| TOWN OF MILLIS | 3 | | FORM #1 | | | |
|-----------------------|-------------------|--------------------|--------------|--------------|-------|--|
| FISCAL YEAR 20 | 16 BUDGET | DEPARTMENT SUMMARY | | | | |
| DEPARTMENT: H | lealth Department | | | | | |
| | FY13 | FY14 | FY15 | FY16 | TA | |
| | ACTUAL | ACTUAL | BUDGET | REQUEST | RECMD | |
| SALARIES | \$105,238.39 | \$111,279.83 | \$119,702.74 | \$122,354.57 | | |
| EXPENSES | \$8,020.00 | \$6,715.15 | \$9,035.00 | \$ 6,905.00 | | |
| TOTALS | \$113,258.39 | \$117,994.98 | \$128,737.74 | \$129,259.57 | | |

BUDGET COMMENTS:

The 2016 Health Department Budget represents level service with the following notations:

- 1. In FY2015 The Health Department was awarded increased work hours for both the Part Time Nurse and the Administrative Assistant. The FY2016 Budget maintains the FY 2015 hours and rate of pay awarded for those positions.
- 2. The FY2016 Budget reflects the elimination of the Sharps Disposal and Director Beeper line items.

Town of Millis Fiscal Year 2016 Health Department Budget

Form #2 Budget Narrative

DESCRIPTION OF FUNCTION OR ACTIVITY

Our mission and responsibility is to protect the community through health promotion, surveillance and permitting activities.

The Department is actively promoting tobacco awareness, conducting flu and wellness clinics, providing mosquito and rabies awareness and facilitating food recall communications. The Department conducts inspections of all food service establishments within the Town and responds to all living condition concerns. The Department inspects camps and pools. The Department protects both homeowners and the environment through its oversight of Mass DEP's Title 5 requirements. Working with the Massachusetts Department of Public Health, the Department is actively involved in emergency planning and with preparation of State mandated deliverables.

The Department is responsible for the licensing of approximately 145 businesses throughout the year.

STATEMENT OF SPENDING HIGHLIGHTS FOR FISCAL 2016

The Department intends to continue and expand its work on its Mission.

Sharps disposal and director's beeper allocations have been eliminated.

The Department intends to expand its role in the Community. Line item 52031 has been increased to provide additional funds for a Health Fair and/or an outreach program with the schools.

FUNDNG PLAN

Please see the attached Fee Schedule which the Department has maintained since 2008. Additional funding was obtained in Fiscal Year 2014 via the following sources:

| Food Service License 2014 | \$11,640 | Business owners |
|---|----------|---|
| Non-Food License 2014 | \$11,700 | Business owners (i.e. tattoo parlor & trash hauler) |
| EHIR Review Fee 2014 | \$3,000 | Developer fee |
| Medical Services/Vaccine 2014 | \$8,565 | Medicare reimbursement |
| Septic Permitting 2014 | \$6,525 | Permitting for Title 5 system construction |

PERFORMANCE ACCOMPLSHMENTS

The Department is responsible for the issuance of over 145 business licenses (several businesses received more than one license). In Fiscal Year 2014 the following licenses were issued:

- 57 Food Related
- 35 Hazardous Material Storage
- 16 Septic Installer
- 13 Septic Hauler
- 11 Tobacco Sales
- 7 Trash Removal
- 4 Pool

In addition to processing the above licenses, the Board responded to numerous housing and restaurant complaints, inspected all food service establishments, observed numerous septic system installations, conducted three flu clinics, provided outreach nursing assistance to the Council of Aging, participated in a regional tobacco control coalition and represented the Town in Region 4A Emergency Planning.

1/22/15 TSTT
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TOWN OF MILLIS FISCAL YEAR 2016 BUDGET REQUESTS ***FORM 3***

| GENERAL FUND | FY 2013 ACTUAL EXPENDITURES | FY 2014 ACTUAL EXPENDITURES | FY 2015 REVISED ***BUDGET*** | FY 2016 DEPARTMENT REQUEST | |
|--|-----------------------------------|-----------------------------------|------------------------------------|----------------------------------|---|
| BOARD OF HEALTH SALARY | | | | | |
| SALARIES | | | | | |
| 0151051 510300 SALARIES CLERICAL | 24,991.22 | 26,000.00 | 31,824.00 | 32,436.00 | |
| 0151051 510350 CLERICAL WAGES-MEETINGS | 1,652.13 | 1,993.75 | 1,769.48 | 1,830.00 | |
| 0151051 510500 BOARD OF HEALTH DIRECTOR | 63,370.68 | 67,367.21 | 68,812.58 | 70,164,80 | - |
| 0151051 510510 WAGES PART TIME NURSE | 14,972.35 | 15,318.87 | 16,696.68 | 17,017,77 | |
| 0151051 510588 WAGES FOOD SERVICE CONSULTANT | .00 | .00 | .00 | | |
| 0151051 510600 LONGEVITY | 300.00 | 600.00 | 600.00 | 906.00 | |
| TOTAL BOARD OF HEALTH SALARY | 105,286.38 | 111,279.83 | 119,702.74 | 122,354,57 | |

* Error Fy 2015 = 900.00

TOWN OF MILLIS FISCAL YEAR 2016 BUDGET REQUESTS ***FORM 3***

| GENERAL FUND | FY 2013 ACTUAL EXPENDITURES | FY 2014 ACTUAL EXPENDITURES | FY 2015 REVISED ***BUDGET*** | FY 2016 DEPARTMENT REQUEST | |
|--|-----------------------------------|-----------------------------------|------------------------------------|----------------------------------|-----|
| BOARD OF HEALTH EXPENSE | | | | | |
| EXPENSES | | | | | |
| 0151052 510710 CLOTHING/CLEANING | 87.43 | .00 | 100.00 | 100.00 | |
| 0151052 520110 SERVICES RABIES CLINIC | 930.00 | 787.00 | .00 | 0 | |
| 0151052 520301 MEDICAL SUPPLIES | 380.00 | 248.73 | 750.00 | 750.00 | |
| 0151052 520310 MENTAL HEALTH | 1,160.00 | 1,160.00 | 1,160.00 | 1160.00 | |
| 0151052 520311 HEALTH FAIR/FLU CLINIC | 188.35 | 200.00 | 200.00 | 400.00 | |
| 0151052 520800 CONTRACTED MEDICAID BILLING | .00 | .00 | .00 | 0 | |
| 0151052 521000 SHARPS PROGRAM | .00 | 1,467.41 | 1,800.00 | 0 | |
| 0151052 540140 BOOKS/PERIODICALS | .00 | .00 | 175.00 | 75.00 | |
| 0151052 540400 SUPPLIES & EXPENSES | 1,053.06 | 1,648.94 | 1,500.00 | 1500.00 | |
| 0151052 540435 BEEPER | 145.00 | .00 | 500.00 | 0 | |
| 0151052 540450 POSTAGE | 144.98 | 173.77 | 300.00 | 300.00 | |
| 0151052 540500 ADVERTISING | 125.02 | .00 | 700.00 | 700.00 | |
| 0151052 540700 DUES & SUBSCRIPTIONS | 100.00 | 150.00 | 200.00 | 300.00 | |
| 0151052 540710 MEETINGS | 393.25 | 428.00 | 450.00 | 0.00 | |
| 0151052 540800 EQUIPMENT | .00 | .00 | .00 | 100.00 | |
| 0151052 540900 ADMINISTRATIVE EXPENSE | 400.00 | 400.00 | 400.00 | 400.00 | |
| 0151052 570500 AUTO/MILEAGE REIMB | 163.57 | 51.30 | 300.00 | 300.00 | |
| TOTAL BOARD OF HEALTH EXPENSE | 5,270.66 | 6,715.15 | 8,535.00 | | , |
| 015/052 520320 Training | | | | (000.0D | |
| 0151052 540100 Printing/Binding | | | | 100,00 | |
| 015/052 540465 Sustenance Flu an | nic | | | 120.00 | |
| | | | | 7 6,705,00 | ETT |

| TOWN OF MILLI FISCAL YEAR 20 | | FORM #4 - EXPENSE JUSTIFICATION & SUPPORTING DETAIL | | | |
|---------------------------------|---|---|-------------------|--|--|
| DEPARTMENT: | Health Department | BUDGET# | | | |
| | DESCRIPTION | | BUDGET REQUEST | | |
| 510710 | Clothing replacement or cleaning: Field work necessitates dry cleaning and/or clothing replacement. | | | | |
| 520301 | Medical Costs: Supplies and periodicals need to be replenished annually. Line item also includes incidental costs costs associated with flu clinic (i.e. signage) and Public Health Nurse attendance at annual state wide public nurses conference. | | | | |
| 520310 | Mental Health: Annual Funding of the non-profit a individuals with intellectual and developmental di | Arc of South Norfolk which provides assistance to sabilities. | \$1,160.00 | | |
| 520311 | Health Fair: The Department plans to run a Heal participation, equipment rental etc. | th Fair this year. Costs will include vendor | \$400.00 | | |
| 520320 | Tuition/Training: Includes costs for attendance at Annual Conference and periodic Title 5 and Food | | \$600.00 | | |
| 520800 | Medicaid: Item Eliminated. Item funded through revolving fund. \$0.0 | | | | |
| 521000 | Sharps Program: Item Eliminated. Item funded through revolving fund. | | | | |
| 540100 | Printing: Current information found on State website. Line item allows for the printing and binding of current regulations. | | | | |
| 540140 | Books: Food safety, housing, septic etc regulations are updated often. New publications must be purchased when made available. | | | | |
| 540400 | Supplies & Expenses: Daily office supplies | | \$1,500.00 | | |
| 540435 | Beeper: Item eliminated. | | | | |
| 540450 | Postage: Required for daily communication and licensing | | | | |
| 540465 | Food: Sustenance for volunteers during Flu Clinics | | | | |
| 540500 | Advertising: Includes the promotion of the Tobacco 21 Campaign, the Health Fair and Lyme Awarer \$ | | | | |
| 540700 | Dues: Item includes membership in professional organizations. \$300. | | | | |
| 540800 | Equipment: Equipment required for restaurant inspections & housing inspections \$100. | | | | |
| 540900 | Administrative Expense: Stipend for Board | | \$400.00 | | |
| 570500 | Mileage: Use of personal vehicle for Town busine | ess | \$300.00 | | |
| | | | \$6,905.00 | | |
| | | | | | |



| TOWN OF MIL | TOWN OF MILLIS SISCAL YEAR 2016 BUDGET | | FORM #5 EQUIPMENT DETAIL | | | |
|-------------|--|---------------|--------------------------|-------------------|-------------------|--|
| 1 | T: Health Department | | | | | |
| CODE | DESCRIPTION | # OF UNITS | VALUE OF TRADE | NEW OR REPLACE | BUDGET REQUEST | |
| | NO CHANGE | | | 1 | | |
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| FISCAL YEAR 2016 BU | 2 | 3 | 4 | 5 | ONNEL SUN | 7 | 8 | 9 | 10 | 11 | 12 |
|---------------------|---------------------------|--|--------------|-------|-----------|---------------|----------------------------------|----------------|--------------|----------------|-----------------|
| NAME | POSITION-PAY ITEM | CURRENT TOTAL ANNUAL SALARY | HRS/ WEEK | GRADE | STEP | ANNIV DATE | ANNUAL SALARY # WKS/HRS @ SAL | BASE SALARY | OTHER PAY | LON- GEVITY | TOTAL SALARY |
| Karen D'Angelo | Part Time Nurse | \$16,696.68 | 11 | 9 | 10 | 7/24 | 53*11*29.19=17,017.77 | | | \$450.00 | \$17,467.77 |
| Vickie Philben | Department Assistant III | \$31,824.00 | 24 | 7 | 10 | 2/8 | 53*24*25.50=32,436.00 | | | \$450.00 | \$32,886.00 |
| | Clerical Wages, Meetings | \$1,769.00 | | | | | 12*6*25.50=1,836 | | | | \$1,836.00 |
| Barbara Thissell | Director of Public Health | 10/20/14-1/1/15 | | | | | | | | | |
| | | 32.58*24*10=7,819.20 | 24 | 12 | 5 | 10/20 | | | | | |
| | | 1/1/15-6/30/15 32.58*40*26=33,883.2 | 40 | 12 | 5 | | 1/1/15-10/20/15 | | | | |
| | | \$41,702.40 | | | | | 16*32.58*40=20,851.20 | | 141 | | |
| | | | | | | | 10/20/15-6/30/16 | | | | |
| | | | | | 6 | | 37*33.32*40=49,313.60 | | | | \$70,164.80 |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | 12.75 | | | |
| | | | | | | | | | | | |
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| | | | | | | | | | | | |
| SUBTOTAL/TOTAL | | | | | | | | \$0.00 | \$0.00 | \$900.00 | \$122,354.57 |

| ORM #7 APITAL BUDGET AND MISCELLANEOUS REQUESTS |
|--|
| APITAL RUDGEL AND MISCELLANEOUS REQUESTS |
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| h copies of reports, master plans, or supporting documentation) |
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| ENT FOR THE PROJECT? |
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| OR MAY OTHER FORMS OF REVENUE, OTHER |
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| ENANCE COSTS |
| FROM THE TAX LIST? |
| |

FORM 8

| TOWN OF MILLIS | FORM #8 |
|--|---|
| FISCAL YEAR 2016 BUDGET | ABOVE LEVEL SERVICE OPERATING BUDGET REQUEST |
| DEPARTMENT: Health Department | |
| DIVISION: REQUEST PRIORITY #: | |
| | |
| PROJECT/SERVICE TITLE: | |
| | NOT APPLICABLE |
| LOCATION: | |
| JUSTIFICATION FOR PROJECT (please atta | ach copies of reports, master plans, or supporting documentation) |
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S:\Board of Health\Budget\2016 FORM8

The Millis Board of Health held a public hearing on Monday, December 8, 2008 to set the local fees. There are no proposed fee changes, as this scheduled hearing is to standardize the fee schedule.

Fee Schedule

In accordance with the provisions of Chapter 111, Section 31 of the Massachusetts General Laws, the Millis Board of Health hereby adopts the following regulations regarding permit and license fees:

Expiration

ABRASIVE BLASTING:

Registration Fee

\$100.00 per job site

N/A

ENVIRONMENTAL HEALTH PERMIT APPLICATION:

Each Submittal/Application \$500.00

N/A

Escrow \$1,500.00

N/A

FUNERAL DIRECTOR:

Annual \$125.00

April 30th

SEPTAGE HAULERS

Permit & one truck \$100.00

December

Each additional truck \$50.00

SEPTIC SYSTEMS, Installers

Annual License \$225.00

December

SEPTIC SYSTEMS, New Residential:

Homes with 4 or less bedrooms \$500.00 per system (includes 1 plan revision)

Each additional bedroom: \$60.00

Additional Plan revision not

previously approved: \$150.00 Revision to Previously Approved Plan: \$200.00

Upgrades and Repairs:

Existing repair/Upgrade \$150.00 (includes 1 plan revision)

Additional Plan revision \$50.00 D-Box or pipe replacement \$75.00

Re-Inspection Fee \$50.00 (Upgrade or New)
Consulting Fee to be paid by applicant

Abandonment of Septic System

\$ 50.00 (Must be submitted with completed Sewer Connection

Application for DPW)

SEPTIC SYSTEMS, Commercial:

First 500 GPD of flow

\$500.00 (includes 1 plan revision)

Each Gallon in excess of 500 GPD

\$ 1.00 each

Additional Plan revision

\$150.00

Revision to Previously Approved Plan: \$200.00

Consulting Fee

to be paid by applicant

SOIL TESTING (Percs):

Perc Season = September 15th - May 31st

First visit, each site:

\$200.00 (up to 4 deep hole observations and 2 percolation tests) \$100.00 plus additional test

Additional visit, same site:

Additional test:

\$50.00 per hr

Administrative fee for refund Soil Particle analysis

\$25.00 (no site visit conducted) to be paid by applicant

Consulting Fee

to be paid by applicant

BODY ART:

Plan Review Fee

\$ 300.00

December

Establishment Permit

\$1,000.00

Practitioner Permit

\$100.00

CAMPS:

Permit, one inspection

\$ 50.00

Seasonal

* Additional Reviews and/or Inspections \$ 50.00 each

COPIES:

Per 8.5 x 11" Page

\$.25

N/A

HAZARDOUS MATERIALS STORAGE:

Permit

\$ 75.00 registration fee

December

INFECTIOUS WASTE TRANSPORTER:

Permit

\$ 50.00

December

INFECTIOUS WASTE GENERATOR:

Permit

\$ 50.00

December

MASSAGE THERAPY:

\$75.00

Practitioners December

Establishments:

\$150.00

December

SWIMMING POOLS:

Commercial (Public/semi-public)

\$250.00

December

Wading (Public/semi-public) \$150.00
December
Re-Inspection Fee \$50.00
Residential (private) \$75.00

TANNING FACILITY:

Permit \$ 75.00 December

TOBACCO:

Permit \$50.00

December

TRANSFERS AND RENEWALS:

Transfer \$75.00 (if changes in plan, must be filed as new application)

Renewal \$75.00 (if changes in plan, must be filed as new application)

TRASH HAULERS:

Permit \$ 100.00

December

WELLS:

Well, Repair: \$100.00

N/A

Well, New: \$250.00

Failure to draw permit prior to start of work will result in assessment of **Double Permit Fee**.

Failure to renew permit by Expiration Date (anniversary date) will result in assessment of **Double Permit Fee**.

FOOD SERVICE PERMITS (First issuance, plan review and inspection(s))

Annual fees based on seating capacity that has been established by the Massachusetts State Building Code Place of Assembly.

- A. \$300.00 for 25 or less seats
- B. \$400.00 for 26 to 50 seats
- C. \$500.00 for 51 to 100 seats
- D. \$500.00 plus \$1.00 for each additional seat over 100 seats

FOOD SERVICE PERMITS (Renewal)

- A. \$250.00 for 25 or less seats
- B. \$300.00 for 26 to 50 seats
- C. \$400.00 for 51 to 100 seats
- D. \$500.00 plus \$1.00 for each additional seat over 100 seats

^{*} Effective date July 26, 2007

FOOD RETAIL PERMITS (First issuance, plan review and inspection(s))

- A. \$400.00 for a total area less than 8,000 square feet
- \$500.00 for <u>first</u> 10,000 square feet and
 \$25.00 per 1,000 square feet or any portion thereof, thereafter

FOOD RETAIL PERMITS (Renewal)

\$250.00 for first 8,000 square feet or any portion thereof and \$25.00 per 1,000 square feet or any portion thereof, thereafter

INCIDENTAL FOOD SERVICE OR FOOD RETAIL

\$50.00 for an area less than 100 square feet when the sale or service of food is incidental to the primary business

\$100.00 for Manufacturing Ice Cream or Frozen Dessert if primary business (Square footage includes all display, storage, processing and sales areas)

CATERING

\$100.00 per year, mobile vending and catering vehicles \$25.00 per year (seasonal vendor's license; i.e. ice cream trucks) \$25.00 for one-day events

TEMPORARY EVENT

\$50.00 (for profit)

BAKERIES

\$100.00 per year

ALL Violations: 1st Offense \$0.00; 2nd, \$50.00; 3rd, \$50.00

Operation without proper permits and/or failure to renew by December 31st will result in double fees.