Mohawk Area Public Health Coalition

Date and Time: Tuesday, November 10, 2026, 5:00p-6:30p
Chair/Co-chair: Michael Archbald/ Garrett Simonsen
Topic: MAPHCO Monthly Meeting
Time: 05:00 PM Eastern Time, Every month on the Second Tue
Join Zoom Meeting: https://us06web.zoom.us/j/87439560045

Municipal/Representative	Vote: Y/N/A		Municipal/Representative	Vote: Y/N/A	
Ashfield-			Leyden-		
Bernardston-			Montague-		
Charlemont-			Northfield-		
Colrain-			Rowe-		
Conway-			Shelburne-		
Deerfield-			Shutesbury-		
Erving-			Sunderland-		
Gill-			Warwick-		
Greenfield-			Wendell-		
Hawley-			Whately-		
Heath-					
Leverett-					
Other(s):					

Franklin Regional Council of Governments

Topic	Speaker	Time		Discussion
Welcome/Introductions	Chair/co-chair	5 min	5:00p	Roll Call
Approval/Vote: a) October meeting minutes b) a) Principles of Operation	Chair/co-chair	15 min	5:15p	a) b) Annual review of Coalition's Principles of Operation document.
Old Business: a) ERF contract update b) PHEP 101 training c) WebEOC Contact Updates d) Designated Representative Forms	 a) FRCOG-Stephanie b) FRCOG-Stephanie c) Garrett to present short tutorial d). Chair/co-chair	 15 min 15 min 5 min	 5:30p 5:45p 5:50p	a) 1 bid contract has been approved and sent to OPEM for approval. b) Contract in place 4 virtual classes will be held throughout region 1; option (if wanted) can include in-person class. c) Each municipality needs to log in and update Primary/Secondary Emergency Contact personnel info. This is for State use and purposes only. d) Please submit DRFs (one per municipality). This is a primary and back-up personnel that has voting ability within the coalition. Heath, Charlemont, Colrain, Leyden, Bernardston, Greenfield, Shelburne, Buckland, Conway are the only ones received.
WAG/LSAC/DPH updates:	Chair/co-chair	10 min	6:00p	a) Supplies still available for p/u at Franklin warehouse
New Business: a)) NACCHO conference	a) FRCOG-Stephanie	5min	6:05p	a) Reminder of the NACCHO conference, early registration is until Feb. Group rates are also available. The reimbursement model will be used. Please investigate local BOH/City funding for upfront costs as an option.

Local/Partner Updates:	Open	10 min 6:15p	
Unforeseen Business:	Chair/co-chair	10 min 6:25p	
Adjournment	Chair	5 min 6:30p	Roll Call Vote

Documents included:

Agenda pgs. 1-3, October Meeting minutes pgs. 4-7, Principles of Operation pgs.8-9

Meeting Minutes: Mohawk Area Public Health Coalition Meeting (MAPHCO)		
Date: October 13, 2026 **Time:** 5:00 – 6:30 PM	**Location:** Zoom Meeting https://us06web.zoom.us/j/87439560045	**Facilitators:** Co-Chairs Michael Archbald Garrett Simonsen

Attendees	
Trevor McDaniel, Deerfield	Nick Licata, FRCOG
Megan Tudryn, Greenfield	Stephanie McConnell, FRCOG
Ned Saviski,	
Jason O'Brien, North Quabbin Health Services- Orange, New Salem, and Wendell	Randy Crochier, CPHS- Ashfield, Bernardston, Buckland, Charlemont, Colrain, Conway, Erving, Gill, Hawley, Heath, Leyden, Monroe, Northfield, Rowe, Shelburne.
Michael Archbald, Whately	
Garrett Simonsen, Shutesbury	
Amy Simmons, Wendell	
Tim Hilchey, Deerfield	
Ashley Gough, Montague	
Gene Garland, Heath	
Lizzie Alwan, Leverette/Warwick	

Agenda Item	Action
1) **Welcome/Introductions. - September minutes**	**September minutes:** Six members who attended the September meeting voted to approve the minutes. Four members abstained because they had not attended that meeting.
2) **HMCC-**Health and Medical Coordinating Coalition **WAG-**Western Massachusetts Public Health Advisory Group **DPH-**State Dept. of Public Health **OPEM-**Office of Preparedness and Emergency Management **LSAC-** Local State Advisory Committee (Statewide body)	**WAG (Western Advisory Group)** • The meeting was rescheduled to October 14, 2026. • Public Health Coalition chairs provide strategic planning for regional coalition activities. **LSAC (Local State Advisory Committee)** • Attendance was strong, with representatives from agencies across the state sharing current information. • DPH/OPEM provided updates on current events and sought input on coalition funding allocations and deliverables. • Data from the FIFA event will be published and released soon. • Coalitions are being asked to advocate permanent state public health funding and contact legislators.

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	• Liz Foley, who is responsible for the Massachusetts MRC (Medical Reserve Corp), conducted a large training exercise and introduced a new manual for local MRCs. **WRHSAC (Western Regional Homeland Security Advisory Committee)** • The committee discussed financial challenges caused by federal and state funding delays. • A full-scale fairgrounds exercise is planned for spring 2027. • Funding was secured to support the exercise and upgrade the safety plan.
3) **Old Business -**	**Coalition Training Updates** **PHEP 101 (Public Health Emergency Preparedness)** • The proposal will be presented to WAG (Western Mass Advisory Group) on October 14. • The training would be offered regionwide rather than by individual coalitions, with shared costs and both in-person and virtual options. **ERF/CEMP-Emergency Response Framework/Comprehensive Emergency Management Plan** • Outside consultants will be hired to standardize a regional public health response framework and incorporate CERC (Crisis Emergency Response Communication). • The bid deadline is October 14, 2026. **CERC** • An RFQ (request for quote) was posted with an October 14 deadline for consultants to integrate an operational public health communications framework into the municipal response framework.
4) **New Business -**	**WebEOC and 24/7 Drill Updates** Nick explained the WebEOC update requirements and 24/7 drills. Members requested clearer guidance and expressed dissatisfaction with WebEOC. **24/7 drills** • OPEM/DPH issues the drills. • The primary or secondary contact must log in within four hours and confirm the contact information. **WebEOC** • DPH requires listed municipal primary and secondary contacts to update their information quarterly. • The WebEOC mobile app allows users to log in when they are away from their work computers. **Mobile app links** • Google Play • Apple App Store **HHAN alerts (Health and Homeland Alerts Network)** HHAN alerts are separate from DPH/OPEM drill tasks.

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	Follow-up actions • Add a WebEOC walkthrough to next month's agenda, including the login and step-by-step update process. • Tim suggested raising usability concerns with WAG; Nick recommended presenting the issue to LSAC instead. • Nick will ask Felicia Balbi whether she can present on required WebEOC tasks. • If Felicia is unavailable, Garrett offered to provide brief training for members.
5) Unforeseen Business -	None
6) Round Robin/Wrap-up	HMCC Annual Regional Hazard and Vulnerability Assessment**:** The Steering Committee accepted the assessment last week. OPEM approval is the last step before distribution. Once approved, the assessment will be posted on the HMCC website for download.
7) Wrap up and adjourn	• **Motion:** Trevor moved to adjourn at 5:31 p.m. • **Second:** Ned seconded the motion. • **Vote:** Following a roll-call vote, the meeting adjourned at 5:33 p.m.

Documents and/or exhibits used:
Agenda pg. 1/ Meeting minutes pgs. 2-4

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Mohawk Area Public Health Coalition

Principles of Operation

1. Introduction

The Mohawk Area Public Health Coalition (MAPHCO) is the Massachusetts Department of Public Health's (MDPH) designated Public Health Emergency Preparedness (PHEP) Coalition for sub-region 1B of MDPH Preparedness Region 1. It is comprised of representatives of 24 local Boards of Health and Health Departments that work collaboratively to build capacity to respond to public health emergencies and continually improve preparedness.

This document establishes the rules that govern the Coalition. It describes how the Coalition makes decisions, manages daily operations, and assigns responsibilities. These principles promote coordinated action, transparency, and accountability as we work to strengthen public health preparedness and response.

2. Mission and Objectives

Our mission is to provide planning and response capacity to promote, assist, and enhance support to the Franklin County Coalition municipalities to better respond to public health threats and emergencies, including but not limited to natural disasters, bioterrorism, and outbreaks of infectious diseases. Our goal is to provide shared resources through continuous education, advocacy, and partnership to ensure that our communities are equipped with user friendly knowledge, tools, and support necessary during an emergency.

Objectives:

1. Develop and carry out regional public health emergency preparedness plans.
2. Share equipment, staff, and information among member communities.
3. Provide joint training and exercises to build and test readiness.
4. Review and improve preparedness activities on a continuous basis.

3. Membership

Eligibility

Membership is open to the Boards of Health representatives, or their designees, for the following 24 municipalities in PHEP Region 1B: Ashfield, Bernardston, Buckland, Charlemont, Conway, Colrain, Deerfield, Erving, Gill, Greenfield, Hawley, Heath, Leverett, Leyden, Monroe,

Montague, Northfield, Rowe, Shelburne, Shutesbury, Sunderland, Warwick, Wendell, and Whately.

Roles and Responsibilities

Each member municipality agrees to carry out the following duties:

1. Participate in Coalition meetings.
2. Participate in the annual concurrence process.
3. Participate in the development of the Coalition's annual PHEP work plan and budget.
4. Participate in Coalition elections.
5. Ensure completion of all community-level PHEP requirements and priority areas.
6. Participate in the Coalition activities that are outlined in PHEP work plan.
7. Participate in Health and Medical Coordinating Coalition (HMCC) and other advisory groups.
8. Maintain current contacts and WebEOC access.
9. Assess local and regional public health emergency planning and response needs.

Voting Rights and Procedures

To ensure fair and consistent decision-making, the following rules apply at all Coalition meetings:

1. **One vote per member municipality.** Each member community is entitled to a single vote, no matter how many representatives are present.
2. **Proxy voting.** A member municipality that cannot attend may cast its vote through a written proxy submitted in advance.

4. Governance Structure

This section explains how the Coalition is organized and defines the roles and responsibilities of each leadership body.

Sponsoring Organization

The Franklin County Regional Council of Governments (FRCOG) is the sponsoring organization and fiscal agent for the Region 1 (Western Massachusetts) Health and Medical Coordinating Coalition (HMCC). MAPHCO is part of the Region 1 HMCC. As the Sponsoring Organization, FRCOG:

- Acts as the fiscal agent and fiduciary for the Coalition.
- Procures goods and services on behalf of the Coalition.

- Support the Coalition in the development of the annual work plan and budget.

Coalition

The Coalition includes one primary and one alternate representative from each member municipality. The Coalition meets monthly unless otherwise determined by the Co-Chairs.

Voting

- Each member municipality has one vote.
- The primary representative casts the vote; the alternate votes only when the primary is absent.

Appointment

- Municipalities appoint their representatives annually.
- Written appointments are submitted to the Coalition's Co-Chairs at the year-end Coalition meeting (typically in June).

Co-Chairs

- The Coalition elects two Co-Chairs annually at the year-end Coalition meeting.
- Co-Chair duties include:
    - Facilitate all Coalition meetings.
    - Develop and/or approve meeting agendas.
    - Ensure Robert's Rules are adhered to during Coalition meetings.
    - Ensure meeting agendas are followed.
    - Provide leadership, strategic direction, and oversight.
    - Guide implementation of the annual PHEP work plan.
    - Act on behalf of the Coalition between Coalition meetings.

Subcommittees and Advisory Groups

The Coalition may create subcommittees or advisory groups at any time to address specific needs such as training, resource allocation, or communication.

- Membership size and composition are set by the Coalition.
- Subcommittees and/or advisory groups report their findings and recommendations to the Coalition.

Western Area Public Health Advisory Group

The Western Area Public Health Advisory Group (WAG) is comprised of members of each of the Region 1 PHEP Coalitions. This advisory group coordinates and aligns preparedness

activities across the four Region 1 PHEP Coalitions and appoints public health representatives to other regional bodies, including the Region 1 HMCC Steering Committee. Refer to WAG's Operating Principles for further detail.

- The Coalition Co-Chairs will appoint two members to represent PHEP Region 1B to the WAG.
- At least one appointee is expected to attend each WAG meeting.
- The WAG appointees are expected to report to Coalition on WAG activities, recommendations, and planning considerations.

Local State Advisory Group

The Local / State Advisory Group (LSAC) is composed of one representative from each PHEP Coalition in Massachusetts. This advisory group works directly with the MDPH to advise on the statewide PHEP program, make recommendations, and provide feedback to MDPH. Refer to the LSAC's Operating Principles for further detail.

- The Co-Chairs will appoint one Coalition member to represent PHEP Region 1B at LSAC.
- The LSAC representative is expected to attend each LSAC meeting.
- The LSAC representative is expected to report to the Coalition on LSAC activities and solicit feedback from members when needed.
- The LSAC representative plays a role in the concurrence process each year, as defined by MDPH.

5. Meetings

Frequency and Types of Meetings

Coalition – The Coalition shall meet monthly unless determine otherwise by the Co-Chairs. Every member municipality is expected to have at least one representative present at each meeting.

Subcommittees and Special Sessions – Subcommittees, work groups, or other meetings may be convened at any time, as needed, at the discretion of the Co-Chairs.

Meeting Format – All meetings may be conducted in person, virtually, or in a hybrid format that combines both options.

Quorum Requirements

The Coalition may act by a simple majority of members present.

Decision-Making Processes

- The Coalition votes on the annual budget, Co-Chair elections, and membership matters.
- These votes take place at duly called Coalition meetings that meet quorum requirements and observe all open-meeting laws.
- A motion passes with a simple majority of voting members present.

6. Communication

Internal Communication Protocols

Open-Meeting Compliance

- When a quorum of the Coalition wishes to discuss Coalition business, the discussion must take place during a properly posted public meeting in accordance with the Massachusetts Open Meeting Law.
- Conversations that involve fewer participants than a quorum may occur informally and are not subject to Open Meeting Law requirements.

Routine Administrative Communication

- Day-to-day messages about scheduling, agendas, minutes, or other administrative matters are coordinated by the Coalition Co-Chairs and the Coalition Coordinator.
- The Coalition Coordinator is responsible for:
    - Distributing meeting notices and agendas in advance of all sessions.
    - Circulating minutes promptly after each meeting.
    - Sharing updates on Coalition projects, training opportunities, and funding issues.

Member Inquiries

- Members should direct routine questions to the Coalition Coordinator or the Coalition Co-Chairs. Matters that require formal discussion will be placed on the agenda for the next public meeting.

External Communication and Public Relations

Approval

- When time allows, all press releases, public statements, and other external communications must be approved by the Coalition during a public meeting.
- If a prompt response is necessary, the Coalition Co-Chairs may approve the communication on the Coalition's behalf.

Issuance

- Once approved, external communications are issued by, or under the direction of, the Coalition Co-Chairs or the Coalition Coordinator.

Routing

- Member municipalities and partners should send proposed public messages to the Coalition Co-Chairs or Coalition Coordinator for review and distribution.

7. Resource Allocation

Funding Allocation and Distribution

Budgets must be directly related to supporting or enhancing public health and healthcare emergency preparedness capabilities, and consistent with and within the scope of the federal and state grant guidance, MDPH OPEM requirements, and the Grants Management Manual.

Budgets must be thoroughly reviewed by the Sponsoring Organization staff prior to submission to MDPH OPEM. The Sponsoring Organization is required to ensure all submitted budgets are detailed and include adequate information to allow for clear understanding if a cost is allowable, reasonable, and in furtherance of the requirements and priorities of the program.

This includes, but is not limited to, the following review criteria:

- Anticipated cost of an item and the planned quantity
- Clear explanation on how the expense meets allowable criteria
- Linkage to a Priority Area
- Demonstration of how the proposed activity/expense is addressing an identified need or gap

All Coalition level budgets that include community allocations must have detailed expenditures in the categories within the budget template. Any un-budgeted dollars may not be expended or distributed until a budget modification has been approved by MDPH OPEM.

Accountability and Reporting

Quarterly Coalition Reporting

- The Coalition Coordinator submits quarterly progress reports on PHEP projects and deliverables to the Coalition Co-Chairs and the Region 1 HMCC for review prior to submission to the MDPH.
- Each report will describe progress toward the deliverables in the current budget period work plan. The Region 1 HMCC will consolidate and forward these updates to MDPH OPEM.
- The Region 1 HMCC submits quarterly financial reports on MAPHCO PHEP expenditures to the Coalition for review prior to submission to MDPH OPEM.

Quarterly Member Reporting

- Any member municipality that receives a direct PHEP allocation must track its spending and send a quarterly progress and financial report to the Coalition and the Region 1 HMCC.

8. Evaluation and Amendments

Evaluation Procedures

Annual Coalition Performance Review

- At the end of the budget period Coalition meeting, the Coalition Coordinator shall present a year-end evaluation that compares actual results with the goals and outcomes in the work plan.

Annual Performance Review of Contractors

- The Coalition and the Region 1 HMCC shall conduct formal performance reviews of the Coalition Coordinator and any other Coalition contractors at the end of the performance period.
- The review will use the evaluation form issued in the most recent procurement for the position and will measure performance against the scope of work in the current contract.
- Results will guide decisions on contract renewal and on any future procurement for the Coalition.

Process for Amending the Principles of Operation

Authority to Amend

- The Principles of Operation may be amended by a simple majority vote of the voting members present at a duly convened Coalition meeting.

Who May Propose an Amendment

- Any member municipality may submit a proposed amendment.
- The Co-Chairs may also originate an amendment and may appoint a working group or subcommittee to develop its language.

Submission Requirements

- The proponent must send the exact text of the proposed amendment, in writing, to the Coalition Co-Chairs by e-mail or U.S. mail no later than 45 days before the next scheduled Coalition meeting.

Coalition Review and Action

- The Co-Chairs shall distribute the proposal to all Coalition members at least two weeks before that meeting.
- At the meeting, the Coalition shall either vote to approve or decline the amendment. A vote to decline must be accompanied by a written explanation to the proponent.

- Passage requires a simple majority of voting members present.

Effective Date

- Unless otherwise stated in the motion, an approved amendment takes effect immediately upon adoption.