MINUTES OF THE PUBLIC HEALTH COUNCIL

Meeting of February 9, 2022

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

**PUBLIC HEALTH COUNCIL**

**MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH**

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

**250 Washington Street, Boston MA**

**Docket: \*\*\*REMOTE MEETING\*\*\* Wednesday, February 9, 2022 – 9:00AM**

***Note: The February Public Health Council meeting will be held remotely as a video conference consistent with St. 2021, c. 20, s. 20, which provides for certain modifications to the Massachusetts Open Meeting Law due to COVID-19.***

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

Join by Web: https://eohhs.webex.com/eohhs/onstage/g.php?MTID=e3b454c5a0c08b503fd962a2a9e03e6b3

Dial in Telephone Number: 844-621-3956

Access code: 2534 823 3095

1. **ROUTINE ITEMS**
	1. Introductions.
	2. Updates from Acting Commissioner Margret Cooke.
	3. Record of the Public Health Council Meeting held January 12, 2022. **(Vote)**
2. **DETERMINATIONS OF NEED**
	1. Request by Wellman Healthcare Group, Inc. for a substantial capital expenditure. **(Vote)**
	2. Request by PAM Cubed, LLC for a transfer of ownership. **(Vote)**
3. **PRESENTATIONS**
	1. New Results and Updates from the COVID-19 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.*

Attendance and Summary of Votes:

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

Date of Meeting: February 9, 2022

Start Time: 9:06am Ending Time: 10:40am

| **Board Member** | **Attended** | **First Order: Approval of January 12, 2022 Meeting Minutes (Vote)** | **Second Order: DoN: a. Request by Wellman Healthcare Group, Inc. for a substantial capital expenditure. (Vote)** | **Third Order: DoN** **Request by PAM Cubed, LLC for a transfer of ownership. (Vote)**  |
| --- | --- | --- | --- | --- |
| **Commissioner Margret Cooke** | Yes | Yes | Yes | Yes |
| **Edward Bernstein** | Yes | Yes | Yes | Yes |
| **Lissette Blondet** | No | Absent | Absent | Absent |
| **Kathleen Carey** | Yes | Yes | Yes | Yes |
| **Secretary Elizabeth Chen** | Yes | Yes | Yes | Yes |
| **Harold Cox** | Yes | Yes | Yes | Yes |
| **Alba Cruz-Davis** | Yes | Yes | Yes | Abstain |
| **Michele David** | Yes | Yes | Yes | Yes |
| **Elizabeth Evans** | Yes | Yes | Yes | Yes |
| **Michael Kneeland** | Yes | Yes | Yes | Yes |
| **Joanna Lambert** | Yes | Yes | Yes | Yes |
| **Mary Moscato** | Yes | Yes | Yes | Yes |
| **Secretary Cheryl Poppe** | Yes | Yes | Yes | Yes |
| **Summary** | 12 Members Present; 1 Absent | 12 Members Approved; 1 Absent | 12 Members Approved; 1 Absent | 11 Members Approved; 1 Abstained; 1 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 9, 2022 by the Massachusetts Department of Public Health, 250 Washington Street, Boston, Massachusetts 02108.

Members present were: Margret Cooke; Edward Bernstein, MD; Kathleen Carey, PhD; Secretary Elizabeth Chen, PhD; Harold Cox; Alba Cruz-Davis PhD; Michele David, MD; Elizabeth Evans, PhD; Michael Kneeland, MD; Joanna Lambert; Mary Moscato and Secretary Cheryl Poppe.

Also in attendance was Rebecca Rodman, General Counsel at the Massachusetts Department of Public Health.

Commissioner Cooke called the meeting to order at 9:06am and made opening remarks before reviewing the agenda.

**1. ROUTINE ITEMS**

*b. Updates from Commissioner Margret Cooke*

Commissioner Cooke proceeded to update the council on the following:

**Commissioner’s Office Staff Updates**

Commissioner Cooke introduced and welcomed Dr. Estevan Garcia, a board-certified pediatrician and pediatric emergency medicine physician, to DPH.

* Dr. Garcia has joined us as Chief Medical Officer in the Commissioner’s Office, strengthening our clinical capacity and expertise, supporting our policy, program, and regulatory work, and helping provide clinical leadership for our work on racial equity.
* Dr. Garcia comes to us from Cooley Dickinson Health Care in Northampton, where he was Chief Medical Officer.
* He also works clinically in the pediatric emergency department at UMass Memorial Medical Center.

Commissioner Cooke then announced the promotion of DPH Chief of Staff, Jennifer Barrelle, who has been named Deputy Commissioner of the Department.

* Jen will be continuing her key role in the DPH pandemic response, her policy and strategic planning focus, and her role overseeing several of our DPH Bureaus.
* The Deputy Commissioner also chairs the Public Health Council in the absence of the Commissioner.
* Jen has held several positions at DPH, and prior to coming to the Department, and worked in the Massachusetts House of Representatives for over six years.

Commissioner Cooke then introduced Yves Singletary, who is moving from the Bureau of Community Health and Prevention to a new role as Senior Advisor to the Commissioner.

* Over the past year, Yves has been deeply involved in the COVID-19 Vaccine Equity Initiative and has dedicated his career to creating a positive impact in the lives of children, youth, and families.

**COVID-19 Update**

Commissioner Cooke then reported that there has been a decrease in COVID-19 cases and hospitalizations in Massachusetts.Since last month’s PHC meeting, the 7-day average of newly confirmed COVID cases has decreased by 84%, and COVID hospitalizations have decreased by over 50%. The Department continues to closely monitor these trends on a daily basis.

**COVID Vaccination**

Commissioner Cooke stated that nearly 95% of Massachusetts residents have at least one dose of the COVID-19 vaccine and more than 75% are fully vaccinated. She continued to state that getting vaccinated and boosted remain the single best way for people to protect themselves.

**Vaccine Update: Equity Initiative**

Commissioner Cooke then shared highlights on the DPH Vaccine Equity Initiative.

* The Administration has announced an additional 13.5 million dollars for the Vaccine Equity Initiative, to support community organizations in the cities and towns hardest hit by the COVID-19 pandemic.
* The VEI cities and towns continue their efforts to break down barriers to vaccination, including creative ideas, such as Holyoke offering vaccination at local libraries and forgiving library fines for those vaccinated.
* Several family-friendly, community-based clinics are planned during February school vacation week in 9 municipalities (including Fall River, Methuen, and New Bedford), with 5-7 days of clinics supported by our outreach partners and a multimedia communications campaign.

**Rapid Tests**

Commissioner Cooke stated that testing for COVID continues to be an important prevention tool, and last month, the Administration ordered 26 million rapid antigen tests, scheduled to arrive over the next 3 months. The first distribution priorities are to support K-12 schools and childcare settings.

**Therapeutics**

Commissioner Cooke announced COVID-19 therapeutics are available to combat severe COVID illness. Individuals who test positive now have treatment options, monoclonal antibodies, and new antiviral pills, which can prevent hospitalization. Massachusetts continues to expand access to these new COVID-19 oral antiviral therapies. They are now available at certain retail pharmacies, across most hospital systems, and at monoclonal antibody infusion sites, including 9 state-sponsored locations.

DPH’s updated guidance for clinicians has expanded eligibility to the Paxlovid pill, to ensure patients at higher risk of severe COVID-19 can access this medication**.** Other highly effective treatment options include monoclonal antibodies and remdesivir. DPH has developed an online locator tool now includes all COVID-19 therapeutics and tracks available supply. The locator map informs providers and patients where these therapies can be accessed, to ensure patients have timely access to treatment. Patients should check with their providers about whether these treatments are right for them.

**B2 Variant**

Commissioner Cooke then addressed the new variant, which goes by the scientific name BA-2 and is a branch of the Omicron variant. Viral changes are continuous and new COVID variants will continue to emerge. BA-2 has been present in small numbers in Massachusetts since December and the state is continuing to monitor its activity and monitor for other variants. BA-2 doesn’t appear to cause more severe disease, and our vaccines continue to work.

**MassNotify and My Vax Records**

Commissioner Cooke then reminded the council members about MassNotify:

* MassNotify is a tool that works through smartphones, with a focus on privacy, to notify users who may have been exposed to COVID-19 and advises on next steps to take.
* This service, used by 2 million of our residents, empowers users to make informed decisions about their behaviors after an exposure.

Additionally, you can sign up for another useful tool: My Vax Records, which our DPH team helped to develop and launch.

* My Vax Records gives residents an easy way to access their COVID-19 digital vaccine card and vaccination history.
* To date, over 1.1 million residents have used the My Vax Records tool, and nearly 600,000 have opted to use the QR code feature.

**Public Health Staff Appreciation**

Commissioner Cooke stated that February 1st marked 2 years since the first confirmed case of COVID-19 in Massachusetts. DPH staff have been working tirelessly to ensure the health and safety of all residents. Colleagues at the Massachusetts Medical Society issued a statement of appreciation in support of public health staff.

In part, this letter reads:

*“Our partners in public health are heroic. But we realize that they are also exhausted and worn. They are resolute in their commitment to protect, serve, and advocate on behalf of all of us. The sacrifices that have been made by countless individuals, often behind the scenes, do not go unnoticed by physicians”*

Upon the conclusion of the updates, Commissioner Cooke then asked if the Council members had any remarks or questions before proceeding.

Dean Cox asked if there is a way to recognize the work of those working within local boards of health to show appreciation and commend their work.

Dr. Bernstein stated is support of this sentiment and commended the local public health workforce.

Commissioner Cooke agreed, noting that the Mass. Medical society acknowledged local public health as well, and asked the DPH General Counsel to provide more information on how to accomplish this request.

Ms. Rodman asked Dean Cox to draft a letter for DPH to review and sign for the PHC.

Dean Cox agreed to do this.

No further questions or comments from the council members.

**1. ROUTINE ITEMS**

*c. January 12, 2022 Minutes (Vote)*

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

Dr. David made the motion, which was seconded by Ms. Moscato. Secretary Poppe abstained. All other present members approved.

**2. DETERMINATIONS OF NEED**

*a. Request by Wellman Healthcare Group, Inc. for a substantial capital expenditure. (Vote)*

Commissioner Cooke invited the Determination of Need Program Director, Lara Szent-Gyorgyi to review the staff recommendation for Wellman Healthcare Group’s request for a substantial capital expenditure. Rebecca Rodman, General Counsel for the Department, accompanied her.

Upon conclusion of the presentation, Commissioner Cooke asked if the Council members had any questions.

Secretary Chen asked if dementia friendly designs will be incorporated into the plans.

David Cavalier, owner of the Palmer Healthcare Center, stated that he did not have a specific answer.

Secretary Chen stated that this was disappointing response and pointed out there are long lengths of stay at the facility. She recommended there should be considerations to include dementia-friendly design in the plan.

Mr. Cavalier stated they will and thanked Secretary Chen for the recommendation.

Emily Kretchmer, Counsel to Wellman Healthcare Group, stated they are working with the architects to design these plans that will incorporate this request and comply with state regulations.

Secretary Poppe asked about the size of the secured outdoor space and stated that this area is very important for residents with dementia.

Mr. Cavalier agreed that these areas are important and required for these residents. There are areas on both floors in a secure location outdoors in the form of a deck and backyard area for residents and will incorporate outdoor activities.

Ms. Moscato asked if the recent high inflation rates and supply chain issues are considered in the cost of construction in the application.

Ms. Szent-Gyorgyi stated that a notice has been issued that if construction rates are going up, and if applicants can demonstrate that these are purely due to increases in material costs, they do not need to file an amendment, and can move forward.

Ms. Moscato expressed the importance of planning for dementia friendly units and asked if services will be maintained during this renovation process to avoid gaps in services for residents.

Mr. Cavalier stated the building will be functioning during the construction and transition should be smooth. He added that the square footage of the outdoor area on the top floor is 1,000 square feet, and on the first floor, the outdoor area is 1,529 square feet-- to address the earlier question.

Dean Cox asked how dementia friendly design will be incorporated in the work that is currently happening.

Ms. Rodman stated there are Massachusetts regulations that require dementia friendly design plans, that these renovations must adhere to.

Ms. Kretchmer stated the architects and applicants will comply with the regulations and requirements to ensure a dementia friendly design.

Ms. Szent-Gyorgyi stated the current facility is not able to come into compliance for dementia design with the current plan; the new facility will have the capability to fulfill these requirements for dementia friendly design.

Dr. Bernstein asked if there is patient panel representation for community engagement as well as staffing engagement.

Ms. Jennifer Sawyer, Director of Nursing for Wellman Healthcare Group, stated there is adequate staff currently. There are two aides in the dining and activity room and two aides in activity rooms. There are various activities available for residents.

Dr. Bernstein requested that someone speak to community engagement.

Ms. Sawyer stated the residents go to senior centers and engage in the community.

Ms. Szent-Gyorgyi clarified that the question is regarding the Determination of Need (DoN) Factor around community engagement.

Ms. Kretchmer stated getting the DoN approval is the first step in the process. There has been discussions with nursing facilities, hospitals, community leaders and local elected officials. There has been some communication with the patients, family and staff, but this is limited until approval is confirmed.

Dr. Cruz-Davis asked to review the patient demographics and the community being served.

Ms. Kretchmer stated that this facility serves a low-income community and there is a need for behavioral and mental health care. The majority of the residents come within 20 miles of the facility.

Ms. Szent Gyorgyi stated it is also a high public payer facility.

With no further questions or comments, Commissioner Cooke then asked if there is a motion to approve Wellman Healthcare Group’s request for a substantial capital expenditure.

Dr. Carey made the motion, which was seconded by Ms. Moscato. All other present members approved.

**2. DETERMINATIONS OF NEED**

*b. Request by PAM Cubed, LLC for a transfer of ownership. (Vote)*

Commissioner Cooke again invited Lara Szent-Gyorgyi, to review the staff recommendation for PAM Cubed LLC’s request for a transfer of ownership.

Upon conclusion of the regulation, Commissioner Cooke thanked Ms. Szent-Gyorgyi and asked if the Council members had any questions.

Dr. Carey asked about specific gaps in care delivery that are most pressing. Additionally, she asked about the footnote that stated 110 beds that are not in service and asked for more explanation.

Ms. Kristen Smith, Executive Vice President and Chief Transformation Officer, PAM Health, introduced herself. She stated that these historical gaps, which were identified across all 16 hospitals acquired in this transaction, were due to a lack of corporate support, staffing inadequacies and an inability to improve programming and quality of care. PAM Health’s efforts to address staffing issues (a concern seen across the country) include dedicated traveler programs, and promotion through job fairs. From a patient population standpoint, there has been community outreach and integration, marketing of programs, and collaboration with short term acute care hospitals and physicians in the area. Regarding licensed beds versus operating beds, there have been environmental opportunities contributing to this: when PAM Health acquired the hospital, there were a total of 88 licensed beds, while the census was in the 20s. She stated that this was in the midst of a significant need for services, and that they have already improved that census, which will improve access to care, if the ownership transfer is approved.

Ms. Kretchmer, speaking now as Counsel to PAM Cubed, stated that this hospital has been through multiple changes in ownership in the past few years. This would account for some of the beds that were not in service in this location, and assured the Council that PAM Cubed and will work with DPH on this issue.

Secretary Poppe asked if there will be sufficient behavioral health services available within the acute care provided.

Ms. Smith stated that historically, this site has been classified as a traumatic brain injury unit, or neuro rehab unit (NRU – they have 41 of these beds). PAM has evaluated these services and integrated their behavioral health teams into this unit. She added they are dedicated to providing services for patients in need of mental and behavioral health care, within their license. This unit is currently operating at half of the licensed beds—they have recently hired a new unit director, with plans to have a dedicated community liaison, additional staff and programming to expand this area due to the high mental health need in the community and area.

Ms. Moscato commended the plan to utilize these behavioral health beds and stated that she was pleased to see this in motion.

Ms. Smith stated they strive to meet the needs of Massachusetts hospitals in terms of long-term acute care (LTAC)-specific care.

Ms. Moscato asked if the plan is the keep this facility as an LTAC or will there be other types of services provided.

Ms. Smith stated it will remain as services currently provided but will continue to monitor the needs of the population and will adjust and/or expand if needed.

Dr. Bernstein asked if there has been a survey of employees for staffing improvements.

Ms. Smith stated the human resources teams are on site and provided focus groups to address this issue. The employees were welcoming of PAM health and excited for the additional resources and opportunities provided to staff including clinical support and educational opportunities. There had been a lot of staff retention with the goal of continuing to bring in more full-time staff.

With no further questions or comments, Commissioner Cooke then asked if there is a motion to approve PAM Cubed LLC’s request for a transfer of ownership.

Secretary Chen made the motion, which was seconded by Dr. Bernstein. Dr. Cruz-Davis was absent during this vote. All other present members approved.

**3. PRESENTATIONS**

*a. New Results and Updates from the COVID-19 Community Impact Survey (CCIS).*

Commissioner Cooke welcomed the Bureau of Community Health and Prevention to share findings from the COVID-19 Community Impact Survey (CCIS). The insights they shared with the Council focused on youth. Allison Guarino, an epidemiologist in the Division of Child and Adolescent Health and Reproductive Health presented.

Upon conclusion of the presentation, Commissioner Cooke asked if Council members had any questions.

Dr. Cruz-Davis thanked the team for this important data.

Dr. David thanked the CCIS team for the data and asked if there are ways to increase mental health outreach and access regarding these issues.

Ms. Mi-Haita James, Division of Violence of Injury Prevention at DPH, stated they are aware of the workforce issue within mental and behavioral health services and there are violence intervention and prevention programs, as well as primary violence prevention programming for youth at risk (YAR). There are also YAR grant programs, gun violence prevention programs for older youth at risk, as well as the creation of safe spaces for the LGBTQ+ community. There are various services available to youth in communities and a focus on the positive youth development approach to address these needs.

Ms. Jane Ayers, DPH program coordinator, who works directly with community-based organizations, stated that the needs of behavioral health did increase and current programs were able to increase services with addition funding supplied. Staff support was also offered for the LBGTQ+ safe spaces program, including self-care for staff to further support this community. DPH partnered with MA advocates for children to help youth elevate voices through virtual platforms, with support from Harvard law students.

Dr. Cruz-Davis asked if there are initiatives for implementing these findings into strategy.

Ms. Lauren Cardoso stated this team is working on the “data to action” piece on this effort and will be coming back to the PHC to highlight the actions they are coming out of these data points.

With no further questions, Commissioner Cooke reminded Council members the next meeting would be held on Wednesday, March 9, 2022.

The Commissioner asked members to stay on briefly for an announcement, and used the phrase “executive session,” but there was no executive session held. Commissioner Cooke then asked if there was a motion to adjourn. Dr. Cruz-Davis made the motion which was seconded by Dr. David. All present members approved.

The meeting adjourned at 10:40am.

\*Note: On 6/2/22 a correction was made to these minutes reflect the official appointed titles for Commissioner Cooke and Secretary Poppe by removing their “Acting” titles.