

**BOARD MEMBERS**  
*Andrew Tierney, Chairman*  
*Stan Soby, Vice Chairman*  
*Peter Hughes, Treasurer*  
*Rosemary Coyle*  
*David Cox*  
*Ryan Curley*  
*Irene Haines*  
*Kate Morris*



**DIRECTOR of HEALTH**  
*Russell Melmed, MPH*

*Colchester, East Haddam, East Hampton, Hebron, Marlborough, & Portland*

**Chatham Health District Board of Health Special Meeting**  
Time: February 21, 2023 03:30 PM Eastern Time (US and Canada)  
Zoom Meeting 893 9522 9022

Present: Andrew Tierney Stan Soby Dave Cox  
Irene Haines Rosemary Coyle

Others: Russell Melmed

1. Call to Order

Chairman Tierney called this Special Meeting to order at 3:34pm.

2. Public Comment

There were no public comments.

3. Proposed 2024FY Chatham Health District Budget

Mr. Melmed presented the Board with the attached FY2024 Budget Summary, Taking Points and Justifications.

Members of the Board expressed appreciation to Mr. Melmed and the Committee on their efforts in revisiting and reducing the budget from the original proposal.

**Motion was made by Ms. Haines, seconded by Ms. Coyle, to move the Proposed FY2024 Budget to Public Hearing. Vote was unanimous in favor.**

4. Public Comment

There were no public comments.

5. Adjournment

**Following no further discussion motion was made by Ms. Haines, seconded by Mr. Soby, to adjourn the meeting. Vote was unanimous in favor. Meeting adjourned at 3:48pm.**

## FY2024 Budget Summary, Talking Points, and Justifications

This year, we are proposing a 4.93% increase to municipal per-capita. This reflects a COLA (4.5%), three staff promotions, and increasing from part-time to full-time one sanitarian. In addition, we are expecting increases to expenses across many operations categories, including:

- IT
- Liability insurance
- fuel/mileage
- Utilities and communications

We have attempted to mitigate increases by tightening our belt and cutting some line-item expenses. The bottom line is that this budget reflects the importance of our people over stuff.

What public health does is critically important, in many cases statutorily required, and increasingly complex and burdensome on local health departments. Recent public acts and regulatory changes are projected to increase the demands on our workforce, with little state funding specifically tied to these changes, including:

- PA 22-118 mandating local health departments monitor and report to OPM on damage to private property from Sodium Chloride run-off
- PA 22-49 reducing by 3-fold the threshold for local health department lead poisoning investigations (Governor's budget allocated less than half of what was requested for the program, with the bulk of that funding allocated for home owners to abate lead-based paint but negligible funding for local health department investigations)
- Adoption of the FDA Model Food Code

Local and state health departments **have lost 21% of workforce capacity in the 10 years preceding the pandemic**, and the burden of the pandemic has put strains on the remaining workforce. The upward pressure on sanitarian salaries in particular has been noticeable in the last year. While the salary survey shows that we are competitive, it is already becoming an outdated reflection of the job market after just 1-year. 3-of our environmental health staff received job offers in the last year, offering higher salaries. Counter-offers using contingency funds and grant-funds, while not 100% matching the offers, managed to keep two of the three staff from departing.

We are fortunate to have minimized our attrition thus far through a mix of competitive pay, benefits, our own approach to workforce development, and a flexible and positive work environment. This must continue if we are to maintain our current level of services, and meet our growing statutory obligations. Both the Federal and State government recognize the precarious position local health departments are in, and each have taken steps and allocated funding to local health departments to help address the workforce issue. While we are unlikely to see these efforts ease our workforce burdens for 3-5 years, we do see the clouds parting a bit with these significant commitments. The most important Federal and State programs that address our workforce are:

- The most recently passed Federal omnibus spending law includes education loan forgiveness for people in and remaining in, or entering the local public health workforce (this is not part of President Biden's executive order, and is not tied to income thresholds). Under this new

- Train non-certified staff to support environmental and community health. In 2024 we will train our administrative assistant to take on more duties in support of environmental and community health. Among those duties will be Everbridge communications, and a broad array of inspections, including of salons, campgrounds, day cares, and pools. This will reduce the burden on certified staff, perhaps limiting the need to hire additional certified staff to cover the growing workload, particularly in environmental health.