



## BOARD OF COMMISSIONERS

December 8, 2020 at 6:30 pm

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<u>Page</u>	<u>AGENDA</u>
	6:30 <sup>3</sup> Adjustments to the Agenda Public Comments
2	6:35 Dr. Mark Levine, Commissioner, Vermont Department of Health Update on pandemic response and Slow The Spread municipal outreach in Central VT.
3	7:05 Vermont Mask Survey, <i>Amy Hornblas</i> (enclosed) Presentation and discussion for awareness.
27	7:20 Committee Rules of Procedure Updates (enclosed) <sup>4</sup> a) Clean Water Advisory Committee b) Municipal Plan Review Committee c) Transportation Advisory Committee
37	7:30 Bylaw Work Group, <i>Laura Hill-Eubanks</i> (enclosed) <sup>4</sup> Appoint 1-2 Board members to the work group.
39	7:45 Meeting Minutes – November 10, 2020 (enclosed) <sup>4</sup>
43	7:50 Reports (enclosed) Update/questions on Staff and Committee Reports
	8:00 Adjournment

**Next Meeting: January 12, 2021**

<sup>1</sup> Persons with disabilities who require assistance or special arrangements to participate in programs or activities are encouraged to contact Nancy Chartrand at 802-229-0389 or [chartrand@cvregion.com](mailto:chartrand@cvregion.com) at least 3 business days prior to the meeting for which services are requested.

<sup>2</sup> Dial-in numbers are toll numbers. Fees may be charged dependent on your phone service.

<sup>3</sup> Times are approximate unless otherwise advertised.



## Biography

### **Mark Levine, MD • Vermont Commissioner of Health**

Dr. Mark Levine was appointed commissioner of health by Governor Phil Scott and began service on March 6, 2017.

Prior to his appointment, Dr. Levine was a professor of medicine at the University of Vermont, associate dean for graduate medical education, and designated institutional official at the College of Medicine and UVM Medical Center. He also served as vice chair for education in the Department of Medicine.

Dr. Levine received his B.A. in biology from the University of Connecticut and M.D. from the University of Rochester. He completed his internal medicine residency and chief resident year at the University of Vermont, and a fellowship in general internal medicine at the University of North Carolina. Dr. Levine's general internal medicine practice focused on health promotion and disease prevention, preventative health screening and clinical nutrition, chronic disease management, and solving complex diagnostic dilemmas.

With this experience, Dr. Levine understands the challenges our health care system holds for both patients and physicians. This informs his interest in improving public health through policies that foster a culture of health.

Dr. Levine has served on the American College of Physicians Board of Regents, and as governor of its Vermont chapter; as vice president and president-elect of the Vermont Medical Society; and was a longstanding member of the Vermont Department of Health's Primary Care-Public Health Integration Workgroup. He successfully directed large NIH and HRSA educational grants related to nutrition-preventive medicine competencies for general physicians.

**Vermont Mask Survey**

**Fall Report**

**October, 2020**

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### SUMMARY

*The Vermont Mask Survey was created to gather information about the negative health effects Vermonters are experiencing as a result of wearing masks.*

The negative health effects of wearing masks by health care workers has been the subject of many research studies. (Examples are available for each health effect in the *Discussion* section.) However, research on the effects of mandating masks among the general public has only just begun. This survey is an initial contribution to these efforts. Being a small sample, this is not a statistical analysis, and more work needs to be done if the magnitude of the problem is to be fully understood.

Data gathered from this survey demonstrates that a number of Vermonters across the state are suffering multiple health difficulties as a result of wearing masks. The survey discovered that among respondents who experience difficulties **every time** they wear a mask: most experience multiple difficulties every time; pre-existing conditions are worsening; and several are not accessing essential services because they cannot wear a mask.

Also, 66% of respondents who experience difficulties **every time** are required to wear a mask at work, and most of them reported working an average of 4 - 5 days per week and between 5 - 8+ hours each day.

While the true extent of the health dangers Vermonters are facing by wearing masks is unknown, these survey results suggest that caution around their use is warranted, and more research needs to be done to assess their safety.

### INTRODUCTION

Universal mask use in community settings for disease prevention is a new practice, and there is little evidence to use as guidance related to its potential health risks (Alberta, 2020, p. 2). In the meantime, employees, customers, patients, students, and the general public have been encouraged by state mandates and media messages to wear them in most community settings in Vermont.

If masks are recommended to the general public, The World Health Organization report suggests that decision-makers should continue collecting scientific evidence and “*evaluate the impact (positive, neutral or negative) of using masks in the general population (including behavioral and social sciences).*” (WHO, 2020, p. 8)

The purpose of this study is to begin compiling evidence in order to better evaluate the potential health hazards Vermonters are risking as a result of universal mask recommendations.

## METHODS

The survey results were gathered from July through the first week of October, 2020. The survey was advertised using posters (@ 50 total), which were hung up on bulletin boards at locations in 10 Vermont counties during the three months of the survey. Posters directed participants to a website for a downloadable copy of the survey ([vtmasksurvey.com](http://vtmasksurvey.com)). Completed surveys were mailed in or emailed by the participants. Social media and online surveying was avoided to preserve confidentiality and respondent authenticity.

The 7 health difficulties asked about in the survey were based on the “likely disadvantages” most commonly cited in the research (WHO, 2020, p. 8):

1. Headaches
2. Difficulty Breathing
3. Skin Irritation
4. Difficulty Communicating Clearly
5. Physical Discomfort
6. Mental/Emotional Discomfort
7. Difficulty cleaning your hands every time you touch your mask

Participants were asked to report how often they experience each of the difficulties when wearing a mask: *Every Time*, *½ the Time*, *Occasionally*, or *Never*.

Other information requested on the survey included the date, county of residence, whether the respondent was required to wear a mask at work, the average number of days a week, average number of hours at a time, and additional comments. Participants could leave any of the answers blank, if they chose.

Negative Impacts of Wearing Masks for Virus Prevention  
by Employees and the General Public

**Survey Questions**  
\* All Questions are Optional \*

1. Today's Date: \_\_\_\_/\_\_\_\_/2020

2. County or Town of Residence: \_\_\_\_\_  
(This will help track where the survey has reached)

3. Are you required to wear a mask at work? Yes \_\_\_ No \_\_\_ N/A \_\_\_

4. Average # of Days a Week Wearing a Mask:  
\_\_\_ 1 Day \_\_\_ 2 Days \_\_\_ 3 - 4 Days \_\_\_ 4 - 5 Days \_\_\_ 6 - 7 Days

5. Average # of Hours Wearing a Mask Each Day:  
\_\_\_ 1 hour or less \_\_\_ 2 - 4 hours \_\_\_ 5 - 7 hours \_\_\_ 8 hours \_\_\_ 8 + hours

6. On average, how often do you experience the following when wearing a mask:

	Every Time	1/2 of the Time	Occasionally	Never
1. Head-aches				
2. Difficulty Breathing				
3. Skin Irritation				
4. Difficulty Communicating Clearly				
5. Physical Discomfort				
6. Mental/Emotional Discomfort				
7. Difficulty Cleaning Your Hands every time you touch your mask				

7. Additional Comments and Explanations Welcome: (Use additional paper if needed. Please do not include business names or other specifics to keep this survey confidential.)

8. Please initial or sign an "X" to signify that your answers are genuine and represent one Vermont citizen: \_\_\_\_\_

For more information: [vtmasksurvey.com](http://vtmasksurvey.com)  
Send Responses to: Mask Survey, P.O. Box 55, Marshfield, VT 05658 or [vtmasksurvey@mail.com](mailto:vtmasksurvey@mail.com)  
Thank you for your participation!

62 individual survey responses were received. 21 reported experiencing difficulties ***every time*** they wear a mask, 31 ***occasionally***, and 10 ***never***. While a small sample, research suggests that small samples are not necessarily less accurate (Vissar 1996, Saldivar 2012 p. 5 - 6). Also, most direct-delivery surveys can expect a response rate of about 33% (Lindemann, 2019). This survey relied upon a poster campaign, and purposely avoided social media to ensure more local authenticity. Therefore, a response rate of around 1 response per poster was in line with the expectations. The survey will continue through the winter, and there will be a larger sample to report on in the spring.

There were three distinct sets of survey results, each reporting different levels of difficulties. The results are described below:

## **RESULTS**

### **First Set: Experience Difficulties “Every Time”**

The first set was made up of surveys from respondents who reported experiencing difficulties ***every time*** they wear a mask. The arrival dates of the first set were spread throughout the three months of the survey, and were received both online and through the mail. Respondents in this set were from Rutland, Caledonia, Lamoille, and Washington counties.

All of the 21 respondents in this first set reported having difficulty breathing ***every time*** they wear a mask. Three of them reported experiencing all of the 7 difficulties ***every time***. The rest experienced some combination of 3 or more difficulties ***every time***.

#### **Number of Difficulties Experienced *Every Time*:**

<b><i># of Difficulties Experienced “Every Time”</i></b>	<b><i># of Respondents</i></b>
All 7 Difficulties	3
6 Difficulties	1
5 Difficulties	7
4 Difficulties	6
3 Difficulties	4
2 or less	0
<b>TOTAL:</b>	21

## Vermont Mask Survey Fall Report

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The most common problem was difficulty breathing (all 21 respondents), with physical and emotional discomfort the second most common. A third of respondents reported experiencing skin difficulties *every time*, yet that complaint also had the highest number of *never* responses.

**Number of Responses Per Difficulty:**

<u>Type of Difficulty</u>	<b>Every Time</b>	<b>½ of the Time</b>	<b>Occasionally</b>	<b>Never</b>
1. Headaches	8	2	7	4
2. Difficulty Breathing	21			
3. Skin Irritation	7	1	4	8
4. Difficulty Communicating Clearly	16	2	3	
5. Physical Discomfort	17		3	
6. Mental/Emotional Discomfort	17	2	1	
7. Difficulty Cleaning Your Hands every time you touch your mask	14	4	1	1
<b>TOTAL Responses:</b>	100	11	19	13

Most respondents of this set wear a mask an average of 4 - 5 days per week. The two respondents who answered N/A explained in the comment section that they avoid going places where they are required, including the use of public transportation and other essential services.

**Average # of Days a Week Wearing a Mask:**

<u># of Days</u>	<u># of Respondents</u>
N/A (Avoid places that require them)	2
1 Day	1
2 Days	2
3 – 4 Days	3
4 – 5 Days	10
6 – 7 Days	3
<b>TOTAL:</b>	<b>21</b>

**Average # of Hours Wearing a Mask Each Day:**

<b><u># of Hours</u></b>	<b><u># of Respondents</u></b>
N/A	1
1 or Less Hours	4
2 – 4 Hours	3
5 – 7 Hours	5
8 Hours	3
8 + Hours	5
<b>TOTAL:</b>	21

66% respondents reported that they are required to wear a mask at work. Over half of those wearing them for work wear a mask 5 or more days a week, and between 5 and 8+ hours each day. Those who wear one for work reported the highest number of hours per day in this set.

**Are You Required to wear masks at work?**

<b>YES</b>	<b>14</b>
<b>NO</b>	<b>2</b>
<b>N/A</b>	<b>4</b>

**Of Those Wearing a Mask at Work,  
How Many Days per Week:**

<b><u>Days a Week</u></b>	<b><u># of Respondents</u></b>
2 Days	1
3 – 4 Days	2
4 – 5 Days	9
6 -7 Days	2

**Of Those Wearing a Mask at Work,  
How Many Hours per Day:**

<b><u>Hours Each Day</u></b>	<b><u># of Respondents</u></b>
2 – 4 Hours	2
5 – 7 Hours	4
8 Hours	3
8+ Hours	5

Survey respondents were invited to include additional comments. In the first set, five respondents described the negative impact the masks are having on their pre-existing health conditions, including mental and physical conditions. Two reported feeling light-headed. One stated she is pregnant, and found her blood-oxygen levels drop after wearing a mask.

**Additional Comments by Category:**

<i>Type of Difficulty</i>	<i>Comments</i>
1. Headaches	<i>every day</i>
2. Difficulty Breathing	<i>very light headed, coughing</i>
3. Skin Irritation	<i>rash on ears, breaking out like a teenager</i>
4. Difficulty Communicating Clearly	<i>elderly do not hear well, throat irritation due to having to talk louder</i>
5. Physical Discomfort	<i>hot, sweating, not enough air</i>
6. Mental/Emotional Discomfort	<i>panic attacks, feel sad, no smile to greet customers</i>
7. Difficulty Cleaning Your Hands	<i>no chance due to work conditions</i>
Pre-existing conditions impacted:	<i>asthma, breathing problems, PTSD, heart condition, pregnancy</i>

**Additional Comments: In Their Own Words:**

*“It is very difficult to cut hair with a mask on my client.”*

*“As I have asthma, I feel like I am having a panic attack.”*

*“Get headaches due to sweating non-stop from the mask,  
don’t sweat when not having hot air on my face from my own breath.  
Get no fresh air. Rash on my ears.”*

*“Everyone I talk to has difficult time breathing. Skin irritation.  
I’m 50+ years old and my face broke out like a 16 year old!”*

*“Dizziness, shallow breathing, etc...”*

*“Considering lawsuits.”*

*“I am pregnant. My blood oxygen level decreases to 94% after wearing a mask.”*

*“I have breathing issues and get very light headed due to wearing a mask.”*

*“Behind the shield we can wear [the mask] below the nose,  
out on the floor it has to be up and over the nose!  
It’s hot and not clean air!”*

*“When I have to wear a mask for a longer time (more than 15 minutes),  
like when grocery shopping, working, hair cut, my heart condition that I had been able to control  
the past two years with diet and exercise starts to come back.  
I’m worried this will come back permanently.”*

*“I have PTSD and it causes me great distress wearing a mask. I am upset about the mask mandate because businesses decline my entry and it makes it harder to get my daily needs done. I don’t have a car and the bus requires a mask so I have to walk everywhere.”*

*“I apologize for this poorly filled out survey. I cannot wear a mask so I don’t have access to printing services because the library where I go for printing doesn’t allow entry without a mask.”*

*“Masks make me have coughing fits and then people think I have a cold.”*

*“I limit where I go so I don’t have to wear one often.”*

*“Not leaving the house because of the mask situation. I get very upset when I have to wear the mask. It makes me very sad.”*

*“As an ‘essential worker’ I was instructed by my supervisor to wear a mask... having to speak louder to be heard, which makes my throat raw and sore.”*

## **RESULTS**

### **Second Set:**

#### **“Occasionally” or “Never” Experience Difficulties**

A second set of surveys was received. These respondents reported experiencing difficulties only ***occasionally*** or ***never***. None of the surveys in this set selected ***½ of the time*** or ***every time*** for any difficulty.

There were striking similarities among the survey responses in this set. 30 of the 31 surveys arrived by mail with only 5 different post-mark dates on the envelopes, dated between July 16<sup>th</sup> and August 3<sup>rd</sup>. The envelopes, signatures, and handwriting had distinct similarities, suggesting a common source. (These similarities did not appear in the first set described above.) Due to these factors, and so that those with more severe difficulties can be weighed distinctly, this second set of responses has been tallied separately.

In the second set of surveys *Cleaning Hands* and *Communicating Clearly* were the most common difficulties identified, with *Difficulty Breathing* and *Mental/Emotional Discomfort* far below in second place. They also reported no skin irritation at all.

**SECOND SET- Number of Responses Per Difficulty:**

<i><u>Type of Difficulty</u></i>	<b>Every Time</b>	<b>½ of the Time</b>	<b>Occasionally</b>	<b>Never</b>
1. Headaches			1	29
2. Difficulty Breathing			5	25
3. Skin Irritation				30
4. Difficulty Communicating Clearly			14	11
5. Physical Discomfort			3	26
6. Mental/Emotional Discomfort			5	25
7. Difficulty Cleaning Your Hands every time you touch your mask			23	8

All of the responses in the first set of surveys reported 3 or more difficulties ***every time***. However, 80% of the second set of surveys reported only one or two difficulties ***occasionally***.

**SECOND SET- Number of Difficulties experienced OCCASIONALLY:**

<i><b># of Difficulties Experienced "Occasionally"</b></i>	<i><b># of Respondents</b></i>
4 Difficulties	1
3 Difficulties	5
2 Difficulties	12
1 Difficulty	13

**RESULTS**

**Third Set:**  
**"Never" Experience Difficulties**

A third set of 10 surveys were received with the response ***never*** selected for each difficulty. The target population of this survey are people who do experience difficulties. Therefore the responses from those who do not experience difficulties were omitted from the tallies.



## RESULTS

### Evidence of Stigma

The purpose of this survey is to increase understanding. It is rooted in compassion for the vulnerable people in our community. We need to be able to have open dialogue and investigation, especially if we are going to understand the effects across the community. Unfortunately, there are many people who deny the importance, and even the very existence, of the negative effects of wearing masks. The resulting stigma against those who suffer may be causing health issues of its own.

This survey revealed evidence of the stigma in three ways. For one, many posters advertising the survey were removed from community bulletin boards within days of being hung up. Secondly, there seems to have been an attempt to skew the results, as described above with the second set. Finally, 8 responses were received which contained bullying comments and threats, such as these:

*I had some discomfort wearing my mask the other day. But then, I realized that healthcare professionals wear masks for 10+ hours a day and have no negative side effects. I also realized... that only uneducated dumbasses like yourselves actually think that they know better than expert scientists and professionals. Accordingly, I realized that my discomfort didn't come from wearing my mask. It came from not knowing who you are so that I can punch your retard face.*

*You and your group are fucking uneducated pieces of shit. Get corona and die, you inbred motherfuckers.*

*if you don't wear a mask when you go out then you're a piece of shit period...i hope you feel like shit.*

*Just Wear the Mask! Don't you care about other people?*

Further evidence of this stigma, how it is limiting people's access to services, and testimony about the difficulties experienced by people with pre-existing conditions, can be found on the *No Mask Mandate* petition website (<https://www.change.org/p/governor-phil-scott-no-mask-mandates-in-vermont>). This survey has been signed by nearly 4,000 people who oppose the mandate and feel the decision to wear a mask should be a choice. Several petitioners have left comments on the website confirming the evidence included in this report.

Due to the increased health risks, the Vermont Mask Mandate exempts some people from wearing masks for if they have a medical or developmental condition, or trouble breathing (State of Vermont, 2010). However, there appears to be a stigma that is unnecessarily preventing eligible people from utilizing the exemption, and therefore limiting their safe access to public places.

How much is the stigma itself hurting people psychologically? How many people who should not wear masks are feeling pressured to wear them to avoid confrontations like the ones listed above? How many employers feel compelled to enforce masks on their employees and customers, even when they are aware of the harm they are doing, in order to avoid losing business due to the stigma? Shaming and silencing people does not lead to good health policies. How can we reduce the stigma so that a clear assessment of the issues can be made?

## DISCUSSION

Aside from the obvious quality-of-life issues suffered by the survey respondents, there are also serious long-term health consequences associated with the difficulties they describe. The physiological reasons for the symptoms, and their long-term consequences, are not yet understood.

The research available on the health risks of wearing masks has focused on health care professionals and their use of personal protective equipment (PPE) because, up until recently, that has been their primary use. The discomfort associated with the use of masks in the health care setting is well known, and there has been much research on the subject. However, the underlying causes of the symptoms are still under investigation. Pain and discomfort, whatever the causes, are warning signs that our bodies are experiencing stress, and should not be ignored. In a paper titled *The Physiological Burden of Prolonged PPE Use on Healthcare Workers during Long Shifts*, the authors state: “Dizziness is an important warning sign, as it can be caused by dehydration, hyperventilation (gasping for breath), elevated carbon dioxide [CO<sub>2</sub>] levels in the blood, low blood sugar, and anxiety, among other things.” (Williams, et al, 2020)

There are problems in trying to relate studies of mask use in the medical field to their use in the general public. Health care professionals are not representative of the general population. People who work in the health care field are adults and their jobs require that they are functionally able-bodied. On the other hand, the general public is made up of people of all ages and abilities.

Medical professionals receive training on proper mask hygiene, work in sterile environments, and have ample access to hand-washing facilities. Understanding contamination issues in public settings, such as restaurants and grocery stores, will require new research.

The types of masks approved for use in the medical field are N-95 masks and surgical masks (OSHA, 2020). Further study will be needed to learn the impacts other types of masks (such as cloth masks and gators) and their use by the general public.

People with pre-existing conditions are known to be at greater risk of suffering health difficulties when wearing masks, and are excluded from studies in the medical field. One study explained their reasons for excluding those people from the study: “*Exclusion criteria [for the study] included any medical or physical symptom/condition that could potentially put subjects at risk from prolonged N95 use, including pregnancy, arrhythmias, hypertension, poorly controlled asthma, history of panic attacks or claustrophobia, and/or seizure disorder.*” (Rebmann, et al, 2013, p. 1219)

What follows are samples of available research addressing the 7 difficulties explored in this study, examples of the types of long-term damage they could be causing, and questions to encourage further study:

### 1. Headaches:

Only four survey respondents in the first set reported they **never** have headaches.

- a) Headaches are a well known side effect of wearing N95 masks in health care settings, and evidence shows that their frequency increases over time. (Lim et al 2006, Rebmann et al 2013 p. 1221)

- “Most healthcare workers develop de novo [new] PPE-associated headaches or exacerbation of their pre-existing headache disorders.” (Ong, et al 2020, p. 864)
- b) Headaches have been linked to a lack of oxygen in studies of health care workers. “The etiopathogenesis of N95 face-mask-associated headaches could possibly be related to hypoxemia, hypercapnia, mechanical factors or the stress associated with its use.” (Lim et al 2006, p. 201)
  - c) Headaches have been linked to an increase of CO<sub>2</sub> in the blood as a result of wearing masks for extended periods. Other health complications associated with increased CO<sub>2</sub> include: “Nervous system changes (e.g., increased pain threshold, reduction in cognition – altered judgement, decreased situational awareness, difficulty coordinating sensory or cognitive abilities and motor activity, decreased visual acuity, widespread activation of the sympathetic nervous system that can oppose the direct effects of CO<sub>2</sub> on the heart and blood vessels).” (Williams, et al, 2020)
  - d) The Mayo Clinic website lists possible causes, effects, and complications that can develop as a result of daily headaches: “If you have chronic daily headaches, you’re also more likely to have depression, anxiety, sleep disturbances, and other psychological and physical problems.” (Mayo Clinic, 2019)
  - e) Migraine is a debilitating health condition, and it has been linked with other serious health conditions. “Migraine has been perpetually linked to the onset of other conditions (known as comorbidities), which may or may not be a direct manifestation of the migraine process. Some of these can continue into the later stages of life as well.” (Bullock, 2019)

## 2. Difficulty Breathing:

All of the respondents in the first set reported experiencing difficulty breathing **every time**.

- a) Difficulty breathing is a common complaint in studies of health care workers (Alberta, 2020).
- b) Even though they have been designed for optimal airflow and comfort, N-95’s restrict airflow by 37% (Lee & Wang, 2011).
- c) Due to the breathing difficulties caused by wearing masks, the CDC’s website titled *Considerations for Wearing a Mask* warns: “Cloth face coverings should NOT be placed on children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.” (CDC, 2020)
- d) The Occupational Safety and Health Administration (OSHA) advises that cloth face coverings: “May be used by almost any worker, although those who have trouble breathing or are otherwise unable to put on or remove a mask without assistance should not wear one.” (OSHA, 2020)
- e) Recent research has found evidence of foreign particles and fibers in some of the masks currently in use, and evidence that wearers may be inhaling these particles into their lungs (Borovoy, 2020).
- f) A pilot study on the effects of long-duration wearing of masks found that: “Wearing N95 respirator and surgical facemask would increase the breathing resistance due to the presence of extra layer through the breathing path. An increase of mean resistance during 1.5 hours post mask-wearing period was identified in both sessions, indicating potential change of the upper airway conditions.” (Zhu, et al, 2014, p. 99)
- g) A study on the physiological impacts of N-95’s, concluded: “In healthy healthcare workers, FFR [N95 masks] did not impose any important physiological burden during 1 hour of use, at

realistic clinical work rates, but the FFR dead-space carbon dioxide and oxygen levels were significantly above and below, respectively, the ambient workplace standards, and elevated PCO<sub>2</sub> is a possibility.” (Roberge, et al, 2010)

- h) Research about the causes of difficulty breathing is conflicted. A study of nurses in 2013 found that: “Although physiologic measures of heart rate, O<sub>2</sub>, and CO<sub>2</sub> did not reflect a difficulty with gas exchange, nurses reported feeling more short of breath the longer they wore respiratory protection.” (Rebmann, et al, 2013, p. 1221)
- i) Concern that surgeons may be experiencing induced deoxygenation when wearing surgical masks during surgery is a concern among researchers. (Beder, et al, 2008) For this and other reasons, masks with low air-flow resistance which allow surgeons to “breathe freely,” are recommended in a 2019 study titled *Understanding the factors involved in determining the bioburdens of surgical masks*. (Liu, et al, 2019)
- j) Restricted breathing has been linked to permanent damage to the body. For example, restricted breathing experienced by those with conditions such as COPD and asthma has been linked to structural damage in the lungs and changes in immune reactions (Vassilakopoulos, et al, 2004)
- k) As cited in the sources referenced above, people with breathing difficulties are at a greater risk of difficulty and are advised not to wear masks. In Vermont, 11% of adults and 10% of children have asthma (Vt. Dept. of Health, 2012) and about 5% of Vermonters are living with COPD (American Lung Association, 2013, p. 15).
- l) If wearing an N-95 mask has been shown to decrease the oxygen levels of pregnant health care workers, should there be warnings and advice for use of masks by pregnant women in the general population? (Tong, 2015)

### 3. Skin Irritation:

About a third of respondents in the first set reported **never**, and another third reported **always** experiencing skin irritation.

- a) According to research, adverse skin problems are common (Alberta, 2020) and will occur with long-term PPE use (Hu, et al, 2020).
- b) A recent study of the effects of masks on the skin while used by the general public showed that certain populations are at risk for irritation, particularly the elderly and others with dry skin. (Szepietowski, et al, 2020). It also found that wearing masks causes itchiness in about 20% of wearers, leading to scratching, which “would markedly affect the effectiveness of face masks.”
- c) An article from Johns-Hopkins Medicine titled *Coronavirus: Tips to Avoid “Maskne” Skin Irritation* describes this common problem, who is most vulnerable, and includes suggestions such as not wearing masks treated with formaldehyde and other allergens, and when to seek medical treatment. (Chien, 2020)
- d) Besides formaldehyde, other allergens have been found in surgical masks that can cause irritation on the skin and ears (Badri, 2017).
- e) The Mayo Clinic warns prolonged skin irritation can cause infections and scarring, loss of sleep, and depression. They suggest the irritant should be avoided, and that treatment should be sought if irritation persists (Mayo, 2020).
- f) As mentioned in the studies above, people with pre-existing skin conditions are more likely to suffer when wearing a mask. About 1 in 4 Americans are impacted by skin disease (AADA 2020).

#### 4. Difficulty Communicating Clearly

All of the respondents in the first set reported some level of difficulty with communication.

- a) Communication difficulties are a known hazard of using PPE, and is a common question in research studies (Rebmann, 2013).
- b) In a study titled *The negative impact of wearing personal protective equipment on communication during coronavirus disease 2019*, communication was found to be negatively effected, resulting in miscommunication and other issues. “Where attempts to deliberately raise voice volume or shout through PPE were simulated, understanding significantly improved as expected. The raising of voice for prolonged periods may lead to issues with voice strain and abuse, in addition to frustration or miscommunication.” (Hampton, et al, 2020, p. 4)
- c) The recent universal use of face masks are proving to be devastating to those with hearing loss, and is causing increased isolation and other problems (Chodosh et al 2020, Tagupa 2020). For example, people with hearing loss are experiencing difficulties communicating with their medical care providers, leading to health concerns (Goldin, 2020).
- d) How are people with other conditions which impact communication, such as developmental disabilities, being effected?
- e) Learning to interpret other’s non-verbal communication (especially facial expressions), and communicate with others is an important developmental skill children are acquiring (Halberstadt, et al, 2013). What are the long-term effects going to be from denying children this opportunity at key stages of their development?

#### 5. Physical Discomfort

Respondents reported feeling dizzy, hot, pain behind their ears, and throat pain.

- a) Masks have been shown to cause increases in heart rate, overheating, itchiness, general fatigue and feeling unfit, and other sensations in health care workers (Li, et al, 2005).
- b) Among surgeons working in air-conditioned operating rooms “...it is known that heat and moisture trapping occur beneath surgical masks...” (Beder, et al, 2008, p. 122) Should there be limits on requiring their use in occupational settings where workers already experience heat strain, such as commercial kitchens?
- c) Chronic pain (persistent or recurrent pain that lasting longer than 3 months) (Treede et al 2015) has been shown to cause negative social and biological impacts (Silva & Rieger, 2008), and can even impact the sufferer’s family (Dueñas, et al, 2016). Does the chronic pain experienced when wearing masks have the potential to cause the same social and biological problems?

#### 6. Mental/Emotional Discomfort

Nearly all the respondents in the first set reported mental and emotional discomfort **every time**.

- a) Studies of medical personnel wearing masks have found a number of common complaints that could contribute to mental and emotional discomfort: “Subjective symptoms related to wearing an N95 included nausea, headache, light headedness, visual difficulties, shortness of breath, palpitations, confusion, and difficulty communicating.” (Rebmann, et al, 2013)
- b) When we are under stress, particularly due to remembering a past trauma, our heart beat and breathing rate increases, and our bodies use extra oxygen (Kolk, 2014, p. 42 & 270). How does wearing a mask impede our body’s ability to meet these extra demands?

- c) There are several members of the community who are likely to feel anxiety when their face is covered and breathing restricted. For example, between 3% and 10% of women in our country have experienced strangulation, about 1% in the past year alone (Sorenson, et al, 2014).
- d) If parity for mental health issues is a value we are working towards in Vermont (8 V.S.A. § 4089b), how do we weigh the fact that a significant portion of the population is likely to experience disabling effects (such as anxiety attacks) when wearing masks?
- e) We know that chronic stress can have damaging effects on the immune system (Silva & Rieger, 2008). How does the chronic stress caused by masks affect the body's ability to stay healthy and fight disease?
- f) If masks have been shown to impact doctor/patient relations, leading to a sense of less empathy and connection (Wong, et al, 2013), what does bringing this experience into the community do to our other relationships?
- g) Previous research on aggression shows that wearing masks decreases empathy and increases people's willingness to use violence. There is concern that their universal use is currently causing an increase of aggression (Grossman, 2020).
- h) To many, seeing masks in the community are a constant reminder to be afraid (Neilson, 2020). How does this response affect the incidence of anxiety problems and their related health issues?

### 7. Difficulty cleaning your hands every time you touch your mask

Difficulty cleaning hands was, far and above, the most common complaint in the second set of surveys.

*"Be aware that masks can become contaminated on the outside. Avoid moving or adjusting the mask. Assume the mask has been contaminated and take proper precautions.*

*Critically, if you wear a mask, you must wash your hands before putting it on, as well as before and after taking it off.*

*Cloth masks should be worn only a short time, as there is some evidence that they can trap virus particles after they become damp, which may put the wearer at greater risk.*

*For those choosing to wear non-medical masks, it may be prudent to carry a bag with several clean masks in it, as well as a plastic bag that can be used to safely store used masks until they can be washed at home.*

*It is critical that used masks be carefully handled to avoid spreading infection to others."*

- Alberta Health Services, COVID-19 Scientific Advisory Group (2020)

- a) Difficulties washing hands was experienced by more survey respondents than any other issue, suggesting that proper hand hygiene is rarely able to happen in community settings.
- b) Improper mask hygiene poses a serious risk, and this message has been made clear in public education efforts. (Alberta 2020, CDC # 1 & #3 2020, Klompas 2020, Desai & Mehrotra 2020, Nebraska Medicine 2020, WHO 2020 p. 6). For example, the CDC recommendations include: "Don't put the mask around your neck or up on your forehead. Don't touch the mask, and, if you do, wash your hands or use hand sanitizer to disinfect." (CDC #1, 2020)
- c) The research supporting the need for proper mask hygiene comes from mask use in the medical field. For example, mask use has been shown to increase the rate of influenza like illness (ILI) among health care workers due to the moisture retention, reuse of cloth masks, and poor filtration (MacIntyre, et al, 2015). Surgical masks worn during surgical procedures are known sources of contamination, and there is concern that surgeons are not always following



the proper procedures, including re-use of masks: “People often tend to skip steps in daily routines, even in important fields such as surgery.” (Liu, et al, 2019).

- d) Education is necessary if masks are to be used properly. “Educate patients, visitors, and HCP about the importance of performing hand hygiene immediately before and after any contact with their facemask or cloth face covering.” (CDC #2, 2020)
- e) How is mask hygiene practiced currently, in the general public? A recent survey of 2,315 students in Poland found “some practices among young people could be regarded as inappropriate. This can lead to decreased efficacy of face protection and eventual spread of viral infection. Therefore, we believe that our results might be of value in construction of general public education campaigns on the proper use of face masks...” (Matusiak, et al, 2020, p. 3)
- f) Vermont public health officials are not role modeling proper mask hygiene, or tracking use of masks to determine the level of infection associated with them (CCTV, 2020, 58 - 104 minutes).
- g) Improper hand hygiene can spread many dangerous diseases in food service settings (ServeSafe, 2008). How is the current use of masks by staff and customers in restaurants contributing to hand contamination and the incidence of food-borne illnesses?

### CONCLUSION

Mask wearing in community settings is a new health practice, and it is being universally implemented in Vermont. Fully understanding its effects is crucial to assessing its effectiveness and safety. This survey provides evidence that the use of masks in Vermont is causing a number of citizens to suffer. The potential of long-term mental and physical health consequences is a valid concern, demonstrated clearly in the research.

This report raises a number of questions, such as:

- What percentage of the population is suffering to the same degree as the survey respondents?
- Aside from the quality of life issues, are the health difficulties they are experiencing also causing long-term health impacts?
- Are some segments of the population suffering disproportionately, such as children, the elderly, or the working-class?
- How many people are unable to leave their jobs due to financial reasons, even though wearing a mask for work is causing severe health difficulties?
- How are people with pre-existing conditions being affected?
- Should warnings be given about the health risks, especially for vulnerable populations, such as those who are pregnant or have pre-existing conditions?
- How many people are wearing masks, even though their conditions (such as difficulty breathing) exempt them from doing so?
- If SARS-CoV-2 is more likely to cause serious harm to a person who has pre-existing health conditions, then does worsening these conditions actually increase their risk of infection?
- How can we address the stigma against those who cannot wear masks?
- How many incidents of communicable diseases are being caused by improper mask hygiene?
- How is immune system function impacted by the physical and psychological stress endured?
- How much do these negative impacts undermine the community’s overall resistance to disease?

May we work together as a Vermont community to address these questions.

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***About the Author:*** Amy Hornblas is a licensed health educator in Vermont. She received a BA in Community Health in 1994. She has experience educating people of all ages and abilities. Areas of expertise include: disease prevention, nutrition, addiction, effects of trauma, violence-prevention, media literacy, and the development and use of assessment tools.

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## MEMO

Date: December 2, 2020  
To: Board of Commissioners  
From: Bonnie Waninger, Executive Director  
Re: Recommendation to CVRPC Board for Rules of Procedure Approval

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**☒ ACTION REQUESTED:** Adopt changes to Rules of Procedure for:

1. Clean Water Advisory Committee
2. Municipal Plan Review Committee
3. Transportation Advisory Committee.

One motion to adopt could be made for all three documents or three motions could be made separately. Information about change to each document are enclosed. The Executive Committee reviewed the ROPs and recommends adoption by the Board.

**Clean Water Advisory Committee (CWAC)**

In 2019-2020, the CVRPC CWAC has had challenges with member attendance and being able to vote due to lack of quorum. The CWAC is requesting to revise its Rules of Procedure to address this by revising the Committee's membership so that watershed organizations are advisory rather than Committee members.

The CWAC ROPs also were updated to reflect CVRPC's revised bylaws and for a correction under Adoption of Organizational Procedures to clarify that CWAC is a special committee of the Board and therefore is subject to the Commission's bylaws.

**Municipal Plan Review Committee (MPRC)**

The MPRC does not have adopted ROPs. It was in the process of developing them when the bylaws were updated. Bylaw information was incorporated, and they are ready for adoption.

**Transportation Advisory Committee (TAC)**

The TAC ROPs were updated to reflect CVRPC's revised bylaws.

As part of its ROP review, the TAC requested that the Commission update the Commission bylaws to remove TAC membership language related to non-municipal members, which the TAC would then incorporate into its Rules of Procedure. The TAC expressed that it wants outside groups to participate, but it would prefer those groups be precluded from having a vote on business. TAC members expressed that having non-municipal TAC members would change the nature of the TAC, increase quorum requirements, and make it difficult to maintain fairness if certain groups are selected and others are not.



## Central Vermont Regional Planning Commission

### **CLEAN WATER ADVISORY COMMITTEE (CWAC)** *RULES OF PROCEDURE*

**PURPOSE:** To oversee the Central Vermont Regional Planning Commission's (CVRPC) water quality planning program in accordance with CVRPC plans, policies, and procedures, to act as a liaison between local communities and the Vermont Agency of Natural Resources (ANR), and to provide local and regional input regarding water quality issues important to the region.

**GENERAL ACTIVITIES:**

1. Oversee programming related to the CVRPC's assistance to ANR with basin planning and surface water management, including but not limited to:
  - a. Development of tactical basin plans.
  - b. Technical assistance and data collection activities, including information from watershed organizations, to inform municipal officials and the State in making water quality investment decisions.
  - c. Coordinating municipal planning and adoption or implementation of municipal development regulations to meet State water quality policies and investment priorities.
  - d. Implementing a project evaluation process to prioritize water quality improvement projects within the region to assure cost effective use of State and federal funds.
  - e. Guidance for project prioritization for submittal of grant applications for water quality improvement or planning projects.
2. Undertake water quality related technical assistance and policy activities and coordinate activities with the Transportation Advisory Committee including but not limited to activities related to implementation of Municipal Roads Stormwater General Permits.
3. Participate in special studies conducted by the CVRPC.
4. Provide input and policy recommendations to the Board of Commissioners regarding pertinent water quality issues, including review of State plans, policies, and legislation.

**ADVISORY ROLE:** The CWAC shall be advisory to the Board of Commissioners. The CWAC will offer advice and input to ANR and other organizations and individuals as appropriate, provided it is compatible with plans, policies, positions or resolutions adopted by the Board of Commissioners. CWAC advice and input may be reviewed, confirmed or reversed by the CVRPC Board of Commissioners at the Board's discretion. New or amended plans, policies, positions or resolutions shall be ratified/approved by the Board of Commissioners.

**MEMBERSHIP:** The Clean Water Advisory Committee shall consist of nine (9) members appointed by the Board of Commissioners as follows:



- 3 CVRPC Commissioners and 1 Alternate
- 5 Representatives of the region's municipalities
- 1 Interested stakeholder

Members serve two year terms.

The CWAC may seek advice from one or more natural resource-based organizations serving the region and/or the Agency of Natural Resources, including but not limited to:

- Vermont Agency of Natural Resources,
- Winooski Natural Resource Conservation District,
- Friends of the Winooski River, and
- Friends of the Mad River.

**OFFICERS/ELECTIONS:** The Clean Water Advisory Committee will elect a Chair and Vice-Chair annually at its first meeting of the fiscal year. The Chair will be responsible for running meetings, setting agendas in conjunction with staff, reviewing and signing correspondence on behalf of the Committee, and representing the Committee at various meetings as needed. The Vice-Chair will provide support to the Chair as needed. If the Chair or Vice-Chair should resign before term expiration, an interim election shall be held within two meetings of the committee or when regular elections are held, whichever is earlier.

**ATTENDANCE AND QUORUMS:** A quorum shall consist of a majority of members (51%). Members are encouraged to attend all regular meetings and special meetings as they arise. Members with three consecutive unexplained absences will be contacted by the Chair to determine if they still wish to serve on the CWAC. The CWAC shall meet as necessary to carry out their stated purpose and as supported by the Commission's budget.

**COMMUNICATION, COORDINATION, AND EXPECTATIONS:**

- Meetings shall be noticed and held in accordance with Vermont Open Meeting Law.
- Draft policies and resolutions shall be forwarded to CWAC members and interested/affected parties for comment before action by the CWAC, or final action/approval by the Board of Commissioners.
- Committee membership brings the expectation of active involvement outside of meeting time. CWAC members are expected to review shared materials in advance of meetings and to become knowledgeable concerning background facts and information regarding issues to be discussed.
- Minutes of all regular and special meetings will be prepared by staff, distributed to CWAC members and interested parties, and made available to the public in accordance with open meeting and public records laws described in 1 V.S.A.
- CWAC members are encouraged to serve as liaisons to their local legislative boards by facilitating communication and coordination on a regular basis.
- CWAC members are encouraged to offer input on all matters before the CWAC, and are encouraged to bring up items of local or regional concern for CWAC consideration.

**CONFLICT OF INTEREST:** Upon joining the Commission or its committees, individuals must review and sign the Commission's most recently adopted Code of Conduct and Conflict of Interest Policy to indicate that they have read, understood, and agree to comply with it.

**ADOPTION OF ORGANIZATIONAL PROCEDURES:** The CWAC may, at any time, vote to amend these procedures, upon 51% vote of the CWAC membership. Proposed amendments will be forwarded to CWAC members, chairs of local legislative boards, and interested parties before consideration at a regular CWAC meeting. Amendments will then be forwarded to the Board of Commissioners for ratification.

The CWAC is a special committee of the Regional Planning Commission, and is therefore subject to the Commission's bylaws. These Rules of Procedure, combined with Robert's Rules of Order, provide procedural and administrative guidance for the CWAC.

Recommended by the Clean Water Advisory Committee: 10/08/20

Recommended by the Executive Committee: 11/02/20

Adopted by the Board of Commissioners: \_\_\_\_/\_\_\_\_/20

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Laura Hill-Eubanks, Chair  
CVRPC Board of Commissioners



## Central Vermont Regional Planning Commission

### MUNICIPAL PLAN REVIEW COMMITTEE (MPRC) *RULES OF PROCEDURE*

**PURPOSE:** The Municipal Plan Review Committee (the Committee) serves in an advisory capacity to the CVRPC Board of Commissioners in the review and approval of member municipalities plans as specified within 24 VSA Chapter 117 §4350(b) and §4352(b) and (c) of Vermont Statute.

**GENERAL ACTIVITIES:**

1. Review municipal plans for conformance to statutory requirements, in accordance with 24 V.S.A. Section 4350(b), and make recommendations for approval to the Board.
2. Review municipal enhanced energy plans for determination of energy compliance, in accordance with 24 V.S.A. Section 4352(b).
3. Review municipal planning processes, in accordance with 24 V.S.A. Section 4350(a), and make recommendations for confirmation to the Board.
4. Review the compatibility of all municipal plans at least every eight years and in accordance with 24 V.S.A. Section 4345a(9) and report its findings to the Board.
5. Provide guidance to municipalities about future plan updates and ways to strengthen planning efforts.

**ADVISORY ROLE:** The Committee shall be advisory to the Board of Commissioners and shall provide a recommendation to the Commissioners regarding a municipality's planning efforts and consistency with state statute. The Committee may offer advice, input, and opinions to municipalities, consistent with plans, policies, positions or resolutions adopted by the Board of Commissioners. The advice, input, and opinions provided by the Committee may be reviewed, confirmed or reversed by the CVRPC Board of Commissioners at the Board's discretion.

**MEMBERSHIP:** The Committee shall consist of five (5) members who shall be elected at the Board's Annual Meeting. At least two (2) members shall be Commissioners and no more than (3) members shall be Alternate Commissioners.

**OFFICERS/ELECTIONS:** The Committee will elect a Chairperson and Vice-Chairperson at the first meeting following the annual appointment by the Board of Commissioners. The Chair will be responsible for running meetings, setting agendas in conjunction with staff, and representing the Committee at various meetings as needed. The Vice-Chair will provide support to the Chair as needed. If the Chair or Vice-Chair should resign before his/her term is expired, an interim election shall be held within two meetings of the committee.

**ATTENDANCE AND QUORUMS:** Members are encouraged to attend all regular meetings and special meetings as they arise. A quorum shall consist of a majority of the voting members.

**COMMUNICATION AND COORDINATION:**

- ◆ Meetings shall be noticed and held in accordance with Vermont Open Meeting Law; Public Hearings for municipal plan review shall also be held in accordance with [§4350\(b\)\(1\)](#).
- ◆ Hearings and meeting will take place in a central location within the region.
- ◆ Draft policies and resolutions shall be forwarded to Committee members and interested/affected parties for comment before a recommendation by the Committee for final action/approval by the Board of Commissioners.
- ◆ Minutes of all regular and special meetings will be prepared by staff, distributed to Committee members and interested parties, and made available to the public in accordance with open meeting and public records law described in 1 VSA.
- ◆ The Committee will report on committee discussions or activities to the Board of Commissioners on a regular basis.
- ◆ Committee members are encouraged to offer input on all matters before the Committee, and are encouraged to bring up items of local or regional concern for Committee consideration.

**CONFLICT OF INTEREST:** In the event any Committee member has a personal or financial interest with any individual, partnership, firm or corporation seeking to contract with the CVRPC, or to provide materials or labor thereto, or has a personal or financial interest in any matter being considered by the Committee, the member shall state on the record the nature of his or her interest. If the member is uncertain whether he/she should participate in the discussion or decision, the Committee shall determine by vote whether the member should participate. The Committee may also make a determination of conflict if the majority of voting Committee members in attendance at the meeting determine a conflict of interest exists. A member of the Committee with an identified conflict of interest shall not deliberate or vote with the Committee but may participate in the open public discussion.

**ADOPTION OF ORGANIZATIONAL PROCEDURES:** The Committee may, at any time, vote to amend these procedures, in accordance with quorum requirements noted above. Proposed amendments will be forwarded to Committee members before consideration at a regular Committee meeting. Amendments will then be forwarded to the Board of Commissioners for ratification.

The Committee is a standing committee of the Regional Planning Commission, and is therefore subject to the Commission's bylaws. As such, these Rules of Procedure, combined with the Central Vermont Regional Planning Commission's bylaws and Robert's Rules of Order, provide procedural and administrative guidance for the Committee.

Recommended by the Municipal Plan Review Committee: 11/02/20

Recommended by the Executive Committee: 11/30/20

Adopted by the Board of Commissioners: \_\_\_\_/\_\_\_\_/20

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Laura Hill-Eubanks, Chair

CVRPC Board of Commissioners



## Central Vermont Regional Planning Commission

### TRANSPORTATION ADVISORY COMMITTEE (TAC)

#### *RULES OF PROCEDURE*

**PURPOSE:** To oversee the Central Vermont Regional Planning Commission's (CVRPC) transportation planning program in accordance with CVRPC plans, policies, and procedures, to act as a liaison between local communities and the Vermont Agency of Transportation (VTrans), and to provide local and regional input regarding transportation issues important to the region.

#### **GENERAL ACTIVITIES:**

1. Oversee the CVRPC transportation planning program in accordance with CVRPC plans, policies and procedures. This includes assisting with the development of CVRPC's annual transportation work program and budget.
2. Develop and update a regional transportation element as part of the Regional Plan.
3. Provide recommendations on funding and prioritization for the Agency of Transportation's Capital Budget and State Transportation Improvement Program.
4. Act as a liaison between local communities and the Vermont Agency of Transportation.
5. Provide local and regional input regarding transportation issues important to the region.

**ADVISORY ROLE:** The TAC shall be advisory to the Board of Commissioners. The TAC will offer advice, input, and opinions to VTrans and other organizations and individuals as appropriate, provided it is compatible with plans, policies, positions or resolutions adopted by the Board of Commissioners. TAC advice, input, and opinions may be reviewed, confirmed or reversed by the CVRPC Board of Commissioners at the Board's discretion. New or amended plans, policies, positions or resolutions shall be ratified/approved by the Board of Commissioners.

**MEMBERSHIP:** The TAC shall consist of municipal representatives and representatives from transportation-related groups. Each of the member municipalities in the Central Vermont Region is eligible to appoint one voting member and one alternate to the Transportation Advisory Committee. Municipal participation is discretionary and determined by appointment by the municipality's legislative body. Upon the approval of 51% of the Transportation Advisory Committee, other transportation-related groups will be invited to appoint one voting member and one alternate to the Transportation Advisory Committee.

Municipal legislative bodies shall certify the appointment of the committee member and alternate in writing to CVRPC. Committee members and alternates begin serving immediately upon certification of appointment unless otherwise specified in the appointment. Terms for committee members and alternates are one year, from July 1 to June 30. Committee members and alternates may be appointed to serve successive terms.

Committee members and alternates who are appointed midterm shall serve out the term ending June 30 and may continue serving for the subsequent term starting July 1 without recertification.

**OFFICERS/ELECTIONS:** The TAC will elect a Chairperson and Vice-Chairperson annually at the TAC's May meeting. The Chair will be responsible for running meetings, setting agendas in conjunction with staff, reviewing and signing correspondence on behalf of the TAC, and representing the TAC at various meetings as needed. The Vice-Chair will provide support to the Chair as needed. If the Chair or Vice-Chair should resign before his/her term is expired, an interim election shall be held within two meetings of the committee or when regular elections are held in May, whichever is earlier.

**ATTENDANCE AND QUORUMS:** A quorum shall consist of a majority of members. Members are encouraged to attend all regular meetings and special meetings as they arise. Members with three consecutive unexplained absences will be contacted by the Chairperson to determine if they still wish to serve on the TAC. The TAC shall meet at least eight (8) times per year or as determined by the Chair to be necessary to carry out the stated purpose.

**COMMUNICATION AND COORDINATION:**

- ◆ Meetings shall be noticed and held in accordance with Vermont Open Meeting Law.
- ◆ Draft policies and resolutions shall be forwarded to TAC members and interested/affected parties for comment before action by the TAC, or final action/approval by the Board of Commissioners.
- ◆ Minutes of all regular and special meetings will be prepared by staff, distributed to TAC members and interested parties, and made available to the public in accordance with open meeting and public records laws described in 1 V.S.A.
- ◆ TAC members are encouraged to serve as liaisons to their local legislative boards by facilitating communication and coordination on a regular basis.
- ◆ TAC members are encouraged to offer input on all matters before the TAC, and are encouraged to bring up items of local or regional concern for TAC consideration.

**CONFLICT OF INTEREST:** Upon joining the Commission or its committees, individuals must review and sign the Commission's most recently adopted Code of Conduct and Conflict of Interest Policy to indicate that they have read, understood, and agree to comply with it.

**ADOPTION OF ORGANIZATIONAL PROCEDURES:** The TAC may, at any time, vote to amend these procedures, upon 51% vote of the TAC membership (at least 12 votes in favor). Proposed amendments will be forwarded to TAC members, chairs of local legislative boards, and interested parties before consideration at a regular TAC meeting. Amendments will then be forwarded to the Board of Commissioners for ratification.

The TAC is a standing committee of the Regional Planning Commission, and is therefore subject to the Commission's bylaws. These Rules of Procedure, combined with Robert's Rules of Order, provide procedural and administrative guidance for the TAC.

Recommended by the Transportation Advisory Committee: 10/27/20

Recommended by the Executive Committee: 11/02/20

Adopted by the Board of Commissioners: \_\_/\_\_/20

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Laura Hill-Eubanks, Chair

CVRPC Board of Commissioners





## MEMO

Date: December 1, 2020  
To: Board of Commissioners  
From: Laura Hill-Eubanks, Chair  
Re: Bylaw Update Work Group

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☒ **Action Requested.** Appoint 1-2 Board members to a bylaw work group.

The Commission adopted a substantial update to its bylaws on December 10, 2019. It is customary reflect back on how updated bylaws are working after they have been in use for a year or more.

The Executive Committee noted questions and suggested changes/clarifications that have arisen (see below). It established a bylaw working group to determine what, if any, changes might be recommended. Steve Lotspeich (Waterbury) and Michael Gray (Woodbury) volunteered to participate in the work group from the Executive Committee. The Committee requests that the Board appoint 1-2 additional Commissioners or Alternates to participate.

### Review Items Mentioned to Date

- Transportation Advisory Committee membership – The TAC requested language related to the addition of non-municipal seats be removed. (Section 403: Standing Committees, g. Transportation Advisory Committee)
- Elections – Do Alternate Commissioners vote in elections? What if the Commissioner doesn't return a ballot? Can ballots be cast electronically? (Section 502: Elections)
- Should Alternates be enabled to participate as Commissioners if a Commissioner recuses themselves from a vote? (Section 302: Appointment and Terms of Commissioners and Alternates)
- Should the bylaws address excused versus unexcused absences? (Sect. 305, Attendance)
- Should Executive Committee duty 2a. Set municipal dues be modified to 2a. Recommend municipal dues rate to the Board of Commissioners for adoption? (Section 403: Standing Committees, b. Executive Committee)

- For Committee members appointed by the Board, should participation have term limits? (currently, there are no term limits except that Nominating Committee members may not serve two consecutive terms)
- Now that the Nominating Committee nominates committee members, the ballot has become unwieldy. Should mail-in ballots:
  - continue to be used for all nominations,
  - be used for Executive Committee and officer elections only, or
  - be replaced by an election process at the May Commission meeting? (Section 502. Elections)
- If CVRPC is designated a Clean Water Service Provider, how will the Basin Water Quality Council be incorporated into CVRPC?

**CENTRAL VERMONT REGIONAL PLANNING COMMISSION**  
**BOARD OF COMMISSIONERS**  
**Draft MINUTES**  
**November 10, 2020**

**Commissioners:**

<input checked="" type="checkbox"/>	Barre City	Janet Shatney	<input checked="" type="checkbox"/>	Moretown	Dara Torre, Secretary/Treasurer
<input type="checkbox"/>		Heather Grandfield, Alt.	<input type="checkbox"/>		Joyce Manchester, Alt
<input type="checkbox"/>	Barre Town	Byron Atwood	<input checked="" type="checkbox"/>	Northfield	Laura Hill-Eubanks, Chair
<input type="checkbox"/>		George Clain, Alt	<input type="checkbox"/>	Orange	Lee Cattaneo
<input type="checkbox"/>	Berlin	Robert Wernecke	<input type="checkbox"/>	Plainfield	Paula Emery
<input type="checkbox"/>		Karla Nuissl, Alt.	<input type="checkbox"/>		Bob Atchinson, Alt.
<input checked="" type="checkbox"/>	Cabot	Amy Hornblas	<input type="checkbox"/>	Roxbury	Gerry D'Amico
<input type="checkbox"/>	Calais	John Brabant	<input checked="" type="checkbox"/>	Waitsfield	Don La Haye
<input type="checkbox"/>		Jan Ohlsson, Alt.	<input type="checkbox"/>		Harrison Snapp, Alt.
<input checked="" type="checkbox"/>	Duxbury	Alan Quackenbush	<input type="checkbox"/>	Warren	
<input checked="" type="checkbox"/>	E. Montpelier	Julie Potter	<input type="checkbox"/>		J. Michael Bridgewater, Alt.
<input type="checkbox"/>		Clarice Cutler, Alt.	<input checked="" type="checkbox"/>	Washington	Peter Carbee
<input type="checkbox"/>	Fayston		<input checked="" type="checkbox"/>	Waterbury	Steve Lotspeich, Vice-Chair
<input type="checkbox"/>	Marshfield	Robin Schunk	<input checked="" type="checkbox"/>	Williamstown	Richard Turner
<input checked="" type="checkbox"/>	Middlesex	Ron Krauth	<input type="checkbox"/>		Jacqueline Higgins, Alt.
<input checked="" type="checkbox"/>	Montpelier	Marcella Dent	<input checked="" type="checkbox"/>	Woodbury	Michael Gray
<input type="checkbox"/>		Mike Miller, Alt.	<input checked="" type="checkbox"/>	Worcester	Bill Arrand

Staff: Bonnie Waninger, Nancy Chartrand, Clare Rock

Guests: Kim McKee and Greg Western, Cross Vermont Trail Association

**Call to Order**

Chair L. Hill-Eubanks called the meeting to order at 6:31 pm and conducted a roll call. Quorum was present.

**Adjustments to the Agenda**

The agenda order was adjusted due to some presenters not being present.

**Public Comments**

None.

**Municipal Dues**

Waninger provided an overview of the reason for dues and how they have been maintained and utilized over the last several years; i.e. matching grants, making up shortfalls, supporting ongoing maintenance and operations. The dues being recommended will take effect July 1, 2021. Krauth noted that on the chart showing dues for all RPCs that Rutland's percentage is quite low and wondered why that was.

Waninger advised all municipalities in that region are charged the same rate despite the size of

1 municipality, and their dues have not been raised for years. Potter commented that when she joined  
2 the Board setting dues was delegated to the Executive Committee. Last fall, the Board requested that  
3 this be a duty of the full Board again. This is now the second year it is being brought before the full  
4 Board for decision. Hornblas questioned Northfield's population growth. Hill-Eubanks advised they  
5 believe it is students. Waninger confirmed she double checked the number before presenting the  
6 information to the Board.

7  
8 *J. Potter moved to adopt the FY22 municipal dues assessment rate of \$1.28 per capita as recommended*  
9 *by the Executive Committee; R. Krauth seconded. Motion carried.*

#### 11 **Meeting Minutes – October 13, 2020**

12 *J. Shatney moved to approve the minutes; D. La Haye seconded. Motion carried.*

#### 14 **Municipal Plan Approval & Confirmation of Planning Process**

15 Hill-Eubanks introduced Bill Arrand, Chair of the Municipal Plan Review Committee (MPRC). Arrand  
16 advised the MPRC met on November 2<sup>nd</sup>. Two CVRPC staff and three members of the public were  
17 present. He asked Shatney if she wanted to present any additional information on behalf of Barre City.  
18 Shatney advised that 2½ years was spent updating the plan which was originally written by a consultant.  
19 She feels very good about the plan and hopes to get things accomplished as a result. Arrand advised  
20 that staff recommended that additional information on remote work opportunities and childcare would  
21 be good to consider in the future. Arrand also confirmed Barre City is not pursuing energy  
22 determination at this time, but has a substantial energy chapter. The MPRC recommended approval.  
23 Additional discussion ensued regarding Barre's Energy Committee and the City's plan to update the  
24 Energy Plan portion in the future to include some finite specific goals for the City. Hill-Eubanks  
25 commented that the maps of the neighborhoods were very helpful.

26  
27 *D. Torre moved to approve the City of Barre, Vermont 2020 City Municipal Plan; R. Turner seconded.*  
28 *Motion carried.*

29  
30 *S. Lotspeich moved to confirm the City of Barre's planning process; R. Krauth seconded. Motion carried.*

31  
32 *B. Arrand moved to authorize the Board Chair to sign the resolution which resolves that the Central*  
33 *Vermont Regional Planning Commission approves the City of Barre, Vermont 2020 City Municipal Plan,*  
34 *adopted September 15, 2020 and consulted with and confirms the planning process of the City of Barre,*  
35 *M. Dent seconded. Motion carried.*

#### 37 **Central Vermont Economic Development Corporation (CVEDC)**

38 Postponed.

#### 40 **Regional Recreation Updates**

41 C. Rock of CVRPC provided a presentation regarding recreational updates in our region and highlighted  
42 some of the planning that has occurred over the last few years which has included:

- 43 • Mad River Valley Transportation Plan which promoted the value to the local economy of active  
44 trail systems and interconnectedness.

- Woodbury Town Forest Recreation Plan to promote forest based recreation and trails system. The plan includes a tool kit to help other communities do similar type projects.
- Cabot Hub and Spoke Trail Network Master Plan and Implementation Program supports creating a town-wide trail network linking village center to a regional trail network.
- Northfield Ridge to River Master Plan identifies opportunities to better connect Northfield's population nodes to each other and recreational areas and also tied in stormwater and place making infrastructure.

She noted CVRPC is looking forward to a partnership with Montpelier Parks Department related to a comprehensive outdoor recreation map and a recreational trails hub. CVRPC will be assisting by facilitating and convening a trails group in the region to identify gaps and connections between some of the local trail groups that would help with a more interconnected system.

This presentation was followed by Kim McKee of the Cross Vermont Trail Association (CVTA) Board. The CVTA is a project to build a multi-use path across the width of Vermont. It enters the Central Vermont region in Marshfield and exits into Chittenden County in Duxbury, with 30 miles of off-road sections currently built. The current Winooski Bridge Project extends the newly constructed Montpelier path an additional 3 miles upstream with a bridge across the Winooski River near the hydro dam. Greg Western of CVTA shared that maps about the bridge project are on their website [www.crossvermont.org](http://www.crossvermont.org). The goal is to connect Montpelier to Wells River Rail Trail (Route 14) which has long been supported by CVRPC. He noted they had most recently developed a trail counting protocol with CVRPC. A template count was conducted a couple of years ago and that data continues to be collected. Their goal is to be plugged into regional planning and fill in physical trail gaps and capability gaps where needed.

Hill-Eubanks asked if they've had to deal with Act 250 permitting and how they found the experience. Western noted they have an Act 250 permit for current Winooski Bridge project and confirmed the process was a lot of work to prepare the application and once the application was complete it was a fairly smooth process to approval, however, it took a year to prepare the application. He also noted it is complicated as to who it encumbers, the landowner versus the trail organization.

There was question regarding easements versus landowner agreements. Western spoke to benefits of each. He advised easements are ultimately better from perspective of permanent public access. The Winooski bridge project is all donated easements with the exception of a section on state land, for which they only have permission to use the land.

## Reports

Waninger shared that Act 166 directs RPCs to inventory municipal public safety resources. Staff will be contacting municipalities to gather data to determine who serves each municipality from a fire, rescue, EMS, and police perspective. This will be ongoing over the next year.

She also noted that there has been ongoing state discussion about diversity, equity, and inclusion. State agencies been given direction, and she expects this will work its way through contracts and grants. More information will be forthcoming to the Board. She also advised RPCs are talking with VLCT about whether it makes sense for a partnership with RPCs to provide trainings to the municipalities. Feedback from municipalities was requested as to whether they saw a role for RPCs and VLCT to play in this type

1 of training.

2  
3 There was a question as to what types of resources may be available currently for municipalities with  
4 regard to equity training. Waninger shared information on training she has attended and advised she  
5 would be happy to share resources she has and to please let her or Nancy know if you would like them.

6  
7 **Adjournment**

8 *D. La Haye moved to adjourn at 7:38 pm; XXX seconded. Motion carried.*

9  
10 Respectfully submitted,

11  
12 Nancy Chartrand, Office Manager

**Central Vermont Regional Planning Commission**

P: 802-229-0389

Staff Report, November 2020

F: 802-223-1977

All CVRPC staff continue to work remotely per the Governor's order to support remote work for employees to the extent possible. (Addendum 12 to Executive Order 01-20)

**COMMUNITY DEVELOPMENT**

Contact Clare Rock, [rock@cvregion.com](mailto:rock@cvregion.com), or Zach Maia, [maia@cvregion.com](mailto:maia@cvregion.com), unless otherwise noted.

**Municipal Planning & Plan Implementation:**

- Revised Town Plan maps for Worcester.
- Revised zoning district and stream buffer maps for Montpelier.
- Provided a BioFinder tutorial and reviewed Town Plan maps with the Roxbury Planning Commission. Offered assistance for drafting Plan chapters.
- Presented survey results and draft zoning recommendations to the Middlesex Planning Commission.
- Wrote support letter and packaged Cabot's grant application to EPA/USDA Local Food Local Places program.
- Assisted Plainfield in revising Draft Town Plan for final public hearing; provided formatting assistance.
- Began reviewing and formatting Washington's 2020 Draft Town Plan ahead of adoption process.
- Finalized Municipal Energy Data reports for distribution utilizing Efficiency Vermont data.
- Continued public engagement and data visualization discussions with Woodbury regarding its Town Plan.
- Assisted Barre Town in making a determination on zoning variances.
- Provided cell tower locations and information on Section 248a process/approach to East Montpelier.
- Provided input into Mad River Valley community indicators/dashboard project.

**Training & Education:**

- Began planning for a December Modern Wood Heat event in coordination with the Mad River Valley Planning District and the Dept. of Forests, Parks and Recreation.
- Began facilitating support for Marshfield Energy Committee outreach on Efficiency Vermont incentives.

**Regional Planning and Implementation:**

- Reviewed Act 250 application for regional impact to Shutesville Hill Wildlife Corridor; convened Project Review Committee meeting and submitted letter to District Commission.
- Restarted efforts to hold a Regional Housing Summit by updating regional housing data.
- Participated in a kick-off meeting for the 4-Region Comprehensive Economic Development Strategy (CEDS). Partners discussed tasks, deliverables, and timelines. Collected regional economic development resources.
- Created draft cell coverage maps for Regional Plan.
- Participated in VT Urban and Community Forestry Leadership Team meeting to plan quarterly meeting.
- Participated in Act 164 (cannabis legislation) workgroup presentation.

**Partnerships for Progress:**

Working Communities Challenge: Participated in Federal Reserve Bank of Boston Meet & Greet with Bank Chair. Participated in Governor's press conference on awards. The Greater Barre Team was awarded \$310,000 to implement its idea to improve the workforce development system. Green Mountain United Way is the

implementation team lead. CVRPC lead the planning effort and wrote the team's grant application.

Central Vermont Economic Development Corporation (CVEDC): Participated in Board and annual meetings.

THRIVE: Participated in Design Team meeting, weekly Leadership Partners check ins, and monthly Community and Leadership Partners meetings. Scheduled/facilitated Trust workgroup meeting.

Capstone Community Action: Provided transportation consultant with information about Working Communities initiative and transportation connections.

Washington County Hunger Council: Chaired Council Meetings and several meetings discussing the Food Access Map/ Tool for use by other organizations. Attended a statewide Hunger Chairs meeting with Congressmen Welch about Hunger during COVID-19. Provided Vermont Sustainable Jobs Fund with costs estimate to expand award-winning Food Retailers Access map statewide.

Wrightsville Beach Recreation District: Participated in Board meeting. Assisted with distributing annual report.

## EMERGENCY MANAGEMENT & HAZARD MITIGATION

Contact Grace Vinson, [vinson@cvregion.com](mailto:vinson@cvregion.com), unless otherwise noted.

### Local/Regional Planning:

- Attended monthly VEM/RPC meeting.
- Attended State Emergency Response Commission (SERC) meeting and LEPC/SERC Liaison subcommittee meeting on Local Emergency Planning Committee (LEPC) consolidation and realignment.
- Consulted with Plainfield about potential grant application for Brook Road bridge replacement.
- Discussed Family Connectivity Project with Good Beginnings of Central Vermont staff. The project is working to improve connectivity for low income families. The greatest barrier is the ability to fund monthly service.

**Local Hazard Mitigation Plans (LHMP)**: Staff supported communities in the development, review, and adoption of local hazard mitigation plans.

Calais – Hosted meeting about community engagement and hazard identification and analysis. Planned next meeting.

Montpelier – Planned kick off meeting.

Washington – Finalized and released plan for public comment. VEM submission in early December.

Williamstown – VEM issued Approval Pending Adoption. Selectboard adopted the plan in November. Awaiting Final Approval letter from FEMA.

### COVID-19 Response & Recovery:

- Participated in State Emergency Operation Center and Health Operation Center meetings to maintain situational awareness regarding response and recovery needs/actions.
- Held bi-weekly telephone consultations with the Dept. of Taxes for Local Government Expense Reimbursement (LGER) program. Hosted RPC monthly meeting, including training RPCs on storytelling in advance of fulfilling reporting requirements to convey the program's value. Researched and responded to questions from RPCs and Central VT applicants. Provided LGER services to Central Vermont units of local government. Contacted multiple municipalities about funding new public WiFi hotspots via LGER.
- Provided weekly updated maps on Vermont COVID cases.



## TRANSPORTATION

Contact Ashley Andrews, [andrews@cvregion.com](mailto:andrews@cvregion.com), unless otherwise noted.

**Field Services:** Contact Ashley Andrews, [andrews@cvregion.com](mailto:andrews@cvregion.com), for 2020 counts and inventories.

- Completed road erosion inventory field work in Plainfield and Cabot; drafting reports.
- Continuing road erosion inventory field work for Middlesex.
- Presented to Waitsfield, Duxbury, and Barre Town Selectboards about their road erosion inventories.
- Completed a fall Park and Ride survey.
- Continued map-based inventory of Central Vermont sidewalks.

### Transportation Studies:

Transportation Resilience Planning Tool: Discussed project with RPC Directors and initiated RPC contracts.

**Public Transit:** CVRPC represents Central Vermont on the Green Mountain Transit (GMT) Board of Commissioners. Staff participated in the following GMT meetings:

Board of Commissioners – See Committee updates.

Leadership Committee – Reviewed COVID-related service changes. Reviewed Board agenda. Discussed process for General Manager 6-month performance appraisal.

Operations Committee – Discussed performance via a Performance Dashboard presentation. Ridership has steadily increased and continues to be below the established performance metric. A refocus on fleet replacement is needed. Reviewed COVID-related service changes; commuter services have been reduced by ~50% to meet reduced rider demand. GMT is reverting to naming routes by number and destination due to continuing passenger confusion. Received presentation on the Public Transit Agency Safety Plan.

### GMT Board of Commissioners Chair Role Activities:

- Participated in briefing meetings with the General Manager about a variety of topics and events.
- Discussed Board Retreat session with Commissioner and General Manager.
- Initiated General Manager 6-month evaluation; drafted survey to gather Board and staff input.

### Municipal Assistance:

- Discussed potential pop up bicycle and pedestrian projects with Local Motion and Woodbury Planning Commission.
- Coaches Berlin on approach for Transportation Alternatives grant application.
- Provided Berlin and Duxbury with support letters for Transportation Alternatives grant applications.
- Met with Barre City, VTrans, and VANR about a potential FEMA grant application for railroad trestle #308. The trestle is in immanent failure and its mid-stream pier exacerbates flooding. The grant would study alternatives, including repair and multiple removal scenarios. Initiated grant application. Met with VTrans. Developed scope of work for budget discussion with a contractor.

### Regional Activities:

- Participated in the Mad River Transportation Advisory Committee meeting.
- Participated in the TPI monthly meeting.
- Participate in Microtransit Advisory Committee meeting. Service is being branded as MyRide.

## NATURAL RESOURCES

Contact Pam DeAndrea, [deandrea@cvregion.com](mailto:deandrea@cvregion.com), unless otherwise noted.

### **Tactical Basin Planning Assistance:**

- Met with Winooski Basin Planner, Winooski Natural Resources Conservation District, Friends of the Winooski River, and the Friends of the Mad River for project development coordination for Winooski Basin projects.
- Conducted review of Woodbury's municipal protectiveness for water quality and flood resilience for the Lamoille Tactical Basin Plan.
- Coordinated with CCRPC on finalizing scope of work and budget for Tactical Basin Planning for FY21.
- Coordinated with CCRPC, the DEC and other RPCs on work plan development formatting for FY21.

### **Design Implementation Block Grant Program (DIBG, formerly Clean Water Block Grant Program):**

Woodbury Stormwater Mitigation Final Designs – Executed stop work order for contractor on Church Street site, communicated with SWCRPC on next steps and possible modification to scope of work to develop alternative site. On-site testing determined depth to bedrock was too shallow for the proposed design to work effectively. The contractor continued necessary field work and data collection to complete the hydrologic modeling for the engineering designs for the Post Office site and other sites. Final designs anticipated by spring 2021.

Calais Stormwater Mitigation Final Designs – Contractor completed necessary field work and data collection and is working on the 60% engineering designs. The designs will entail an underground infiltration system at the East Calais Post Office, an infiltration basin along Moscow Woods Rd., and the stabilization of the gully. The 60% designs will be completed by March, 2021 and final designs by the fall 2021.

Berlin Town Office Stormwater Implementation – The Town of Berlin submitted the Notice of Award to the construction company Dale Percy, Inc. Construction will commence in spring/summer 2021 and project completion is November 2021.

**Moretown Elementary School Stormwater Final Design:** Contractor continued work on the 60% designs based on data collected during site characterizations. The 60% designs are expected to be completed mid-December. CVRPC will reach out to Moretown stakeholders for a meeting sometime after the holidays. The main treatment proposed is a gravel wetland along with improvements around the school to move stormwater away from the school. Stormwater contributes to flooding in classrooms. Final design is expected to be complete in June 2021.

**604b:** CVRPC will support water quality monitoring efforts for the Friends of the Mad River (FMR) by providing a web map depicting Mad River Watch water quality monitoring stations and results to help it with education and future decisions on monitoring efforts. Section 604b of the Federal Clean Water act passes funds to States to enhance water quality efforts. VT DEC contracts with the Rutland Regional Planning Commission (RRPC) to support Tactical Basin Planning activities. RRPC acts as RPC statewide lead and subcontracts with other RPCs.

## OFFICE & ANNOUNCEMENTS

### **Office:**

- Researched Vermont cannabis law for Personnel Policy implications and prepared a memo for the Personnel Policy Review Committee.
- Reviewed CCVRPC compensation study and updated CVRPC Benefits description for Personnel Policy review.
- Prepared TPI work program and budget adjustment with memos for the TAC and Executive Committee.

- Reviewed Title VI Plan updates and provided edits.
- Prepared and summarized RPC fringe benefits survey update.
- Responded to auditor's questionnaires; research risk assessment for updates.
- Completed final review of FY20 accounts for audit preparation.

#### Professional Development/Leadership:

- Pam completed three courses to fulfill renewal requirements for Certified Floodplain Manager (CFM).
- Zach trained staff on available energy data resources and integration into other program areas.
- Zach participated in his first 2020-2021 Vermont Changemakers Table meeting. This program facilitates conversations among a cohort of young Vermonters seeking to enact and facilitate social change determined. Participants apply, and must be accepted, into the program. The November topic was Rural Community Engagement and Infrastructure.
- Pam and Ashley attended the Northeast Arc Users Conference (NEARC). Pam was elected to the NEARC Board. CVRPC shared its [Friends of the Winooski River 2019 Mean Monitoring Results](#) web app.

#### Upcoming Meetings:

All CVRPC meetings currently are being held as virtual meetings. Meeting access information is provided on agendas at [www.centralvtplanning.org](http://www.centralvtplanning.org). For non-CVRPC meetings, please visit websites for host organizations.

#### December

Dec 9	6 pm	Modern Wood Heat Workshop in Mad River Valley
Dec 15	6:30 pm	Board of Commissioners
Dec 17	4 pm	Project Review Committee
Dec 25		<i>Christmas Holiday, CVRPC office closed</i>

#### January

Jan 1		<i>New Year's Day Holiday, CVRPC office closed</i>
Jan 4	4 pm	Executive Committee
Jan 4	6:30 pm	Local Emergency Planning Committee 5
Jan 12	6:30 pm	Board of Commissioners
Jan 14	4 pm	Clean Water Advisory Committee
Jan 18		<i>Martin Luther King Day Holiday, CVRPC office closed</i>
Jan 20	9 am	Green Mountain Byways Steering Committee
Jan 26	6:30 pm	Transportation Advisory Committee
Jan 28	4 pm	Project Review Committee

Visit CVRPC's web site at [www.centralvtplanning.org](http://www.centralvtplanning.org) to view our blog and for the latest publications and news.

**Central Vermont Regional Planning Commission**  
**Committee & Appointed Representative Reports**  
November 2020

*Meeting minutes for CVRPC Committees are available at [www.centralvtplanning.org](http://www.centralvtplanning.org).*

**EXECUTIVE COMMITTEE** (Monday of week prior to Commission meeting; 4pm)

- Authorized signature of two agreements with Chittenden County Regional Planning Commission: Tactical Basin Planning FY20 Amendment 1 and Comprehensive Economic Development Strategy.
- Approved and authorized signature of Amendment 1 to the Commission's FFY21 Transportation Planning Initiative agreement with VTrans. The amendment provides new funding for CVRPC to act as statewide RPC lead for the Transportation Resilience Planning Tool and reallocates funding for consultant services to assist with developing a cost estimate for a FEMA grant application.
- Authorized the addition of temporary staff (Assistant Planner) and approved an adjustment to the FY21 CVRPC budget.
- Recommended updated Municipal Plan Review Committee Rules of Procedure for Board adoption.
- Authorized the Chair to sign a 3-year renewal for the CVRPC line of credit.
- Established a bylaw work group to consider whether adjustments to CVRPC's updated bylaws are needed. Steve Lotspeich and Michael Gray will represent the Committee. The Board will be asked to appoint/elect 1-2 representatives at its 12/8 meeting.
- Initiated a discussion about diversity, equity, and inclusion. The goal was to begin consideration of how to furthering them at CVRPC.
- Discussed appointment of a Nominating Committee. Executive will make its formal nomination to the Board in January.
- Amended the Commission meeting agenda to add an item related to the bylaw work group.
- Approved a 3% raise, effective 01/01/21, for the Executive Director.

**PERSONNEL POLICY COMMITTEE** (A sub-committee of the Executive Committee)

Meetings on hold due to COVID. Anticipated to resume January 2021.

**NOMINATING COMMITTEE** (February and March; scheduled by Committee)

Did not meet.

**PROJECT REVIEW COMMITTEE** (4<sup>th</sup> Thursday, 4pm)

The Committee continued its review of Act 250 Application 5W1206-5. The proposed project is a 9-lot subdivision in northeast Waterbury with construction on 6 lots for residential development. The Committee determined this development constituted a project Significant Regional Impact based on impact to a regional resource, the Shutesville Hill wildlife corridor. The project is located in a Priority Forest Block as mapped in the Regional Plan and is located in both the Resource and Rural Future Land Use Districts. The Committee determined the project was not in conformance with the Regional Plan based upon regional wildlife and forest fragmentation policies. A letter was submitted to the District Office. The next Committee meeting is December 17<sup>th</sup> at 4:00 pm.

**REGIONAL PLAN COMMITTEE** (as needed; scheduled by Committee)

Did not meet.

**MUNICIPAL PLAN REVIEW COMMITTEE** (as needed; scheduled by Committee)

The Committee held a hearing for the Barre City Municipal Plan approval. It recommended the Board approve the Plan and confirm the City's planning process.

**TRANSPORTATION ADVISORY COMMITTEE** (4<sup>th</sup> Tuesday; 6:30 pm)

- Approved amendment for FFY21 Transportation Planning Initiative.
- Discussed minor changes to the Committee Rules of Procedure by the Executive Committee.
- Heard presentation on the new Vermont Project Selection and Project Prioritization (VPSP2).

**CLEAN WATER ADVISORY COMMITTEE** (2<sup>nd</sup> Thursday, 4pm)

- Discussed changes to the Committee Rules of Procedure recommended by the Executive Committee.
- Approved meeting every other month to accommodate budget availability for Act 76 meetings.
- Discussed clean water projects in cue for upcoming funding for Central Vermont via summary table and interactive map presented by staff.

**VERMONT ASSOCIATION OF PLANNING & DEVELOPMENT AGENCIES (VAPDA)**

- Discussed S.124, which requires RPCs to create an inventory of municipal public safety resources of each town within its jurisdiction by December 31, 2021. Discussion of what that would entail and whether EMPG funds could be used to complete the task.
- Discussed conversations with VLCT about hosting joint trainings on diversity, equity, and inclusion. VLCT will be asked to attend the December VAPDA meeting.
- Joe Segale (VTrans) updated VAPDA on the state's Transportation Resiliency Planning Tool. Resiliency planning is completed by watersheds, with all watersheds to be completed by June 2021. Funding will be available for RPCs to provide quality control of consultant's information. CVRPC will be the lead for VAPDA.
- David Pelletier (VTrans) and David Saladino (consultant) updated VAPDA on state's Visitor Information Center Study. This included an assessment of existing facilities and will result in the development of recommendations for future investment. The study began in September 2020 and will be completed in April 2021. RPCs were requested to share ideas/input.
- Sarah Lang presented on the Incremental Development Alliance (IDA) and the concept of incremental development. The IDA is available to provide to RPCs direct training and workshops for developers and communities. Small-scale development seminars lead to small development boot camp. VAPDA agreed to provide a \$500 sponsorship for an upcoming event in Vermont.
- Paul Costello, Jenna Koloski, and Nick Kramer (VCRD) provided an overview of *The Vermont Proposition*, a draft document with concepts and recommendations for statewide community and economic recovery from the COVID-19 crisis. Draft proposition statements were discussed and VAPDA provided ideas for improving the statements and additions/removals. RPCs should send any

ideas/thoughts to Paul. Information on the VT Proposition and a survey can be found at: [www.futureofvermont.org](http://www.futureofvermont.org)

#### **VERMONT ECONOMIC PROGRESS COUNCIL**

No activities from Central Vermont.

#### **GREEN MOUNTAIN TRANSIT**

- Held Board retreat focused on the Role of the Board. Robust discussion of policy setting versus day to day operations, representing the Board while representing the appointing authority, appropriate level of activism and engagement, role of the chair, and effectiveness of the committee structure. The Board directed several items to the draft Strategic Plan for further development.
- VTrans discussed evolving COVID protocols.
- Approved the Public Transit Safety Agency Plan.
- Heard presentation about fare free service with financial and safety impacts for GMT. The House Transportation Committee requested VTrans prepare its budget assuming fares and no fares. GMT generates \$2.3 million in fares, primarily from its urban ridership. Discussion of continuing fare free service during COVID or permanently generated considerable discussion.
- Received update on COVID-related service changes. (see Staff Reports, Transportation, GMT Operations Committee). The Valley Evening Service in the Mad River Valley will not operate this season; there appeared to be no opposition during public meetings and conversations with the MRVPD Steering Committee.
- Discussed process for General Manager 6-month performance appraisal.

#### **MAD RIVER VALLEY PLANNING DISTRICT**

The MRVPD held its tri-town leadership meeting with members of the respective select boards and planning commission members. The topic of the meeting was housing. MRVPD and the MRV Housing Coalition staff prepared an informational booklet in advance of the meeting which included highlights from the recent Housing Needs Assessment. Following a brief presentation, Paul Costello from the Vermont Council on Rural Development moderated a discussion to identify what steps could be worked on collaboratively. Interest focused on the following steps:

- Continued funding of the new housing coalition's part-time staff, Kaziah Havilland-Montgomery,
- Creating a MRV Housing Trust Fund,
- Evaluating how the Valley could regulate short term rentals, and
- Assess how all Valley towns could share the financial burden Waitsfield shoulders as the commercial hub of the Valley.

## Working Communities Challenge Awards \$1.9 Million in Grants to Four Vermont Communities

**Grants will fund initiatives to improve economic outcomes for rural towns and smaller cities**

November 19, 2020

**Barre, Vt.** – Federal Reserve Bank of Boston President Eric Rosengren and Vermont Governor Phil Scott today announced that the [Springfield Area](#), [Greater Barre](#), [Lamoille County](#), and [Winooski](#) are the recipients of \$300,000 grants as part of the Boston Fed's [Working Communities Challenge](#). The program includes more than \$700,000 in additional planning and action grants for Vermont communities, and aims to strengthen the economies of rural towns and smaller cities. The competition officially launched in Vermont in 2019 with state, private sector, and not-for-profit support.

Each of the four communities will receive the grants over three years to support programs designed to bolster economic equality and workforce development across these regions of the state.

"Congratulations to each of these communities for putting together proposals designed to address significant needs in their unique regions," Rosengren said. "This is just the start of a lot of hard work on behalf of the residents in these communities. I look forward to working with these teams and following their progress over the coming years."

- **Springfield** seeks to increase workforce participation to combat generational poverty and help residents support themselves and their families.
- **Greater Barre** looks to lower the rate of single female head of households in poverty by 15% in 10 years.
- **Lamoille County** plans to tackle systemic barriers to employment and improve workforce transitions in order to lower the county's unemployment rate by 2024 and create a more diversified economy.
- **Winooski** aims to establish systems to lift underrepresented voices and involve the area's diverse population in decision-making and community dialogue.

"I want to congratulate the four winners we're announcing today and thank the Boston Fed for working with us on this initiative," said Governor Scott. "This pandemic has shown us why it's important to strengthen our small communities and ensure we have more diversity in our economy so we're not so reliant on any one sector or any one region. Grants like this will help achieve these goals so we can come out of this pandemic stronger and more resilient."

President Rosengren and Governor Scott will celebrate the four communities being named grant recipients on Thursday, November 19, at 12 p.m. via a virtual event. [Register here](#) to join and hear from Rosengren and Scott. Leaders from each of the four communities and funders will also share their efforts to strengthen their local economies and build healthy communities.

To learn more about the communities and the initiatives these grants will support please check out a series of videos that feature their work.

### **About the Working Communities Challenge**

The Working Communities Challenge advances local collaborative efforts that build strong, healthy economies and communities in Vermont's rural towns, regions, and smaller cities. Launched in 2019, the initiative supports diverse, local teams as they tackle complex challenges facing their communities. This unique three-year grant competition focuses on economic opportunity for communities and residents with low incomes. Its supported by the Federal Reserve Bank of Boston, the State of Vermont, national and local philanthropy, and private sector employers.

The Working Cities Challenge is funded by of the state of Vermont and a collaboration that includes the Doris Duke Charitable Foundation, The Robert Wood Johnson Foundation, NeighborWorks America, The Avangrid Foundation, The Northern Border Regional Commission, The William J. and Dorothy K. O'Neill Foundation, The National Life Foundation, The Vermont Community Foundation, The TD Charitable Foundation, Green Mountain Power, Efficiency Vermont, Pomerleau Real Estate, People's United Bank, Vermont Energy Investment Corporation, Vermont Electric Power Company, Inc., Northfield Savings Bank, Vermont State Employees Credit Union (VSECU), Housing Vermont, and Windham Foundation. The Federal Reserve Bank of Boston does not provide funding for the initiative.

For more on the Working Communities Challenge, [please click here](#).

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### **For CVRPC Board:**

CVRPC provided facilitation and grant writing services for the Greater Barre team's planning efforts. Green Mountain United Way will be the implementation lead for this effort, having been awarded a \$310,000 grant.

Other partners in the Greater Barre effort include: City of Barre, Green Mountain United Way, Central VT Economic Development Corporation, Capstone Community Action, Central VT Home Health & Hospice, Central VT Medical Center, Central VT Adult Basic Education, Community College of VT, Family Center of Washington County, Barre Area Development, Barre Partnership, and Vermont Agency of Transportation.



[\(617\) 973-3877](tel:(617)973-3877)

November 25, 2020

VIA E-MAIL

Ms. Susan Baird, District Coordinator  
District 5, Environmental Commission  
10 Baldwin Street  
Montpelier, Vermont 05633-3201

RE: Application #5W1206-5 Substantial Regional Impact & Regional Plan Conformance

Dear Ms. Baird,

The Central Vermont Regional Planning Commission (CVRPC) staff and Project Review Committee have reviewed Application #5W1206-5 for the construction of a 9-lot Planned Unit Development (PUD) on a 109-acre tract located in Waterbury, VT. The project as proposed has been identified as a project of Substantial Regional Impact and has been found not to be in conformance with the *2016 Central Vermont Regional Plan, Amended 2018*.

**Project Location**

The proposed project is located on the boundary of the Rural and Resource Future Land Use Planning Areas as defined by the Central Vermont Regional Plan. The majority of the proposed subdivision is located within the Rural Future Land Use Area. This area encompasses much of the CVRPC region, and is where much residential development over the past few decades has occurred. The Regional Plan indicates objectives of this land use area can be realized by future development that preserves important resources (such as agricultural soils and forest blocks) and sets aside open space reserved for agriculture, forestry, wildlife habitat or public recreation.

The eastern portion of the subdivision, including the areas in the vicinity of the house sites and associated infrastructure on Lots 7, 8, and 9 are located in the Resource Future Land Use Planning Area. These areas dominated by lands requiring special protection or consideration due to their uniqueness, irreplaceable or fragile nature, or important ecological functions. The eastern portion of the proposed project is also located within a mapped Highest Priority Forest Block as depicted on CVRPC's "Natural Resources – 3" map. These Forest Blocks represent a regionally connected network of forest that provides high-quality interior forest habitat.

In the review process, the Committee also considered information provided by the Vermont Department of Fish & Wildlife as contained within the October 12, 2020 memo submitted to District 5 Environmental Commission. The memo identifies the project to be located within the Shutesville Wildlife Corridor; defined as "the only viable connection between the Green Mountains and Worcester Range." And the memo goes on to state that "[T]his regionally significant landscape connection is at risk from continued development within the interior of forest blocks and development adjacent to area roads that still provide suitable connectivity habitat."

**Substantial Regional Impact**

CVRPC defines development projects of Substantial Regional Impact as those that will have substantial and ongoing impact on two or more municipalities, including the host municipality. Among the development projects of substantial Regional impact are those that:

- Will likely impact on a resource within the Region which is widely used or appreciated by people outside of the locality in which it is located.
- Which may affect settlement patterns to the extent that the character or identity of the Region (or its sub- Regions) is significantly affected.
- Are likely to alter the cost of living, availability of choices, access to traditional way of life or resources widely used or appreciated by Regional residents.

The Committee found that as proposed, the 9-lot PUD is a project of Substantial Regional Impact as it would likely impact the Shutesville Wildlife Corridor, a resource within the Region which is widely used or appreciated by people outside of the locality in which it is located.

**Conformance with the Regional Plan**

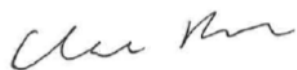
Based upon the projects location within CVRPC's Rural and Resource Future Land Use Planning Areas, CVRPC's mapped Highest Priority Forest Block, and the Shutesville Wildlife Corridor, the proposal for 9-lot Planned Unit Development (PUD) does not conform with the following policies from the regional plan:

- Development should be designed to minimize its impact on the viability of agricultural operations or its contribution to fragmentation of forest Blocks.
- Wildlife connectivity areas should be protected from fragmentation and uses that reduce their viability for movement of wildlife, particularly where they connect forest blocks.
- The extension of permanent roads, energy transmission facilities, and utilities into Resource areas is discouraged.
- Avoid development that fragments forest blocks and habitat connectors.

CVRPC understands the applicant is actively working to modify the subdivision plan to lessen the adverse impact on the ecological resource and requests the option to review any revised plans for conformance with the regional plan.

Thank you for your consideration.

Sincerely,



Clare Rock, Senior Planner

CC: Certificate of Service