MINUTES OF THE PUBLIC HEALTH COUNCIL

Meeting of February 17, 2021

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

**PUBLIC HEALTH COUNCIL**

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**Henry I. Bowditch Public Health Council Room, 2nd Floor**

**250 Washington Street, Boston MA**

**Docket: \*\*\*REMOTE MEETING\*\*\* Wednesday, February 17, 2021 – 9AM**

***Note: The February Public Health Council meeting will be held remotely as a video conference due to the COVID-19 State of Emergency declared by Governor Charles D. Baker on March 10, 2020 and consistent with the Governor’s March 12, 2020 Order modifying the state’s Open Meeting Law and July 2, 2020 Order regarding gatherings.***

Members of the public may listen to the meeting proceedings by using the information below:

Join by Web: <https://statema.webex.com/statema/onstage/g.php?MTID=eb9d215e827a5363d774d008983c69eac>

Dial in Telephone Number: 1-866-692-3580

Access code: 185 338 2144

1. **ROUTINE ITEMS**
	1. Introductions
	2. Updates from Commissioner Monica Bharel, MD, MPH.
	3. Record of the Public Health Council Meeting held January20, 2020. **(Vote)**
2. **DETERMINATIONS OF NEED**
	1. Request by Emerson Endoscopy and Digestive Health Center, LLC for Substantial Change in Service **(Vote)**

**3. PRESENTATIONS**

a. Preliminary Findings from the COVID Community Impact Survey (CCIS)

*The Commissioner and the Public Health Council are defined by law as constituting the Department of Public Health. The Council has one regular meeting per month. These meetings are open to public attendance except when the Council meets in Executive Session. The Council’s meetings are not hearings, nor do members of the public have a right to speak or address the Council. The docket will indicate whether or not floor discussions are anticipated. For purposes of fairness since the regular meeting is not a hearing and is not advertised as such, presentations from the floor may require delaying a decision until a subsequent meeting.*

Public Health Council

Attendance and Summary of Votes:

Presented below is a summary of the meeting, including timekeeping, attendance and votes cast.

Date of Meeting: February 17, 2021

Start Time: 9:13am Ending Time: 10:39am

| Board Member | Attended | First Order: Approval of January 20, 2021 Meeting Minutes (Vote) | Second Order: DoN Request by Emerson Endoscopy and Digestive Health Center, LLC for Substantial Change in Service (Vote) |
| --- | --- | --- | --- |
| Commissioner Monica Bharel | Yes | Yes | Yes |
| Edward Bernstein  | Yes | Yes | Yes |
| Lissette Blondet | Yes | Yes | Yes |
| Kathleen Carey | Yes | Yes | Yes |
| Sec. Elizabeth Chen | Yes | Yes | Yes |
| Harold Cox | No | Absent | Absent |
| Alba Cruz-Davis | Yes | Yes | Yes |
| John Cunningham | Yes | Yes | Yes |
| Michele David | Yes | Yes | Yes |
| Claude Jacob | Yes | Yes | Yes |
| Michael Kneeland | Yes | Yes | Yes |
| Keith Hovan | Yes  | Yes | Yes |
| Joanna Lambert | No | Absent | Absent |
| Acting Secretary Cheryl Poppe | Yes | Yes | Yes |
| Summary | 13 Members Present; 2 Absent | 13 Members Approved; 2 Absent | 13 Members Approved; 2 Absent |

**PROCEEDINGS**

A regular meeting of the Massachusetts Department of Public Health’s Public Health Council (M.G.L. c. 17, §§ 1, 3) was held on Wednesday, February 17, 2021 by the Massachusetts Department of Public Health, 250 Washington Street, Boston, Massachusetts 02108.

Members present were: Monica Bharel, MD, MPH; Edward Bernstein, MD; Kathleen Carey, PHD; Secretary Elizabeth Chen; Alba Cruz-Davis, PhD, MPH; John Cunningham, PhD; Claude Jacob; Michael Kneeland, MD; Lisette Blondet; Cheryl Lussier Poppe; and Michele David, MD.

Also in attendance was Elizabeth Scurria Morgan, Acting General Counsel at the Massachusetts Department of Public Health.

Commissioner Bharel called the meeting to order at 9:13AM and made opening remarks before reviewing the agenda.

**1. ROUTINE ITEMS**

b. Updates from Commissioner Monica Bharel, MD, MPH

**COVID VARIANTS**

Commissioner Bharel reported over half a million COVID-19 cases and 15,000 deaths since the start of the pandemic. DPH is concerned by the new COVID variants being seen announced that testing completed at the State Public Health Laboratory has identified 19 infections of the B.1.1.7 variant, originally identified in the United Kingdom. These 19 cases bring the total number of cases known to be infected with this variant of the virus to 34 in the Commonwealth. The first case in the United States was identified in late December 2020 and in Massachusetts on January 17, 2021.

Four of those 34 cases have evidence of recent travel, suggesting that the majority of cases identified in Massachusetts are community-acquired. The B.1.1.7 variant is known to spread more easily. Two other variants of concern are the B.1.351 originally found in South Africa, and the P.1 variant, which originated in Brazil. DPH has now identified the first case of the B.1.351 COVID-19 variant in the Commonwealth. This variant has been reported in 19 other people from ten states in the United States. The case is a female in her 20s who resides in Middlesex County. The B.1.351 variant is known to spread easily and antibodies from prior COVID infection and vaccines may be less effective against the variant.

New information from CDC shows that improving the fit and filtration of masks helps reduce the spread of the virus. Using fitted masks and following all of our public health measures is critical. This includes social distancing, avoiding travel, avoiding groups, staying home when you are sick, getting tested for COVID and getting vaccinated when it is your turn.

**COVID VACCINE**

Commissioner Bharel stated that there has been many improvements to the website, including a new call center with expanded hours for 75 and over individuals who cannot access a computer or need help, and there is a new website that makes it easier to find available appointments. As of February 16, 2021, a total of 1,166,516 doses of vaccine have been administered in Massachusetts. So far over 850,000 individuals have been vaccinated with a first dose of vaccine. DPH has increased our vaccine utilization – now our vaccine administration is at 76.4%, which is up from 40%.

Commissioner Bharel signed an order earlier this month to require vaccine providers to enter the demographic data including race and ethnicity data into their reports to DPH. This is meant to improve the reporting method in order to ensure this data was collected on individuals being tested for COVID. This data helped DPH understand the number of cases, hospitalizations, and deaths and stratify by race and ethnicity.

Vaccine data now posts daily to the mass.gov website each day at 3:30pm and continue to post a more robust set of metrics on vaccination every Thursday. You can find the vaccine numbers and all of our COVID information at [www.mass.gov/covidvaccine](http://www.mass.gov/covidvaccine).

Commissioner Bharel then reminded the PHC about the “Trust the Facts. Get the Vax” campaign that launched during the Superbowl Kick off show– the ad included physicians from diverse backgrounds speaking to trust and safety.

There was a group of about 20 health communications professionals and community leaders advise us during the development of this campaign. This group was instrumental in helping ensure we were on target for our messaging – especially among disproportionately affected communities across our state.

This public information campaign is multi-channel, and multi-lingual and grounded in our own research. This is the first of several ads that will run on TV and digital platforms including multiple languages – including English, Spanish, Portuguese, Cape Verdean, Haitian Creole, Vietnamese, Chinese (Traditional & Simplified), Russian, Arabic and Albanian. We also have a companion video in American Sign Language. The campaign will direct residents to mass.gov/COVIDvaccine, where residents can learn more about the safety and efficacy of the vaccine and when and where they will be able to get vaccinated.

**EQUITY PLAN**

Commissioner Bharel then introduced the new initiative that was just announced on February 16, 2021. This initiative is in line with our data driven, DPH approach to precision public health. The current goal of the initiative is to build trust in vaccine safety and efficacy and work with communities to help residents overcome barriers – both physical and other barriers – to get vaccinated. DPH’s targeted outreach initiative will focus on the 20 cities and towns most disproportionately impacted by COVID-19. Cities and towns with the greatest COVID-19 case burden, taking into account social determinants of health and disproportionate impact of COVID-19 on Blacks, Hispanics and other people of color.

These communities are Boston, Brockton, Chelsea, Everett, Fall River, Fitchburg, Framingham, Haverhill, Holyoke, Lawrence, Leominster, Lowell, Lynn, Malden, Methuen, New Bedford, Randolph, Revere, Springfield and Worcester.

This initiative will bring resources directly to these communities to support engagement and outreach. Each community’s input will be heard regarding their needs and we will assist each city or town, building on existing efforts and strengthening vaccine awareness and administration plans currently in place. This effort will be enhanced by funding to Community Health Centers in order to support the important role of Community Health Workers in increasing vaccine access.

The Department recently awarded the Mass League of Community Health Centers $1M in capacity-building funding, which will be used to increase the capacity of health centers to do outreach and education to priority populations on COVID-19 vaccine, including through CHW Ambassadors. DPH is committed to provide resources and vaccine as needed, understanding that federal vaccine distribution to the state remains constrained.

Commissioner Bharel invited Dr. Sabrina Selk, Director of our Office of Health Equity, present this initiative in more detail.

**Community Impact Survey**

The Commissioner noted that last fall, DPH conducted a COVID-19 Community Impact Survey. This work has informed our efforts and provided a data-driven foundation of our vaccine equity initiative. There have been about 35,000 responses to our Impact Survey and we are eager to share with you the findings and what we learned about the COVID-19 burden in Massachusetts. These responses will be shared later in the meeting.

**BSAS and Housing**

DPH continues to use data and every means possible to address the opioid epidemic as an important social determinant of health, housing instability makes it infinitely harder for individuals to access care for opioid use disorder.

In late January 2021, DPH announced $2 million in grants awarded to two housing programs to increase access to low-threshold housing for adults experiencing homelessness and who are at high risk for HIV exposure. Boston-based nonprofit organizations Commonwealth Land Trust and Victory Programs will provide housing and services for up to 60 individuals per year in Suffolk County with a focus on the Melnea Cass Boulevard and Mass Ave area in Boston. These are Housing First model programs and sobriety is not a requirement for accessing or maintaining housing.

She added that safe and stable housing for individuals vulnerable to chronic health issues like HIV is crucial, especially as COVID-19 continues to impact communities.

Commissioner Bharel then asked if the Council members had any questions before proceeding.

Ms. Blondet would like to see the community health worker roles are clearly articulated and addressed in the campaign.

Dr. David appreciates all the work DPH is doing with vaccine access to critical populations.

Mr. Jacob asked to clarify the role of the local boards of health in this campaign

Commissioner Bharel stated that local boards of health directors have partnered with DPH during the vaccine rollout and exchange resources.

Dr. Bernstein appreciated the acknowledgement of COVID and the opioid epidemic in terms of the emergency department issues and housing.

No further questions or comments from the council members.

**1. ROUTINE ITEMS**

c. January 20, 2021 Minutes (Vote)

Mr. Jacob asked to correct a typo that should read dose.

The Commissioner asked if there was a motion to approve the January PHC minutes with the suggested correction.

Mr. Hovan made the motion, which was seconded Mr. Jacob. All members present approved.

Alba Cruz-Davis joined the meeting at 9:36am

**2. DETERMINATIONS OF NEED**

**a. Request by Emerson Endoscopy and Digestive Health Center, LLC for Substantial Change in Service (Vote)**

Commissioner Bharel then invited the Determination of Need Program Director, Lara Szent-Gyorgyi to review the staff recommendation for Emerson Endoscopy and Digestive Health Center’s request for substantial change in service. She is joined by Rebecca Rodman, Senior Deputy General Counsel. Upon conclusion of Ms. Szent-Gyorgyi’s presentation, the Commissioner opened the meeting to questions from the Council.

Representatives of the Applicant:

Christine Schuster (Lead Speaker), President and CEO, Emerson Hospital

Christine Gallery, Senior Vice President and Chief Strategy Officer, Emerson Hospital

Eric Stastny, Senior Vice President and Chief Operating Officer, Emerson Hospital

Michael Hachey, Senior Vice President and Chief Financial Officer, Emerson Hospital

Mary Ann Gellenbeck, SVP Implementation Services, Physicians Endoscopy

Rob Puglisi, VP of Operations, Physicians Endoscopy

Andy Levine, Attorney, Summit Health Law Partners

Crystal Bloom, Attorney, Summit Health Law Partners

Secretary Chen asked if internet access is being seen as a social determinant of health and if can be integrated.

Secretary Chen also asked if there are natural breaks in the system for over utilization of procedures.

Ms. Szent-Gyorgyi stated that internet access as a social determinant of health had been discussed and will be integrated into analysis.

Ms. Schuster stated that they monitor patients based on age and risk factors and feel confident they are performing the appropriate number of procedures.

Secretary Chen asked for more specific details regarding number of procedures.

Ms. Schuster stated that they follow age related guides for testing schedules.

Dr. Kneeland expressed concern that patients may not be getting screened enough during the pandemic.

Ms. Schuster stated that they have not had many COVID cases and have not had to shut down services and have created a safe environment for patients in conjunction with education on when to seek treatment during the pandemic in order to encourage patients to come in when necessary.

Ms. Gallery added having the center be off site would likely be more likely to come to the center being outside of the hospital locations.

Dr. Bernstein asked if there is Medicaid volume in the new facility.

Ms. Schuster stated that they provide outreach to all their communities, especially high Medicaid communities including seeking approval for urgent care and food pantries based on communities’ assessments to fill the gaps.

Dr. Bernstein asked if they provide pre op evaluation via telehealth.

Ms. Schuster stated they have robust telehealth services and utilize it to determine what is appropriate for the patients.

No further question or comments from the council members.

Commissioner Bharel asked if there was a motion to approve the Center’s request for substantial change in services.

Dr. Kneeland made the motion, which was seconded by Dr. Bernstein. All present approved.

Commissioner Bharel stated Emerson Endoscopy and Digestive Health Center’s request for substantial change in services is approved.

**4. PRESENTATIONS**

**a. Preliminary Findings from the COVID Community Impact Survey (CCIS)**

Commissioner Bharel then invited Dr. Sanouri Ursprung to review some of the preliminary findings from our COVID-19 Community Impact Survey. This survey is critical to understanding how COVID-19 has impacted residents of the Commonwealth, particularly among communities of color. We will continue to evaluate the results and translate those into action, but I wanted you all to get a sense of what the results are telling us so far.

Upon conclusion, Commissioner Bharel asked if the council member had any questions.

Dr. David commented on the concern for reliable internet access for information to inform communities.

Commissioner Bharel stated that has informed the approach on methods to getting out information and accessing information and will be working with communities to understand the best way to access this information.

Dr. Bernstein asked if the DPH robocalls can be broadened to offer more information for accessing information.

Mr. Jacob if there are more engagement strategies for the future in coordination with institutes in place to widen efforts and reach.

Commissioner Bharel stated that efforts have been widely discussed to broaden strategies for alignment in efforts.

Mr. Jacob suggested to align with an established trusted source in communities that currently exist in order to further support the initiative.

Commissioner Bharel agreed and DPH is working with local communities and champions to align these efforts.

Ms. Cruz Davis appreciates all the work being done by DPH on the response and continued effort to improve health.

With no further questions, Commissioner Bharel reminded Council members the next meeting would be held on Wednesday, March 10, 2021. She then asked if there was a motion to adjourn.

Dr. Bernstein made the motion, which was seconded by Secretary Chen. All members present approved. The meeting adjourned at 10:39am.