

REGULAR MEETING MINUTES ASPETUCK BOARD OF DIRECTORS

September 9, 2024

Subject to change until approved by the Board of Directors.

The Regular Meeting was called to order by Chairman Shaum at 7:00 pm.

The following voting Board Members were present in the room: Chairman Paul Shaum, Vice Chairwoman Catherine Revzon, Director Fonteyne, and Director Mally.

Also, present in the room was Mark A.R. Cooper, Director of Health; Pam Scott, Director Finance and Human Resources, Vanessa Hurta, Director of Clinical Services, and Ryan Currier, Sanitarian.

Approval of Minutes

Chairman Shaum asked if there were any comments on the July 11, 2024, Regular Meeting minutes.

Hearing none, on a motion made by Director Mally and seconded by Vice Chairwoman Revzon the Board voted to approve the Regular Meeting minutes of July 11, 2024. Chairman Shaum voted yes, Vice Chairwoman Revzon voted yes, Director Fonteyne voted yes, and Director Mally voted yes.

Motion was approved 4 to 0.

Communications

Mr. Cooper summarized the communications included in the Directors meeting package. Four were press releases of which two were about mosquito's and West Nile Virus, one concerning what to do after floods, and one regarding the "Get Vaccinated" campaign. Two other communications involved the filing of State and Federal Audit Exemption notifications.

Fee Schedule Comparison Review

Mr. Cooper noted a few meetings ago the Board briefly discussed the Health District's fee schedule and whether it should be revisited. In discussing that question with staff, Ryan Currier took it upon himself to do some research and prepare the Fee Schedule Comparison Chart included in each Director's Board Meeting package. Mr. Currier indicated it has been five years since the Health District's fee schedule was last updated, summarized his work effort and explained the charts setup. He collected the fee schedules from eleven municipalities in Fairfield County and attempted to standardize

the responses. He explained the amount of work effort that goes into certain inspections, such as food stores, which may take a few hours to complete a single inspection. He also compared the Health District's fees to some of the municipal department fees, the Health District's is significantly lower.

Director Fonteyne asked how many times the Health District has adjusted fees in the past and what has been looked in terms of where our fees fell in the range of low to high, indicating perhaps somewhere in the middle is preferable. Mr. Cooper responded that since he has been Director fees have been adjusted a couple of times. In 2008 the Health District had some of the highest fees in the area, this is no longer the case. Mr. Cooper also indicated that he is not looking to adjust fees immediately, but as the next budget season approaches, it is something that could be considered.

Director Mally added that as the District gets into the budget process, the fee schedule could be looked at as a function of staffing size, staffing costs, inspections looking at the metrics and costs associated with population size, permit activity, number of inspections, amount of work effort, etc., as compared to these factors the last time the fee schedule was modified about five years ago.

Director Fonteyne indicated that the Health District's revenues and expenditures are approaching a point of equilibrium, revenues leveling out with staffing costs increasing, with inflation increasing the cost basis.

Mr. Cooper indicated that it will be given a hard look in developing the next budget. Mr. Currier added that the cost of living and providing services keeps going up every year; the consensus was that making smaller incremental increases would be better than having to make periodic large increases.

There was a brief discussion on lost revenue from the non-payment of fees, fees that do not cover the need for multiple repeat inspections, and when work is done without permits.

Homebound Health Check Program

Mr. Cooper noted that as part of the Strategic Plan a Homebound Health Check Program has been discussed and has been offered to the community in the past. Vanessa Hurta, Director of Clinical Services has developed an outline to restart the program and is here to discuss it. Mrs. Hurta explained that in the past the program had one part time nurse and that there was no charge for the services provided. The nurse retired, the COVID pandemic hit, and the program stopped. More recently the Health District has been receiving many requests for similar services to start up again. In addition to restarting the program in some form, she is interested in providing med-reconciliations, essentially checking to make sure the patient is taking what has been prescribed, and when they are supposed to. Additionally, the nurse would do a safety assessment of the home, a functional assessment of the client, provide immunizations, educational counseling about any medications they may be on, and contact their provider is deemed necessary. This service would only be for the homebound.

Director Fonteyne asked if Mrs. Hurta has any idea of how many people might qualify for such a program. Mrs. Hurta responded that she does not but could check with each town's social services director. She added that the number of visits might have to be limited, perhaps once per month on certain dedicated days, with calls limited to office hours. The first assessment might take two to three hours with subsequent visits being much quicker. There also must clear parameters of what Health District staff would be responsible for.

Director Fonteyne asked how the program would be funded. Mrs. Hurta responded that Greenwich has a similar program that charged on a sliding scale that maxed out at sixty-five dollars per visit.

Director Fonteyne asked if there is a Medicare Code for this kind of service. Mrs. Hurta responded that she could check whether insurance would cover it, but also check with Greenwich to see how their program handles it. Mr. Cooper added that the local Social Services directors could be asked to verify financial hardship cases and perhaps they have funds for those in their aid programs. If there is no outside funding for the service, the Health District could use some of its operating budget. Mrs. Hurta indicated that she has spoken to the Directors of Social service in the past who have indicated they could complete a financial assessment in a few days.

Director Fonteyne stated that it sounds like a good program but anything that would help get a handle on how much it costs, how many people might utilize the program, and how many people need to be hired to do this work would be helpful. Mrs. Hurta responded that there is no need to hire any additional staff, the demand would be handled by herself and the department's other nurse. There could be a waiting list to get in the program. The only cost might be the gasoline mileage reimbursement to for traveling to the home.

Mr. Cooper noted that during flu season the Health District has provided and charged for flu vaccinations to the home bound, this would be very similar.

Director Fonteyne indicated that he would like to know if there is a source of reimbursement or support for the program and what is the anticipated demand for the service. Then a budget can be developed for the level of service needed. In the meantime, a trial program could be started to try and get the answers to the questions.

There was general discussion on the potential risk for having to cap or end the program in the future because of overwhelming need and where funding might be found. Chairman Shaum requested that Mrs. Hurta come back to the Board with a report on what demand for the program is found and what it cost. Director Fonteyne emphasized that the program should be focused on those who are falling through the cracks.

Director Mally asked what would happen should a patient start in the program with a monthly visit but then develops a need for weekly ones. Mrs. Hurta responded by saying the Health District would consult with and hand the patient over to the primary care provider. One of the criteria for participation in the program is having a primary care provider willing to communicate with the Health District. It is the primary care giver who would have to order a skilled visiting nurse or other more intense services. Referral from Social Services Departments having properly conducted a financial assessment seems like the way to go, self-referrals and those from family might be more problematic.

By consensus the program can start with clear criteria for participation, for those who can pay there should be fee, and for those who cannot afford the service they should be vetted through their town's social services financial assessment process.

Vice Chairwoman Revzon agreed there should be a fee otherwise the program would not be valued.

Director Mally asked how many patients were under the age of sixty-five and on Medicare who took advantage of the previous program. Mrs. Hurta responded very few.

Director Of Health Report

Operational and Permit Activity Reports

Mr. Cooper noted that the August report was not ready by this meeting because when the first business day of a month falls on federal holiday staff are hard pressed to pull all the numbers together. The August report will be ready for the next meeting. The June and July reports are in the Board meeting package, Mr. Cooper asked if there are any questions.

Director Fonteyne noted that although the permit application chart has a seasonality to it, it seems to be stabilizing. Mr. Cooper indicated that it is his guess that the new permit level will average out at about one hundred twenty per month since Easton joined.

Vice Chairwoman Revzon asked if the Health District has received flu and RSV vaccine. Mr. Cooper replied yes.

Executive Session

On a motion made by Director Fonteyne and seconded by Director Mally, the Board voted to go into an executive session to discuss the Executive search, the federal lawsuit, and a contract with Inspect2Go for EH Software. Chairman Shaum voted yes, Vice Chairwoman Revzon voted yes, Director Fonteyne voted yes, and Director Mally voted yes.

Motion was approved 4 to 0.


Chairman Shaum declared the executive session over at 8:30

Adjournment

Chairman Shaum asked if there was any other business to come before the Board. Hearing none, on a motion made by Director Fonteyne and seconded by Director Mally, the Board voted to adjourn at 8:31. Chairman Shaum voted yes, Vice Chairwoman Revzon voted yes, Director Fonteyne voted yes, and Director Mally voted yes.

Motion was approved 4 to 0.

Respectfully submitted.



Mark A.R. Cooper Director of Health
Aspetuck Health District