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## **BOARD OF HEALTH**

### **March 19, 2015 Meeting**

### **MINUTES**

**A. CALL TO ORDER AND ROLL CALL.** Chairman Judith Sartucci called the meeting to order at 6:09 P.M. in Room S2 at the Pitkin Community Center, 30 Greenfield Street, Wethersfield, CT

**Present:** Judith Sartucci, Chairman  
Patricia Checko, Vice-chairman  
Charles Brown, Secretary-Treasurer/Director of Health  
Angela Colantonio  
Dianne Doot  
Margaret Hanbury (arr. 8:05 PM)  
Raymond Jarema  
Jerilyn Nagel (arr. 6:14 PM)  
Michele Sadlosky  
Marti Stiglich  
Carolyn Wysocki (via conference call)

**Excused:** Paul Cloonan and Kristine Nasinnyk

**Staff:** none

**Date public notice posted:** March 13, 2015

**Quorum present.**

**B. PUBLIC FORUM** – no one from the public present.

**C. ADOPTION OF MEETING AGENDA** –

**A MOTION** was made by Checko, seconded by Doot to adopt the meeting agenda with the addition of an executive session. **MOTION CARRIED UNANIMOUSLY.**

**D. EXECUTIVE SESSION**

**A MOTION** was made by Checko, seconded by Stiglich to go into executive session for the purposes of discussion of a draft document exempt from disclosure under Conn. Gen. Stat. 1-210 (attorney client privileged work product) regarding 1) a personnel issue and 2) legal services.

**MOTION CARRIED UNANIMOUSLY.**

In Executive Session at 6:15 PM: Sartucci, Checko, Doot, Jarema, Colantonio, Stiglich, Nagel, Sadlosky and Wysocki. Brown excused from session.  
Out of Executive Session at 6:55 PM. Brown rejoined the meeting.

**E. ACTION ON ITEMS DISCUSSED IN EXECUTIVE SESSION**

1. **A MOTION** was made by Wysocki, seconded by Doot to approve a monthly invoice for payment for legal services rendered by Shipman and Goodwin.  
**MOTION CARRIED UNANIMOUSLY**
2. **A MOTION** was made by Jarema, seconded by Sadlosky to accept the personnel recommendations of the Board's attorney and direct that they be implemented.  
**MOTION CARRIED UNANIMOUSLY.**

**F. FEE WAIVER REQUEST FOR TASTE OF NEWINGTON EVENT**

In keeping with the agency's fee policy Brown presented a request from the Newington Chamber of Commerce to waive all the food vendor inspection fees for its annual Taste of Newington fundraiser scheduled for March 21, 2015. Brown recommended waiver of fees for the approximately 8 food vendors. Projected fiscal impact for agency: \$760. Inspection of food service vendors and issuance of temporary food service permits will still be done in keeping with the State Code and agency ordinance.

**A MOTION** was made by Checko, seconded by Sadlosky to approve the waiver of inspection fees for all food vendors participating in the 2015 Taste of Newington fundraiser, as requested by the Newington Chamber of Commerce and recommended by Brown as Director of Health. **MOTION CARRIED UNANIMOUSLY.**

**G. RECOMMENDATIONS OF CENTRALIZATION COMMITTEE**

Nagel and Brown presented some of the findings of the Board's Centralization Committee and its first set of recommendations.

**A MOTION** was made by Nagel as Chairman of the Centralization Committee that the Board adopt the recommendations of that Committee to:

1. endorse the consolidation and centralization of all staff and office functions into one headquarters site;
2. Use FY 2015-16 for fiscal planning; completion of a feasibility study; and developing a request for proposals for new site; and
3. Plan for centralization (actual move) to occur during FY 2016-2017.

Board members discussed the pros and cons of moving forward with consolidation and centralization of all staff and office functions, the impact on staffing, service in the towns, fiscal planning for such a move and other preparation involved in such an undertaking.

Brown and members of the *Finance* Committee pointed out that fiscal planning was already underway in the FY 2016 draft budget to begin to budget for costs related to the eventual move (e.g., IT service and equipment, administrative conversion and consolidation of agency records, etc.) and would be addressed each year as the agency moved forward. Members of the *Centralization* Committee further pointed out that this transition to new headquarters would be a multi-year process, and would continue after the physical move itself was made.

**MOTION CARRIED UNANIMOUSLY.**

**Central Connecticut Health District  
March 19, 2015 Board of Health Meeting  
Page 3**

Board members asked that Brown and the Centralization Committee bring to the Board as soon as available additional information from its work sessions, information from the WHB Health District and others used in consultation, timetable for a feasibility study and other efforts planned by the Committee.

Hanbury joined the meeting.

**H. STRATEGIC PLANNING SESSION #2**

Sartucci turned the remainder of the meeting over to Brown to continue the strategic planning session begun with the Board in its special workshop session on February 4, 2015.

Brown provided background and materials for the Board review including those from its CHA, summary of the essential public health services, and framework from its 2011-14 strategic plan. Using a PPT he guided the Board through the session and included the following issues:

- Bridge Plan versus full strategic plan  
Brown had met with the Governance Committee on March 10, 2015 to review the results of the February session and outline format for this next session. A critical issue from the last Board session: whether to go with a one year “bridge plan” or continue with setting up a new 3-5 year plan for the agency. Recommendation of the Governance Committee is to stay the course and proceed with a long range plan. Among Committee members’ concerns was the need for a strategic plan that for use with potential funders for new grant funding – not possible with a short-term “bridge plan” unless agency is seeking some kind of short-term transition funds (which are hard to find). After discussion Board concurred and agreed to continue with long range planning, but asked that the plan address short-term, long-term and incremental objectives.
- Areas not completed or accomplished in the last 3 year plan  
Brown presented a summary of the objectives from the previous strategic plan, which were either not completed or not addressed, and identified those that were still relevant and achievable. Consensus of Board: as feasible and appropriate these should be included in the new plan.

Brown continued discussion with the Board of the strategic planning framework from its 2011-14 plan and reviewed the remaining strategic goals and strategic objectives for each. In its review he asked the Board to also identify each as short-term, intermediate or long-term objectives:

- Strategic Goal V: strengthening the agency’s infrastructure (funding, physical plant, IT and website, agency communications, workforce development). Brown identified this whole area as critical and the foundation for any direction he would attempt to move the agency – “need to get our house in order first.” Some concern among Board members that this not be the sole focus to the detriment of other strategic areas such as new directions for environment health, health promotion and prevention, and emergency preparedness.
- Strategic Goal IV: quality of service. Accreditation remains a priority and needs to be addressed throughout the new strategic plan beginning with an agency performance management system -- of which quality assurance, quality

**CCHD Board of Health**  
**March 19, 2015 Board Meeting**  
**Page 4**

improvement and customer satisfaction monitoring are all components. Accreditation is about good management. As CCHD moves toward accreditation a change in “culture” is needed.

- Strategic Goal I: environmental health
  - Board concurred with goal. Objectives need modifying.
  - Need to move from just addressing hazards to promotion of healthy homes and healthy natural and built environments.
  - How to address to climate change an issue.
  - Need to address code revision and law enforcement
- Strategic Goal II: good health at every age
  - Board concurred with goal. Objectives need modifying.
  - Need for differentiation between programs and initiatives.
  - Need to address the social determinants of health.
  - Need to better address health equity and how agency can best help people improve and facilitate health lifestyles and environment, not just a focus on access to care.
  - Also need to link with 2020 Health People Objectives and with the State’s Health Improvement Plan.
- Strategic Goal III: emergency preparedness.
  - Board concurred with goal. Objectives need modifying.
  - Need to focus on enhancements to what agency has in place and direction in which it needs to go to sustain its gains in this area.

Board concurred that given the challenges and scope of the issues the agency faces, it is moving toward a 5-year versus a 3-year strategic plan.

Next steps:

- Brown will meet with agency staff to review the strategic planning process and provide an opportunity for their review and input;
- Brown will draft a revised framework for the strategic plan, review with Governance Committee, and then bring to Board for review and discussion.
- Once approved Brown and staff will flesh out the operational objectives.
- Additional time at upcoming Board meetings, and an additional session if needed, will be planned to continue and complete this process.

**I. NEXT BOARD MEETING** – regular meeting on April 16, 2015, 6:30 PM in the Board Room of the Berlin Peck Library, Berlin, CT.

**J. ADJOURNMENT - A MOTION** was made by Sadlosky, seconded by Doot to adjourn. **MOTION CARRIED UNANIMOUSLY.** The meeting adjourned at 8:55 PM.

Respectfully submitted,

Judith A. Sartucci  
Recorder pro tem

**REVIEWED AND APPROVED BY THE BOARD:** April 23, 2015