



Town of Yarmouth Board of Health
1146 Route 28, South Yarmouth, MA 02664
(508) 398-2231

BOARD OF HEALTH MEETING AGENDA
January 5, 2026 at 5:00 PM

YARMOUTH TOWN CLERK RE

DEC 30 '25 PM 2:28

Board of Health

Hillard Boskey, M.D.

Mary Craig

Charles T. Holway

Laurance Venezia DVM

Eric Weston

**Assistant Health
Director**

Barry Lewis

This meeting will be conducted in person at the date, time and location identified above. This means that at least a quorum of the members of the public body will attend the meeting in person and members of the public are welcome to attend in person as well. As a courtesy only, access to the meeting is also being provided via remote means in accordance with applicable law. Please note that while an option for remote attendance and/or participation is being provided as a courtesy to the public, the meeting/hearing will not be suspended or terminated if technological problems interrupt the virtual broadcast or affect remote attendance or participation, unless otherwise required by law. Members of the public with particular interest in any specific item on this agenda, which includes an applicant and its representatives, should make plans for in-person vs. virtual attendance accordingly.

Members of the public who wish to attend the meeting may do so in the following manner:

Phone: 1-253-215-8782 or 1-312-626-6799 and enter the meeting ID (871 1526 3955)

To request to speak: Press *9 and wait to be recognized.

Zoom Webinar:

Join the meeting hosted in Zoom by using the following link: <https://us02web.zoom.us/j/87115263955>

The meeting will be broadcast live, in real time, via a live stream on Yarmouth's YouTube Channel located at the following link: <https://www.youtube.com/channel/UCgQ1QFZevmoqW5Mz2PnWKpA/>

It is recommended that phone participants access materials in advance of the meeting.

Please note that for any item listed below the Board of Health may take official action including votes.

1. Call to order
2. Declaration of a Quorum
3. Public Comment
The open meeting law discourages public bodies from discussing topics not listed on the agenda. The public should therefore not expect the Board to respond to questions or statements made during the Public Comment portion of the meeting.
4. Kratom – Discussion
5. Nicotine Free Generation - Discussion
6. Review & Approve Minutes
 - a. December 15, 2025
7. New/Old Business
8. Adjournment



Town of Yarmouth Board of Health Regulation Prohibiting the Manufacturing, Sale, and Distribution of Synthetic and Naturally Derived Kratom Unregulated Novel Intoxicating Products

A. Authority:

This regulation is promulgated under the authority granted to local Boards of Health by Massachusetts General Laws, Chapter 111, Sections 31 and 122, which authorize Boards of Health to adopt reasonable health regulations and take action to protect the public from sources of disease and health risks.

B. Statement of Purpose:

The Yarmouth Board of Health recognizes that the sale and distribution of natural and synthetic unregulated psychoactive substances including but not limited to synthetically altered kratom products pose an emerging threat to public health, particularly among youth and vulnerable populations. These substances are often: manufactured without oversight, sold without proper labeling, dosage guidelines, or ingredient transparency, associated with unpredictable or harmful health effects, readily available in convenience stores, vape shops, and online with no safeguards.

C. Definitions:

For the purposes of this regulation, the following definitions shall apply:

Board of Health: The Yarmouth Board of Health and its designated Board of Health Agents.

Board of Health Agent: Any person designated by the Yarmouth Board of Health or the Yarmouth Health Department to carry out and enforce the provisions of this regulation. A Board of Health Agent shall have all powers assigned under Massachusetts General Laws, including inspection authority, issuance of orders, and initiation of enforcement actions.

Kratom: Any part of the plant *Mitragyna speciosa*.

Natural Raw Kratom: Any unadulterated form of the plant *Mitragyna speciosa*, including its leaves (whole, crushed, or powdered), stems, or other plant parts, that have not been chemically altered, synthesized, or had their alkaloid concentrations artificially increased or mixed with any other ingredients.

Novel Intoxicating Products (NIPs): New or emerging substances sold for intoxication that are not well regulated.

Synthetically Derived Kratom: Any kratom product that has been altered from its natural plant form through chemical synthesis or the use of synthetic alkaloid analogs or concentrates beyond what occurs naturally in the plant.

Permit Holder: Any person or entity that holds a permit with the Town of Yarmouth Health Department.

Person: Any individual, firm, partnership, association, corporation, company, or organization of any kind, including, but not limited to an owner, operator, manager, proprietor, or person in charge of any establishment, business, cultivation property, or retail store.

Retail Establishment: Any store, kiosk, gas station, vape shop, convenience store, smoke shop, or other physical location engaged in the sale of consumer goods.

Unregulated Novel Intoxicating Products: Any substance, compound, or mixture, whether natural, synthetic, or semi-synthetic, that is intended for human consumption or ingestion, inhalation, absorption, or any other method of introduction into the human body, that:

1. Has psychoactive, intoxicating, or mood-altering effects;
2. Is not approved by the U.S. Food and Drug Administration for such use; and
3. Is not otherwise regulated or scheduled under Massachusetts or federal law.

D. Prohibition:

No person, business, or other entity shall sell, offer for sale, distribute, or otherwise provide for human consumption any of the following within the Town of Yarmouth:

- I. Natural or Synthetic Kratom – Any kratom products that contain natural kratom, synthetic, or semi-synthetic alkaloids, chemical analogs, or derivatives naturally or not naturally occurring in the kratom plant (*Mitragyna speciosa*).
- II. Unregulated Novel Intoxicating Products – As defined in section “Definitions”, any natural, synthetic, or semi-synthetic substance, compound, or mixture with psychoactive, intoxicating, or mood-altering effects, not approved by the U.S. Food and Drug Administration, and not otherwise regulated or scheduled under Massachusetts or federal law.

E. Enforcement and Penalties:

1. Any person or entity charged with violating this regulation shall receive a notice of violation from the Yarmouth Board of Health or its designated agent.
2. It shall be the responsibility of the establishment owner and/or the manager or business agent to ensure compliance with this regulation. In the case of a violation, the violator shall receive:

- i. In the case of a first violation, a fine of one thousand dollars (\$1,000.00);
 - ii. In the case of a second violation within thirty-six (36) months of a previous violation, a fine of one thousand dollars (\$1,000.00), and a suspension of any permit issued by the Board, including but not limited to a permit to sell tobacco products, for seven (7) consecutive business days; or not limited;
 - iii. In the case of three (3) or more violations within a thirty-six (36) month period, a fine of one thousand dollars (\$1,000.00), and a suspension of any permit issued by the Board including but not limited to a permit to sell tobacco products, for thirty (30) consecutive business days.
3. Every day that a violation exists shall be deemed to be a separate offense. Separate but simultaneous violations shall be treated as separate violations. Multiple permit suspensions may not be served concurrently.
4. Any person who receives notice of a violation of this regulation may request a hearing before the Board of Health. The request must be made in writing and filed within seven (7) days of the date the violation was received.
5. The authority to inspect establishments for compliance and to enforce this regulation shall be held by the Yarmouth Board of Health and its designees and the Yarmouth Police Department.
6. Any person may register a complaint pursuant to this regulation to initiate an investigation and enforcement with the Yarmouth Board of Health and its designees.
7. Upon accrual of four (4) violations of this regulation within a thirty-six (36) month period, or upon the commission of two (2) or more egregious violations of this regulation with thirty-six (36) months as determined by the Board, the Board may issue a notice of intent to revoke and shall hold a hearing in accordance with this regulation and, after such hearing, may permanently revoke any permits held by the violator, including any permits to sell tobacco products in Yarmouth.
8. Before suspending or revoking any permit issued by the Board, including a permit to sell tobacco products, the Board shall provide notice of the intent to suspend or revoke such permit, which notice shall contain the reasons therefor and shall establish a time and date for a hearing, to be held no earlier than seven (7) days from the date of the notice. The permit holder or their designee shall have the opportunity to be heard and shall be notified of the Board's decision and the reasons therefore in writing. If after hearing, the Board finds that violation of this regulation occurred, the Board shall suspend or revoke the subject permit. For purposes of such suspensions or revocations, the Board shall make the determination

notwithstanding any separate criminal or non-criminal proceedings concerning the same offense. Upon suspension or revocation of a permit, all permitted products must be removed from the retail establishment. Failure to remove such products shall constitute a separate violation of this regulation.

9. Failure to comply with the terms of a permit suspension imposed pursuant to this regulation may subject the permit holder to an additional suspension of all Board-issued permits for thirty (30) consecutive business days.

F. Severability:

If any provision of this regulation is declared invalid or unenforceable, all other provisions shall not be affected thereby but shall be in full force and effect.

Date approved by Town of Yarmouth Board of Health - _____

Hillard Boskey, M.D.
Chairman

Mary Craig
Vice Chair

Charles T. Holway
Clerk

Laurance Venezia DVM

Eric Weston



TOWN OF YARMOUTH

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Board of
Health
-
Health
Division

BOARD OF HEALTH MEETING MINUTES

1146 Route 28, South Yarmouth

December 15, 2025

Board Members Present: Hillard Boskey, M.D., Laurance Venezia DVM, Mary Craig, Eric Weston

Absent: Charles T. Holway

Others Present: Barry Lewis, Assistant Health Director, Riley Niederberger, Division Assistant

1. Call to Order

The meeting was called to order at 5:00 p.m.

2. Declaration of a Quorum

Quorum Present

3. Public Comment

None.

4. Variance – Yarmouth Wastewater Pumping Station 280 Route 28

Yarmouth Wastewater Project is seeking variance for the temporary relocation of the leaching field at 280 Route 28. Michael Guidice of CDM Smith attended the meeting as a representative of the Comprehensive Wastewater Management Plan (CWMP). A Phase 1 wastewater pumping station is proposed to be constructed at 280 Route 28, the site of Bellew Tile & Marble, within the limits of the leaching field for the parcel. To facilitate construction of the Town's pumping station, the leaching field will need to be permanently taken out of service. To provide temporary service to the building during construction, the Town is proposing to install a temporary six hundred (600) gallon leach pit adjacent to the pumping station site. The existing pressure pipe from the building's pump chamber will be connected to the leach pit to provide service to the building's one (1) bathroom for approximately one (1) to one and a half (1.5) years.

Once construction of the pumping station is completed the building will be connected to the pumping station, which will provide permanent sewer service for the property. The building has limited employees, and Barry stated a leaching pit will be sufficient for the average flow of the system.

Motion: Mary Craig moved to approve the variances requested at 280 Route 28, West Yarmouth, MA 02673.

Second: Laurance Venezia

All in favor

5. Kratom – Discussion

Recently the Town of Bourne passed a new regulation restricting the sale and distribution of synthetically derived cannabinoids and Kratom. The Board discussed concern for safety, proper testing, and quality control of products marketed as Kratom that may be hybrid or synthetic products.

Mary would like the Board to review options to possibly amend a Synthetic Cannabinoid Regulation to include a Kratom and 7-OH section. Hillard noted he is unaware of any medical research that proves if Narcan is effective for a Kratom overdose. The Board will review further research on surrounding municipal regulations and educational materials. This item will be discussed at the next meeting.

No action required by the Board at this time.

6. Review & Approve of Minutes

Motion: Laurance Venezia moved to approve the December 1, 2025 minutes as written.

Second: Mary Craig

All in favor

7. New/Old Business

The Health Department hosted a successful giving initiative through the Yarmouth Holiday Giving Tree, the community donated gifts for thirty-five (35) local students and one (1) family. All gifts will be delivered to the schools before the holiday break. The Health Department and Board showed their appreciation for all who participated and thanked Sara, Debra, and Riley of the Health Department for supporting the event.

Friday, January 23, 2026, from 10:30 a.m. to 3:00 p.m. at the Lorusso Lodge at Flax Pond, the Health Department in partnership with the American Red Cross invites the community to participate in a Blood Drive in recognition of National Blood Donor Month. Walk-ins are welcome and appointments can be scheduled through the American Red Cross website, "Find a Drive", and enter the sponsor code YARMOUTHREC.

Friday, February 6, 2026, from 1:00 p.m. – 3:00 p.m. at the Hearing Room, Town Hall 1146 Route 28, South Yarmouth the VNA will be providing a Fall Risk Assessment Clinic. Spaces are limited, to register contact VNA Public Health and Wellness at 508-957-7423.

Hillard announced there are currently one thousand nine hundred (1,900) reported cases of Measles in the U.S. Hillard urged the community to speak with their healthcare providers if they have concerns about vaccinations for their children and emphasized the dangers of Hepatitis B as carriers can be asymptomatic, but ultimately complications of Hepatitis B can include liver infection, liver cancer, or liver failure.

Larry spoke from his years of Veterinarian experience, observing the impact of vaccinations clinically reducing incidence of several diseases.

Mary recommended that the community review information on mass.gov and speak with their healthcare providers if they have public health or medical concerns.

Next Meeting: January 5, 2026

8. Adjournment 5:53

Motion: Laurance Venezia

Second: Eric Weston

All in favor

**YARMOUTH BOARD OF HEALTH
REGULATION PROHIBITING THE SALE OF SYNTHETIC PSYCHOACTIVE
SUBSTANCES**

Date of Publication: FEBRUARY 2, 2017

A. Statement of Purpose

WHEREAS, it has been reported by various agencies that synthetic psychoactive substances including cannabinoids, cathinones, stimulants, depressants, opioids and hallucinogens have been linked to serious physical effects resulting in hospitalization and death when ingested, inhaled or otherwise introduced into the human body. These substances pose health, safety and welfare issues for the residents of Yarmouth.

B. Authority

This regulation is promulgated pursuant to the authority granted to the Yarmouth Board of Health by Massachusetts General Laws, Chapter 111, Section 31 that “Boards of Health may make reasonable health regulations.”

C. Definitions

As used in this regulation, the following terms shall have the meaning ascribed to them below:

Synthetic: A substance made by chemical synthesis, the production of chemical compounds by reaction from simpler materials.

Person: An individual, corporation, partnership, wholesaler, retailer or a licensed or unlicensed business.

Consumed: Introduced into the human body by any manner including, but not limited to, inhalation, ingestion or injection.

D. Prohibited Activities

1. No person shall sell, offer to sell, distribute, gift or publicly display for sale any synthetic psychoactive substances, including, but not limited to, synthetic cannabinoids, cathinones, stimulants, depressants, opioids and hallucinogens that has been chemically treated and are possessed, sold or purchased with the intent that despite any labeling to the contrary, said substances will be consumed by humans for the purpose of intoxication, which if consumed may induce effect or effects of intoxication similar to a controlled substance or imitation controlled substance, that include but not limited to:

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elation, euphoria, dizziness, impaired judgement, excitement, irrational behavior, exhilaration, paralysis, stupefaction, dulling of the senses or nervous system, weakness, tremors, sleeplessness, feelings of relaxation, disorientation, muscle spasms, confusion, loss of coordination, hallucinations and changes in sensory perceptions (including sight, smell, sound,

shapes, touch, time and body image) feeling of detachment from self and environment, memory loss, psychological distress (including feeling of extreme panic, agitation, fear, anxiety, paranoia, invulnerability, exaggerated strength and aggression), physical distress including extreme changes in heart rate, respiration and body temperature.

2. This regulation shall apply regardless of whether the substance is marketed for the purpose of being smoked, ingested or injected, and is marked "Not for Human Consumption."

E. Penalty for Violation

Any person violating these provisions will be ordered to appear before the Board of Health at a public hearing. If a violation is found to have occurred, the Board of Health may impose the following penalties to be paid within ten (10) days or as otherwise determined by the Board of Health:

- (1) In the case of a first violation, a fine of three hundred dollars (\$300.00).
- (2) In the case of a second violation, a fine of five hundred dollars (\$500.00) and loss of tobacco license for seven (7) days.
- (3) In the case of a third violation, a fine of one thousand dollars (\$1,000.00) and loss of tobacco license for thirty (30) days.
- (4) In the case of any violation, the Board may suspend or revoke the tobacco permit or any other permit or license issued by the Board of Health and held by the violator.

F. Enforcement

- (1) Enforcement of this regulation shall be by the Yarmouth Health Department or its designee, including the Yarmouth Police Department.
- (2) This regulation may be enforced by filing a criminal complaint in the District Court.
- (3) Any resident who desires to register a complaint pursuant to the regulation may do so by contacting the Yarmouth Board of Health or its designee and the Board shall investigate.
- (4) All substances, found in plain view, being used in violation of this regulation will be seized, transferred to the Yarmouth Police Department and held until final adjudication whereupon they will be destroyed by the Yarmouth Police Department in accordance with its procedures.

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G. Severability

If any provision of this regulation is declared invalid or unenforceable, the other provisions shall not be effected thereby but shall continue in full force and effect.

H. Effective Date

This regulation shall take effect immediately upon publication of a summary in a newspaper of general circulation in the Town of Yarmouth, which date shall be posted on the front page of this regulation.

Adopted JANUARY 23, 2017

Effective FEBRUARY 2, 2017

YARMOUTH BOARD OF HEALTH

Hillard Boskey, Chair

Tanya Daigneault

Mary Craig, Vice Chair

Charles Holway

Debra Bruinooge

TUESDAY, DECEMBER 9, 2025

CDC's hepatitis B reversal puts newborns back at risk

By Katherine Gergen Barnett

Dr. Katherine Gergen Barnett is associate professor of family medicine at Boston University Chobanian & Avedisian School of Medicine, vice chair of primary care innovation & transformation at Boston Medical Center, and communications fellow at Primary Care Collaborative.

As a family medicine physician, I have the privilege of caring for patients from the earliest days of pregnancy contemplation through pregnancy and postpartum and newborn care. In this critical time, I counsel my patients on dozens of items on how to keep themselves and their babies safe and healthy, including avoiding environmental exposures such as extreme heat, the risks of certain foods and medications, and the impact of gestational diabetes, hypertension, and maternal depression. In my two decades of medical practice, I have not encountered questions or fear about the routine use of the hepatitis B virus vaccine at birth. This is about to change.

Last week, the Centers for Disease Control and

Hepatitis B is a viral infection that attacks the liver, causing both acute and chronic liver disease.

Prevention's advisory panel voted to drop the routine administration of the HBV vaccine to all infants. The recommendation corrodes one of the greatest public health victories of the past 30 years.

Hepatitis B is a viral infection that attacks the liver, causing both acute and chronic liver disease. While hepatitis B can be transmitted from the birthing parent (known as "perinatal transmission"), infants can also contract hepatitis B from caregivers, household contacts with known or unknown hepatitis B infection, or from surfaces and objects contaminated with blood containing hepatitis B virus (known as "horizontal transmission"). About 90 percent of infants who are infected with HBV develop chronic HBV infection, an often devastating and incurable disease that leads to increased risks of cirrhosis, liver cancer, and premature death. Up to a quarter of people infected at birth will die prematurely from the disease.

The HBV vaccine was first approved by the Food and Drug Administration in 1981 and was initially only administered to known high-risk populations, including newborn infants born to HBV-positive mothers. However, rates of viral infections were still increasing, including thousands of infants who had not contracted hepatitis B at birth.

By vaccinating through a risk-based strategy, the medical establishment was missing protection of large numbers of infants still at risk and hepatitis B was infecting 16,000 children under age 10 annually. Gaps in screening and detection occurred for infants born to women who had inadequate access to prenatal care and screening, whose tests were done in a window before infection, or who were exposed to hepatitis B virus in the first year of life from seemingly innocuous household items such as toothbrushes or nail clippers of unknowingly infected people. Since the United States adopted universal vaccination for hepatitis B of newborns in 1991, an estimated 500,000 childhood infections and 90,100 childhood deaths have been prevented, and the rates of HBV infections in children and teens have plummeted by 99 percent.

Babies born in Massachusetts will not yet be affected by the new CDC recommendation. Massachusetts and six other Northeast states will continue to recommend that every child receive the vaccination at birth. However, as my colleagues and I know all too well, poor information does not stop at state borders.

The ensuing confusion around the HBV vaccine for infants will inevitably create new gaps in protection, allowing for rising rates of infections. Public health experts and physicians have a responsibility to our patients and communities to help guide people through this confusion. But we cannot do it alone. Everyone has a critical role to play.

There are several key elements to this partnership:

- Conversations about vaccination cannot be rushed. Providers must resist the drive toward efficiency in medical visits and take the time to listen with respect and without judgement to patients' concerns and fears of vaccination, recognizing that these fears are driven by love and wanting the best for their infants. At every medical encounter, providers have an opportunity to build shared health goals with patients.

- Patients and families, in turn, need to come ready to share their concerns and questions while being open to information about the risks of hepatitis B and the benefits of the vaccine for infants and the community.

- Trusted community voices are critical in this work. Connecting to trusted messengers where people eat, learn, pray, receive haircuts, and purchase beauty products is essential for keeping communities healthy.

- We must allow for the power of stories. People whose lives have been upended by chronic hepatitis B, who face not only the medical consequences of the infection but also the attached stigma, are beginning to speak out. Those voices matter.

We cannot afford to lose three decades of public health advances. The risks of hepatitis B are too great. We have the medical and public health tools, but it will take all of us to protect newborns and future generations.