TOWN OF SHREWSBURY

Board of Selectmen Meeting
Board of Selectmen’s Meeting Room
Richard D. Carney Municipal Office Building
100 Maple Avenue
Shrewsbury, Massachusetts 01545-5398

Tuesday, July 21, 2020 - 7:00 PM
MINUTES

Amended Agenda: Originally Posted on July 17, 2020 at 1:20 pm

Important Notice: Pursuant to Governor Baker’s March 12, 2020 Order Suspending Certain Provisions of the Open Meeting Law, G.L. c. 30A, §18, and the Governor’s March 15, 2020 Order imposing strict limitations on the number of people that may gather in one place, this meeting of the Shrewsbury Board of Selectmen will be conducted via remote participation to the greatest extent possible. All meetings and hearings listed in the agenda will also be done so through remote participation. Specific information and the general guidelines for remote participation by members of the public and/or parties with a right and/or requirement to attend this meeting can be found on the town’s website, at www.shrewsburyma.gov/coronavirus. For this meeting, members of the public who wish to listen or watch the meeting may do so by visiting https://www.shrewsburymediaconnection.org/. No in-person attendance of members of the public will be permitted, but every effort will be made to ensure that the public can adequately access the proceedings in real time, via technological means. In the event that we are unable to do so, despite best efforts, we will post on the town's website an audio or video recording, transcript, or other comprehensive record of proceedings as soon as possible after the meeting. To participate in the public comment portion of this meeting, dial [1 917-268-8104] and enter the following pin: [963 240 401#]. Please mute your device until the Chair of the Board of Selectmen addresses your agenda item or opens the meeting to public comment.

Present: Ms. Beth Casavant, Chair, Mr. John Lebeaux, Vice-chairman, Mr. John Samia, Clerk, Mr. Maurice DePalo, Selectman, Mr. James Kane, Selectman
Also Present: Mr. Kevin Mizikar, Town Manager, Ms. Hollie Lucht, Director of Council on Aging, Mr. Kevin Anderson, Chief of Police, Mr. Paul Campaniello and Rickard Ricker, Shrewsbury Housing Authority, Mr. Jeffrey Howland, DPW Director

Ms. Casavant called the meeting to order at 7:00 pm and read the remote script verbatim.

Preliminaries:
1. Approve bills, payrolls and warrants
On a motion by Mr. Lebeaux, seconded by Mr. Samia, on a roll call vote, Mr. Lebeaux-yes, Mr. Samia-yes, Mr. DePalo-yes, Mr. Kane-yes, Ms. Casavant-yes, the Board unanimously voted to approve warrants 21002 and 2106 as presented.

2. Announcements/Reports
None

3. Town Manager’s Report
Mr. Mizikar stated that unfortunately there has been several water main breaks and several instances of discolored water in Town, and the Town is working diligently to address the issues. Unfortunately water demand is higher and there has been periods of drought. Mr. Mizikar asked residents to adhere to water use restrictions.

Financial Business:
4. Budget Report
Mr. Mizikar stated that Fiscal Projection 2 was sent to the Board of Selectmen and Finance Committee and is available to view on the website.

**Special Reports/Actions/Updates:**
5. **Coronavirus/COVID-19 from Town Manager**
   
   Since the past Thursday, there has been 4 cases over the prior 7 days. Over the last 2 days there hasn’t been any updated cases, but from the 17th to the 19th there were 9 cases over the 2 days.

**Meetings/Hearings:**
6. **7:05 PM : Meeting with Christine Mowry, Executive Director, and Jen Rifkin, Director of Clinical Services, Shrewsbury Youth and Family Services, to review the SYFS Community Wide Older Adult Behavioral Health Needs Assessment**

   Mr. Mizikar stated that in the spring of 2019 there was discussion on the Town’s position on elder outreach services and the general backlog of SYFS across all age groups. Enhanced funding was provided to SYFS at the 2019 Fall Town Meeting totaling $43,500 to reduce the backlog and also an older adults need assessment.

   Ms. Mowry stated that SYFS started these conversations late last summer with the Town. There are 8,000 residents over the age of 60. Ms. Mowry & Ms. Rifkin presented a PowerPoint presentation that reviewed the data collection, the existing programs and services provided through Shrewsbury Housing Authority Services, Saint Anne’s Human Services and the Shrewsbury Public Library, the major issues identified in research, town-wide issues including issues within the COA, SHA, and Library, and recommendations. The Board thanked Ms. Mowry and Ms. Rifkin for their work on this report.

   Mr. Samia asked how COVID-19 may have changed some of the information included in this report which was completed before the pandemic. Ms. Mowry replied that food insecurity is the biggest issue that they have come across and anticipate more challenges with fuel assistance in the fall and older adults being able to access technology to hold appointments virtually.

   Mr. Kane expressed concern that less than 100 participated in the paper surveys and asked why the survey continued. Mr. Mowry replied that it was expected that it was going to be challenging and the people that were responding via focus groups and surveys are the people that are overall doing better than the residents that are more isolated. A greater response would have reflected a greater need for services. Mr. Kane asked how we ensure that we are effectively reaching the ones that are most vulnerable. Ms. Rifkin replied that meals on wheels folks are the closest to those individuals and we need to find out how to coordinate with meals on wheels.

   Mr. Lebeaux shared concerns with Mr. Kane and drew attention to page 34 of the report where there was a discrepancy in focus groups and stakeholder interviews over the paper surveys. Ms. Mowry stated there was more response in person than in paper surveys. The Board expressed their gratitude to SYFS for their continued support to the community and work on putting this report together. Ms. Mowry stated that going through the assessment has already made so much progress being able to have these discussions interdepartmentally.

   Mr. Campaniello, Shrewsbury Housing Authority, drew attention to the detailed letter to the Board dated July 15, 2020 and reviewed the findings in the letter. Mr. Ricker also thanked SYFS for the work they did and stated that there is no doubt that the senior population needs more outreach and services, however the Shrewsbury Housing Authority is a housing provider and cannot be privy to health related issues of our residents and are strictly prohibited from getting involved in health issues of their residents. Mr. Ricker also discussed the transportation issues during this pandemic.
Ms. Lucht commented on transportation. Most guidelines come from WRTA themselves. Having one person on the van at this time is for safety reasons and Ms. Lucht is working with staff and WRTA to increase ridership, however they need to follow specific guidelines.

Chief Anderson stated that in February had a meeting with Shrewsbury Housing Authority Kelly Bergeron, and determined there was an issue that the Shrewsbury Towers were having with residents being afraid to call the police in fear of retaliation. Shrewsbury Housing Authority and the Police Department held a group meeting and invited all residents of which 70 participants attended. This meeting was beneficial in addition to doing the study, Police were unbeknownst of the issues but now are with this study and are able to come up with a plan.

New Business:

7. Review and act on the charge of the Diversity, Equity and Inclusion Committee and establish a selection committee

Ms. Casavant stated that she had put together a draft document to facilitate this discussion and asked for member feedback. Mr. DePalo stated that this should be a process where a task force studies diversity, inclusion and racism drawing off of Mr. Lebeaux’s comments and having a relatively large group of members. Mr. DePalo suggested that the Board create the task force, give it a charge, and discussed some items that be included in the charge. Mr. Samia stated that the Board needs to understand where we are, what we do, and where we desire to go.

The Board discussed the size of the task force, charge, report requirements, and appointment process.

On a motion by Mr. Kane, seconded by Mr. DePalo, on a roll call vote, Mr. Kane-yes, Mr. DePalo-yes, Mr. Lebeaux-yes, Mr. Samia-yes, Ms. Casavant-yes, the Board unanimously voted that the Board of Selectmen solicit participants, residents of the Town of Shrewsbury, to participate in the aforesaid committee, to number between 20-30 based on the Board’s reaction to the applicants, and that they would organize themselves in this committee to undertake and accomplish the charge, and that they report to the Board within a 12 month period their findings.

Mr. Kane requested that when the task force is organized that the manager ensure they understand they are subject to the public meeting law. Mr. DePalo suggested that Board members put final touches on the charge and bring it back for final approval next meeting for finalization.

8. Review and act on the Town Manager Evaluation for FY 2020

Ms. Casavant stated that Ms. Clemmey put the compiled Town Manager evaluation in the drive at 6:45 pm for review in compliance with open meeting law. This is the first time that the Board has used this tool for an evaluation. Ms. Casavant reviewed the rubric that was used to conduct the review. The overall review was very positive. Board members gave commentary on their satisfaction with Mr. Mizikar’s performance. Mr. Samia commented especially on how Mr. Mizikar handled the challenges of Covid-19 and achieved an AAA bond rating. Mr. Kane commented on his calm demeanor and how he addressed the challenges with Waste Management. Mr. Lebeaux commented on how well he has handled the covid-19 crisis and clarified one of his scores that was inaccurate and would follow up with the office. Ms. Casavant commented that Mr. Mizikar is consistent and is impressed with his ability to lead and his understanding of town operations.

On a motion by Mr. Lebeaux, seconded by Mr. Samia, on a roll call vote, Mr. Lebeaux-yes, Mr. Samia-yes, Mr. DePalo-yes, Mr. Kane-yes, Ms. Casavant-yes, the Board unanimously voted to approve the review.

Mizikar thanked the board for their comments and his staff for their tireless efforts on a day to day basis.
9. **Review and act on the Goals of the Board of Selectmen**

Ms. Casavant suggested that this be moved to next week and discussed in tandem with the Town Manager goals.

10. **Review and authorize payment of the FY2021 Massachusetts Municipal Association annual dues payment**

On a motion by Mr. Lebeaux, seconded by Mr. Samia, on a roll call vote, Mr. Lebeaux-yes, Mr. Samia-yes, Mr. DePalo-yes, Mr. Kane-yes, Ms. Casavant-yes, the Board unanimously voted to authorize payment of the FY2021 Massachusetts Municipal Association annual dues payment.

11. **Review and act on the road closure request from Jeffrey Howland, DPW Director, for a closure to thru traffic of Caroline Avenue from July 20, 2020 until full opening is authorized by the DPW Director, as a result of damage from a water main break on July 17, 2020**

Mr. Howland appeared before the Board and reviewed the water main break. Mr. Howland stated that he is concerned about the road, which is about 130 feet long and reviewed the contents in his memo.

On a motion by Mr. DePalo, seconded by Mr. Lebeaux, on a roll call vote, Mr. Lebeaux-yes, Mr. Samia-yes, Mr. DePalo-yes, Mr. Kane-yes, Ms. Casavant-yes, the Board unanimously voted to approve the request.

**Correspondence: The Board of Selectmen will review and possibly act on the following:**

12. Letter, dated July 10, 2020, from Joseph A. Thomas, Planning Board, re: Planning Board Reorganization- so noted

13. Email, dated July 9, 2020, from State Representative Hannah Kane, re: EEE Legislation Passed Today in the House- so noted

14. Letter, dated July 9, 2020, from Jeffrey Howland, DPW Director, to Kevin Mizikar, Town Manager, re: Updated Status of On-going Construction Projects- so noted

15. Letter, dated July 13, 2020, from Keith Elmes, Animal Control Officer, re: Quarterly Return on Warrant April-June- so noted

16. Email, dated July 13, 2020, from Deeptha Ganesh, 26 Hawthorne Road, re: Open Mic Night- so noted

17. Email, dated July 15, 2020, from Christopher Mehne, Town Moderator, re: Notice of Continuance of Annual Town Meeting (August 8) - so noted

18. Letter, dated July 15, 2020, from the Shrewsbury Housing Authority Board of Commissioners, re: SYFS Community Wide Older Adult Behavioral Health Needs Assessment dated 2/24/2020- so noted

19. Email, dated July 16, 2020, from Charles and Marie Kaspersson, 18 Patriot Lane, re: Nuisance Dogs at 47 Memorial Drive- so noted

20. Letter dated July 17, 2020, from Kevin Mizikar, Town Manager, to Margaret Hurley, Chief, Central Massachusetts Division, Office of the Attorney General, re: Declaration of Recess and Continuance of the July 29, 2020 Annual Town Meeting- so noted

21. Email, dated July 17, 2020, from Jim Aulenbak, 87 Spring Street, re: Shrewsbury Food Trucks similar to the Boston Food Truck Covid-19 Initiative- so noted, Ms. Casavant asked that they schedule a meeting with Mr. Aulenbak on the 28th to describe his initiative.

On a motion by Mr. Lebeaux, seconded by Mr. Samia, on a roll call vote, Mr. Lebeaux-yes, Mr. Samia-yes, Mr. DePalo-yes, Mr. Kane-yes, Ms. Casavant-yes, the Board unanimously voted to adjourn at 9:22 pm.
Minutes
Shrewsbury Board of Selectmen
July 21, 2020
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Respectfully Submitted,

Valerie B. Clemmey
Administrative Assistant to the Board of Selectmen

Referenced Materials
7/21 Remote Script
SYFS Community Wide Older Adult Behavioral Needs Assessment dated February 24, 2020
SHA letter dated July 15, 2020
Draft Diversity, Equity and Inclusion document dated 7/14/2020
2020 Town Manager Review
Carolina Ave Memo dated July 20, 2020
Confirming Member Access:
As a preliminary matter, this is Beth Casavant, Chair. Please permit me to confirm that all members and persons anticipated on the agenda are present and can hear me.

- Members, when I call your name, please respond in the affirmative.
  - John Lebeaux
  - John Samia
  - Maurice DePalo
  - James Kane

- Staff, when I call your name, please respond in the affirmative.
  - Kevin Mizikar
  - Valerie Clemmey

- Anticipated Speakers on the Agenda, please respond in the affirmative.
  - Christine Mowry
  - Jen Rifkin

Introduction to Remote Meeting:
Good morning/afternoon/evening. This Open Meeting of the Board of Selectmen is being conducted remotely consistent with Governor Baker’s Executive Order of March 12, 2020, due to the current State of Emergency in the Commonwealth due to the outbreak of the “COVID-19 Virus.”

In order to mitigate the transmission of the COVID-19 Virus, we have been advised and directed by the Commonwealth to suspend public gatherings, and as such, the
Governor’s Order suspends the requirement of the Open Meeting Law to have all meetings in a publicly accessible *physical* location. Further, all members of public bodies are allowed and encouraged to participate remotely.

The Order, which you can find posted with agenda materials for this meeting allows public bodies to meet entirely remotely so long as reasonable public access is afforded so that the public can follow along with the deliberations of the meeting.

Ensuring public access does not ensure public participation unless such participation is required by law. This meeting will feature public comment.

For this meeting, the Board of Selectmen is convening by Google Meet as posted on the Town’s Website identifying how the public may join.

For “Zoom” or “Google Hangout” Meetings
Please note that this meeting is being recorded, and that some attendees are participating by video conference.

Accordingly, please be aware that other folks may be able to see you, and that take care not to “screen share” your computer unless asked by the chairperson or the staff person. Anything that you broadcast may be captured by the recording.

**Meeting Business Ground Rules**

We are now turning to the first item on the agenda. Before we do so, permit me to cover some ground rules for effective and clear conduct of our business and to ensure accurate meeting minutes.

- I/the Chair, will introduce each Board Member or Staff Member who has the lead role for this particulate item or guest/speaker associated with this item on the agenda. After they conclude their remarks, the Chair will go down the line of Members first and then to staff members, inviting each by name to provide any comment or questions. I will then call upon the members to offer a motion and then for a second. Please hold until your name is called.

  - Please remember to mute your phone or computer when you are not speaking; remember that unless a document is being shared, your camera feed is triggered by your speaking or background noise;
  - Please remember to speak clearly and in a way that helps generate accurate minutes
For others in attendance that are expected to present:
  o Please hold until your name is called to present
  o Please remember to mute your phone or computer when you are not speaking; remember that unless a document is being shared, your camera feed is triggered by your speaking or background noise;
  o Please remember to speak clearly and in a way that helps generate accurate minutes
  o After your presentation, members of the Board/Committee will be given the opportunity to ask questions

  ● Finally, each vote taken in this meeting will be conducted by roll call vote.

  [Any additional preliminary comments tailored to meetings]
Shrewsbury

Older Adults Behavioral Health Needs Assessment

July 21, 2020
Needs Assessment Process

● Fall 2019- Town requested that SYFS complete an assessment of the behavioral health needs of the Shrewsbury older adult population and the capacity of town to address those needs
● Nov 2019- Jan 2020- SYFS collected data
● Feb 2020- SYFS compiled and analyzed data and developed recommendations and submitted report
Data Collection

- Paper and online surveys for residents
- Paper and online surveys for providers and stakeholders
- Interviews with 22 key informants
- Focus groups with residents
  - Shrewsbury Housing Authority Properties
  - Shrewsbury Senior Center
  - Residence at Orchard Grove
  - Shrewsbury Men’s Club
  - Shrewsbury Women’s Club
Data Collection

93 residents responded to the survey

- 69.9% identified as female, 26.9% identified as male
- 37.7% - under 70
- 21.5% - 70-75
- 23.7% - 75-80
- 17.2% - over 80
- 24.7% reside in Shrewsbury Housing Authority properties
Existing Programs and Services - Town Specific

- Shrewsbury Council on Aging/Senior Center
- St. Anne’s Human Services
- St. Anne’s Free Medical Program
- Shrewsbury Youth and Family Services, Inc.
- Shrewsbury Public Library
Existing Programs and Services

- Elder Services of Worcester Area
- Veterans, Inc.
- Dementia Friendly Community Initiative
- Department of Transitional Assistance (DTA)
- Housing Specific Resources
  - Shrewsbury Housing Authority
  - RCAP Solutions
  - Central Massachusetts Housing Alliance
  - (DHCD) CHAMP System
Shrewsbury Housing Authority Services

- The SHA manages clean, safe and well-maintained living environments for residents
- 235 one-bedroom affordable housing units designated primarily for elderly residents across three complexes
- Additional scattered site properties available for families and individuals throughout Shrewsbury (can you put a number on this? I know of 5 at Ridgeland Road - KDL)
St. Anne’s Human Services

- Food pantry and other food distribution services
- Thrift shop
- Holiday support
- Weekly medical clinic through St. Anne’s Free Medical Program
- Case management and referrals
Shrewsbury Council on Aging

● Variety of programming (grief and loss support, stress management, social activities, daily lunches through Elder Services of Worcester)
● Dementia caregiver support group
● Home visits through the Outreach Coordinator
● Heating assistance application support (SMOC, Share the Warmth)
● Property tax abatement application support
● Referrals to attorneys for elder-specific legal issues
● Referrals to Elder Services of Worcester for home care services, elder abuse protection, Meals on Wheels services
Shrewsbury Public Library

- Outreach service for those who are unable to visit the library
- Book groups
- Computer classes, movie nights, genealogy and family history resources, and period events
- Memory Cafe for those with memory loss and their caregivers
- Notary Public
Major Issues Identified in Research

- Transportation
- Isolation
- Crisis Response
- Stigma
Town-wide Issues

Transportation- General Issues

- Single most cited barrier to accessing needed services across providers, stakeholders, and seniors
- Lack of or limited transportation can lead to:
  - Increased isolation
  - Limited or no options for socialization
  - Limited or no access to behavioral or medical health care
Isolation - Commonplace and Widespread

- Nearly 100% of stakeholders and providers noted that isolation is a major concern
- 55.8% of surveyed residents indicated they had experienced feeling isolated and/or lonely
- At every focus group, participants mentioned that they knew of people who never leave their home or apartment
- For Meals on Wheels clients, drivers may be the only human contact for seniors
Town-wide Issues

Isolation - Associated Dangers

● Hard to participate in social activities when isolated or feeling isolated
● Increased mental health issues
  ○ Anxiety and depression can make it hard to access the Senior Center and supportive services
● Homes can fall into disrepair and become unsafe
● Falls, significant cognitive decline, etc., may go undetected, leading to major crises
● Increased risk for becoming a victim of a financial scam
Town-wide Issues

Crisis Response

● No local options for seniors who are in crisis
  ○ Seniors may end up at the police station or the hospital

● No local options for seniors who are experiencing homelessness or housing instability
  ○ Seniors need to seek support from agencies in Worcester
Town-wide Issues

Stigma

- Belief that mental health problems are a normal part of aging.
- Seniors lack of understanding that behavioral health issues are treatable.
- Persistent beliefs among seniors that mental health problems show weakness, “craziness,” etc.
- Seniors report fear of being judged if seen walking into mental health clinic.
- COA Board Members identified fear as a barrier to accessing needed help.
- Lack of understanding and knowledge in adult children on how to identify and discuss mental health and cognitive decline with their parents.
Major Older Adult Service Provider Gaps

● Shrewsbury Council on Aging/Senior Center
● Shrewsbury Public Library
● Shrewsbury Housing Authority
● St. Anne’s Human Services
Council on Aging (COA)/Senior Center - Programming

- Request for expanded hours - this could allow younger/working seniors to participate
- Request for more exercise classes
- Request for groups to discuss “feelings and issues”
- Request for increased activity options “beyond board games”
COA - Transportation - Van Issues

● Need to schedule in advance can deter people from using it
  ○ Requirement of scheduling at least 48 hours in advance
  ○ Rides are not always guaranteed

● Difficult to schedule medical appointment due to limited van hours
  ○ Can affect how soon seniors can schedule needed appointments
  ○ One senior described getting left at a doctor’s office because the appointment had run beyond the van hours
  ○ People on dialysis need to wait until 10:00 for appointments - this may not be optimal

● SHA residents report feeling uncomfortable and judged when they call for van rides
  ○ SHA staff echoed this sentiment
  ○ Some also noted that the rides, although discounted, are unaffordable for them
Council on Aging (COA)/Senior Center - Communication

- Limited knowledge among residents of services offered
- Printed newsletter is the primary means of communicating services and programs
  - Not everyone receives this - younger seniors may primarily use electronic communications
  - Other agencies rely on electronic communication
- Website is outdated and does not offer current information
- No general flyer/brochure detailing standard services and programs
Council on Aging/Senior Center - Outreach Needs

- Former Outreach Coordinator was not able to reach most vulnerable and isolated seniors to connect them to COA services
- People with the most need are not accessing the Senior Center
- No process to communicate concerns from Meals on Wheels to Senior Center staff
- Need for mental-health specific outreach and counseling
- Certain members of the community do not feel welcome at Senior Center - not accessing services
Shrewsbury Public Library

- Limited capacity to work with individuals who are in crisis (arrive under the influence, confused, etc), but large number of patrons looking to staff for support
- Limited resources for referrals, particularly during nights and weekends
- Memory Cafe is only available for people who have transportation to get the library
- Significant concern of the staff is the unmet behavioral health and social services needs of senior patrons
SHA Tower Property - Resident Safety

- Bullying - residents report feeling scared to leave their apartments
- Incidents of domestic violence occur, per staff and residents
- Some residents reported fear of calling the police
- Threats of violence - Staff unable to curb a resident physically threatening and harassing others
- Three reported sexual assaults at the Tower, per staff
- Possible miscommunications between SHA and police
SHA Tower Property - Mental Health and Substance Use Disorders

- 30-35% residents struggling with untreated SUD’s, according to staff
- Significant drug activity in the parking lot
- 90% of residents struggling with untreated mental health issues, according to staff
- 50% struggle with hoarding across SHA facilities, according to staff
- No home-based behavioral health services are available due to loss of funding
Shrewsbury Housing Authority - Staffing Issues

- Need for social worker or similar position
- Previous Social Services Coordinator transitioned to a new position
- Limited coordination with previous COA Outreach Coordinator
- Mental health training needed for staff
St. Anne’s Human Services

- Staff has no capacity to deliver food to residents who cannot physically get to St. Anne’s - likely more vulnerable seniors (biggest barrier to serving those in need)
- Lack of knowledge/coordination with other agencies in town, including the COA/Senior Center
- Limited capacity to work with individuals who are in crisis (arrive high, confused, etc.)
Recommendation- Community Wide Collaboration

- Institute monthly meeting group to include SHA, SYFS, COA, Library, St. Anne’s Human Services, Police, and Fire to address the issues identified in this assessment and improve communication (Eliminate weekly Triad)
- Produce a program with panel discussion with leaders from each provider department/agency to clearly explain what services are available and how to access them
Recommendations - Transportation Changes

- Expanded van hours
- A requirement that vans will not leave any seniors at appointments with no mode of transportation to return home
- Expanded van geography to allow access to a wider variety of medical and social programs
- Ensure that all employees and drivers in contact with seniors requesting rides are respectful of the unique needs of each community member accessing this service
- Ensure that a van is available to SHA residents as contracted by SHA
Recommendations- Isolation and Loneliness

- Bolster available outreach services - full time *community-based* Outreach Coordinator through the COA
  - 4 hours/week at SHA properties, with extra emphasis on the Shrewsbury Tower
  - 2 hours/bi-weekly at the Library
  - 4 hours on the third Monday of the month at St. Anne’s during food distribution
  - Home-based outreach appointments
Recommendations - Isolation and Loneliness

● Changes to Senior Center/COA Operations
  ○ Develop and distribute marketing materials
  ○ Expand Senior Center hours and augment programming
  ○ Develop policies to identify and refer isolated and vulnerable seniors to the Outreach Coordinator
  ○ Train all staff and volunteers in Older Adult Mental Health First Aid
  ○ Work with St. Anne’s to develop food deliveries
Increased Clinical Support

- COA Outreach Coordinator to complete referrals for longer term behavioral health care to SYFS (current in place)
- SYFS to provide a master’s level clinical intern for COA to bolster clinical supports
- COA Outreach Coordinator position becomes FTE
  - This Coordinator would spend the majority of time conducting home visits with residents who are at-risk or who have been identified as having mental health challenges
- Increase collaboration between Outreach Coordinator and Meals on Wheel through signed Releases of Information
- SYFS to provide weekly social connectedness group (intern led) at the Senior Center
Additional Recommendations

- Shrewsbury Police Department Partner with Advocates, Inc. to develop a Co-Response Jail Diversion Program to respond clinically to people in crisis
- Community resident/employee/volunteer become familiar with crisis resources such as Shrewsbury Police and Fire Departments, Community Healthlink Emergency Mental Health Services, and Worcester hospital emergency departments or any other service that is available 24/7

- SHA Recommendations
  - On-site activities that mirror those offered at the Senior Center
  - A full time Social Worker or Social Services Coordinator
Community Wide

Older Adult Behavioral Health Needs Assessment

February 24, 2020
Dear Mr. Mizikar,

Over the past 20 years, the nation’s aging services network has been preparing for the demographic shift, known as the Age Wave, which is occurring as the baby-boom generation collectively enters older adulthood. In recent years, there have been discussions at all levels of government, and throughout health and social service delivery networks, on how to redesign systems to accommodate the increasing number of people in their 60s, 70s, 80s, 90s and even 100s who live in the community. When health and social service systems were designed, it was at a time when the older adult population was significantly smaller and life expectancies were shorter than they are now and are predicted to be in the future. Far fewer older adults expected to live many years beyond retirement and did not require the same level of intervention and support to remain in the community as they do today.

As Shrewsbury residents continue to live longer and the largest generation ages into this population, they are more likely to live in the community, often independently, in their own homes. Many will require home and community-based services to maintain that independence in healthy and safe ways. It is increasingly important to consider whether the current supports and services that are in place best serve individuals in the community, particularly those who have or develop mental health disorders and have limited access to the world outside their home. While the aging network system of support has worked well for many, it is time to reassess the current needs of older adults and consider additional modes of service delivery.

The Older Adult Behavioral Health Needs Assessment targeted residents over the age of 60 and was designed to better understand the needs of older adults, the current service delivery model, and the gaps that may exist between the existing and needed services. The report includes primary research with residents and with community stakeholders who provide services to older adults. Additionally, this report provides a compilation of the results from focus groups, interviews, and the surveys. Such information will prove to be instrumental as the Town of Shrewsbury, the Council on Aging and local social services providers prepare to meet the needs of the more than 8,400 older adults in the community.

The Shrewsbury community is fortunate to have so many members who are committed to volunteering in various capacities at several different organizations. It is important to note that Shrewsbury Youth and Family Services, Inc. (SYFS) views the Older Adults Behavioral Health Needs Assessment as a beginning, not an end. The agency will use this as a living document to help chart the course for shaping the long-term services, a structurally solid support system in Shrewsbury, and to ensure the town is providing the most critical services as efficiently and
cost-effectively as possible. SYFS will continue to welcome feedback from other town
departments, agencies, aging stakeholders, policy-makers, and the community at large.

We would like to thank you for taking the time to review this very important study. With your
participation and insight, the Town of Shrewsbury will continue its tradition of being at the
forefront of addressing the current issues faced by all community members.

Best Regards,

Christine Mowry

Jennifer Rifkin

Christine Mowry, Executive Director
Jennifer Rifkin, Clinical Director

CC: Kristen Las, Assistant Town Manager
Shrewsbury Board of Selectmen
SYFS Board of Directors
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DATA COLLECTION METHODS

Who was Surveyed
All Shrewsbury residents over the age of 60 were invited to participate in this survey. The current breakdown of this population is as follows:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total Residents</th>
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<tbody>
<tr>
<td>60-69</td>
<td>3957</td>
</tr>
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<tr>
<td>80-89</td>
<td>1378</td>
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<td>90-99+</td>
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Older Adult Needs Assessment Survey (paper and electronic)
Individual survey data may be accessed and reviewed here:
https://forms.gle/3B4DWvxm4oeZceRXA

Approximately 3,000 paper surveys were distributed at the Shrewsbury Public Library, Shrewsbury Housing Authority Facilities, St. Anne’s Human Services, St. Mary’s Parish, First Congregational Church, Shrewsbury Senior Center, Shrewsbury Youth and Family Services, and Elder Services of Worcester Area. Paper surveys were distributed to all residents participating in Meals on Wheels delivery as well as the drivers.

Electronic survey links were included in the Council on Aging Newsletter, in an advertisement on Shrewsbury Media Connection local cable channels, the Town of Shrewsbury Facebook page, the Shrewsbury Youth and Family Services website and social media pages, and in the bulletins at St Mary’s Catholic Church and The First Congregational Church.

Topics included:
- Demographic Information
- Knowledge of and Access to Programs and Services
- Isolation/Loneliness
- Socialization/Recreation
- Nutrition/Home Delivered Meals
- Transportation
- Mental Health Challenges
- Substance Use
- Suicidal Ideation
- Security/Safety
- Caregiving support
Provider Assessment Survey (paper and electronic)
Individual survey data may be accessed and reviewed here:
[https://forms.gle/zjP7fL9for1RieJ27](https://forms.gle/zjP7fL9for1RieJ27)

Provider Assessments were distributed to staff and volunteers at the following organizations:
Shrewsbury Public Library
St. Anne’s Human Services
Shrewsbury Housing Authority
Shrewsbury Senior Center (including Meals on Wheels Drivers)
Shrewsbury Council on Aging Board Members
Dr. Alan Cusher
Worcester Elder Services
State Representative Hannah Kane

Topics Included:
- Services Provided
- Top Three Identified Issues Facing Older Adults
- Identified Health and Social Service Gaps
- Barriers to Engaging Older Adults
- Referral Resources
- Identified Underserved Populations
- Behavioral Healthcare Access and Utilization Barriers
- Most Frequently Identified Behavioral Health Challenges

**Key informant sessions:** Key informant sessions were facilitated with several individuals. The purpose of the key informant sessions was to explore the needs of seniors, persons living with a disability, caregivers, special populations among providers of services, and key stakeholders that serve the target populations. These sessions included interviews with the following:

State Representative Hannah Kane
Walter Rice, COA
Sharon Yager, COA
Hollie Lucht, COA
Shashi Menon, COA Advisory Board
Cliff Gerber, COA Advisory Board
Louise Russell, COA Advisory Board
Beth Murray, Senior Center - Meals on Wheels
Senior Center Volunteers
Elaine LeBlanc, St. Anne’s Human Services
Melinda Nies, St. Anne’s Human Services
Kelly Bergeron, Shrewsbury Housing Authority
Shirley Fuentes, Shrewsbury Housing Authority
Ellen Dolan, Shrewsbury Public Library
Jim Vuona, Shrewsbury Fire Chief
Dr. Alan Cusher, PhD
Julie Nason, ADVISE
Father Michael Rose, St. Mary’s Parish
Viv Dumas, Elder Services of Worcester
Lt. Kevin Anderson, Shrewsbury Police Department
Shrewsbury Case Managers, Elder Services of Worcester

**Focus groups**: Several facilitated focus groups were held. The purpose of these groups was to gather in depth information about the needs of special populations identified by SYFS. A facilitator was provided to conduct and accurately capture the views and opinions of participants.

Multiple focus groups were held for the following groups:

- Shrewsbury Housing Authority (Elizabeth Gardens)
- Shrewsbury Housing Authority (Francis Gardens)
- Shrewsbury Housing Authority (Tower)
- Shrewsbury Senior Center
- Residence at Orchard Grove
- Shrewsbury Men’s Club
- Shrewsbury Women’s Club

Areas of discussion included:

- In-home service needs
- Transportation
- Caregiving
- Mental Health and Substance Use
- Elder abuse, neglect, and financial exploitation
- Case management
- Wellness, Nutrition and Health Care
- Social/Recreational Needs
At-A-Glance Overview

Older Adult Assessment Data:

<table>
<thead>
<tr>
<th>Survey Questions</th>
<th>Affordable &amp; Safe Housing</th>
<th>Access to Organized Social Activities</th>
<th>Home Care Services</th>
<th>Accessing/Getting to Programs &amp; Resources</th>
<th>Transportation for shopping &amp; recreation</th>
<th>Counseling (for depression anxiety)</th>
<th>Meaningful work or volunteer options</th>
<th>Locating programs &amp; resources</th>
<th>Caregiver support</th>
<th>Transportation for medical needs</th>
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<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
</tr>
</tbody>
</table>
1. How often do you feel isolated or lonely?
93 responses

2. How often do you feel sad or depressed?
93 responses
3. How long do your feeling of sadness or depression last?
93 responses

4. During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?
93 responses
5. During the past 12 months, how many times did you do something to purposely hurt yourself without wanting to... cutting or burning yourself on purpose?  
93 responses

- 0 times: 77.4%
- 1 times: 20.4%
- 2 or 3 times: 1.7%
- 4 or 5 times: 0%
- 6 or more times: 0%
- N/A: 0%

6. During the past 12 months, did you ever seriously consider attempting suicide?  
93 responses

- Yes: 21.5%
- No: 78.5%
- N/A: 0%
7. During the past 12 months, did you make a plan about how you would attempt suicide?
93 responses

8. During the past 12 months, how many times did you actually attempt suicide?
93 responses
9. How often do you feel anxious or consumed with worry?
93 responses

10. How often does your anxiety interfere with your daily activities?
93 responses
11. Do you experience panic attacks?
93 responses

- Yes: 76.3%
- No: 8.6%
- I don't know: 10.8%

12. During the past 30 days, on how many days did you have at least one drink of alcohol?
93 responses

- 0 days: 64.5%
- 1 or 2 days: 10.8%
- 3 to 5 days: 6.5%
- 6 to 9 days: 5.2%
- 10 to 19 days: 3.5%
- 20 to 29 days: 3.5%
- All 30 days: 2.2%
13. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

93 responses

14. During the past 30 days, how many times did you use prescription drugs at a dose higher than prescribed or not prescribed (e.g., Morphine, OxyContin, Vicodin, etc.)?

93 responses
15. During the past 30 days, how many times did you use other drugs (Marijuana, Heroin, Cocaine, Methamphetamines, etc.)?
93 responses

16. Do you feel safe in your home environment?
93 responses
17. Have you ever been a victim of elder abuse or domestic violence?
93 responses

18. Have you ever been a victim of a financial scam?
93 responses
19. Do you have a trusted adult you feel comfortable talking to about things that bother you?
93 responses

1. Gender
93 responses
2. Age
93 responses

3. What is your sexual orientation?
93 responses
4. What are your living arrangements?
93 responses

- I live alone: 32.3%
- I live in an assisted living facility: 14%
- I live with a significant other: 24.7%
- I live with family or friends: 25.8%
- I live in Shrewsbury Housing Authority
- I am homeless

20
Provider Assessment Data:

Survey Questions:

What Factors might increase behavioral healthcare access & utilization among older adults

- Home-based treatment
- Transportation to clinics
- Transportation to food pantry
- Increased awareness among professional care providers
- Increased number of treatment options
- Other

<table>
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<th>What Factors might increase behavioral healthcare access &amp; utilization among older adults</th>
<th>Home-based treatment</th>
<th>Transportation to clinics</th>
<th>Transportation to food pantry</th>
<th>Increased awareness among professional care providers</th>
<th>Increased number of treatment options</th>
<th>Other</th>
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Provider Assessment Qualitative Data

The qualitative provider assessment data includes information gathered from key informants. The discussions with service providers brought to light a number of issues facing seniors. For the most part, there was a great deal of similarity in the issues that arose during these various discussions. The survey also validated the concerns mentioned during the focus groups and interviews. The major issues of concern that arose from this research are transportation, isolation/loneliness, affordable housing, health care, outreach to homebound seniors, social issues, and accessing resources. In addition to these major topics three underlying issues came to light that have an effect on all of the others. The first relates to the need for communication between town departments and other service providers, the second to the need for a dedicated, full-time Outreach Coordinator, and the third to transitional issues related to aging. It may be useful to consider some underlying realities that impact care for older adults. Providers often
suggested that seniors may need help with transitioning into their older years. Providers frequently commented on some issues that make it more difficult to serve the eldest members of this population. It was suggested that these oldest adults can be fierce in their efforts to maintain their independence. This often leads to a reluctance to ask for help and a resistance to take advantage of the help that is available to them. Service providers say this often causes some older adults to ignore interventions that could help them maintain their independence. Providers suggest that these realities need to be considered when developing programs that serve this segment of the population. Care must be taken in the language used to market programs as well as the interpersonal approaches used by service providers.

As part of this needs assessment, local first responder data was requested. The Shrewsbury Police responded to 186 mental health calls in 2018 and that number increased to 218 in 2019. They responded to 457 elder specific calls in 2018 and 510 in 2019. While they did not provide the number of elder mental health calls, anecdotal reports indicated that it is commonplace to see older adults struggling with behavioral health issues when responding to calls. They also noted that many calls may be initially reported as medical issues, but responding officers often encounter comorbid behavioral health issues during the visit.

The Shrewsbury Fire Department reported similar anecdotal data regarding calls for elders and mental health. They also reported that they transported seniors to the hospital for psychiatric related reasons 29 times in 2019, 17 times in 2018, and 14 times in 2017. However, these numbers do not account for situations in which seniors refused transport to the hospital or when ambulances covering from another town provided the transport. It also does not account for calls where mental health issues may have been identified, but were not severe enough to warrant a hospital visit.

During an interview with members of Against Domestic Violence in Shrewsbury Education (A.D.V.I.S.E), it was reported that a limited number of calls (1-2) for assistance in domestic violence situations are received annually.
Existing Services and Programs

a. **Shrewsbury Council on Aging/Senior Center:** Stress management program (Wednesdays- COA Outreach Coordinator), Grief & Loss Support Group (2nd & 4th Tuesday of the month- local Psychologist), SHINE: Health Insurance Assistance, Dementia Caregiver Support Group (3rd Tuesday of the month- COA Outreach Coordinator), home visits, emotional support (COA Outreach Coordinator/Elder Services), SMOC/Fuel Assistance/Share the Warmth/Property Tax Abatement application processing, referrals to attorneys for assistance with legal documents such as wills, health care proxies, and Durable Power of Attorney, Meals on Wheels through Elder Services of Worcester, Village Cafe daily lunch provided by Elder Services of Worcester, referral assistance to Elder Services of Worcester for home/personal care services, elder abuse protective services, hoarding issues, emotional support, and loneliness.

b. **St. Anne’s Human Services:** St. Anne’s Human Services plays a pivotal role in assisting the town’s most vulnerable residents of all ages. St. Anne’s is primarily known for their food distribution. The thrift shop, operated by volunteers, runs on donations which support the food pantry and other programs. In addition to their regular food distribution on the third Monday of each month, St. Anne’s distributes countless turkeys and holiday food bags, coordinates a community-wide Giving Tree program which provides holiday gifts for over 170 children, and during the holidays also distributes toiletries, warm hats, coats, gloves, and gift cards when they are available. Clients of St. Anne’s who are SELCO customers are able to submit Share the Warmth applications at this site. Various other initiatives take place throughout the year, such as the backpack/school supply drive. St. Anne’s also provides assistance to families with new babies (collection of baby items and furniture). Although not a part of their core mission, St. Anne’s volunteers occasionally assist clients with referrals to other social services agencies and provide clients with substance use challenges with clean clothing and supplies.

c. **St. Anne’s Free Medical Program:** The mission of St. Anne’s Free Medical Program is to provide high-quality healthcare services to individuals and families without adequate access to healthcare in the Greater Worcester Community on Tuesdays from 6:00 pm - 8:00 pm. Services provided include basic laboratory services, school physical exams, sick visits, immunizations, Tuberculosis testing, OB/Gyn referrals, work physicals, health insurance help and assistance.

d. **Shrewsbury Youth and Family Services, Inc.:** Services provided include outpatient mental health counseling (across the lifespan), psychoeducation, school-based support services, aging support groups, addiction prevention and education, Mental Health First Aid training (Youth, Adult, Older Adult, Public Safety, Higher Education), positive youth development programs, Case Management (Assistance with SNAP benefits, housing
referrals, SMOC application processing, Share the Warmth, SOAR - emergency fuel, holiday gift program).

e. **Shrewsbury Public Library:** Adult Services include personalized outreach service for those who are unable to visit the library in person, book groups, computer classes, movie nights, genealogy and family history resources, Memory Cafe for those with memory loss and their caregivers, Notary Public, Multi-Cultural events.

f. **Elder Services of Worcester Area:** Case management, homemaker/home health services, home delivered meals, protective services, personal care attendant program, options counseling - disability resource center, healthy living - evidence based programs, money management, Central MA Metrowest Transitions in Care from hospital to home, chore assistance, adaptive housing, personal emergency response system, respite companions, senior companions, social day program, adult day health, transportation, supportive home care aide, short term respite beds, medication dispensation, vision rehabilitation, Safe Return (through Alzheimer’s Association), Grandparent’s Raising Grandchildren support groups, Making Connections Memory Cafe.

g. **Veterans, Inc:** Housing programs (emergency, transitional, and long term), Women and Children’s program, Case Management, Employment and Training, Health and Wellness, Outreach, Supportive Services for Veteran Families, Housing Rehabilitation and Modification, Independence Hall - Recovery Treatment Center in Shrewsbury.

h. **Dementia Friendly Community Initiative:** Dementia Friendly Community training provided by Kelly Landini from The Residence at Orchard Grove.

i. **Department of Transitional Assistance (DTA):** SNAP benefits (formerly food stamps), SNAP Application for Seniors for food and cash assistance, Economic Assistance (cash benefits), employment and training resources.

j. **Housing Resources:**

Shrewsbury Housing Authority

RCAP Solutions: affordable housing assistance, homelessness prevention (housing assistance payments for low-income tenants), housing case workers, transitional and emergency housing assistance.

Central Massachusetts Housing Alliance (CMHA): homelessness prevention and housing stabilization, housing counseling, case management, referrals to additional community services, and emergency payments for rental and utility arrearages.

Commonwealth of Massachusetts Department of Housing and Community Development (DHCD) CHAMP System: Public housing applications separate from the federal government’s subsidized public housing units and vouchers (central portal to apply to multiple housing authorities), housing stock can be greater than federal housing.
MAJOR OLDER ADULT SERVICE PROVIDER GAPS

Elder Services of Worcester Area

Elder Services of Worcester is a critical resource for the senior population in Shrewsbury. There are several case managers who specifically serve the seniors in town. Based on their reports, they noted that many seniors struggle with transportation issues. They noted that van hours are limited and it is not uncommon for people not to get appointments when they are requested. The lack of van service for social outings was also mentioned as an issue that can lead to isolation and loneliness. Furthermore, because of the van’s geographic limitations (Worcester is not covered), many of the social activities offered by Elder Services of Worcester are not accessible to Shrewsbury seniors.

All of the Shrewsbury case managers reported that isolation, loneliness, depression and anxiety were present and largely untreated in the seniors they serve. Some also mentioned untreated substance use disorders as a major issue. They cited a lack of knowledgeable service providers and a reluctance to accept help as the primary barriers to seniors accessing treatment. There was also a general sentiment that the most isolated seniors who are most at-risk for behavioral health and related issues are not being seen. This theme was consistently identified by other stakeholders, providers, and seniors who were surveyed.

Shrewsbury Housing Authority

As noted earlier, the Shrewsbury Housing Authority is one of the largest agencies providing direct support and service to the senior population. Multiple focus groups with residents and several staff interviews highlighted the fact there are significant needs within SHA, particularly at the Shrewsbury Towers, where about 75% of residents are seniors. There were fewer reported concerns from residents of Elizabeth and Francis Gardens. SHA staff members feel there is a lack of communication between the COA/Senior Center and SHA and are unclear as to what the Outreach Coordinator’s role is, if any, with housing authority residents.

One of the most serious issues is resident safety. A significant number of residents at the Towers reported bullying that is serious enough that people feel afraid to leave their apartments. SHA staff agreed this was a major concern. One resident was so concerned about her safety, she
asked to speak with one of the interviewers at a different time and asked her [the interviewer] to press all of the elevator buttons so no one would know where the interviewer was going.

SHA staff and Towers residents reported that substance use is a regular occurrence. SHA staff estimated that 30-35% of Towers residents are struggling with a substance use disorder, but are not receiving any treatment. According to residents, “the parking lot is notorious for drug dealing,” “there are needles in the parking lot,” and “there is always non-resident sexual activity taking place in the parking lot”. One SHA staff member noted the opioid crisis has severely affected many of the residents. Some residents are too frightened to leave their apartments after 6:00pm due to drug activity. It appears that many residents contact the SHA regarding these issues and are told to contact the police instead. However, some residents reported that they are scared to call the police, due to the bullying issues noted earlier. Additionally, it was reported by SHA staff that they believe many residents spend their checks immediately upon receipt on substances and are frequently left with no money for food for the rest of the month.

Violence and the threat of violence also appear to be significantly problematic at the Towers. One resident reported that she was “threatened and harrassed on the elevator by another resident for a month.” Several residents noted that domestic violence is common and it is not unusual to hear couples fighting dangerously and abusively. SHA staff stated that they are aware there is a resident carrying a knife and threatening people, but do not seem to know how to stop this. They also noted that there were three reported sexual assaults within the past year at the Towers. Given the fear residents described of “snitching,” it is safe to assume there may have been a significantly higher number of sexual assaults. It seems clear that the Towers is not a safe environment, particularly for some of Shrewsbury’s most vulnerable residents.

In addition to the violence and substance use, it seems that many of the residents of the Tower and the other SHA facilities are struggling with mental health and social issues. SHA staff guessed that 90% of the residents have an untreated mental health issue and 50% struggle with hoarding. One SHA staff member reported that several years ago, there was a program that she believed was grant funded that allowed clinicians to go into the apartments of SHA residents to provide behavioral health services. She stated that it was an effective program and seemed to help residents maintain better mental health and feel safer. She also noted that there are some residents who participate in Community Healthlink’s Tenancy Preservation Program (TPP). The Tenancy Preservation Program (TPP) is a homelessness prevention program. TPP works with tenants facing eviction as a result of behavior related to a disability (e.g. mental illness, mental retardation, substance abuse, aging related impairments). The SHA staff member felt these services are effective in helping some residents stabilize their mental health issues. Essentially, this staff member suggested that treatment resources that meet the needs of the residents are effective in helping decrease issues associated with behavioral health. 100% of residents in one focus group (20 attendees) reported that they would utilize therapy privately in their homes.
Several reported that they had utilized therapy in the past but cannot currently access treatment due to lack of available transportation.

The SHA is also operating with a smaller staff than it may need. The Social Service Coordinator position was previously a 30 hour/week job. However, the Social Service Coordinator recently took on an additional role of the CHAMP-State Public Housing Manager. She is now fulfilling both roles within a 37.5 hour/week position, although she is primarily focused on the CHAMP-State Public Housing Manager job duties. By her report, she no longer has time to support residents in the way she did in the past. She regularly provided assistance to tenants negotiating issues with other residents, visited with individuals in their apartments, and helped people with identifying and connecting them to needed services. She also now has less time to assist tenants with applications to MassHealth or understanding letters about Medicare, Disability Services, food stamps, etc. The care coordination needs of the SHA tenants have not decreased, however the services available to them did. In fact, in the time that the Social Service Coordinator position has been underfilled, there has been a large uptick in the number of calls received by Representative Hannah Kane’s office regarding tenant conflicts, questions about MassHealth or other insurance issues, Fuel Assistance eligibility questions, and requests for assistance with qualification and applications for public housing. In one noted instance, a community member who was told by SHA that they were not eligible for public housing contacted Representative Kane’s office. Representative Kane’s research concluded that this resident did indeed qualify and an application was completed. Representative Kane reported that she and her staff do not have the resources to be regularly fielding these types of inquiries.

Transportation was also cited by SHA senior residents as a major barrier to accessing both healthcare and social programming. Citizens in need of transportation can choose from three types of services: 1) ADA Van Service, 2) Regular Van Service, and 3) Worcester Regional Transit Authority. Among the common complaints are that van hours are limited and residents cannot access afternoon medical appointments (despite calling a month in advance to schedule rides they are told the van is not available), drivers are rude and disrespectful to SHA residents, van charges are very high, SHA residents most often have to walk to Shaw’s when they need groceries, vans do not transport to Fairlawn rehab so residents cannot access healthcare, residents have no way to get to pleasurable activities (such as volunteering), when calling to schedule rides they are frequently told the computers are down and cannot schedule, and that vans are frequently busy taking younger people to college, etc. It was also reported that vans frequently do not show up, drop off and leave people stranded at appointments, and SHA residents feel degraded when calling for rides.
There also appears to be a problematic relationship between the SHA and the Shrewsbury Police Department. SHA staff reported that within the past year, they placed three calls in one day to the police asking to respond to a resident who was “screaming and yelling and very high on pills.” The police came to the Towers each time. However, on the third call when pressed by SHA staff to make an arrest, one of the officers stated “I have no reports that we were here earlier in the day.” SHA did not provide any documentation of these calls.

As noted earlier, there have been several reports of sexual assaults at the Towers recently. A SHA staff member stated that she called the police on behalf of one of the residents who had reported an assault. According to that SHA staff, the officer who responded initially refused to take a written report, did not talk to the alleged perpetrator, and told the victim, “just stay away from him.” SHA staff indicated that they feel the police do not take their concerns seriously and avoid actively patrolling SHA properties. However, another resident of the Towers stated “it’s embarrassing to live here because the cops are always here”. It should also be noted that several months ago, SHA staff requested an increased police presence. They reported that “things improved” when the police would walk through the SHA buildings during the week and on weekend nights when staff was not present. The police department reports frequent visits to and regular presence at this facility.

**St. Anne’s Human Services**

St. Anne’s currently serves approximately 465 families comprised of 1,405 individuals. In an interview with the volunteers who work tirelessly to run the food pantry and thrift shop, the most immediate need identified was the ability to deliver food items to those who are unable to access St. Anne’s during distribution days. There is a substantial number of community members who have the ability and desire to prepare food for themselves and/or their families, but cannot access it. These residents do not want or even need Meals on Wheels, they simply need access to groceries. This was prioritized as the top need but at this time St. Anne’s currently has no means of making such deliveries. It was reported that approximately ¼ of their clients are older adults and due to the cost of taxes and maintenance, the ability to stay in their homes is severely compromised making homelessness another significant concern. A large number of clients are struggling with substance use disorders and arrive at St. Anne’s high or intoxicated. In these situations, volunteers frequently provide clean clothing along with food but provide no information for treatment options. Language barriers, particularly Russian, Chinese, Polish and Albanian, present a unique challenge for St. Anne’s staff due to an inability to make connections with translators. St. Anne’s volunteers are largely unaware of the services available through the Senior Center/Council on Aging and report no knowledge of outreach efforts. Though they are not social workers, they report spending a significant amount of time researching potential services for clients. They frequently make referrals to Elder Services of Worcester.
St. Anne’s operates a free medical clinic on Tuesday evenings from 6:00 pm - 8:00 pm. The clinic treats approximately 100 patients per week with 10% being over the age of 60. Those who volunteer there report loneliness/isolation, depression, and elder abuse as the top three concerns. Loss of a spouse, dementia, high/not understanding insurance deductibles, and the inability to maintain homes due to rising costs and limited/fixed finances, and overuse of dietary supplements are also cited as concerns. Those who are unable to drive/have no access to transportation, those who are disabled, and those with mental health problems or dementia were identified as being particularly underserved. It was reported that most of those over 60 who use the clinic are not familiar with the resources at the senior center or report feeling unwelcome there.

**Shrewsbury Senior Center/Council on Aging**

The Senior Center is intended to offer a variety of social and community supports for people over the age of 60 in Shrewsbury. As noted earlier, there are many programs offered through the Senior Center that address these needs. However, there are significant gaps in programming, services offered, culture, and operations that currently exist.

One of the more serious issues is that the Senior Center struggles to communicate the services it offers. There were some Council on Aging Advisory board members and Senior Center volunteers who noted that there is a lack of understanding within Shrewsbury regarding what services are offered and how to access them. The newsletter is the primary method that the Senior Center uses to promote events and ongoing services. While there is a link to the newsletter on the website, it does not work. Also, unless a person is signed up for the newsletter, they will not be aware of the services or programming offered. This makes it challenging for people or providers who are not directly connected to the Senior Center to access services or to encourage people who may benefit from service to attend. There is no brochure or flyer detailing the general services offered at the Senior Center, although the strategic plan and goals are on their website. In addition, several COA board members, stakeholders, Senior Center volunteers and participants noted that very few younger seniors who may still be working utilize the Senior Center due to the fact that there is no late afternoon or evening programming. Many go home to loneliness and isolation. Without understanding the services offered there, it will be difficult to draw in new members.

There were some COA board members with operational concerns about the Senior Center. They reported feeling as though they could not freely discuss concerns during meetings and that it is difficult to work with now former staff members. There was also concern expressed regarding the lack of documented policies and procedures, lack of a clearly defined Outreach Coordinator
job description, lack of effective and appropriate Senior Center programming, and lack of a full time social worker.

There were multiple suggestions from Senior Center volunteers and participants for more exercise classes. Some noted there was a zumba class offered in the recent past, however, not all Senior Center participants could join the class due to mobility issues. Several people noted that classes for people with a wider variety of fitness levels should be offered. Several Senior Center volunteers suggested that a “group to just talk about feelings and issues” would be helpful. One person mentioned that they would like to see a group similar to the one SYFS offers at the Towers. Several volunteers suggested an increase in activities “beyond board games and quilting.” It should be noted that the Senior Center Newsletter calendar indicated a wider variety of programming than was discussed by the volunteers.

There was significant concern from COA Board members, Meals on Wheels staff, and Senior Center staff and volunteers, in addition to providers and stakeholders, that the Senior Center is not reaching the most vulnerable and isolated seniors although some volunteers did feel that the Outreach Coordinator is effective. As indicated by providers, stakeholders, and seniors themselves, isolation is one of the most serious issues facing seniors. It appears the Senior Center needs to respond to that specific need more effectively and directly. COA Board members stated that there is a clear need for mental health specific community outreach. While there is an Outreach Coordinator position, it seems that this position does not spend the majority of time involved in outreach appointments addressing clinical issues. The Outreach Coordinator spends the majority of time at the Senior Center making referrals and connecting people to needed service. However, the people who are able to get to the Senior Center are likely the least in need of the services offered by the Outreach Coordinator. For example, SYFS received a call from a man who was dependent on oxygen who was unable to leave his home and his wife had recently left him with no warning. While he was calling regarding fuel assistance, it quickly became evident that this man was struggling with depression and suicidality. This man clearly would have benefited from mental health outreach services. The Director of Meals on Wheels mentioned a client who calls her on a weekly basis who struggles with significant anxiety. Given the fact that this is a Meals on Wheels client, she may be primarily homebound and cannot access mental health services unless someone comes to her. Ideally, the Outreach Coordinator should be regularly communicating with any Senior Center staff and volunteers to help identify people in need of outreach.

As discussed above, many of the seniors living in Shrewsbury struggle with behavioral health issues. Some struggle so severely they do not leave their apartments. A local faith-based leader stated “some people access the Senior Center, but not the ones who need it the most.” These seniors’ mental health needs go unaddressed and will continue to go unaddressed without a mental health professional coming to them. During a focus group, several seniors noted that
“home-based counseling will be important.” Not only would more robust outreach services help seniors address their mental health issues on an individual level, but those services might also serve as a bridge to help them connect to the Senior Center itself. Ideally, outreach services would reduce the isolation for seniors by addressing mental health issues and by increasing social opportunities through more direct connections to the Senior Center. In those instances where seniors may require longer term or more intensive treatment, the Outreach Coordinator could place referrals to appropriate providers.

There is an additional cultural complication at the Senior Center that makes it hard to engage the most isolated seniors. Uniformly, SHA residents felt they were not welcome at the Senior Center. SHA staff echoed this sentiment. Residents of the Towers and Elizabeth Gardens both expressed feeling nervous to call for transportation to the Senior Center, particularly if they are the only person requesting a ride. SHA staff reported that some residents have felt “degraded if they call for rides to the Senior Center.” While some of this sentiment may be attributable to the social anxiety and poor self image that may come with mental health issues, it is likely that the Senior Center is lacking in its capacity to welcome all seniors. It was reported by one stakeholder that her family member, who volunteers at the senior center, echoed the sentiment that “those people” are an unwanted presence at the senior center.

As one of the primary providers who works directly with the senior population, the Outreach Coordinator holds a meeting on a weekly basis to gather first responders and social service providers. While the intention of this meeting is positive, the purpose and goals of the meeting are unclear. In theory, a meeting such as this should increase the collaboration of all parties and ensure that individual and systemic issues are identified. Regular attendees should be clear on the resources available among participating agencies, but this is not the case. This meeting, as currently constituted, is a missed opportunity for collaboration and cooperation to address senior needs.

**Shrewsbury Public Library**

The library is a critical resource in our community. Interviews with staff produced concerning data. Loneliness and isolation were cited as top issues along with chronic and acute mental health needs (depression, psychosis, delusions, paranoia, dementia, anxiety) and significant life needs with few resources available (homelessness, financial and legal concerns, health and illness). Older adults without family and friends are often found in the library seeking advice and intervention on a wide range of topics. Library staff do their best to connect them to other agencies or resources as they are clearly unable to do so on their own. Those who work in the library are especially concerned about crisis situations, where older adults are experiencing severe mental health or social service crises. Resources for immediate assistance are very limited, particularly during evenings and weekends when most agencies are closed. With the
library open 7 days per week most of the year, people in crisis will often turn to them for assistance. Library staff reports making phone calls to other agencies when possible, or involving the police when there is a safety concern. While the Good Day Memory Cafe is well attended with 20 or more regularly in attendance, lack of transportation prevents many from attending programs. Night programs, when many older adults prefer not to drive, can be especially problematic. Patrons with ongoing mental health needs or declining physical or mental health and no known caregiver or family members to assist them are particularly underserved. The most significant barrier is the patron’s lack of capacity to access services on their own. The top priorities for those working in the library would be the availability of 24/7 crisis management services for mental health/substance use issues, and improvement in transportation services.

**COMMUNITY PRIORITIES**

**Transportation**

Across all resident surveys, stakeholder interviews, providers responses, and resident focus groups, one of the most important needs related to behavioral health and wellness is transportation. Residents regularly reported that the existing transportation services offered through the COA do not meet the needs of the population. Focus group participants noted limited hours and the need to sign up for rides more than two days ahead have made it challenging for residents to schedule and attend medical and behavioral health appointments. One respondent reported that she had a doctor’s appointment that started and ended late (a commonplace occurrence) and the van left her at the doctor’s office with no way to return home. Another resident reported that she had to schedule a medical appointment weeks beyond the first available appointment because she knew it had to fit within the van’s limited schedule. One person mentioned that the van schedule is particularly problematic for people on dialysis, as they cannot make appointments prior to 10:00 am.

Clearly, this has an impact on residents’ capacity to maintain their physical health, which may have a deleterious effect on their mental health. Regular and positive connections with doctors does more than help people manage acute or chronic health issues. These medical professionals may be able to identify mental health challenges before they become crises and make referrals for mental health treatment. If residents struggle to get to and from medical appointments, they are losing or limiting contact with the first line of defense. Additionally, if residents feel they cannot rely on the COA vans for medical appointments, it is unlikely they would feel confident they could rely on van rides for regular therapy appointments.

Transportation issues also impact many residents’ social opportunities. This appeared to affect residents living in Shrewsbury Housing Authority facilities most acutely. During two focus groups, residents reported feeling uncomfortable calling for rides to the Senior Center due to
feeling that staff answering the phones were rude to them. That sentiment was echoed by SHA staff, as well. For many SHA and other community residents, if they do not feel comfortable requesting rides to the Senior Center, they may have no other options for accessing social activities.

Isolation

Isolation and feelings of loneliness among older adults were identified as striking needs in the community. Nearly 100% of stakeholders and providers noted that isolation is a major concern and 55.8% of surveyed residents indicated they had experienced feeling isolated and/or lonely. At every focus group, participants mentioned that they knew of people who never leave their home or apartment. The SHA CHAMP-State Public Housing Manager / Social Service Coordinator noted that when she was exclusively the Social Services Coordinator SHA residents regularly met with her in their apartments and they predominantly expressed loneliness and depression stemming from isolation. However, when her job responsibilities changed, she has been less available as an informal support and that void has not been filled. The Director of Shrewsbury’s Meals on Wheels program, which is the single largest outreach program for seniors in Shrewsbury, noted that for those involved in her program, “the drivers may be the only contact a senior has with another person.”

In several focus groups, residents noted that when people feel isolated and lonely, it becomes harder to participate in social activities. One person reported “anxiety and depression make it hard to leave and access the Senior Center.” Another noted that the cost of some of the activities and trips offered by the Senior Center are too high for many seniors to manage, leading to further isolation and some feelings that “they do not belong at the Senior Center.” As both residents and stakeholders reported, many people do not have family support and limited or no communication with their adult children. Several SHA residents noted that the isolation and loneliness may be particularly acute during the holiday season and it is not uncommon for seniors to spend holidays alone.

Several providers and key informants also discussed several issues that occur as a result of isolation, particularly for seniors who are not accessing any services. The Police Department and a local priest noted that they have encountered multiple situations in which seniors’ homes have fallen into disrepair and may not be safe. Similarly, they recalled instances where seniors’ were experiencing untreated medical issues because no outside person had visited and noticed the problem. The Director of Meals on Wheels noted that some of her drivers had encountered seniors who had fallen and probably needed medical attention, long before they had arrived. COA Board members noted that it is a challenge to reach the most isolated seniors. They also
noted there is no process to support clients who may have been identified by Meals on Wheels drivers as in need of help.

Virtually all stakeholders also mentioned that people who are isolated and not accessing services of any kind are at much higher risk of becoming victims of financial scams. They noted that these isolated seniors may be relying on scammers for the small amount of social contact they provide. The consequences of isolation and loneliness are profound and far-reaching and the need for a more direct and robust response to these issues is considerable.

**Crisis Response**

Another clear service gap identified, primarily by stakeholders and providers, is a lack of crisis center or 24 hour support center. The Police Department reported that they have noticed an uptick in the number of calls related to dementia. For example, there are frequent calls reporting seniors who have walked out of their homes and then get lost. According to the Department, unless a family member calls asking about that senior, the officers ultimately need to transport that senior to a hospital and have them monitored there until a family member or neighbor can make an identification. Staff from the library have also struggled with similar issues. According to the Library Director, “we are especially concerned about crisis situations, where elders are experiencing severe mental health or social service crises. Resources for immediate assistance are very limited, especially on evenings or weekends when many agencies are closed. With the library open 7 days per week most of the year, people in crisis will often turn to us for assistance. I would love to see a crisis assistance agreement/contract to help in such situations.” SYFS staff have also seen a need for a crisis center. During the past 12 months, there have been a number of seniors who have turned to SYFS in need of critical housing support. Several have been at immediate risk of becoming homeless. However, SYFS is not equipped to respond to crises, even during business hours and will generally refer to Worcester agencies for direct support in addressing the crisis.

**Stigma**

Another community need that is not necessarily unique to seniors, but clearly impacts that population is a lack of comfortability in addressing and talking about mental health and wellness. There was considerable feedback from seniors and providers that many of the questions asked on the senior survey were viewed as “private matters,” rather than issues that might require treatment. Based on feedback from seniors, it appears that most people did not understand why these questions regarding mental health issues were being asked. The small number of people who responded to the survey is descriptive of how foreign it may feel for seniors to address and discuss behavioral health. Several seniors and providers mentioned that many people are uncomfortable asking for help with mental health issues or worry that they may spotted walking
into an agency that offers mental health treatment. COA Board members noted that “not wanting people to know is a significant barrier to accessing help.” This is an obvious hurdle that may prevent people from accessing services when they are needed. It also speaks to the critical importance of the role of mental health outreach support. Similarly, several stakeholders and providers noted that many adult children of older adults are unaware of possible symptoms of mental health issues, including dementia and cognitive decline. In part, fear or discomfort around discussing and learning about behavioral health issues makes it challenging for loved ones to recognize when a senior parents needs additional support.

**RECOMMENDATIONS**

Though long term strategic interdepartmental and outside agency planning will be required to build a town-wide, cohesive infrastructure to support this rapidly increasing population, the following recommendations can easily be implemented in the immediate future and can help to alleviate some of the more pressing problems. Ideally, the Senior Center would have a full time Program Coordinator who works specifically to expand and run activity operations within the senior center AND a full time Clinical Outreach Coordinator.

**Isolation and Loneliness**

Isolation and loneliness were identified as the single most pressing behavioral health issue facing seniors. A three pronged approach may be able to address this most effectively. Changes and improvements need to be made in:

- Available outreach services
- Senior center programming
- Transportation

**Available Outreach Services**

Perhaps the single most effective method to reach seniors who are socially isolated and/or home-bound is to increase the availability and visibility of the Outreach Coordinator position. This position should be full time and spend the vast majority of the time in the community. In order to address some of the isolation and significant mental health issues described by stakeholders, the Outreach Coordinator should designate times each week or month to spend at community spaces where the most at-risk seniors gather. This would allow the seniors to get to know this provider and feel safer asking for support when it is needed. The provider could also provide concrete support for the residents through on-site case management activities. To accomplish this, the Outreach Coordinator should spend a minimum of:

- 4 hours/week at SHA properties, with extra emphasis on the Shrewsbury Towers
- 2 hours/bi-weekly at the Library
- 4 hours on the third Monday of the month at St. Anne’s during food distribution
These actions would serve as wonderful relationship building activities, would assist in reducing isolation and identifying seniors that may be struggling with mental health challenges, and may encourage seniors to access the Senior Center. By having the Outreach Coordinator on site during regularly scheduled times, site staff and volunteers can schedule appointments for those who may need assistance or advertise drop-in hours during these times. It would likely also enhance the relationships between the Outreach Coordinator/Senior Center and the major senior population providers.

Senior Center/COA Operations

- An expansion of Senior Center programming to include additional fitness classes that are accessible to all levels, programs that are in high demand and were identified in the COA Strategic Plan and Survey (computer classes, cooking, etc)
- Intergenerational programming that utilizes the skill set of the many students and younger people interested in volunteer opportunities that would foster positive relationships between generations and increase social connectedness
- Expanded hours to promote younger seniors involvement and participation in the Senior Center
- Offer a wider variety of low-no cost trips and outings that would be accessible to those living on a fixed income
- Develop a policy to ensure that the Outreach Coordinator is informed of any concerns from Meals on Wheels and Senior Center staff/volunteers when a resident is identified as having a potential mental health challenge
- Train all Senior Center staff, volunteers, Meals on Wheels volunteers in Mental Health First Aid for Older Adults (SYFS to provide at no cost)
- Regularly update Senior Center website to accurately reflect current programming and available services
- Create and distribute marketing collateral detailing available services to be mailed and distributed at various community locations (library, markets, banks, etc.)
- Work to create a more inclusive and welcoming environment for ALL Shrewsbury residents by developing a Diversity and Inclusion initiative which includes training for staff and volunteers
- Work with St. Anne’s to develop a program to deliver food to those residents who cannot access distribution at St. Anne’s

Transportation

It is clear that transportation is a barrier not only to social connection, but also, in some circumstances, to accessing healthcare. In order to address these barriers the following recommendations are made:

- Expanded van hours
- A commitment that vans will guarantee rides home for seniors who are at appointments
- Expanded town van geography to allow access to a wider variety of medical and social programs
• Ensure that all employees and drivers in contact with seniors requesting rides are respectful of the unique needs of each community member accessing this service
• Ensure that a van is available to SHA residents as contracted by SHA

Community Wide Collaboration

• Eliminate weekly Triad and replace with monthly meeting to include representation from SHA, SYFS, COA, Library, St. Anne’s Human Services, Police, and Fire. In addition to informing one another of programming changes, this meeting would serve as the community collaboration and effort to address the issues identified in this assessment.
• Leverage Shrewsbury Media Connection in filming a panel discussion with leaders from each provider department/agency to clearly define what services are available and how and where to access them. Though many seniors will not access the internet to search, they do watch local programming.

Increased Clinical Support

• COA Outreach Coordinator to complete referrals for longer term behavioral health care to SYFS (current in place)
• SYFS to provide a master’s level clinical intern for COA to bolster clinical supports. This position would be utilized as the COA Director deems fit and would be free of charge between June and April. Clinical supervision will be provided by SYFS
• COA Outreach Coordinator position becomes FTE with regularly scheduled hours as described above. This Coordinator would spend the majority of time conducting home visits with residents who are at-risk or who have been identified as having mental health challenges
• COA Outreach Coordinator accompanying Meals on Wheels drivers to homes of older adults who have been identified as vulnerable
• SYFS to provide weekly social connectedness group (intern led) at the Senior Center. The goal of this group is to help participants increase resilience, promote social connection, teach healthy stress management skills, and improve capacity to age positively.

Crisis Response

The recommendation for crisis response is that any community resident/employee/volunteer become familiar with crisis resources. These include the Shrewsbury Police and Fire Departments, Community Healthlink Emergency Mental Health Services, and Worcester hospital emergency departments or any other service that is available 24/7. Additionally, it is recommended that the Shrewsbury Police Department consider partnering with Advocates Co-Response Jail Diversion Program. Advocates operates pre-arrest Co-Response Programs in multiple police departments across Massachusetts. These programs are founded on the understanding that by working together, clinicians and law enforcement can respond most appropriately to the needs of individuals in the community who are in crisis. It is recommended
that the Shrewsbury Police Department pursue a partnership with Advocates to implement this program in the community.

Additional Recommendations

In addition to these recommendations, we suggest that additional support be put in place specifically to address the unique needs of Shrewsbury Housing Authority residents. First, there needs to be clear and ongoing communication between SHA staff and the SHA Board regarding the mental health and social services needs of residents. We are also recommending that SHA staff develop documentation procedures to help track ongoing concerns of residents. This data could inform the SHA Board more effectively and help protect SHA staff.

Since there appear to be several barriers to accessing the activities at the Senior Center along with the fact that SHA residents feel unwanted and unwelcome there, it would benefit those residents to increase in-house inclusive activities similar to what is offered at the Senior Center. In addition to enhancing the social opportunities, there is a clear and dire need for a social worker on site. At the very least, it is imperative that the Social Services Coordinator position be filled as a full time employee. Though outside of the scope of this assessment, it has also become clear that all SHA staff would benefit from training on how and when to access the child welfare system. SYFS would be happy to provide training on this topic.

SYFS staff are grateful for the opportunity to complete this needs assessments. Not only have staff appreciated collaborating providers, stakeholders, and seniors to uncover needs, but this process has allowed SYFS to further develop our relationship with local providers. We look forward to continued collaboration and collective efforts to address the needs uncovered in this community-wide assessment.
July 15, 2020

Town of Shrewsbury
Board of Selectmen
100 Maple Avenue
Shrewsbury, MA 01545

Re: SYFS Community Wide Older Adult Behavioral Health Needs Assessment dated 2/24/2020

Dear Chairman and Members:

This letter is in response to the recent Shrewsbury Youth and Family Services (SYFS) Community Wide Older Adult Behavioral Health Needs Assessment Report dated February 24, 2020. Given that the Shrewsbury Housing Authority (SHA) was specifically referenced in the report, we thought it was appropriate to offer a response.

**Report Data**
We believe it is important to note that the data in the report is significantly skewed and does not reflect an accurate sampling of the town’s demographics, senior population, or SHA residents, given the number of survey respondents. The report references only 93 respondents in a town with over 35,000 residents and approximately 10,000 seniors. Additionally, of the 93 respondents, less than 25% were SHA residents, or approximately 23. It is our understanding that there were very few responses from the greater Senior Community when considering the number of surveys sent out.

**Shrewsbury Housing Authority**
When considering comments of the 23 SHA survey respondents, it should be noted that SHA provides housing (direct or via Section 8) for approximately 1,000 residents. Therefore, the 23 SYFS respondents represent approximately 2% of the SHA population and approximately .02% of the town’s senior population. In fact, in a recent survey that SHA conducted of its resident population, a vast majority of our residents responded saying that they were very pleased with SHA life. Further, the responses came back with overwhelming positive remarks and very few complaints.

Also, we think it is important for the town to note our mission and our charter. Our mission is to offer SHA residents a clean, safe and well-maintained living environment in the most fiscally responsible manner.

Our charter defines us as a politic, corporate and duly organized public housing agency. State and Federal lawmakers promulgate rules and regulations by which the housing authority must abide. The authority’s funding is received directly from state and federal agencies. We take no money from the town. In fact, we support many town initiatives, including subsidizing the senior transposition. Additionally, we while do offer a variety of social services to our residents, we are not a social services organization.
SHA Responses to Specific Report Findings

Resident Safety

Bullying
The District Attorney’s office (Liz Haddad from the Community Programs) recently spoke to our residents about bulling and prescription safety.

Substance abuse
SPD recently did a presentation on “See Something, Say Something” and Summit Healthcare did a presentation on opioids and aids.

Residents not receiving treatment for substance abuse
SHA cannot legally force medical treatment on anyone unless it gets to the point on sectioning, in which case the resident’s family needs to be involved.

Needles (and sexual activity) in parking lot
Needles were an issue in the past, but we are not aware of any drug paraphernalia in well over a year. At that time, we increased security by adding additional cameras and hiring an outside security firm that walks the property (inside and out) on the weekends, when the property is not staffed by the SHA. This has added a layer of safety for our residents.

Reported sexual assaults
The appropriate actions were taken by involving the SPD. Once we call the police, we do not have any input as to what action they take.

The note that the towers is not a safe environment
This seemed partially egregious. We have a full-time staff as well as a security company at the towers. We take pride in the outreach that we do with our residents, and we take action when needed.

It is worth noting that there is an ongoing issue in that that most seniors are extremely unwilling to accept young disabled adults that are living in their “senior” housing development (a requirement by law). We have seen ongoing animosity and difficulty between these two groups.

Residents are struggling with social issues
Prior to the recent exception due to Covid-19, the SHA residents have social hours, bingo games, cookouts, exercise groups, prayer groups, and mass. They also take advantage of the outside furniture and grilling. We cannot make our residents participate. Additionally, Elder Services recently did a presentation on hoarding, and Summit Healthcare did one on homecare, and one-on-one companionship.

Lack of communication with The Council on Aging/Senior Center
The Council on Aging frequently gives presentations to our residents; the most recent one was in January. At these presentations, our residents typically enjoy learning about volunteer opportunities, transportation and outreach. (Cynthia Willis, Walter Rice and Ken Colon)

Relationship between SPD
The relationship and communication between the SHA and SPD are excellent. To imply otherwise is both incorrect and inappropriate.
Need for clear and ongoing communication between SHA members and its board regarding the mental health and social services needs of residents

Due to privacy and healthcare laws (HIPPA, etc.), there are very clear limits about how resident health information can be shared during a board meeting which is also subject to open meeting laws. The Executive Director can inform the board about general/abstract issues, but there are also DHCD and HUD regulations that prevent the board from having any personal information on any of the residents. SHA cannot be exposed to a legal issue by violating an individual’s right to privacy.

Staffing

The Resident Service Coordinator was phased out 2017 when the Commonwealth discontinued funding for that position. In March of 2020, a new position of State public housing Manager, Bookkeeper, Resident Social Service Coordinator was funded and distributed evenly across the programs of Federal and State. The main role of a resident service coordinator is to enhance the resident’s ability to age in place/live independently as long as possible.

However, the Resident Service Coordinator is not a Licensed Social Worker. There are distinctions to be drawn between the roles of a resident service coordinator and a licensed social worker. The role of the Resident Social Service Coordinator is a unique position as a member of the management team and also as an advocate for individuals right to self-determination of the health of the entire community.

Typically, Resident Social Service Coordinators do not address any one-on-one tenant issues. It would be ethically and morally irresponsible (and possibly illegal) for a Resident Social Service Coordinator to take on over 250 cases (SHA case load). This is why cases are referred out to social service agencies in the community.

Legislators calls

We understand that legislators get the calls all the time. The SHA board members receive similar calls. Typically, these callers are looking to move up on the waiting list or state that they have been passed over. These lists are monitored DHCD and done electronically. People are housed by their preference and DHCD and HUD guidelines.

Recommendation of an outreach coordinator

If this position were to be funded by the town or another third-party agency, SHA would be pleased to collaborate with this individual as well as provide an office space for the coordinator.

Sincerely,

The Shrewsbury Housing Authority Board of Commissioners

Richard Ricker, Chairman
Gayle Vigeant, Vice Chair
Kathleen Curran McSweeney, Treasurer
Paul Campaniello, Secretary
Bruce Parmee, Resident Commissioner
The Board of Selectmen seeks 5 individuals to serve as the selection committee for the purpose of appointing a committee of no more than 20 intentionally diverse individuals to the newly formed Diversity, Equity and Inclusion Committee. Members of the selection committee will not be eligible to serve on the Diversity, Equity and Inclusion Committee.

Individuals wishing to be considered for appointment to the Diversity, Equity and Inclusion Committee must be residents of Shrewsbury, but are not required to be registered voters or property owners. The charge for the Diversity, Equity and Inclusion Committee is as follows:

The Diversity, Equity and Inclusion Committee will become the body of experts charged with developing an action plan to address racial and ethnic disparities in the Town of Shrewsbury. The Diversity, Equity and Inclusion Committee will work with a trained facilitator, provided by the Town, in the beginning phases of their work. The findings of the Diversity, Equity and Inclusion Committee may prompt the Board of Selectmen to explore the creation of a standing committee of commission to carry out the objectives outlined in the action plan.

The Diversity, Equity and Inclusion Committee should make every effort to engage the community in their work through interviews, public hearings, surveys etc. The overall goal of the action plan is to:

- Identify and eliminate race-based disparities within the Town of Shrewsbury
- Promote a culture of inclusion and engagement for all residents and respect for the contributions of every individual or group
- Ensure equitable access to resources and opportunities for all residents
- Suggest programs, activities, educational forums and events to raise awareness about prejudice, racism and discrimination in our community and promote a culture of respect for all persons.

The Committee will report back to the Board of Selectmen within six months from the date of their first meeting to provide a status update on their work. The Committee will produce an action plan for the Board's consideration within nine months from the date of their first meeting.
July 21, 2020

To: Board of Selectmen

From: Kristina Anderson, Assistant to the Town Manager – Human Resources Coordinator

Re: Town Manager Evaluation – Kevin J. Mizikar – Fiscal Year 2020

In accordance with Open Meeting Law requirements, I have obtained individual reviews from each Board member and have developed a composite evaluation based on the data and commentary submitted.

Each factor was rated and scored from “0 = Unsatisfactory” to “4 = Exceptional/Outstanding.” A summary of comments and score data are explained and illustrated below.

**Board of Selectmen Evaluation of Town Manager Kevin J. Mizikar - FY 2020**

**Overall Rating:** Exceeds Expectations to Exceptional/Outstanding

**I. Factor 1 – Knowledge**

*a. Beth Casavant*

I continue to be impressed with Mr. Mizikar's understanding of every aspect of town operations. While this is something that he demonstrates on a daily basis, the current COVID crisis really highlighted his skills. Kevin was quick to implement changes across the organization to ensure town operations and was very familiar with changes made by the legislature that directly impacted local government. He maintains strong working relationships with other professionals in his field and does a great deal of professional reading and research to stay abreast of current trends and topics and what other communities are experiencing and addressing. If the budget were not as tight, I would really like to see Mr. Mizikar be able to participate in more professional development opportunities. I think that having the chance to step away from the day-to-day, gather with your peers and take a deep dive into timely topics is extremely important to staying interested and excited about your role.

*b. James Kane*

Our TM is always well informed or makes himself well informed on the issues facing us. Additionally, when briefing the board or a single member, our TM makes it a practice to assume the follow on or next steps to be considered by this initial conversation or policy question. This
serves us all as his understanding of the legal or regulatory context provides for a basis for a thorough review.

c. **John Lebeaux**
Mr. Mizikar routinely demonstrates command of a wide array of subjects.

d. **John Samia**
Mr. Mizikar continues to demonstrate a broad and deep knowledge of a wide array of subject matters, including budgeting (fiscal 2020 and 2021 budgets), long-term forecasting, strategic planning, contracts, zoning, employment law and environmental law. He also demonstrates true leadership by empowering his direct reports, including the Assistant Town Manager, to lead areas in which they possess the subject-matter expertise.

e. **Maurice DePalo**
Mr. Mizikar draws upon a deep well of knowledge developed through education and work experience. He is extremely well versed in the laws and regulations pertaining to municipal government. I believe he possesses a strong capacity to learn new subjects in a relatively short period by immersing himself in the subject and its history. (I use as an example his accumulation of the workings of the water department). I believe Mr. Mizikar is continuously expanding his knowledge base through research, staying abreast of management and governmental management trends, and participation in regional and statewide policy working groups.

II. **Factor 2 – Productivity**

a. **Beth Casavant**
Mr. Mizikar has prioritized programs and projects that address the most pressing needs of town operations. During the past year he led the Board through the decision making process around raising the cost of town trash bags, providing a great deal of analysis and many options for our consideration. He was also committed to finding a long-term solution to the ongoing problem of discolored water in town. He is careful to make the most of every dollar available but is not hesitant to advocate for spending on projects that are necessary to maintain or infrastructure or provide essential services to the residents. While water and sewer operations were already structured as a utility, adding storm water and solid waste has helped to better organize that part of the budget by keeping those funds separate. I think that is especially helpful now in looking at the budget through the lens of financial impacts related to COVID and understanding where changes can be made.

b. **James Kane**
Our TM takes on many “enhanced presentations” for the board and public to ensure full understanding for all interested parties and create more work for himself while doing it in a professional fashion that does not compromise quality or detail.

c. **John Lebeaux**
Mr. Mizikar keeps the work product flowing in an expeditious manner.

d. **John Samia**
Mr. Mizikar and his team (particularly Mr. Snowdon) constantly monitored and reported upon various elements of the Town’s financial performance. Despite the existence of a structural deficit, Mr. Mizikar creatively seeks to continue to provide a level of services that stakeholders expect yet remain within the Town’s available resources. A simple comparison of Shrewsbury’s
tax rate against its neighbors shows that stakeholders continue to enjoy a tremendous level of services at a fraction of the tax rate paid in neighboring communities, and this is due to tremendous financial management and cost efficiencies. This is a testament to Mr. Mizikar’s financial leadership.

Credit agencies agree with this conclusion, as Standard & Poor’s gave Shrewsbury an AAA bond credit rating, a 2-level improvement to Shrewsbury’s previous credit rating. The rating improvement was directly a result of the Town’s strong budgetary performance, strong financial management and strong management and will result in millions of savings to the Shrewsbury taxpayer for the Beal Project.

Mr. Mizikar is a steadfast advocate for developing a long-term plan to ensure the long-term vibrancy of the Town, and I look forward to working with Mr. Mizikar to move planning into a reality in fiscal 2021.

e. Maurice DePalo

Mr. Mizikar continues the Town’s tradition of doing more with less. He is continuously reviewing service delivery and work processes to determine if there are more efficient and therefore productive ways to perform the work, always with an eye towards improving the delivery of services.

III. Factor 3 - Decision Making

a. Beth Casavant

In his role, Mr. Mizikar makes hundreds of decisions each day that reflect his understanding of the community and the expectations of the Board of Selectmen. He is driven by his desire to make Shrewsbury an outstanding community for all. While many decisions are his, Mr. Mizikar surrounds himself with people that can inform his thinking and provide him with an opportunity to understand different perspectives. This is illustrated when hiring for critical staff positions like the COA Director or the Police Chief, where Kevin convened a hiring committee comprised of various stakeholders to aid in the decision making process. Another example is Kevin’s work on the budget for FY21, which continues to be a moving target due to COVID. Kevin has worked through numerous budget scenarios, consulted with each department head and met regularly with the school department to further refine his budget recommendation, provide options for the Board of Selectmen to consider, and articulate the impacts of each scenario.

b. James Kane

Our TM demonstrates clear thinking and a rational approach to how he deals with processing a decision related to the board and or the public. Little time exists to allow for philosophical contemplation, yet our TM seems to see all sides of a matter when working towards a decision.

c. John Lebeaux

Mr. Mizikar does not make decisions prematurely; he moves at the pace made necessary by the issue, consults appropriately, and always endeavors to make the most informed decisions he can. His decision making to date has been excellent.
d. John Samia
Fiscal 2020 was anything but ordinary, but Mr. Mizikar’s decision-making during fiscal 2020 was nothing short of extraordinary.

For example, Shrewsbury began fiscal 2020 with a new waste management company. From the beginning, the new vendor fell short of contractual and community expectations. By the end of summer 2019, the number of vendor issues had mostly subsided. However, it became clear that the disproportionate amount of Thursday customer pick-ups could lead to vendor inability to timely complete its routes on that day. Mr. Mizikar had two options, do nothing or fix the problem even though customers were still grappling with having a new waste management vendor.

Mr. Mizikar made the difficult (but correct) decision to enact route changes for 886 households to balance out the waste management routes. As a result of enhanced communication (Including going door to door on multiple occasions), these route changes were made seamlessly and without incident.

Shrewsbury residents have been facing issues with manganese for years. Shrewsbury invested over $14 million in a state-of-the-art water treatment facility to eliminate new manganese from entering the water supply. While successful, Town residents continue to deal with the adverse effects from decades-old buildup of manganese in the water lines. The water department’s previous approach had been mainly hydrant flushing, with uneven results. In October 2019, Mr. Mizikar and his team adopted water improvement initiatives such as unilateral flushing to better tackle the manganese problem.

Finally, even with so much unknown about the COVID-19 outbreak, Mr. Mizikar proactively modeled the potential financial impact of COVID-19 based on the Town’s previous experience during the dot.com bust and great recession and developed a revised fiscal 2021 projection based on a well thought through set of assumptions. He has clearly communicated the various scenarios to the Board, the school department and all department heads and holds weekly meetings with the school department to work through the budget constraints as effectively as possible.

e. Maurice DePalo
I believe one of Mr. Mizikar’s strengths is his ability to see developing issues before they grow into larger situations. (As an example, Mr. Mizikar saw the need to prepare for town operations in anticipation of the COVID-19 crisis growing into the major crisis it has become. He mobilized staff and had working plans and contingencies in place ahead of the curve. I have observed that he practices a team approach to address issues and is sensitive to the impact of others (internal and external to the organization) when working on a project or issue. When he brings a problem/situation to the board, he typically offers a proposed solution or solutions I find that Mr. Mizikar is open to new ideas or other points of view in his decision making process. He will not hesitate to make changes if he determines change is required.

IV. Factor 4 - Oral Communication

a. Beth Casavant
I think this area is truly one of Mr. Mizikar’s greatest strengths. He is absolutely the best listener. Even in this new world of virtual meeting, I can tell that Kevin is engaged not only from his body language but
also through his thoughtful responses. Kevin is always ready to discuss any topic on our meeting agenda and is always prepared to answer questions. I know from our conversations, that Mr. Mizikar reflects on his presentations during our Board meetings to identify ways that he can improve the content and the opportunity for increased dialogue among Board members.

b. James Kane
Our TM has a gift for oral presentation that shows in the rate of town meeting approvals for TMA items approved and the support rec’d from the board of selectmen. The clarity offered through the spoken word has allowed for TM members and others to benefit from the work done to date on a project and to understand the reasoning and reasons behind them all.

c. John Lebeaux
Mr. Mizikar clearly communicates to a wide variety of audiences through spoken word.

d. John Samia
Mr. Mizikar speaks clearly, concisely and effectively. At town meeting, he respectfully addressed town meeting members concerns and engaged in thoughtful dialog even where he was in disagreement. Similarly, during Board meetings, whether during the Town Manager Report or addressing meeting agenda items, Mr. Mizikar consistently presents thoughtful and well-developed presentations that convey confidence and mastery of the relevant subject matter.

e. Maurice DePalo
Mr. Mizikar possesses superior oral communication skills. He speaks and presents his thoughts in a clear, organized and concise manner. I find one of his strongest qualities is ability to effectively and thoughtfully listen to others. He takes what others say into consideration when making decisions. When working through an issue or developing a plan of action he will frequently seek feedback in an informal and/or formal manner. I believe he communicates to all manner of audiences in a way that the others understand the message that he is communicating.

V. Factor 5 - Written Communication

a. Beth Casavant
This year Mr. Mizikar implemented weekly written communication with the Board that is received each Thursday. I found that to be extremely helpful as it is not always possible to know what Kevin and his staff are working on throughout the week. I look forward to those communications and often we discuss these topics during our weekly meetings. Kevin has consistently provided the Board with well thought out presentations that balance providing sufficient background for the public without being overly redundant for the Board.

b. James Kane
Our TM has a gift for expressing policies and positions and related reasoning in a clear, concise, and precise way to ensure communication is complete, to the point and practically stated. Again, TM action is a true measure of one’s ability to communication to a large body and our TM’s record is to be admired.

c. John Lebeaux
Mr. Mizikar clearly communicates to a wide variety of audiences through written word.


d. John Samia
Mr. Mizikar timely and effectively communicates with the Board and department heads regarding issues and concerns of the Town.

Mr. Mizikar holds weekly meetings with department heads, which is very important particularly given that over the past 12 months, numerous new department heads have been appointed including at the council on aging, water/sewer superintendent, the library, police department and SELCO. On-going and open communication will be critical to ensure the long-term success of these new leaders.

Mr. Mizikar prepares comprehensive materials for the Board in advance of meetings so that informed and appropriate Board decisions can be made. He also (i) keeps the Board appropriately informed about operational matters on a weekly basis by e-mail update, and (ii) promptly informs the Board about important operational issues as such issues occur, including water main breaks, fires, accidents and resident concerns.

e. Maurice DePalo
Mr. Mizikar possesses strong written communication skills. To take from the text above, he “consistently writes complex directives, letters, reports, etc. in a clear, concise, and highly understandable style. Writing is convincing and timely and achieves desired results.” I cannot describe it any better. His major reports are well written, complete in addressing the subject matter and I personally feel that I have become educated as a result of reading and studying the subject matter as presented.

VI. Factor 6 - Financial Administration

a. Beth Casavant
Mr. Mizikar has an exceptional understanding of all aspects of the budget and has done work to make future budget projections. During the past fiscal year, Mr. Mizikar was supported by Dave Snowden in creating financial models and putting together a budget. I support returning Mr. Snowden to his role within the Town Manager’s Office to support Kevin, especially now when COVID has made everything so uncertain. As we face a significant shortfall in revenue, Mr. Mizikar has explored numerous options to take the town through this time with minimal disruption to service. He is always ready to discuss each scenario and is creative in his approach to the FY21 budget. Even though the situation is dire, Kevin remains very matter of fact about the options available and allows the numbers to drive his decisions.

b. James Kane
Our TM has presented himself and proven himself to be a skilled municipal finance leader in his presentations to the TM members, to the various boards and commissions and to the rating agencies, MSBA and local and state pension representatives. While understanding and respecting past traditions and tendencies, our TM has sought a new path regarding reserves and demonstrated it to be a reasonable path. His ability to understand on-going regulatory and statutory changes to muni finance and dive in to the COVID related programs at the state and federal level are testimony to his intelligence, work ethic, and focus.
c. John Lebeaux
Mr. Mizikar is extremely strong in this area. His budget work to date is consistently exemplary. His ability to shift and pivot with tremendous flexibility and creative thought relative to the ever-changing COVID-19 FY 21 budget/spending plan has been most impressive.

d. John Samia
Mr. Mizikar is collaborative in his approach to the budget process in order to ensure that the outcome is one that will best serve our Town. His work on financial matters in fiscal 2020 and with the fiscal 2021 budget has been exemplary.

For example, as a direct result of Mr. Mizikar’s efforts, Standard & Poor’s gave Shrewsbury an AAA bond credit rating, a 2-level improvement to Shrewsbury’s previous credit rating. The rating improvement was directly a result of the Town’s strong budgetary performance, strong financial management and strong management and will result in millions of savings to the Shrewsbury taxpayer for the Beal Project.

The fiscal 2021 budget has been anything but ordinary. In rolling out fiscal projection one, Mr. Mizikar worked tirelessly, thoughtfully and strategically with department heads and the Board to develop a budget, which is resource constrained, to be able to carry forward existing municipal and school department operations with minimized harm. Then the COVID-19 global outbreak started.

Starting early April 2020, Mr. Mizikar proactively modeled the potential financial impact of COVID-19 based on the Town’s previous experience during the dot.com bust and great recession and developed a revised fiscal 2021 projection based on a well thought through set of assumptions. He has clearly communicated the various scenarios to the Board, the school department and all department heads and holds weekly meetings with the school department to work through the budget constraints as effectively as possible.

e. Maurice DePalo
As stated above, Mr. Mizikar is strong financial manager who does possess a thorough knowledge of the complexities of municipal budgeting. He will frequently present alternatives to a budgeting situation as part of his decision making process. He includes the board in analyzing and developing his budget plans. He studies alternative ways of funding the budget or portion of it to provide maximum use of available funds. I believe Mr. Mizikar is extremely talented in municipal budgeting. He develops complex scenarios and is adept at understanding the effects of making changes, not only to the current year, but looking into the out years, which is a very valuable skill.

VII. Factor 7 – Leadership

a. Beth Casavant
In conversations that I have with residents and town staff I often hear great things about Mr. Mizikar and his leadership. Kevin has earned the respect of his staff. This is due to the time he spent early in his Shrewsbury career to understand town operations and build relationships with town staff. Mr. Mizikar also arrived in Shrewsbury at a time when many long time department heads were ready to retire, so he has been able to hire key players and build his staff to reflect his vision for the town. Even with the difficulties around the budget and being able to provide adequate funding for departments to implement
their plans to improve services for residents, Kevin is maintaining morale to the best of his abilities. COVID added an entire new layer, but I think that the staff appreciated Kevin’s quick response and how committed he was to keeping staff safe while maintaining operations.

b. James Kane
Our TM has demonstrated leadership since day 1. Over the past years, he has expanded that characteristic in a skillful and unassuming way of gaining trust, respect, and then benefiting from that incremental enhancement in the eyes of residents. I note that if something is not going well, such as the changeover to a new waste hauler, our TM assumed complete responsibilities regardless of the specifics, as he understood that residents were not being well served and that it needed to be fixed quickly. Even later in that process, he again came back with system changes that he felt would serve the residents better in the long run, made his presentation and owned the chance of another misstep.

c. John Lebeaux
Leadership—Organizations benefit from having a strong leader. Mr. Mizikar’s management style is very collegial and oriented to consensus building; that behavior communicates his quiet strength and self-confidence, which positively influences the entire organization.

d. John Samia
Mr. Mizikar continues to serve as a great leader for Shrewsbury in his capacity as Town Manager. Driven by excellence and community focused, he leads the Town with a clear vision for a world-class municipal operation and of a community that will enable all residents to thrive. He is forward thinking, fiscally responsible, and always focused on the best interests of our community and his staff. He encourages a professional culture where department managers and his team are empowered and part of the decision-making process.

Anyone can lead during the best of times, but during times of extreme adversity, true leaders emerge. There is no doubt that Mr. Mizikar has been tested during the unprecedented COVID-19 global outbreak and he has truly led every step of the way. He secured municipal facilities in March, immediately empowered his team to lead the COVID-19 task force, developed financial models as early as April 10th, oversaw the June municipal election and has led by a sense of calm, yet forcefulness that has enabled the Town to continue to operate as efficiently as possible during this time.

During this time, Mr. Mizikar’s community outreach has been exceptional, sharing as much information about COVID-19 as possible using every communication vehicle available to him – Board meetings, Code Red, Facebook and SMC.

e. Maurice DePalo
Mr. Mizikar manages by setting clear ethical and moral standards. He clearly leads by example. He does a good job at conveying the importance of the tasks at hand. He clearly states the strategy and the mission and supports his staff in accomplishing the goals. Again, his superior listening skills contributes to his inclusive approach. Importantly, he respects his employees at all levels He has done an excellent job of maintaining morale during this difficult and unsettled period.
VIII. Factor 8 – Public Relations

a. Beth Casavant
Mr. Mizikar is professional in his interactions with the public. He is truly a dedicated public servant and takes his responsibility to respond to direct inquiries from residents seriously. He has continued the tradition of participating in Ask the Manager on our local public access channel and seeks ways to increase engagement with the community. I would like to assist Kevin to initiate visioning work as a community to understand what our residents most value.

b. James Kane
Our TM has demonstrated willingness to get out and update groups in town and maintained the “Ask the Manager” show on local cable. I have heard from many that he is approachable and know him to be willing to meet with residents and follow up in their matter of concern effectively. Again, actions speak volumes and during the trash hauler dark days, he stood tall and dealt with the issues head on and sought to explain why issues were preset and importantly how they were to be resolved.

c. John Lebeaux
Mr. Mizikar works very well with the public face to face, and through traditional and new media.

d. John Samia
Mr. Mizikar maintains an open line of communication with all Shrewsbury stakeholders whether in person, via Facebook, Code Red and the monthly Ask the Manager SMC TV show. He proactively seeks to solve problems and concerns and strives to provide a world-class municipal operation in which all residents will be able to thrive.

For example, Shrewsbury began fiscal 2020 with a new waste management company. From the beginning, the new vendor fell short of contractual and community expectations. Mr. Mizikar welcomed stakeholder complaints and constructive criticism and tirelessly sought to resolve issues with the vendor.

He maintains an open line of internal communication with department heads and employee groups. This open and respectful dialogue has resulted in employee group contractual concessions from 5 out of 6 unions for fiscal 2021 that will help the Town to deal with the crippling financial impact of COVID-19 and to preserve services.

While it took a little time, Mr. Mizikar added information about hexavalent chromium to the town web site in response to the citizens petition warrant article in the 2019 Annual Town Meeting.

He maintains a strong relationship with each of Senator Moore and Representative Kane, which will be essential particularly going-forward as the Commonwealth grapples with the financial and human-related effects from COVID-19.

e. Maurice DePalo
Mr. Mizikar has done a good job of improving communication with the public. I believe residents regard him as being responsive to their issues. He is working with staff to improve our
electronic communications and has improved the timeliness of information. Communication during the COVID crisis has been very good, as the community seems to be generally satisfied that they know what is being done in the community. There is a lack of some information that people are asking for regarding COVID-19 illness and recovery rates, but this is a function of the information available at the state and Health Alliance level. Mr. Mizikar works to have government operations to be as transparent as possible.

IX. Factor 9 – Work Relationships

a. Beth Casavant
Mr. Mizikar is well regarded by his peers as evidenced by his involvement on different boards and committees. He looks for ways to partner with other communities and looks within our town organization to identify redundancies and find ways to be more efficient with the limited staff and resources available. He is creative in forming partnerships in order to accomplish his goals.

b. James Kane
Our TM has seemingly avoided getting chummy with co-workers and subordinates while establishing a level of professional trust and candor that benefits the organization.

c. John Lebeaux
Mr. Mizikar is an excellent colleague and role model.

d. John Samia
Mr. Mizikar is the consummate professional - well respected amongst his team and the Board and sets the tone for driving high standards within our Town government.

He provides information and education on issues as appropriate and effectively implements the Board’s policies and procedures. Mr. Mizikar regularly seeks information from state leaders, local town government leaders and the relevant professional associations that may assist the Town in providing services without need to redevelop them.

e. Maurice DePalo
Mr. Mizikar has a strong working relationship with the board. Speaking on my time as Chairperson, I believe the manager and I have a strong working relationship where information flowed freely and collaboration was part of the normal course of business.

Mr. Mizikar is interested in the wellbeing and success of those who work for and with him. His demeanor and obvious respect for those who work with him makes it easy to build strong working relationship and easy to like him as a person. He consistently provides information to the board in an informative way. Mr. Mizikar and the board’s goals and objectives are very much aligned and he incorporates those into his daily administration of the town government.

He will frequently reach out to others to collaborate on issues. Team and inclusion are a big part of his management style. He works extremely well and is effective in accomplishing goals through working with others. He has worked hard to break down the “silos” to build constructive working relationships throughout the organization.
X. Factor 10 – Staff Development & Training

a. Beth Casavant
It is a challenge to allocate sufficient resources for staff development and training within our tight budget. Kevin views the staff as an asset to the organization and invests a great deal of time into developing people’s talents and helping them reach their potential in their current role. Retaining qualified staff is important for the stability of town operations and I am glad that Kevin looks for ways to encourage department heads to be active in their professional associations and offers opportunities for all employees to focus on their well-being. Historically, town employees spend the better part of their career in Shrewsbury. If that trend continues, the effort the Kevin puts into leadership training and professional development will be well worth it.

b. James Kane
Our Town Manager has pushed the board to recognize the need for additional and outside training to benefit the organization and specific managers. Although curtailed, many other steps were accomplished and in place prior to the pandemic and its operational impacts.

c. John Lebeaux
Mr. Mizikar is a strong proponent of staff training. He participates himself, and encourages and provides opportunities for staff.

d. John Samia
Mr. Mizikar undertook professional development for himself and encourages the continued professional education for his team. Mr. Mizikar participated in a one-on-one Leadership Development and Communication Development. His direct reports also have been encouraged to continue with their professional development by participating in on-going education programs and certifications. Each of Mmes. Las (Leadership and MCPPO certification), Clemmey (Suffolk – local government certification) and Lucht (Supervisory Leadership) and Messrs. Snowden (MCPPO certification), Howland (Leadership) and Rowley (Leadership) continued with their respective development during fiscal 2020. In addition, nearly all department heads are active in their state and national professional associations; many in leadership positions in those.

In addition, additional training was given in stress management (sessions during COVID-19), anti-harassment/discrimination and emerging leadership training for DPW Foremen, Supervisory Leadership Development Program through MMA and DPW Administrative Assistants, Customer Service Essentials.

e. Maurice DePalo
Mr. Mizikar strongly believes in staff development and encouraging people to build upon their skills to help them reach their goals. He has had numerous trainings of various types for the management team. The amount of professional training throughout the organization has been impressive. By the amount educational opportunities that staff has been able to compete, it is obvious that the educational opportunities are much appreciated. Mr. Mizikar believes that by setting goals and empowering employees (with support) to make decisions to accomplish their goals, along with regular performance reviews are they key to success of the employee.
XI.  **Factor 11 – Personnel Practices**

   a. **Beth Casavant**  
   Thanks to COVID, Mr. Mizikar’s labor relation skills were put to the test. Kevin is fair but firm, and that likely contributes to the success has in negotiations. Improvements made to the class and compensation plan will put us on par with other communities and help to retain our valued employees. Since arriving in Shrewsbury, Kevin has hired more department heads than Mr. Morgado did in his entire career. This has been a time of great transition for Shrewsbury and Mr. Mizikar took the opportunity to make changes and implement new practices. Much of the work that Kevin does in this area is not visible to the Board or to the public, but it is critical to the overall way our municipal departments function and the service that is provided to residents.

   b. **James Kane**  
   Our TM has sought to systematically enhance the “HR Function” in his time and has done so by centralizing the processes and stressing outside training.

   c. **John Lebeaux**  
   Mr. Mizikar pays a great deal of appropriate attention to the Town’s HR program.

   d. **John Samia**  
   Mr. Mizikar and his team have established a rigorous, collaborative and successful hiring process. As a result, Shrewsbury is a highly sought after community to work and attracts professionals from throughout the Commonwealth. Over the past 12 months, numerous department heads have changed including at the council on aging, water/sewer superintendent, the library, police department and SELCO. Most of the positions have been filled in-house, which shows the bench strength in many Town departments.

   In addition, Mr. Mizikar made improvements to the classification and compensation including implementing an entirely new market competitive classification system and compensation plan and moving to a performance-based rather than longevity-based compensation-based philosophy.

   He maintains an open line of internal communication with department heads and employee groups. This open and respectful dialogue resulting in employee group contractual concessions from 5 of 6 unions for fiscal 2021 that will help the Town to deal with the crippling financial impact of COVID-19 and to preserve services.

   In addition, Mr. Mizikar and his team quickly implemented policies to address issues arising from COVID-19, including the Remote Work Policy, Families First Coronavirus Response Act, Daily Employee Illness Tracking and Reopening Training and Certification.

   e. **Maurice DePalo**  
   Mr. Mizikar has invested in developing a formal HR function. He has hired an HR administrator who has been effective in the recruitment process, among other topics. Mr. Mizikar is working to build the HR area over time to a level appropriate for an organization of the town’s size. One example of change was to change to Performance based compensation as opposed to longevity-based compensation. In addition, he created, with input from all of the stakeholders, a new management and organizational structure for the Water and Sewer Department and similarly created the Department of Public Works from the Engineering, Public Buildings, and Parks and...
Cemetery Departments. He has developed good relationships with the unions. Through a tremendous amount of effort and cooperation from the stakeholders, Mr. Mizikar has implemented much needed organization changes to better meet the challenges of the 21st century.

XII. Summary Evaluation

a. Beth Casavant
In summary, Shrewsbury is so fortunate to have Mr. Mizikar as our Town Manager. In the coming year, I would like to provide him with more support in the Manager’s Office so that Kevin can resume his focus on more high level planning work rather than day-to-day operations. I would like to work with Kevin to further increase communication with residents and to develop the Diversity, Discrimination and Racism Task Force. I think Mr. Mizikar and I both want to increase citizen engagement and understand if the work that we are doing aligns with the residents think we should be doing. At the same time, I want Kevin to make sure he takes time away from his desk, especially with the added demands for COVID, to recharge. Working from home means you are basically always at work, and maintaining a work/life balance is especially important now.

Additionally, we find ourselves facing a serious budget cycle as we look beyond FY21. I am hearing echoes of 2013 when we realized that the time had come to ask the voters for an override. We are moving ahead with plans for a new police station at a time when the public is questioning the role of police in the community and already seeing an either/or between supporting the police station building project or funding the schools. As we try to open the new Beal, realize full funding of our pension, keep up with the rising costs of health care and provide adequate funding for the DPW to meet the demands of providing service to our growing community, there is much work to be done in determining the right time to ask the voters to override Prop 2.5. There needs to be ample opportunity for the Board to have robust discussions about the path forward both in our regular business meetings and in what I hope will be regular workshop sessions.

When I feel stressed and overwhelmed by the challenges presented to us by COVID and the school budget, I am grateful for Kevin’s steady presence. He is always calm, reasonable and consistent in his approach – qualities that are so important in a leader.

b. James Kane
Our TM is performing at an Exceptional level. His commitment to our residents is unquestioned as is his commitment to his colleagues in town service. He was performing highly prior to the pandemic and only further proved himself throughout it. Although our approaches are not the same on many aspects of the TM, its roles and approach, I admire the path he has chosen and all that he has further built upon and achieved in his few short years. His performance is exceptional – end of sentence, period!

c. John Lebeaux
Mr. Mizikar continues to effectively advance the interests and position of the Town both through his implementation of BOS policies and through initiatives he proposes. The COVID-19 crisis began has put him in an incredibly challenging situation as he is creating the playbook every day. He has very positively responded to that challenge; his crisis management and his recommendations to the BOS have constantly advanced the Town toward most the favorable outcomes achievable.
**d. John Samia**

Mr. Mizikar continues to serve as a great leader for Shrewsbury in his capacity as Town Manager. Driven by excellence and community focused, he leads the Town and strives to make it a world-class municipal operation and community that will enable all residents to thrive. He is forward thinking, fiscally responsible and always focused on the best interests of our community and his staff.

Mr. Mizikar is a steadfast advocate for developing a long-term plan to ensure the long-term vibrancy of the Town, and developing a long-term plan should be a primary goal for Mr. Mizikar in fiscal 2021.

Mr. Mizikar’s work on financial matters in fiscal 2020 and with the fiscal 2021 budget has been exemplary. As a direct result of Mr. Mizikar’s efforts, Standard & Poor’s gave Shrewsbury a AAA bond credit rating, a 2-level improvement to Shrewsbury’s previous credit rating. This rating improvement will result in millions of savings to the Shrewsbury taxpayer for the Beal Project.

Immediately recognizing the potentially draconian effects of the COVID-19 global outbreak, Mr. Mizikar proactively modeled the potential financial impact of COVID-19 based on the Town’s previous experience during the dot.com bust and great recession and developed a revised fiscal 2021 projection based on a well thought through set of assumptions. He has led by a sense of calm, yet forcefulness that has enabled the Town to continue to operate as efficiently as possible during this time.

In summary, Mr. Mizikar is the consummate professional - well respected amongst his team and the Board and sets the tone for driving high standards within our Town government. We are fortunate to have Mr. Mizikar leading our Town.

**e. Maurice DePalo**

Mr. Mizikar has clearly demonstrated strength in the financial/budgeting area planning and orchestrating organizational change. Key to the success in these areas is inclusion of key players and stakeholders throughout the processes. His ability to listen, consider other points of view, and work collaboratively are among his greatest strengths. For all of the other skills one can possess, if one cannot do these three things successfully, the potential level of success is minimized.

I offer a few areas of constructive suggestions in which to grow. Communication to the public is an area Mr. Mizikar can build upon. I also would encourage him to continue to invest in his employees so that they can succeed and can reach the goals that they may aspire to attain. I also encourage Mr. Mizikar to build upon his work in multiyear budget forecasting.

Character shapes the success of any leader. Mr. Mizikar’s humble demeanor, willingness to give credit to others and appreciate the value of other individuals are what enables his success.

In closing, I do believe Mr. Mizikar has done an exceptional job and that his managing and leading out town government through this difficult time has been exemplary.
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This is to acknowledge the fact that the Board of Selectmen in accordance with the procedures conducted the performance review and that the Town Manager has received the overview document with the compilation of scores.

Approved by the Board of Selectmen on this day July 21, 2020.

Beth Casavant

Maurice DePalo

John Lebeaux

James F. Kane

John Samia
MEMORANDUM

TO:       Board of Selectmen
FROM:     Jeffrey Howland, PE – Director of Public Works
SUBJECT:  Caroline Avenue road closure
DATE:     July 20, 2020

Due to the existing condition of Caroline Ave., at approximately the intersection with Howard Street as a result of a water main break on July 17th, I am requesting that Caroline Ave. be closed to thru traffic starting July 20th and be reopened upon adequate repair of the pavement.

On July 17th, a water main break just east of the Howard Street intersection resulted in significant undermining of the Caroline Ave. pavement for approximately 130 feet westerly towards Harrington Ave. There was significant sediment lost from under the pavement that washed down to Harrington Ave. and Willard Avenue. A sink hole had formed in the middle of the road west of the water main break that the Highway Division platted last Friday morning.

I visited the site Friday afternoon and met with the Highway Division to review the integrity of the road and that time there was not an immediate concern of the pavement, but area was coned off to keep vehicles off it. We also put signs up on both sides (Road Work Ahead) of the damaged area to warn traffic. We were however, concerned about the high temperatures over this past week-end softening the pavement causing it settle.

We met again this morning with the Highway Division and Water Division to observe the pavement integrity and to discuss a solution. The pavement had settled in various locations west from the original water main break trench upwards of 9” – 12”. We therefore prepared for closing of the road to thru traffic, which we did on July 20th. We installed Road Closed – Local Traffic Only signs. We are concerned with the unknown under the pavement.

We have posted on the social media outlets (web site, Facebook, etc.). We are meeting with Contractor(s) to solicit an emergency proposal to complete the repair. I will have a better timeline for the repair once we meet with Contractors starting on July 21st.
Road Closure of Caroline Avenue as a result of damage caused by a water main break.