

NOTICE OF OPEN PUBLIC MEETING



Northern Bristol County Public Health Alliance

Date: January 6, 2026

Time: 10:00 am - 12:00 pm

Meeting Location:

Joanne Cathcart Conference room (Lower level) 43 S Washington St, North Attleborough, MA 02760, USA

MINUTES FOR IN-PERSON MEETING

Voting Attendees:

- a. Sheri Miller Bedau, Attleboro
- b. Cliff Pierre, Attleboro
- c. Elizabeth Moreira, Dighton
- d. Anne Marie Fleming, North Attleboro
- e. Brian McCracken, North Attleboro
- f. Geri Hamel, Rehoboth

Non-Voting Attendees:

- g. Melissa Silverman, Regional Public Health Nurse
- h. Emelee Guest, Regional Inspector
- i. Erika Syokau, BME Strategies

I. Call to Order

- a. Anne Marie motioned to call the meeting to order at 10:14 am, and Sheri seconded. The meeting opened with a quorum of 4/6 voting members present. (Attleboro, Dighton, North Attleboro, Rehoboth, and Rehoboth)

II. Past Meeting Minutes

- a. Geri made a motion to approve the meeting minutes from December 2nd 2025. Liz seconded the motion. All voting members present approved the meeting minutes.

III. Regional Staff Updates

i. Regional Inspector Monthly Report

1. *Emelee shared the following updates:*

- a. Completed initial onboarding in late November
- b. Completed Tier 1 Training for Food and Housing



BME STRATEGIES



Northern Bristol County Public Health Alliance

- c. Began studying for the ServSafe Exam (scheduled for 1/8/26)
- d. Registered memberships with MEHA, NEHA, and MHOA
- e. Assisted with the NBCCPHA website launch
- f. Finalized a master list of all shadowed inspections
 - i. Anne Marie asked Emelee how inspections are going on the iPad.
 - ii. Emelee expressed growing confidence in her iPad usage but suggested the usefulness of a test feature prior to deployment.
 - iii. Liz inquired about the timeline for the state software.
 - 1. Erika and Anne Marie reminded the group that METRIK is still scheduled for a FY27 rollout and will include a case management component.

ii. Regional Nurse Monthly Report

- 1. *Melissa shared the following updates:*
 - a. Conducted several blood pressure and glucose screenings in North Attleboro and Taunton
 - b. Attended a group meeting with the American Red Cross with the Dighton nurse
 - c. Researched and conducted outreach and document tracking for resources for the maternal-child health (MCH) programming in Sydney, with the focus on securing meeting rooms in the municipalities
 - d. Ongoing tuberculosis case management, direct observation therapy, and home visits
 - e. Working on certified lactation counselor certification
 - i. Anne Marie asked Melissa to look into a few community partners.
 - 1. Geri asked if Melissa could host another hands-on CPR in Rehoboth. Melissa shared that she would be happy to assist.





Northern Bristol County Public Health Alliance

- a. Melissa shared that there has been an increase in CPR
- f. Geri relayed feedback from new Rehoboth families who lack support within their immediate household. She inquired if there is support available through PSI (Postpartum Support International) specifically for breastfeeding assistance.
 - i. Melissa shared that the current partners don't have the capacity to support breastfeeding education and courses.
 - ii. Sheri informed Melissa to check in with Sheila based on her current efforts in Attleboro.
 - iii. Emelee shared that she received support from an online lactation consultant through her insurance coverage.
 - iv. Cliff shared that his wife received lactation support from Newton Wellesley Hospital.
 - 1. Erika shared that lactation support is a focus area for the MCH classes.

iii. Regional PHS Monthly Report

- 1. Sydney is working on continuing survey dissemination, key informant interview outreach and implementation, and environmental scan. Additional town outreach is always appreciated.
- 2. The week of January 5th marks the final outreach effort for the Giving Closet (Tuesday, Wednesday, and Friday). To significantly boost both donations and registration, leveraging official city websites and social media for outreach is highly recommended. The specific flyers for both donations and registration are available via the links provided in Sydney's report.
 - a. Any donations are welcome as well. Per initial registration, diapers and personal care items are proving to be the most needed items.
- 3. Regional staff are working to confirm meeting space for upcoming MCH classes and are effectively outreaching to community





Northern Bristol County Public Health Alliance

members for subject matter experts to present specific topics to residents as part of the MCH initiatives.

4. Sydney shares a reminder to subscribe to Substack for the monthly newsletter and that she has developed hoarding task force materials as part of our discussion in a little bit.
 - a. Erika shared a live demo of the newsletter on Substack and informed the SSA to subscribe.

IV. Workplan and Budget Updates

a. *Giving Closet*

- i. Erika shared an in-depth update on the resource drive called the Giving Closet.
 1. This donation drive is being organized to provide essential items to parents and children residing within the SSA as part of the MCH programming for the alliance. These items include personal hygiene products, cleaning supplies, paper products, diapers, formula, and nonperishable food items.
 2. Here are some current updates on the drive in Berkley
 - a. Currently, there are 24 registrants with at least one from each municipality.
 3. Next steps for the resource drive:
 - a. Regional staff will continue to build partnerships with local and statewide organizations for consistent item collection, since PHE funds are not allowed to purchase these materials.
 - i. Melissa shared that regional staff have collaborated with pantries in each community.
 - ii. Anne Marie suggested sharing information on the resource drive with dental offices.
 1. Erika shared that Sydney is looking into mini cards with alliance information to share in offices.
 - b. Regional staff will rely on health directors to support additional donation box sites in the new year.





Northern Bristol County Public Health Alliance

- c. Strengthened local support is key to significantly boosting outreach efforts. This increased local involvement would lead to greater donations, the development of new partnerships, and a broader understanding of the alliance's work.
 - i. The group was asked to consider these three objectives and to suggest ways for regional staff to achieve these goals.
 - ii. Anne Marie shared her concern about sustainability and the reason behind the drive. In the past, she has found working on the food pantry to be very time-intensive and took away from programming needs.
 - 1. Melissa explained that this resource drive was intended to respond to needs related to SNAP benefits, serving as a gateway to subsequent MCH classes and, eventually, MCH courses.
 - 2. Anne Marie inquired if the regional staff had reached out to Hope and Comfort for additional supplies.
 - a. Melissa confirmed that regional staff are on the waiting list for Hope and Comfort.
 - iii. Geri proposed a wider sharing of the resource drive in February. This timing is intended to allow people to settle in after the holidays and potentially donate items they received. She also plans to bring this proposal to her board in February.
- b. *Budget Update*
 - i. An update was shared on the current spending progress.
 - 1. As of December 31st, the alliance has spent around 29% of the total contract amount, \$525,226.21. The majority of spending includes nursing supplies, health communications, trainings and travel reimbursements





Northern Bristol County Public Health Alliance

- ii. The coalition was reminded that the alliance is in the second term of our tri-annual reporting cycle to DPH. For the remainder of the second term the alliance is expected to spend funds on the following:
 - 1. Acquiring additional supplies for the MCH resource drive and courses.
 - 2. Ensuring full staffing and covering salaries.
 - 3. Providing training opportunities.
 - a. Geri inquired about purchasing electronic boards for the council on aging.
 - i. Erika did confirm this is not an allowable expense, but can look into kiosks.
 - 1. Liz also expressed interest in the purchase of a kiosk to display health department information.

iii. Additional Areas of Spending

- 1. Additional areas of spending PHE funds were shared with the group.
 - a. *Public Relations Support*
 - i. In light of recent communication and branding challenges, regional staff have proposed utilizing grant funds for external communications. This investment is viewed as a means to strengthen the alliance's long-term strategic plan, enhance its sustainability, and support its advocacy efforts.
 - ii. **JGPR Academy: Communications Support for the Public Sector:** specializes in providing modern communication strategies for government agencies, cities/towns, and school districts. They offer:
 - 1. Crisis Management: Support for handling critical communications situations.
 - 2. Robust Communications Campaigns: Development and execution of comprehensive campaigns for historically underfunded and underserved clients.





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- iii. JGPR also focuses on building and designing custom tools, technology solutions, and marketing products.
 - 1. JGPR offers in-person and online communications and leadership training to public safety and government professionals across all 50 states in the US and throughout Canada. Training options include a deep catalog of online/Zoom-based courses and in-person programs, which can be delivered on-site anywhere in the US. Any departmental staff could attend these trainings. The training topics include the following:
 - a. Risk Communication and Media Relations for Public Health Professionals
 - b. Introduction to Instagram for Public Health Professionals
 - c. Communicating about Critical Public Safety Incidents or Mass Casualty Incidents for Public Health Professionals
 - d. Social Media Trends in Public Health
 - e. Public Information Officer Training - Getting Started with a PIO: Why, Why, and What - From Go Bags to News Releases
 - i. Training costs are:
 - ii. \$10,000 for 4 hours on any two topics with one instructor
 - iii. \$15,000 for 4-6 hours, 2-3 topics, 2 instructors
 - iv. \$20,000 for 8 hours, 4 topics, 2-3 instructors
 - v. In addition to this training servie the SSA can opt into





Northern Bristol County Public Health Alliance

becoming a PR client, which would include timely and evergreen content, including seasonal PR campaigns (mosquitoes, flu etc) and emergency alerts for your members on major breaking news (one news release free per incident, then \$150/hour).

- vi. The group was asked for their initial thoughts on external public relations support.
- vii. Geri shared that she attended a training by JGPR and thought it was helpful.
- viii. Anne Marie shared her concerns about the contract process.
- ix. Liz shared that sharing content on social media in Dighton can be tough and was hoping to eventually develop a health department social media account once the new office assistant starts.
- x. Erika asked the group to review the slides and information and come prepared to the February coalition meeting with a decision on additional public relations support.

iv. *My Junna Case Management Software*





Northern Bristol County Public Health Alliance

1. An additional area for spending this fiscal year was shared by Melissa. [My Junna](#) is a HIPAA-compliant web-based secure case management software system.
2. This system would support regional staff in tracking their time spent on different projects. Time Tracking defaults to monthly hours on the main dashboard. Monthly hours are based on what activity the user puts in.
3. My Junna pricing is based on the number of seats. Standard \$299 set-up fee with 6-month unlimited training and thereafter free support. Individual training d/t different comfort levels.
4. \$99 first user/mo; \$69 additional user/mo. Ex) \$237/mo plus onboarding fee for 3 regional staff.
 - a. Anne Marie agreed that tracking staff time is a challenge.
 - i. For continued advocacy, Erika suggested that precise data on the regional staff's time allocated to specific projects would be helpful.
 - b. Sheri asked regional staff to look into other platforms for comparison.
 - i. The group agreed to revisit this discussion in another upcoming meeting.

v. Printing WIC Food Cards

1. Sheila has requested the purchase of [WIC food cards](#) to support healthy food initiatives in Attleboro. This suggestion, shared by Erika, could be a valuable addition to the resource drive and other individual municipality programs.
 - a. Sheri shared that this has been a great initiative for Attleboro.
 - b. Geri and Anne Marie requested the cards and expressed interest in the coalition printing a suitable quantity.
 - i. Liz mentioned that Dighton gets flyers printed at an affordable cost (around \$200, due to Dighton's size) through Bristol Plymouth High School. She suggested this could be a potential option for the alliance to explore.





Northern Bristol County Public Health Alliance

- ii. Brian asked if the cards go with WIC food purchases. Additionally, how could people use these recipes if they can't afford the ingredients?
 - 1. Anne Marie agreed and added that many people look into fast and ready-to-go meals.
 - 2. Erika shared that the cards could be purchased and piloted in one community. Erika will look into printing services.

c. Workplan

i. SAPHE 2.0

- 1. The alliance was reminded that the SAPHE 2.0 Reporting period is scheduled to commence soon and will involve two distinct surveys:
 - a. **Workforce Standard Survey:** A 50-question survey estimated to take approximately 30 minutes. DPH will provide a more precise time frame following the pilot phase.
 - b. **Performance Standard Survey.**
 - c. Data analysis for this reporting is anticipated to take place in the Spring.

ii. *Workplan Highlights*

- 1. Erika shared high-level workplan highlights that encompass a lot of the work that regional staff have done over the past few months.
 - a. **Communication & Engagement: Raise awareness of shared services and impact on local residents and communities**
 - i. Regional staff supporting grant applications and community partners
 - b. **Community Partnership & Development**
 - i. Development of NBCCPHA letterhead
 - ii. Enhancing community partnership for donations for the Giving Closet
 - c. **Performance Standard 1: Disease control and prevention. Ensure adherence to infectious disease case investigation, while enhancing staff training, capacity and quality improvement initiatives.**





Northern Bristol County Public Health Alliance

- i. 100% MAVEN coverage
- ii. Requesting MAVEN support utilizing the staff support form on the SOP
- d. Performance Standard 2: Identify areas for improvement in inspection processes and provide targeted training to enhance the effectiveness and consistency of inspections in all participating municipalities.**
 - i. Leveraging the regional inspector's documentation on current inspection processes and encouraging training
- e. Performance Standard 3: Enhance staff capacity to effectively meet mandated inspection requirements and enforce regulations in alignment with the Performance Standards for Local Public Health.**
 - i. Supporting regional staff to complete mandated inspection requirement training and share best practices within the SSA.
- f. Elective 1: Maternal Child and Family Health**
 - i. The Giving Closet
 - ii. PSI classes for nurses
- g. Elective 2: Assessment and Surveillance**
 - i. CHA response
 - 1. Sheri raised concerns about MAVEN system accessibility during municipal cyber attacks. She posed questions regarding the appropriate response when DPH indicates a MAVEN user is offline. Furthermore, she inquired about the state's potential support when such issues are beyond the control of local health departments.
 - 2. Melissa agreed that clearer guidance from the state when cyberattacks occur would be beneficial.





Northern Bristol County Public Health Alliance

V. Better Integration and Sharing of Resources and Communication

a. Brainstorm for Sharing of Resources

- i. A key area for improvement involves boosting resource and information sharing within the SSA. Regional staff have effectively advanced programming and education due to their existing connections; however, municipal staff also hold valuable resources and connections. Harnessing these established municipal staff networks will be essential to support and amplify the efforts of the regional staff.
- ii. The group reviewed the following questions and shared their responses.
 1. *What are the greatest barriers to sharing information/resources between municipalities and regional staff?*
 - a. Time
 - b. Advisory board members enjoy the shared relationship within the alliance.
 - c. Need for identifying a master list of resources within each municipality.
 2. *What do you feel is working regarding communicating and sharing resources between municipalities?*
 3. *What kinds of resources would you want to be shared among municipalities?*
 4. *What would be the most effective method for sharing resources?*

b. Current Barriers Identified by Regional Staff

- i. NBCCPHA Newsletter Expansion
- ii. Feedback Form within the SOP
- iii. Warmhand Offs
- iv. Regionalization of Programs
- v. Increased Need for Time Allocation to Programming and Regionalization

c. Next Steps

- i. The goal of this discussion is to consolidate all feedback shared and to brainstorm additional methods for improving resource sharing.
 1. The first being supporting regional staff in formula documentation development
 - a. Regional staff have drafted a letterhead that can be used to communicate with stakeholders with your approval.





Northern Bristol County Public Health Alliance

- b. Additionally, advisory board members will work to communicate updates to regional staff members promptly prior to the newsletter launch on the first Monday of each month.
- 2. Developing a new NBCCPHA expectation Guideline Document that incorporates feedback from today's session
 - a. This document will highlight supervision for regional staff, expectations for resource sharing for both municipal and regional staff
- 3. Lastly, reference SOP's and all alliance documents in the digital repository to avoid duplication and email exchange

VI. Expenditure Votes

- a. The group took a vote to approve the following expenditures:
 - i. Emelee Guest Title 5 Seminar Training ~ \$130
 - ii. Emelee Guest ServSafe Exam ~\$150
 - iii. Safespot BlueDot Project ~\$250 for 1-10 staff
 - iv. PSI Membership for Melissa Silverman ~ \$175 a year
 - v. Speak Up Champion Racial Bias Education Training for Melissa Silverman ~\$299 can be offered to other members once approved by DPH
 - vi. System Inspector (SI) Certification training through NEIWPCC & MHOA/NEHA Membership Renewals for Cliff Pierre ~ \$405
 - vii. Website Domain Name: northernbristolcountypha.com
 - 1. Anne Marie motioned to approve the expenditures. Sheri seconded the vote.
 - 2. A roll call vote was taken:
 - a. Attleboro: Yes
 - b. Dighton: Yes
 - c. North Attleboro: Yes
 - d. Rehoboth: Yes
- b. *Reminder for all expenditures*
 - i. All Trainings need to be voted on by the advisory board.
 - ii. Each community is allocated \$500 for supplies that do not require an advisory board vote. These requests should be submitted through the Google Form on the SOP.



NOTICE OF OPEN PUBLIC MEETING



Northern Bristol County Public Health Alliance

- iii. Regional staff are responsible for their line items. Purchases over \$1,000 will require an advisory board vote; otherwise, they should be submitted through the Google Form.
 - 1. Melissa: Nursing Supplies
 - 2. Sydney: Health communications
 - 3. Emelee: Inspector Supplies

VII. Community Updates

- a. A reminder was given about the upcoming MEHA annual Title 5 Seminar on February 25th at 8 am in Taunton. The cost is \$130 per person.
- b. Google Drive Repository Training
 - i. The group was informed to keep an eye out for a sign-up for training on how to navigate the Google Drive repository.
- c. Next Coalition Meeting:
 - i. February 3, 2026, virtual.

VIII. Adjournment

- a. Liz made a motion to adjourn the meeting. Sheri seconded the motion.
- b. A roll call vote to adjourn the meeting was taken.
 - i. Attleboro: Yes
 - ii. Dighton: Yes
 - iii. North Attleboro: Yes
 - iv. Rehoboth: Yes
- c. The meeting was adjourned at 11:56 am.

Please Note: There will be no public participation in speaking at this meeting.

PLEASE NOTE THAT THE BOARD OR COMMITTEE MAY ACT ON ITEMS IN A DIFFERENT ORDER THAN THEY APPEAR ON THIS AGENDA. ALSO, IF IT SO VOTES, THE BOARD OR COMMITTEE MAY GO INTO EXECUTIVE SESSION DURING THE MEETING.

PERSONS INTERESTED ARE ADVISED THAT, IN THE EVENT ANY MATTER TAKEN UP AT THIS MEETING REMAINS UNFINISHED AT THE CLOSE OF THE MEETING, IT WILL BE AUTOMATICALLY DEFERRED AND ADDED TO A FUTURE AGENDA AS A REGULAR POSTED AGENDA ITEM, WITHOUT FURTHER NOTICE.



BME STRATEGIES

NOTICE OF OPEN PUBLIC MEETING



Northern Bristol County Public Health Alliance



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