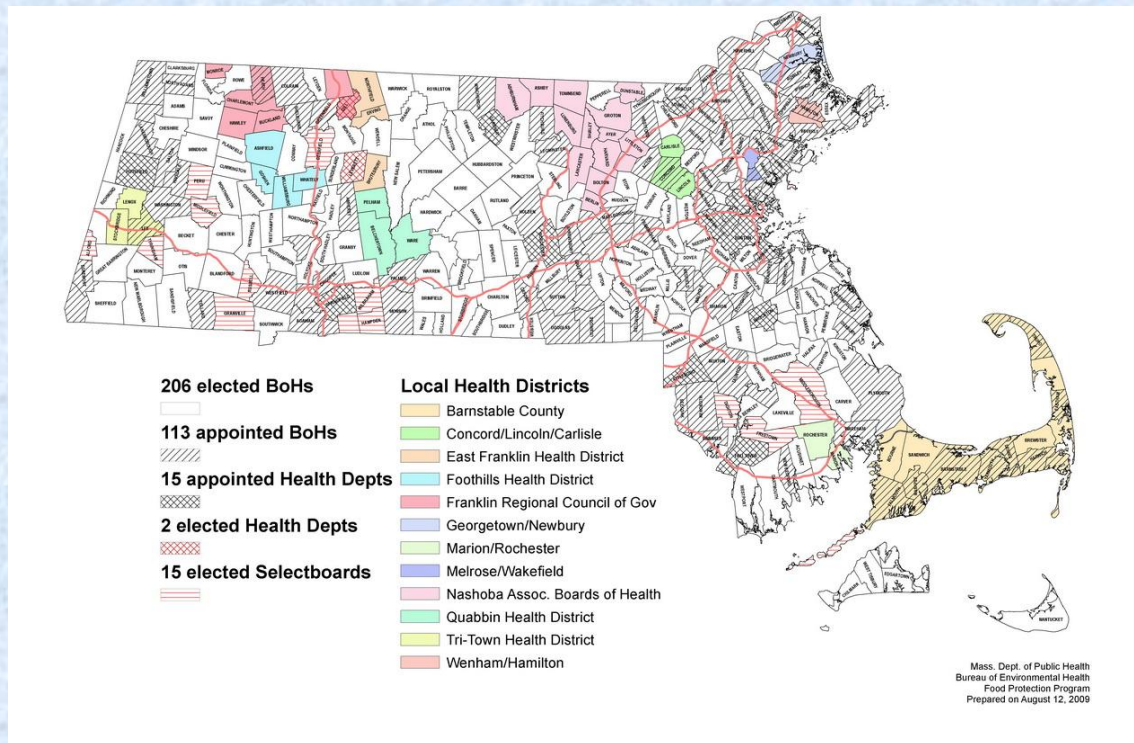


Models for Health Department Collaboration

- **Geoff Wilkinson**, Mass. Dept of Public Health
- **Ruth Clay**, Melrose-Wakefield Health Dept.
- **Phoebe Walker**, Franklin Regional Council of Governments
- **Steve McGoldrick**, Collins Center, UMass Boston

Who is already collaborating?



Regional Health Programs at the Franklin Regional Council of Governments



Regionalization Tool Kit
Conference
September 3, 2009

FRCOG Region

- Most rural county in MA.
- 72,000 people, 725 square miles, 26 towns.
- Greenfield – 18,000 residents; Monroe – 93 residents.
- 23 of 26 towns have population under 5,000; 18 under 2,000.
- Only two towns with public health nurse positions; 3 with full-time building inspectors; 2 with full-time health agents.

FRCOG Municipal Service Programs

- Accounting
- Cooperative Inspection
- Cooperative Purchasing
- Regional Health Inspection
- Regional Public Health Nurse
- Engineering and IT Consultants

Regional Health Inspection

- Provides sanitary code enforcement and inspection for 8 towns' Boards of Health.
 - Unsafe housing
 - Court enforcement
 - Lead
 - Recreational camps and pools
 - Septic plan review and inspections
 - local regulations
 - Food service
 - Technical support of Boards of Health
 - database/software development for special projects.

Agent's work differs from town to town

- Gill: housing and camps
- Charlemont: food and housing, very little septic
- Buckland: housing, camps and septic
- Monroe: housing and food

Lead Paint



Host Agency Model

- Towns contract with Host Agency for services
- Each BOH retains policy and workflow direction
- Host Agency applies an “indirect rate” to the hours worked by staff, and assesses towns based on agreed-upon formula.

RHIP Finances

Revenue Sources	Amounts
Town Assessments	\$50,840
Grant Funds	\$27,000
Total Budget	\$77,840



Host Agency Administrative Support:

- Financial Management
- Procurement policies and services
- Legal counsel
- Personnel policies and liability insurance
- Staff supervision
- Office space



How are towns charged?

1. Began with seed funding to provide free days of time
2. Moved to hourly fee-for-service
3. Transitioned to assessment-based formula. Cost based on 3 year average of historic hourly use.

Pros...

- Professional help is absolutely required in today's BOHs, but hard to find part-time. Needed certifications include:
 - Certified Pool Operator
 - Certified Lead Determinator
 - Certified Food Handler
 - Certified Title 5 Septic System Inspector
 - Approved Soil Evaluator
 - Registered Sanitarian
 - Certified Health Officer
 - Public Water Supply Operator

More Pros..

- Protects towns from liability
- Allows BOH to focus on other priorities
- Makes it easier to retain BOH members



More Pros..

- Lays groundwork for potential future collaboration
- Makes grant funding easier to apply for and receive. Recent grants at RHIP:
 - Hoarding
 - Private Well Regulations & Testing
 - Animal Carcass Disposal Planning
 - FDA National Food Inspection Standards

..... and Cons

- Expensive
- Little historical support for health boards
- Budgets are tight
- Some towns don't want to raise user fees to offset costs
- Towns reluctant to pay for everything they should

The Future of the FRCOG's Regional Health Inspection Program:

- Actively seeking more towns
- Preparing for potential greater level of regionalization in the future.
- Actively seeking grants to address problems identified in the course of the work.

For More Information..

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