystate hospital is also studying the effects of long term COVID. Collins noted she would share the link with the Department staff to be posted on the website and forwarded to the Western Mass Public Health Association.

### **3. Director's Update:**

Director Hart provided an update on the Department's monthly summary regarding complaints received, inspections conducted, notices issued, etc. Collins requested clarification on what housing complaints are. Hart provided an overview for the Department's response and enforcement role in the MA Sanitary Code.

Through the PHE grant, Hart and staff have begun to take intervention tobacco training hosted by the American Lung Association that will be implemented in the High School. Suspensions are no longer permitted as a consequence of being caught vaping. In addition to providing vape detectors, the Health Department will also aid in setting up a tobacco intervention and cessation program at the High School. Although effective, the cessation program cannot be mandated and must be completed on a volunteer basis. The program is known to have a high success rate, despite the lack of use in addiction recovery technologies like nicotine, patches, etc.

Hart shared she had originally wished to coordinate a blood drive through the American Red Cross but was informed that they no longer host mobile clinic blood drives, and instead have two permanent locations for blood donations. However, they host Red Cross Ready events to discuss emergency preparedness. The event has been set for January 19<sup>th</sup> at the Senior Center starting at 11 am. The Health Department will be present and raffling off emergency preparedness kits. Hart mentioned that all the schools in Town have been certified as shelters through the Red Cross. In the event of an emergency, Red Cross would help with shelter operations.

Director Hart reported that she has been working on the assessment of the septic systems for the condos being built on Skinner Woods Estate located on Amherst Rd. Per Hart, the assessment has been difficult to conduct as changes were made to the original plan without notice or approval. The Department also has to redo perc tests to accommodate the changes made to the original plan. The Planning Department also had to intervene as the proposed septic system design will now have to interfere into an area previously defined as restricted to accommodate all the changes made to the original property design and layout. The project developer will have to go before the Planning Board on January 23<sup>rd</sup> with the new proposal including all the changes made. Collins shared her frustration with this and asked if the developer is likely to face any consequences. Hart shared that penalties and additional requirements would have to be issued by the Planning Board.

Hart shared that the Age and Dementia Committee has released a new resource document for seniors. Director Hart mentioned she was recently asked if she would be a part of an intersectional Department of Mental Health Advisory Board. Upon waiting for background clearance, Hart was notified that South Hadley had been recategorized into the Hampden district although it is demographically apart of Hampshire County. Hart will be reassigned to the Hampden District group instead, where she is already working with Chicopee and Holyoke with the Public Excellence grant.

#### **4. New Business:**

##### **(A) South Hadley Human Rights Commission Appointment:**

Chair Judge introduced the Human Rights Commission as the next topic for discussion. Hart mentioned Town Administration had reached out to Judge to request that a member of the Board join the Commission. Board members noted that they would need additional information including details on the time commitment prior to committing to join. Judge agreed to follow up with Kristen Maher, the Executive Assistant to the Town Administrator for the requested information.

##### **(B) Health Department Website Update:**

Cesar shared that she regularly updates the Department and Town website with emerging public health news and events. This typically includes notices of sewage overflow into the Connecticut River, upcoming COVID-19 vaccine clinics, etc. Chair judge questioned if it was possible to identify the amount of traffic the public health webpage receives. Hart noted that it had been reported that the public health page had received 10,800 visits in the month of November. She attributed some of its popularity to COVID. Hart also mentioned that the website has been reorganized and streamlined with overarching topics on the side margin for easier navigation, including access to the regulations.

##### **(C) Update- South Hadley Drug & Alcohol Prevention Coalition (Karen):**

Karen shared that although she was not present at the last coalition meeting, she would provide an overview of the meeting utilizing the minutes. It was reported that 279 pounds of drugs were turned in for the Drug Take Back Day event. Hart added that the Police station is a permanent location for the collection of unused drugs. Walsh Pio highlighted that the turnout is a testament to the importance of the program. Hart shared that lock boxes were also distributed at the event to help guardians keep drugs and paraphernalia away from minors.

The coalition will be sponsoring a bus to the upcoming cotillion on January 28<sup>th</sup> to ensure the safe transport of students to and from the event. The coalition presented to the South Hadley School Committee at the December 1<sup>st</sup> meeting to provide an overview on what the coalition does. The

coalition was invited back later to present data on the use of drugs amongst students over the years.

Collins recalled the presentation that was given outlining the roadmap of the state's efforts targeting behavior health. It highlighted the large amount of funding coming in from the American Rescue Plan for treatment initiatives that will establish behavioral health centers. The centers will provide 24-hour service, urgent care, support for families, etc. The Center for Human Development will oversee the operations for South Hadley.

Walsh Pio noted there have been proposals to modify the coalition's name to include mental health to gain access to the incoming funds, as their current funding source is set to expire soon. Walsh Pio highlighted that the coalition's mission is centered around prevention efforts and has concern that the name change may impact that, as the funding is intended for treatment efforts. Universal prevention strategies are able to target and impact a wider audience in comparison to treatment methods. This is shown in the data as youth drug usage in South Hadley continues to decline over the years with implementation of prevention methods. All avenues for future funding sources will be considered as the coalition looks for sustainability following the ending of their current funding source.

Nurse Couture summarized her time at the fentanyl event hosted in Westfield, MA. Although not well attended, there were knowledgeable vendors and dignitaries present including but limited to representatives from police, fire, state, courts, and providers. There were tables with resources and related literature available to attendees. Emergency Management Directors and detectives told personal encounters on the subject.

Walsh Pio noted that Sue Cooke had send out a zoom meeting link for the next coalition meeting to be hosted on January 11<sup>th</sup> with supplemental information on fentanyl listed below. The meeting format had been changed to virtual in hopes of increasing attendance. Walsh Pio noted that the topics to be discussed at the next meeting include CADCA, outreach opportunities with the Drama Club and Recreation Department, and staffing changes. Collins shared she would be willing to share information with the families she has contact with.

Walsh Pio noted that there is an 11<sup>th</sup> grade Health Fair being hosted tonight and hoped it would have a good turnout. Collins shared her delight with the diversity in attendees at the coalition meetings. Walsh Pio noted that the intent of the coalition is to have at least representation from at least 16 different interest groups.

#### **Discussion about cannabis pursued:**

Collins questioned if it would be possible to add cannabis as a topic to the next meeting's agenda. She would like to discuss what is going on regionally with the cannabis industry and to gain a better

understanding of the Cannabis Control Commission. Walsh Pio noted she has attended some cannabis related meetings and was pleased to know that South Hadley had passed the bylaw restricting the commercial sale of marijuana, eliminating the applicability of some of the items within the cannabis industry. Chair Judge agreed to put it on the agenda for further discussion. Dr. McKiernan requested that Jernigan send out a reminder to the Board members two weeks prior to a meeting requesting agenda item proposals.

**(D) Master Plan Update:**

Chair Judge mentioned he felt as though not enough progress had been made in reference to the tasks assigned to the Board of Health by MPIC. Collins objected and shared that she felt that the Board of Health has made noticeable progress on their assigned tasks. Collins and Hart met with a MPIC representative to review the tasks assigned to the Board of Health. It was confirmed that the Board of Health has already made strides on some items, such as the passing of regulations seen with the recent approval of the animal keeping and glyphosate regulations. Collins noted some modifications may need to be made to the monitoring section as the Board of Health does not have access to the technology listed. The Board should review the Master Plan again with attention to their assigned tasks and provide a status update. The Board members requested an updated copy of the Master Plan depicting their assigned tasks as there was previously some confusion on the correct version.

**Discussion about Isotope Study pursued:**

Chair Judge questioned if there were any follow up actions required for the aquifer isotope study. The researchers will use various methods to identify relative ages of the water sources. The project is estimated to take about a year to complete. The advisory committee must wait for that data to become available prior to reviewing the results and providing commentary.

**(E) Health Equity Framework:**

Chair Judge introduced the health equity framework document curated by Director Hart as the next topic to be discussed. Collins commended the document and felt as though it effectively conveyed the Board's stance and commitment to health equity. The Board members agreed to thoroughly review the document with the intent of discussing and approving it at the next Board meeting.

**5. Old Business:**

**(A) Glyphosate and Glufosinate Regulation – Board to sign Regulation:**

Director Hart mentioned that the Glyphosate and Glufosinate regulation was not signed at the last meeting after it was approved. Copies of the regulation were passed out and signed by the Board members.

**(B) Minimum Standards for the Keeping of Animals Regulation – Board to sign Regulation:**

Director Hart mentioned that the minimum standards for the keeping of animals regulation was not signed at the last meeting after it was approved. Copies of the regulation were passed out and signed by the Board members.

**6. Set Next Meeting Date – (TBD) at 6:00 p.m. at South Hadley Library**

The next meeting date was set for February 14<sup>th</sup> at 6:00 pm in the Trustees room at the South Hadley library. All present members were in consensus with the next meeting date being February 14<sup>th</sup> at 6pm at the library.

**Discussion about use of Round Up at Orchards Golf Club pursued:**

Chair Judge shared that it was confirmed by Orchards Golf Club management that Round Up has not been used on the property in the last 5 years.

**7. Adjourn the meeting:**

Chair Judge mentioned he would accept a motion to adjourn the meeting. Walsh Pio made the motion and Dr. McKiernan seconded it. All members were in consensus.

The meeting was adjourned at 7:20 p.m.

Respectfully,

Monasia Ceasar



**ATTACHMENT A**

**RECORD LOCATION**

Director's Report

BOH File

BOH Meeting Minutes 11.22.22

BOH File

DRAFT



## BUDGET COMMENTARY

The Health Department and the Town of South Hadley would benefit with a 20hr/week clerical staff position that would handle records management for the department, process records requests and assist the department to go paperless. This would free up management time and enable the Health Department to be available for in person public requests and assistance.

## FY23 GOALS & ACCOMPLISHMENTS

- Wrote and obtained grants in areas such as public health(Tobacco=\$102,000.00, Public Health Excellence=\$625,000), Emergency Management (Emergency Management=\$4,600.00, Hazard Mitigation=26,500), Mass in Motion.
- Updated South Hadley's Continuity of Operations Plan(COOP), South Hadley's Comprehensive Emergency Management Plan(CEMP) and wrote a grant for South Hadley's Hazard Mitigation Preparedness Plan.
- Created and documented an Emergency Action Plan/exercise with the Emergency Management Team for July 4th Fireworks.
- Continue to update Massachusetts Emergency Management Agency's State website (WEBEOC) to include all plans and events for South Hadley.
- Worked with the Town Clerk on plans and crowd control for voting. Purchase of stanchions to assist.
- Participate in and Co-Chair the Hampshire Regional Emergency Planning Committee (HREPC), a regional committee that plans and prepares for hazardous materials emergencies.
- Participate on the South Hadley Drug & Alcohol Committee.
- Participate on the TRIAD Committee. Coordinated RedCross Ready event at the Senior Center for Emergency Preparedness and created .
- AED/CPR lay person rescuer education at Buttery Brook/ Pickle Ball Event. Installed AEDs and turf area at Buttery Brook & South Hadley High School Athletic Field.
- Provided a rabies vaccination clinic in South Hadley for dogs/cats.

- Participate in and President of the Western Massachusetts Public Health Association (WMPHA), a regional committee that assists and supports local health departments in meeting their statutory responsibilities through education, technical assistance, representation and resource development.
- Participate in Age & Dementia Friendly Committee and Age & Dementia Friendly Subcommittee. Purchase Audio & Visual Tools for all Municipal Buildings with Public Health Excellence Grant.
- Wrote contract and coordinated water testing for Copper & Lead in Municipal Buildings.
- Worked with Facilities Director and town-owned Building Managers to establish a plan for replacement of any fixtures that have exceedance levels of Copper and Lead within their buildings.
- Provided and assisted in staffing COVID clinics in South Hadley, Northampton, and Chicopee. Educate and disseminate information on COVID vaccines and clinics. Worked with Environmental Justice populations to distribute at home COVID test kits.
- Purchased two (2) hybrid Poly/ Zoom room systems for the Library and the Senior Center
- Worked with neighboring communities to provide vaccines to homebound residents and environmental justice populations that have limited access.
- Coordinated several disbursements of Personal Protective Equipment (mask, gowns, gloves, etc.) and COVID test kits.
- Continued outreach, using several communication modalities, to businesses, churches, community with information on COVID (testing/vaccine), health information (mosquito/tick-borne diseases, cancer, etc.)
- Worked with the Recreation Director and Planning/Conservation Director to outreach with educational materials on Mosquito-borne illness, COVID, and Melanoma to the community residents and provide items such as insect repellent, lint removers (ticks), sunscreen and bags that were purchased with grant funds.
- Worked with the Town Assessor to identify Rental Properties in South Hadley.
- Created a Rental Registry Regulation to help identify rental properties in South Hadley which will help to better identify and allow for outreach of educational materials for environmental justice populations.
- Created an Animal Regulation to provide minimum standards for the keeping of animals and created a Glufosinate/Glyphosate Regulation for Town-Owned/Operated Property.
- Received Narcan for Municipal buildings funded through our Hampshire Public Health Emergency Preparedness Coalition.
- Worked with Public Health Nurse on disease surveillance for 90+ communicable diseases. (ie Monkeypox, etc.)
- Participated in the Housing Production Plan Focus Group.
- Continued to update website with Public Health Information, events, clinics, etc.
- Created contracts for all contract positions (Tobacco grant= 7 contracts, Public Health Excellence grant= 3 contracts, Animal Control Officer=1 contract).
- Invited to participate in the Department of Mental Health Site Board.

- Purchased vape detectors for all bathrooms for the High School.
- Created a Public Health Equity Framework

## **FY24 STRATEGIC GOALS**

Continue to apply for grants; public health, mental health, emergency management

Work with schools on a Tobacco intervention program for students and purchase vape detectors for the Middle School.

Increase workforce staff (clerical) for paperwork reduction and online access

Help lead multi-department code enforcement team

Collaborate with Assessors and Planning Department to map rental registry locations and include public health data points.

Continue to be more intentional in addressing all forms of health inequities

Complete Health Department Manual to identify Standard Operating Procedures (SOP's) for permit processing.

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Summary	August 2022	September 2022	October 2022	November 2022	December 2022	January 2023
<b>Complaints Received</b>						
housing complaint	13	5	12	11	15	10
food complaint	6	10	7	2	5	6
COVID inquiry/reporting	2	1	1	0	0	0
animal control	9	4	9	3	2	3
dumpster permit	6	1	2	2	0	0
hauler permit	1	1	1	0	0	1
septic permit	1	2	5	3	3	2
property care complaint	1	3	0	2	1	0
miscellaneous	3	13	11	7	8	4
<b>Total</b>	<b>42</b>	<b>40</b>	<b>48</b>	<b>30</b>	<b>34</b>	<b>26</b>
<b>Notices Issued</b>						
housing orders		1	0	1	0	3
condemnations	1	1	0	1	0	0
property care notices	1		0	0	0	1
compliance	2	1	3	1	0	5
educational/best practice material				2	0	0
<b>Total</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>5</b>	<b>0</b>	<b>9</b>
<b>Inspections Conducted</b>						
food inspections	4	1	6	0	0	7
lodging/housing inspections	4	3	1	0	4	3
site observations	2	2	0	0	0	0
<b>Total</b>	<b>10</b>	<b>6</b>	<b>7</b>	<b>0</b>	<b>4</b>	<b>10</b>
<b>Miscellaneous</b>						
records requests		6	9	18	9	1
food plan reviews		1	1	1	2	2
<b>Total</b>		<b>7</b>	<b>10</b>	<b>19</b>	<b>11</b>	<b>3</b>

## **Buttery Brook Watershed Restoration: \*revised\* EENF and Proposed EIR (South Hadley, MA)**

From Fuss & O'Neill Inc.

On behalf of the Town of South Hadley, please find revised versions of the Buttery Brook Watershed Restoration Expanded Environmental Notification Form (EENF) and the Proposed Environmental Impact Report (EIR) linked below for your review.

Links:

[Expanded Environmental Notification Form](#), dated January 30, 2023

[Proposed Environmental Impact Report](#), dated January 30, 2023

## RENTAL REGISTRY REGULATION

### **PURPOSE:**

The South Hadley Board of Health (SHBOH) adopts this regulation to ensure that safe and sanitary conditions exist in the rental housing stock and to promote and protect the health, safety and well-being of the persons occupying said premises and other citizens in the Town of South Hadley, and to provide clear and accessible guidelines for the operation of rental properties per 105 CMR 410.000 Minimum Standards of Fitness for Human Habitation (State Sanitary Code, Chapter II) for tenants, occupants, landlords, and to extend awareness of Health Regulations related to the operation of a rental property and related South Hadley Town Bylaws.

### **AUTHORITY:**

The South Hadley Board of Health is acting under the authority of M.G.L. Chapter 111, Section 31.

### **DEFINITIONS:**

**Bed and Breakfast:** means a private owner-occupied house where rooms are rented and a breakfast is included in the rent, and all accommodations are reserved in advance.

**Board of Health:** means a municipal board of health, a municipal health department, or its other municipal agent(s) or its authorized agent(s) or representative(s) under M.G.L. c. 111 s. 30.

**Condominium:** means the land or the lessee's interest in any lease of such land which is submitted pursuant to M.G.L. c. 183A, the building or buildings, all other improvements, and structures thereon, and all easements, rights and appurtenances belonging thereto, which have been submitted pursuant to M.G.L. c. 183A.

**Dwelling Unit:** the room or group of rooms within a residence used or intended for use by an individual, family, or household for living, sleeping, cooking, and eating, and other areas of which the occupant has exclusive use.

**Homeless Shelter:** means a residence operated by a service agency which provides temporary, overnight sleeping accommodations and offers transitional assistance to homeless individuals and families in need of permanent housing.

**Manufactured Home:** means a structure, building in conformance to the National Manufactured Home Construction and Safety Standards which is transportable in one or more sections, which in the traveling mode, is eight (8) body feet or more in width or forty (40) body feet or more in length, or, when erected on site, is 320 or more square feet, and which is built on a permanent chassis and designed to be used as a dwelling unit with or without a permanent foundation when connected to the required utilities, and includes the plumbing, heating, and electrical systems contained therein.

**Manufactured Housing Community:** means any lot or track of land upon which three or more manufactured homes occupied for dwelling purposes are located, including building structures fixtures and equipment used in connection with the manufactured home and licensed under M.G.L. c. 140 s. 32B.

**Occupant:** means any person living or sleeping in a residence.

**Owner:** means every person who alone or severally with others:

- (1) has legal title to any residence, or parcel of land, vacant or otherwise, including a manufactured housing community;
- (2) has care, charge or control of any residence or parcel of land, vacant or otherwise, including a manufactured housing community, in any capacity including but not limited to personal representative, agent, executor, executrix, administrator, administratrix, trustee or guardian of the estate of the holder of legal title;
- (3) is a mortgagee in possession of any such property;
- (4) is an agent, trustee or other person appointed by the courts and vested with possession or control of any such property; or
- (5) is an officer or trustee of the association of unit owners of a condominium.

**Owner's Representative:** means any adult person designated and duly authorized to act on the owner's behalf to effect compliance.

**Rental Registry Permit:** Annual certificate issued when the rental registry application submitted by the owner is reviewed and approved by an agent of the Board of Health.

**Residence:** means every building or structure used for or intended for, human habitation and every other structure or condition located within the physical boundaries of the same lot. Residences include, but are not limited to, single or multi-unit structures, rooming houses, manufactured homes, homeless shelters, temporary housing, alternative housing, and condominiums.

**Rooming House:** means every residence or part thereof which contains one or more rooming units in which space is rented for compensation by the owner, rental of which is based on a contractual agreement between owner and an individual or household for rent of a rooming unit and use of shared facilities. Rooming houses include, but are not limited to, boarding houses, hotels, motels, inns, lodging houses, bed and breakfast operations, dormitories, fraternity and sorority houses, hostels, and other similar residences.

**Short-term Rental:** transient lodging space with stay not exceeding 28 consecutive days.

**Subsidized Housing:** is owned by a private landlord or corporation that has received government subsidies to provide affordable housing.

**Temporary Housing:** means any tent, mobile dwelling unit, or other structure used for human shelter which is designed to be transportable, and which is not attached to the ground, to another structure, or to any utility system on the same premises for more than 28 days.

**EXEMPTION(S):**

Dwelling unit (s) may be exempt from adhering to the requirements of the rental registry program if:

- \* The dwelling unit(s) is not currently being rented. An affidavit attesting to this would need to be submitted to the Board of Health. Once the occupancy status of the dwelling(s) has changed, the owner must submit the rental registry application within 30 days.



- \* Rooming Houses, specifically, boarding houses, hotels, motels, inns, lodging houses, dormitories, fraternity and sorority houses, hostels, short-term rentals, bed and breakfast operations, except; Rooming Houses or Short-term Rental lasting longer than twenty-eight (28) consecutive days **shall** require a permit.
- \* Residential facilities authorized and operated under state and federal law, congregate or similar group housing for the elderly or disabled, housing for persons with substance abuse problems, congregate living arrangements for persons with disabilities, or other similar housing facilities operated under a license by the Commonwealth of Massachusetts. Notwithstanding, such facilities, where required, shall comply with **\*subsidized housing** requirements.

**PERMIT REQUIREMENTS:**

- \* Every property owner renting/leasing a residence/dwelling unit(s) in South Hadley shall register with the South Hadley Board of Health.
- \* Every property owner renting/leasing a residence/dwelling unit(s) in South Hadley shall submit a completed rental registry permit application with the South Hadley Board of Health.
- \* All components of the permit application must be completed, reviewed, and approved before the issuance of the rental registration permit.
- \* The permit must be renewed annually and is valid until the end of the calendar year (Dec.31<sup>st</sup>).
- \* Every property owner has thirty (30) days to register with the Board of Health when acquiring/purchasing a rental property.
- \* Every property owner shall post the rental registration permit, conspicuously, on the property.

**SELF-INSPECTIONS CONDUCTED BY OWNERS:**

- \* Self-inspections will be conducted by property owners.
- \* Owners or their agent(s) will utilize checklist(s) issued by BOH to conduct inspections.
- \* The inspection must be done annually, signed by the owner or their agent(s), and submitted in conjunction with the rental registration application. Any false statements or information provided on the Checklist(s) shall constitute a violation of this regulation.
- \* Subsidized Housing will not require a Self-Inspection or Certification. An annual Certification by the owner that a rental unit has been inspected in accordance with state and/or federal law shall be provided and shall be accepted as evidence of Self-Inspection as part of the permit application or renewal.
- \* Citations noted during inspections must be addressed and made to be compliant with the 105 CMR 410.000, Massachusetts Standards of Fitness for Human Habitation (State Sanitary Code, Chapter II).

**VIOLATIONS:**

It shall be the responsibility of the owner, to ensure compliance with all sections of this regulation. The violator shall receive:

- a. In the case of a first violation, a fine of one hundred dollars (\$100.00).
- b. In the case of a second violation, a fine of two hundred dollars (\$200.00).
- c. In the case of a third violation, a fine of two hundred dollars (\$300.00).

**NON-CRIMINAL DISPOSITION:**

Whoever violates any provision of this regulation may be penalized by the non-criminal method of disposition as provided in Massachusetts General Laws, Chapter 40, Section 21D.

**SEPARATE VIOLATIONS:**

Each day any violation exists shall be deemed to be a separate offense.

**ENFORCEMENT:**

Enforcement of this regulation shall be by the South Hadley Board of Health or its designated agent(s). Any resident who desires to register a complaint pursuant to the regulation may do so by contacting the South Hadley Board of Health or its designated agent(s) and the South Hadley Board of Health shall investigate.

**SEVERABILITY:**

If any provision of this regulation is declared invalid or unenforceable, the other provisions shall not be affected thereby but shall continue in full force and effect.

**EFFECTIVE DATE:**

This regulation shall take effect on \_\_\_\_\_.

Name	Title	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Town of SOUTH HADLEY****Board of Health****Glufosinate/Glyphosate Regulation on Town-Owned/Operated Property  
Amended February 2023**

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**A. Purpose:**

Glyphosate is the primary active ingredient in glyphosate-based herbicides (GBHs) -- such as RoundUp® and Rodeo. Glyphosate poses harm to developing children and humans generally, bees and other pollinators, pets, domestic animals, wildlife and other living resources. Many glyphosate restrictions or bans throughout the world have been introduced following the 2015 glyphosate report by the World Health Organization International Agency for Research on Cancer (IARC) that concluded "Glyphosate is probably carcinogenic to humans (Group 2A)", that there was a positive association between glyphosate exposures and non-Hodgkin lymphoma (NHL) and that glyphosate exposure caused DNA and chromosomal damage in human cells, as well as genotoxic, hormonal and enzymatic effects in mammals.

Glufosinate (GA) is the primary active ingredient in glufosinate-based herbicides. Studies demonstrate that GA causes adverse health effects in animals (dogs are especially sensitive); it is toxic to fish, clams, oysters, birds, amphibians, and reptiles. It has not been thoroughly studied but is apparently not proven to be a carcinogen.

Because it is in the best interest of public health and the environment to eliminate the use of glufosinate and glyphosate-based herbicides (e.g., GBHs) on town-owned/operated lands, ponds and waterways: to encourage the reduction and elimination of the use of such herbicides on private property: and to introduce and promote ecologically sound, organic and other management practices to prevent and/or manage unwanted vegetation on town owned/operated land, the South Hadley Board of Health adopts the following regulation.

**B. Authority:**

This regulation is promulgated to the authority granted to the South Hadley Board of Health by Massachusetts General Laws Chapter 111, Section 31 that "Boards of Health may make reasonable health regulations."

**C. Definitions:**

For the purpose of this regulation, the following words shall have the following meanings:

**Glufosinate:** **Glufosinate (GA)** is a neurotoxicant in mammals and through dermal absorption or ingestion can cause a range of effects in humans from eye injury, skin irritation, seizures, respiratory failure, to death. It is used as an "alternative" to glyphosate-based herbicides and is the primary active ingredient in glufosinate-based herbicides, such as *Basta*, *Challenge*, *Finale*, *Ignite*, *Liberty* and *Rely*.

**Glyphosate:** a systemic organophosphate herbicide C<sub>3</sub>H<sub>8</sub>NO<sub>5</sub>P used to control herbaceous and woody weeds and the primary ingredient in many broad-spectrum herbicides (e.g., Roundup®, Rodeo® Ranger Pro®, Bonide® Ground Force® Vegetation Killer).

**Herbicide:** a substance that is toxic to plants, used to destroy unwanted vegetation.

**NOFA:** the Northeast Organic Farming Association, Massachusetts Chapter, a non-profit organization that provides guidelines for Organic Land Management.

**Organic Materials Review Institute:** The Organic Materials Review Institute (OMRI) is an international nonprofit organization that determines which input products are allowed for use in organic production and processing. OMRI Listed products are allowed for use in certified organic operations under the USDA National Organic Program.

**Organic land management:** a method of preventing and managing unwanted vegetation problems that does not use GBHs. This includes only NOFA's Standards for Organic Land Care: Practices for the Design and Maintenance of Ecological Landscapes and/or Beyond Pesticides' Products Compatible with Organic Landscape Management or another comparable equivalent to be determined by the South Hadley Board of Health.

**Pesticide.** A substance or mixture of substances intended for preventing, destroying, repelling, or mitigating any pest, and any substance or mixture of substances intended for use as a plant regulator, defoliant, or desiccant; provided that Pesticide shall not include any article that is a "new animal drug" within the meaning of section 201(w) of the Federal Food, Drug and Cosmetic Act [21 U.S.C. § 321(w)], or that has been determined by the Secretary of the United States Department of Health, Education and Welfare not to be a new animal drug by a regulation establishing conditions of use for the article, or that is an animal feed within the meaning of section 201(x) of such act [21 U.S.C. § 321(x)].

#### **D. Protocol**

The use and application of glufosinate and glyphosate-based herbicides by town employees and/or by private contractors for managing lawns, turf, ornamental beds, and trees is prohibited on all town-owned/operated lands.

This shall include, but not limited, to the following spaces owned and managed by the Town of South Hadley park commissioners, school committee, conservation commission and library board of trustees on the grounds listed below, but not limited to: athletic fields, playgrounds, grounds of town buildings (police, fire, town hall, department of public works, council on aging), town museums, greens, parks, picnic areas,

cemeteries, conservation areas, water protection districts, traffic islands, parking lots, beaches, roadsides, golf courses, and food production plots.

Organic Land Management (OLM) shall be the methodology of choice to understand, prevent and manage unwanted vegetation problems on town-owned/-operated properties. This limits management products and interventions to those approved by NOFA, Beyond Pesticides and/or Organic Materials Review Institute (OMRI) or another comparable equivalent determined by the South Hadley Board of Health.

All glufosinate and glyphosate-based herbicide products currently stored in or on town-owned premises shall be compiled by the Director of Public Works or Solid Waste Coordinator, who shall have the authority to dispose of any such products, including all GBHs, through a Massachusetts Department of Environmental Protection (MassDEP) approved method.

This regulation shall only apply to properties owned and operated by the Town and not to private property. Accordingly, it shall not infringe upon any state laws or regulations including Massachusetts General Law Chapter 132B (the "Massachusetts Pesticide Control Act") and Chapter 333 of the Code of Massachusetts Regulations, nor any Federal Laws or regulations.

#### **E. Exemption:**

A request for an exemption shall be made to the South Hadley Board of Health in writing.

An exemption can only be granted by the South Hadley Board of Health, or its designated agent(s), due to an imminent threat to public health. An exemption shall only be granted after all non-toxic interventions have been exercised and failed to produce a tolerable outcome.

#### **F. Enforcement:**

Enforcement of this regulation shall be by the South Hadley Board of Health or its designated agent(s).

Any person who desires to register a complaint pursuant to this regulation may do so by contacting the South Hadley Board of Health or its designated agent(s) and the Board shall investigate.

#### **G. Severability:**

If any provision of this regulation is declared invalid or unenforceable, the other provisions shall not be affected thereby but shall continue in full force and effect.

**H. Effective Date:**

This regulation shall take effect on \_\_\_\_\_.

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**Tony Judge, Chair**

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**Christine McKiernan, Vice Chair**

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**Karen Walsh Pio, Clerk**

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**Jessica Collins**

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**Stephen Frantz**

TONY JUDGE, Chair  
CHRISTINE MCKIERNAN, M.D., Vice-Chair  
KAREN WALH PIO, LICSW, LADC 1, Clerk  
STEPHEN FRANTZ  
JESSICA COLLINS

SHARON D. HART, Public Health Director

January 10, 2023

## HEALTH EQUITY POLICY FRAMEWORK

### **PURPOSE:**

This Health Equity Policy Framework is designed to help the South Hadley Board of Health and Health Department be more intentional in addressing all forms of health inequities.

We seek to address historical and contemporary injustices, overcome economic, social, and other obstacles to health and eliminate preventable health inequities.

### **DEFINITIONS:**

**Health equity:** is the state in which everyone has a fair and just opportunity to attain their highest level of health. Achieving this requires ongoing societal efforts to:

- \* Address historical and contemporary injustices.
- \* Overcome economic, social, and other obstacles to health and health care; and
- \* Eliminate preventable health disparities.

**Health disparities:** are preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by populations that have been disadvantaged by their social or economic status, geographic location, and environment.

**Social determinants of health:** are the conditions in the places where people live, learn, work, play, and worship that affect a wide range of health risks and outcomes. Long-standing inequities in six key areas of social determinants of health are interrelated and influence a wide range of health and quality-of-life risks and outcomes.

**FRAMING:**

Communicating about racism and other inequities – both internally and externally – can be challenging, due to fear, lack of tools, and widely held frames about race, class, and fairness.

South Hadley Board of Health and Health Department (BOH/HD) commits to becoming a thought leader on the impacts of racism and other health inequities on public health outcomes, as well as in action to eliminate these inequities. We commit to being disrupters and truth tellers about the personal, family, community, state, and national cost of institutional racism on health.

In order to overcome barriers of racism and other forms of health inequities, we will use these principles:

- \* **Be explicit about racism.** We will use explicit language and data to communicate about the impact of structural racism and proposed solutions, stressing that racism, not race, is the problem.
- \* **Frame structural and historical nature of issues.** We will use clear language and examples that highlight the structural and historical nature of the problem and avoid framing that individualizes the problem. It is important that we expose the past and current policy and legal structures that perpetuate inequities. Historically, without a structural frame, many people, including policymakers, will revert to an unfair individual frame of reference.
- \* **Support narrative change:** We will support narratives that tell stories about the impact of structural inequities on communities, including amplifying voices from communities most impacted by inequities. Their narratives can educate and offer keys to solutions. We will also support coming from an asset-based approach which lifts up the gifts, value, and benefits of having diverse communities.
- \* **Provide hope and solutions – and an urgency for change.** The structural barriers for achieving health equity often seem overwhelming or even inevitable, we must communicate hope, provide examples of important progress, and focus on how our members and partners can join and build strength to win policy changes that solve real problems. In doing so, we will communicate and validate the urgency of making these changes, as structural inequities impact the many lives within our community.



**POLICY DEVELOPMENT:**

To guide the development of policies, programs, and practices, we will

- \* Recognize, respect, and support the diversity of the community they serve.
- \* Evaluate the potential positive and negative impacts to our communities of color and other marginalized populations (ageism, sexism, ableism, socio-economic status see visual).
- \* Reinforce and expand relationships with local partners to identify problems, develop solutions, support, or lead policy campaigns, identify and implement successful measures.
- \* Include community engagement efforts that can help strengthen partnerships between community members and public health entities, building trust, and promote social connection.
- \* Enhance capacity and workforce engagement to ensure diversity and health equity competencies in existing and future staff.
- \* Ensure that our communities have equitable access to resources (e.g., housing, health foods) and services to meet their physical, spiritual, and mental health needs.
- \* Demonstrate this work to other departments and sectors so that ultimately South Hadley has ability to integrate Health Equity into all policies.

South Hadley Health Equity Policy Framework is designed to support staff and board members to operationalize these goals and enable us to act in more powerful ways to promote health equity and racial justice. All staff and board members, will be committed to continued education, including an openness and commitment to self-study as well as formal discussions and trainings.

We will intentionally invite and include all staff and other volunteer/elected boards to join us.

We will support staff and board members to lead by example and to provide assistance to partner organizations that aspire to like-minded goals.

We will use this Health Equity Policy Framework to guide our actions.

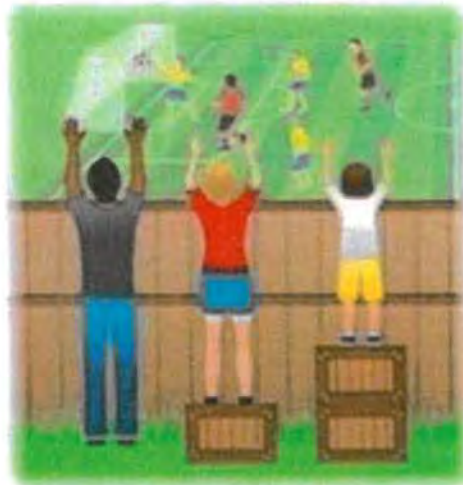
## The differences between Equality and Equity

### Equality



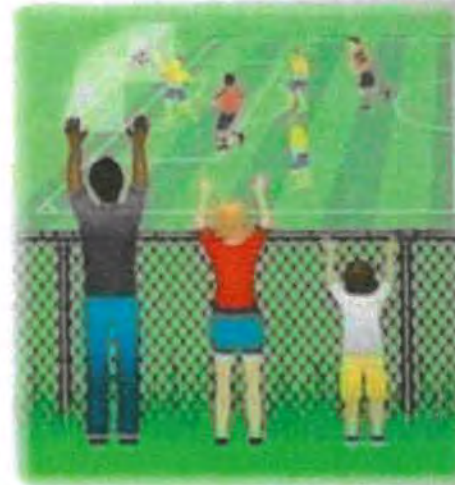
The assumption is that everyone benefits from the same supports. This is equal treatment.

### Equity

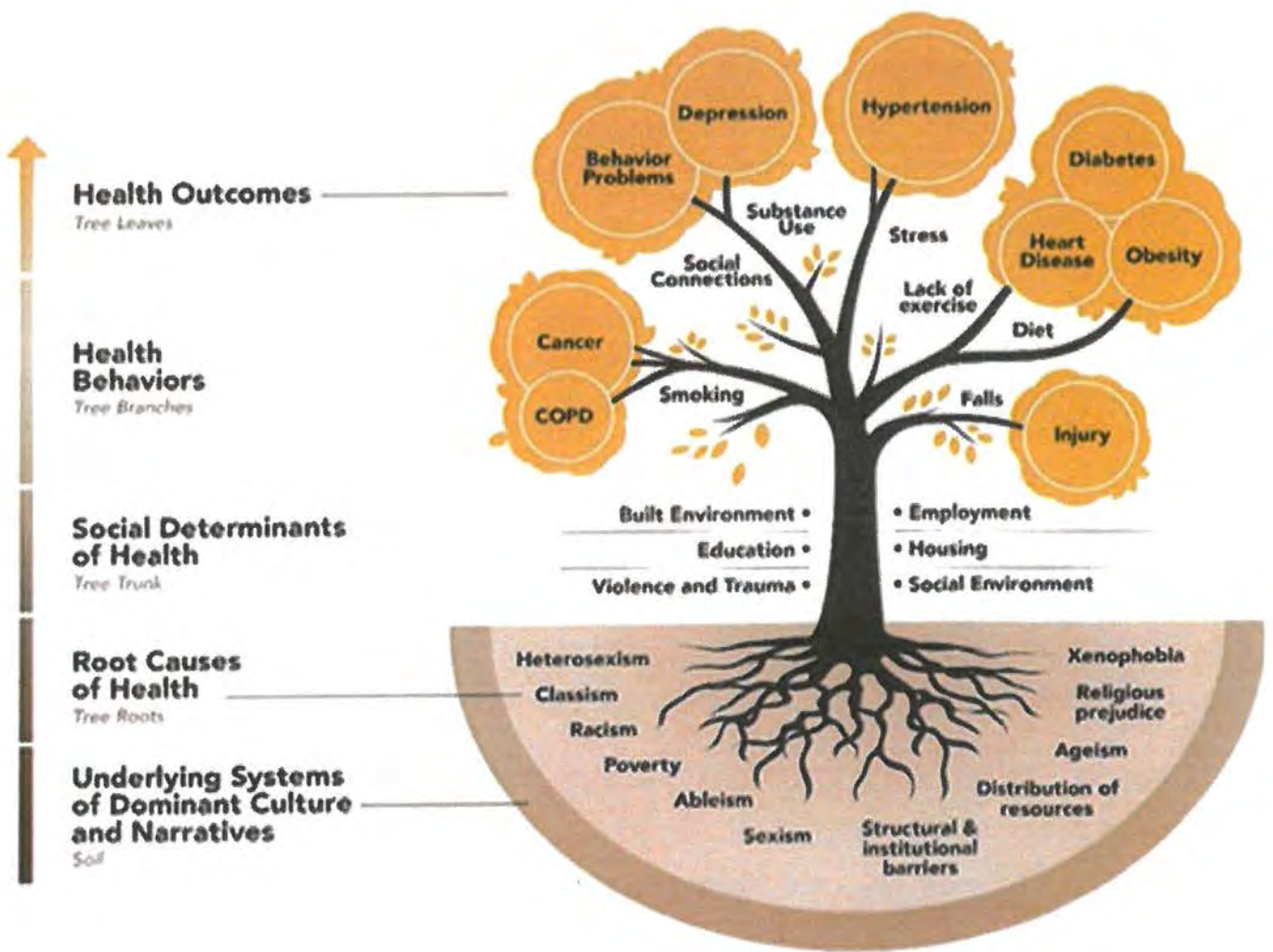


Everyone gets the supports they need (this is the concept of "affirmative action"), thus producing equity.

### Justice



All 3 can see the game without supports or accommodations because **the cause(s) of the inequity was addressed.** The systemic barrier has been removed.



Health Tree Model by Health Resources in Action (HRiA)