

**TORRINGTON AREA HEALTH DISTRICT
BOARD OF HEALTH MEETING
JANUARY 18, 2018**

Members Present: Nancy Rahuba, Bethlehem, Gerard Perusse, Borough of Litchfield, Louis G. Timolat, Canaan, Thomas Breakell, Goshen, Elliot Greenberg, Kent, Thomas McClintock, Litchfield, JoAnn Battistoni, Morris, Gloria Gourley, Norfolk, William Minacci, North Canaan, Jessica Magda, Torrington, Tim Waldron, Torrington, Jessica Wright, Torrington, Janelle Wilk, Watertown, Keith Wilson, Winsted.

Member Absent: Richard Sheldon, Borough of Bantam, Thomas Juliano, Cornwall, Robert Collins, Harwinton, Edward St. John, Middlebury, Dr. Scappaticci, Plymouth, Anthony Orsini, Plymouth, Daniela Ouellette, Thomaston, Joseph Petricone, Jr., Torrington, Ronald Russ, Watertown, Renato Focareto, Watertown.

Meeting called to order by Vice Chairman Breakell at 7PM

1. Minutes

- o Motion made by K. Wilson and seconded by J. Wilk to accept the minutes of the September meeting as written. Motion called and passed with 2 abstentions.

2. Chairman's Report- Vice Chairman Breakell chairing meeting in Chairman Collins absence.

3. Guest/Staff Presentations

- o Guest – Chris King of King, King & Associates
Discussion of Annual Audit going over some key points for Board Member to review.
During the discussion the subject of cyber security came up and was discussed. Mr. King reiterated the importance and how vital it is to any operation. Mr. King answered questions from Board Member and concluded his presentation.
Motion made by L. Timolat to accept the FY 17 audit report as presented. Motion seconded by N. Rahuba, Vote called and motion passed unanimously.

4. Board of Health & Staff

- a. Changes in Board Members – None at this time
- b. Changes in Staff- None at this time
- c. Items for information/consideration by Board Members
 - Resolution for Director to sign documents

Resolved:

The Director of health and/or their designee are authorized to sign any and all contracts, resolutions, legal agreements, and other documents necessary to conduct routine business on the behalf of the TAHD for the period of January 18, 2018-January 17, 2019. Motion was brought to table by L. Timolat and seconded by W. Minacci.

K. Wilson asked if the definition of routine could be addressed. Mr. Timolat proceed with the definition That routine is something that is unique and does not regularly come before the Board. Discussion continued with Director Rubbo describing what constitutes routine and non-routine business for the District.

***An Amended motion was put on the table.**

The Director of Health and/or their designee are authorized to sign any and all contracts, resolutions, legal agreements and other documents necessary to conduct routine that *is recurring*, business on the behalf of the TAHD for the period of January 18, 2018-January 17, 2019. This amended motion was brought to the table by L. Timolat and seconded by T. McClintock. Vote was called and this amended motion was passed unanimously.

Resolution #2

Resolved:

The Chairman of the TAHD Board of Directors is authorized to establish special purpose committees, to appoint their officers, and to assign their subjects of study. Further, the Chairman of the TAHD Board of Directors will act as chairman pro-tempore for the special purpose committees until and if he or she appoints a permanent chairman. This resolution is indefinite, subject to annual renewal by the TAHD Board at each January regular meeting. The term of such permanent committee chairmen as may be appointed ends on the 1st of January of each year.

This resolution is not meant to be construed so as to prevent the TAHD Board of Directors from acting on its own in the matter of committees or from assigning specific charges to standing committees.

his resolution was present 1st by L. Timolat and seconded by N. Rahuba and passed unanimously.

5. Committee Reports

a. Finance Committee – T. Waldron, Chairman

➤ FY 18 YTD- Highlights

- ✓ Director Rubbo highlighted some aspects of FY18 budget. Initially the budget showed 20% decrease in the Per Capita reimbursement but that was not the case as we were funded at our total allocation due to the fact that the State did not adopt a budget by October 1, 2018.
- ✓ Licenses permits and inspections budget \$450,000 we are to date at \$355, 181 even though we a 6 month into the this number remains high due to the fact that food license renewals are incorporated into the and are all collected on July 1 of the current FY.
- ✓ Influenza clinics – expected to receive \$20, 000 – 21, 000 that we budgeted for but currently are awaiting payments on billing of flu vaccine.
- ✓ Lab operations budgeted \$50,000 currently at \$20, 851 looking back at the last 2 years we are running on course.
- ✓ Grants- Lead Poisoning Prevention grant \$28,852 was cut but SPF-Rx grant for Prescription drug education was granted for \$34, 000 for next 4 years.
- ✓ Total income budgeted \$1.7 mil currently at \$1.4 mil remainder will be made up through fees and grant monies.
- ✓ Increase in employee medical insurance of 39% our broker shopped the market and found a similar plan (HSA) under a different provider with higher deductibles and a higher total out of pocket expenses even with the switch the increase is still 22%. An increase in the percentage paid by employees towards the total cost of the premium will take effect as well.
- ✓ Office consumables are doing well
- ✓ Expenses – Flu clinics are down due to the fact no nurses are hired all vaccination is done by Staff nurses.
- ✓ Grants expenses discussed
- ✓ Total expenses right on target
- ✓ Property Management – Discussed on both the income and expense side.

➤ FY 19

➤ Possible 2018-19 Budget and Setting the Per Capita for the Same

This past month we reviewed the TAHD finances including the 2016-1017 Audit Report, the status of 2017-18 spending vs budget, and a possible 2018-19 budget & Per Capita. The process we followed and the conclusions we reached resulted in the following proposals we suggest be presented to the Board at this January meeting.

➤ A review of the 2016-17 Audit Report revealed the following

- ✓ TAHD Operational Budget gain of \$96,674 vs budget gain of \$0.
- ✓ TAHD Operational Budget FY 17 Memorandum of allocation \$42, 180
- ✓ TAHD Fund Balances
 - Un assigned Reserve of \$306, 006
 - Capital Reserve Account of \$172, 219

➤ To better meet the needs of the TAHD we propose the following step:

- ✓ Pay off Loan #2 (339 Main St) using \$163,868 of the Unassigned Fund Balance account.
This will allow TAHD to reduce its overhead and save on interest over the next 28 years.

➤ Next we reviewed the Status of our current 2017-18 YTD

➤ Finally after reviewing the fund balances, the Schedule of Allocations, the information provided above and information supplied to the Committee by the State of CT a possible Operational budget for the FY 2018-19 has been drafted. The FY19 Budget was drafted keeping in mind the continued desire to cover costs. If deeper cuts are made by the State of CT we may have to draw on Unassigned Reserves to cover revenue minus expense shortfalls.

Thus, more revenue and continued control of costs will be needed. On the expense side consideration is being made for a 2% Costs of Living increase. Staff raises will completely depend on how much the State of CT cuts the per capita funding. At this time I am not proposing staff increases. It will only be considered when we have a better understanding of what our income for FY 19 will look like.

➤ There are several factors which could negatively impact the Revenue Side

1. 2017-18 population numbers are down for the seventh straight year. This effects local and state per capita funding.

2. DOH Rubbo has been informed by State DPH office of Local Health administration to expect at the minimum an 11.24% cut in FY19.

3. If the Affordable Care Act is repealed we could see very large cuts to the Block grant that we currently receive.

4. Our Lead prevention funding was eliminated in FY18 unexpectedly.

Thus, just to keep the income we receive from Per Capita level would require an increase in the Per Capita rate.

- ✓ Note by not increasing our local per capita rate we will actually see a reduction in the amount of funding we receive from our member towns for the second straight year. There is always the possibility due to the financial climate in CT that the cuts are deeper than anticipated to the per capita funding.
- ✓ By not increasing the Per Capita Rate we may have to draw on our unassigned reserves to cover any revenue minus expense shortfalls.
- ✓ A \$0.07 increase would make up for the loss in population over the last two years. Although it is an increase on our per capita rate it is not an increase in the total amount the towns pay overall.

With the above recommendations the Finance Committee has agreed to keep the Per Capita rate as it is.

Thus the finance committee recommends the following:

N. Rahuba made a motion that the 2017-18 Per Capita be set at \$5.48. With a second By T. Waldron. With discussion ended the motion passed unanimously.

b. Building Committee – Petricone (Rubbo Reporting in his absence)

- Sale of 339 Main St. – old Laboratory Building

Selling this property can put TAHD in a very sound financial situation

Contacted Marshal Cohen Agency to get some figures on what the

Property is worth and get some comps for properties in the area.

The following motion was brought forward:

L. Timolat moved and seconded by W. Minacci that the TAHD Board authorize DOH to proceed with the sale of the building @ 339 Main St., Torrington. Vote called and passed unanimously.

***Amended Motion by L. Timolat and seconded by T. McClintock**

Board authorizes DOH to proceed with sale of property located at 339 Main St., Torrington.

If offers are received to a fix price of not less than \$175,000.00. Vice Chair Breakell called for

A vote and it passed unanimously.

c. Personnel Committee – Gourley

- Resolution to adopt Mass Mutual Plan Document for deferred compensation retirement plan.457 Deferred Compensation Plan. Resolution for Mass Mutual they require a resolutions to put our plan document on file so the Mass Mutual can provide us with free consultation services for our retirement plan.

RESOLVED: that the Board has previously approved and adopted the Torrington Area Health District Deferred Compensation Plan (“Plan”) to provide employees of the Torrington Area Health District with retirement benefits.

RESOLVED: that the Board does hereby declare the intention of the Torrington Area Health District to continue the Plan, but reserves the right to terminate or amend the Plan at any time.

RESOLVED, that the members of the Board are hereby jointly and severally authorized to take such actions and to execute such documents as they deem necessary or desirable in order to carry out the intent of the foregoing resolutions and required under the Plan to make the Plan fully effective in accordance with its terms and intent.

Motion made to accept resolutions as read was made by J. Battistoni and seconded by T. McClintock. Vote called and motion passed unanimously.

6. Directors Report – DOH Rubbo

a. Flu Update

- Influenza activity has continued to increase rapidly throughout US in CT influenza activity has also rapidly increased in the last 2 weeks. It is classified as widespread geographically in CT. Influenza A (H3N2) viruses are predominant. There have been 5 influenza related deaths of people age 65 and older and recently a 10 year old boy.
- TAHD administered 448 Flu Vaccines this year.
- Regional Flu Clinic to be held on January 28, 2018.

b. SPF-RX Grant

- TAHD was one of 5 health departments to be awarded a 4 year Strategic Prevention Framework For Prescription Drug grand from CT Department of Mental Health and Addiction Services (DMHAS) (9/30/17-9/29/21)
- This is a collaboration with DMHAS and CT Department of Public Health (DPH)
- Grant is specific to Torrington because of identified high opioid use/misuse
- TAHD to receive \$34, 000 annually for 4 years to implement a public education and social marketing campaign
- Requirements
 - ✓ Conduct needs assessment to identify high need communities/populations
 - ✓ Comprehensive school and community based social marketing education campaign Entitled "Change the Script"
 - ✓ Prescriber education
 - ✓ Create community safe drug disposal programs
 - ✓ Participate in data collection, analysis and reporting
- TAHD staff (R. Rubbo, L. Polito and A. Domnich-Kovalevsky) have been attending trainings and meetings to assist with grant implementation.

c. TAHD Health and Medical Subcommittee

- Meet on 10/24/17
 - ✓ Most of the meeting was spent on completing a Hazard Vulnerability/Assessment
 - ✓ All health department and hospitals receiving federal preparedness funding are required by DPH to complete HVA
 - ✓ The HVA's were then sent to their respective healthcare coalition (HCC) results will be combined with regional CHVA
 - ✓ TAHD's was sent to Region 5 HCC
 - ✓ Sample tool – distributed – tool has a formula built in which then gives a ranking for what hazards TAHD is most at risk.

7. Program Reports

a. Immunization Report – Anatasiya Domnich-Kovalevsky- Written report included

b. Emergency Preparedness – Leslie Polito – Written Report included

- Ice jams in Kent on Housatonic River – Will be conducting water sampling for Some of the homes in the flooded area. TAHD staff have been to area several times To view problem.

c. Lead Poisoning Prevention Program – Tom Stansfield

- Reported 1 new case recently

d. Medical Reserve Corp – Kitty Hickcox- Written report

e. Environmental Health Program- Tom Stansfield

- Update on restaurant closure
- Relocation for tenant on heating complaint
- Blight committee city of Torrington
- FDA code update and staff training
- Change of hours update

8. Adjournment- Vice Chairman Breakell called for a motion to adjourn

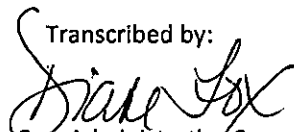
Motion made by J. Wilk to adjourn meeting at 9:08 pm which was seconded by T. McClintock.

Vote taken motion passed unanimously.

Respectfully submitted by:


Robert Rubbo, Director of Health

Transcribed by:


Diane Fox, Administrative Secretary