

**ANDOVER BOARD OF HEALTH**  
**MINUTES**  
**MONDAY, JUNE 15, 2015, 6:00 P.M.**  
**FIRST FLOOR CONFERENCE ROOM**  
**36 BARTLET STREET**

The Board of Health Meeting was called to order at 6:03 p.m. Present were Chairman Gopala K. Dwarakanath, M.D., Ms. Pamela Linzer, Vice Chairman, Ms. Carolyn Dymond, Clerk, and Mr. Thomas G. Carbone, Director of Public Health.

**I. Approval of Minutes**

- **May 18, 2015**

*Motion by Dr. Dwarakanath, seconded by Ms. Linzer, to approve the Minutes of May 18, 2015. Unanimous approval.*

**II. Appointments & Hearings**

- **6 p.m. – Denise Paul, Administrative Assistant – Explanation of Duties** - Mrs. Paul spoke about the duties she performs for the Staff in the Health Division. She answers phone calls and tries to help if possible; if not, she transfers calls to the correct Agent or Nurse. She prepares Septic and Sewer plans to be sent out to different departments for approval, tracks the approvals, and issues permits as required. All letters and Applications for yearly renewals are prepared and mailed out on November 1 of each year. When the Applications come back, she issues and mails out the Permit and receipt, then tracks each renewal on a label list. She attends all Board of Health Meetings, and then transcribes the Minutes for approval by the Director of Public Health and the Board of Health.

All correspondence that needs to go out of the office is mailed out and any incoming mail is directed to the appropriate staff member. She also assists with the annual Flu Clinics and schedules appointments for High Dose Flu Clinics and Cholesterol Clinics. Burial Permits are now processed on-line so they are tracked on a spreadsheet; any that are not paid for are invoiced for payment. Each day Mrs. Paul balances the previous day's cash receipts for CD&P and sends reports out to the Office Manager, Treasurer and Accounting Offices. All complaints are tracked on a spreadsheet and can deal with such issues as food safety, rubbish, sewerage, water, sanitation, animals, hazardous materials, air quality, tick and mosquito, as well as housing issues.

All animal bites are reported to Mrs. Paul and she keeps a spreadsheet to track them. She interacts with all Divisions of the Community & Development Department. A lot of interaction is with the Building Division because the Health Division has to check to see if the property is on sewer and septic. Mrs. Paul issues many permits that need

to be issued for sewer, septic, dumpsters and all renewals. Mrs. Paul also performs any other duties that are requested by the Health Staff.

### III. Discussion

- **Amend 2015 Fee Schedule** – Dr. Dwarakanath stated that at the last Board of Health Meeting the Board had talked about changing the Temporary Food Permit from three days to fourteen days.

*Motion by Dr. Dwarakanath, seconded by Ms. Dymond to amend the 2015 Fee Schedule to change the Temporary Food Permit from three to fourteen days. Ms. Linzer asked for discussion.*

Ms. Linzer asked if a person taking out a Temporary Food Permit decides to go more than the allowed fourteen days, then they would only be required to pay the difference of \$75.00 towards a Retail Permit of \$125.00. Ms. Linzer asked to strike out the number of days because the State allows fourteen days, and that is what the Board will allow. Mr. Carbone answered that would be how it works. It will need to be tracked because there will be two options, so he would like to try it out for this year to see how it goes.

*The Board voted to strike the number of days connected to a Temporary Food Service License. Unanimous approval.*

- **Proposed Training Schedule** - Dr. Dwarakanath stated that Mr. Carbone created a schedule for Staff to come to the Board of Health Meetings to educate the Board on what their jobs entail. Tonight Mr. Carbone will talk about running an effective meeting and Mrs. Denise Paul, Administrative Assistant, would give her presentation. Mr. Carbone stated he will bring in one of the Staff members at each meeting over the next six months. Mr. Carbone also created a list of training subjects. He asked the Board Members to check the training session list and let him know if they would like to change the sequence of the trainings. The subjects will include septic systems, food safety and complaints, among other things. Dr. Dwarakanath stated that having the training session next month on septic systems would be very helpful because the Board sees a lot of Septic system plans and stated that seeing the diagrams of the plans was very helpful.
- **Training – Running a Good Public Hearing** – Mr. Carbone stated that by the Board Members taking the Open Meeting Law and Conflict of Interest trainings on line that gives them some background on the subject. The vast majority of Board of Health meetings are public meetings and anyone can attend. A public meeting doesn't mean the public has to be heard. As Chair of the meeting, Dr. Dwarakanath can say whether or not the Board will listen to any person who attends.

Public Hearings are used to adopt new regulations, and Mr. Carbone encouraged the Board to have a Public Hearing when they are going to regulate. The Meeting is advertised to the public to let them know what the Board is planning to change. People can come to the Board of Health Meeting to voice their opinions, or may send a letter instead. The Board Members will then make a decision based on their best judgement. Sometimes the public gives the Board something to think about that it did not consider. Mr. Carbone would first bring in draft regulations for the Board to review. Then those draft regulations are made public for review. The Board would hold the Public Hearing, then discuss the comments during the next meeting. Mr. Carbone's job is to guide the Board. He stated that ultimately he works for the Board and gets his authority from the Board.

Executive Session is used rarely. The Board typically goes into Executive Session because a lawsuit was filed by or against us. Mr. Carbone told the Board Members that Carol McGravy will meet with them and talk about meetings to give them more details if they would like.

Public Hearings also include Title V variances as well as new camps. The Board needs to be aware that some Hearings attract a lot of people. When the previous Board was dealing with the Nabydoski farm issue, a lot of neighbors showed up to several of the Hearings. Large meetings like that can quickly get out of hand. Mr. Carbone stated that the best advice he could give the Board Members was to stay in control; be polite, let people talk, do not allow yelling, and make sure they know you are listening. If the Board would like to watch some of the Planning Board and Board of Selectmen Meetings, they can see how the Boards deal with upset crowds, because they sometimes have that issue.

#### IV. Old Business

- **Casco Crossing – Status Update** – Mr. Carbone informed the Board that the only outstanding issue is fixing the sidewalks. The new owner has requested one more extension from the State AAB. They have a contract but have to finish the final design. They are reviewing concepts now for the most cost effective way to go. Mr. Carbone will put this on the August Agenda for the Board to receive another update. Dr. Dwarakanath stated that he wanted to make sure they stick to the August date and that the Board not allow the owners to put it off like the previous owners who never got the repairs done. Mr. Carbone stated that if they don't seem to have things in order by August, the Board could request a Show Cause Hearing which will let them know the situation is serious. If the Board determines the owners are in violation, it has the option of filing in court.

#### V. Subdivision Definitive Plans

- N/A

**VI. Plan Review**

- **DWRP – Variances/Local Upgrade Approval**
  - **219 High Plain Road – LUA to allow SAS to be 50’ from a Wetland, 100’ Required and allow Septic Tank to be 64’ from a wetland, 100’ Required -** Mr. Carbone explained that this property is off High Plain Road by Rte. 93. In this case, they are limited on where the system can go because of the wetlands. A typical system should be 50’ from a wetland, but since it borders on a tributary to a water supply, it should be 100’ from the wetland area. In this case, there is no room in the front yard, and they are currently on private well. They will be abandoning the well and connecting to town water. If they try to put the system on the uphill side, it would need a pump and grading, which would be expensive.

*Motion by Ms. Linzer, seconded by Dr. Dwarakanath, to approve the LUA request to allow the SAS to be 50’ from a wetland, where 100’ is required and allow the septic tank to be 64’ from a wetland, where 100’ is required. Unanimous approval.*

**VII. Staff Reports**

**A. Director’s Reports:**

- **Important Dates:**
  - July 13 at 6 p.m. – Board of Health Meeting
  - July 25 to August 4 – Director’s Vacation
  - August 17 at 6 p.m. – Board of Health Meeting
  - September 14 at 6 p.m. – Board of Health Meeting

**B. Nurses’ Report for May, 2015** – The Nurses’ Report for May, 2015, was for informational purposes only.

**C. Inspectors’ Reports for May, 2015** – The Inspectors’ Reports for May, 2015, were for informational purposes only.

**VIII. Board Members Reports:**

- **Discussion Concerning Opioids (not on Agenda)** – Ms. Linzer asked Mr. Carbone about the opioid problems in Town. Mr. Carbone replied that Police Chief Keefe has been working with Dr. McGrath from the school side. There is a plan to do an Awareness Week in October, with speakers in to talk to the kids. The Department of Youth Services will do something for those not in the public school system. Our Intern, Taylor Seidel, is greatly interested in this issue. She attends UMass Lowell and wants to do epidemiology work.

She is very interested in the subject of substance abuse. She has been working with the Police Department and we can now see some of her work on-line. She will work with the School Department to figure out where to put different informational links on the Town website. Mr. Carbone stated that there is a lot of concentration on youth, but they recognize this includes everyone. Many policeman now carry Narcan, which is an anti-overdose drug, and is administered intranasal. Legislation has allowed some health officials to carry it as well.

**IX. Adjournment :**

*Motion by Dr. Dwarakanath, seconded by Ms. Linzer, to adjourn at 7:10 p.m.*

DRAFT