**MINUTES OF THE PUBLIC HEALTH COUNCIL**

**Meeting of January 10, 2018**

**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: Wednesday, January 10, 2018 - 9:00 AM**

1. **ROUTINE ITEMS**
	1. Introductions
	2. Updates from Commissioner Monica Bharel, MD, MPH
	3. Record of the Public Health Council December 13, 2017 Meeting **(Vote)**
	4. Request to Renew PHC Delegations of Authority to the Commissioner of Public Health **(Vote)**
2. **FINAL REGULATIONS**
	1. Request for final promulgation of proposed amendments to 105 CMR 141.000, *Licensure of Hospice Programs* **(Vote)**
3. **INFORMATIONAL PRESENTATIONS**
4. Informational presentation on Massachusetts Preparations for Hurricane Relief Efforts

*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 time-keeping, attendance and votes cast.

**Date of Meeting:** Wednesday, December 13, 2017

**Start Time:** 9:16AM **Ending Time:** 11:15M

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| **Board Member** | **Attended** | **Record of the Public Health Council December 13, 2017 Meeting (Vote)** | **Request to Renew PHC Delegations of Authority to the Commissioner of Public Health (Vote) \*** | **Request for final promulgation of proposed amendments to 105 CMR 141.000, *Licensure of Hospice Programs* (Vote)** |
| **Vote No. 1** | **Vote No. 2** | **Vote No. 3** | **Vote No. 4** | **Vote No. 5** | **Vote No. 6** |
| Monica Bharel | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Edward Bernstein | Yes | Abstained | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Lissette Blondet | Yes | Abstained | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Derek Brindisi | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Harold Cox | Absent  | Absent | Absent | Absent |
| John Cunningham | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Michele David | Yes | Abstained | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Meg Doherty | Absent  | Absent | Absent | Absent |
| Michael Kneeland | Yes | Abstained | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Joanna Lambert | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Paul Lanzikos | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Lucilia Prates-Ramos | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Secretary Francisco Ureña | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| Alan Woodward | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes | Yes |
| **Summary** | **12 Members Present, 2 Members Absent** | **8 Members Approved, 2 members Absent, 4 members abstained** | **12 members approved, 2 members absent** | **12 members approved, 2 members absent** |

**\*See Attachment A for text of motions put forth for a vote**

**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, January 10, 2018 at the Massachusetts Department of Public Health, 250 Washington Street, Henry I. Bowditch Public Health Council Room, 2nd Floor, Boston, Massachusetts 02108.

Members present were: Monica Bharel, MD, MPH; Edward Bernstein, MD; Lissette Blondet; Derek Brindisi; John Cunningham, PhD; Michele David, MD; Michael Kneeland, MD; Joanna Lambert; Paul Lanzikos; Lucilia Prates-Ramos; Secretary Francisco Ureña; and Alan Woodward, MD.

Absent member(s) were: Harold Cox and Meg Doherty

Also in attendance was Margret Cooke, General Counsel at the Massachusetts Department of Public Health.

Commissioner Bharel called the meeting to order at 9:19 AM and made opening remarks before reviewing the agenda.

**ROUTINE ITEMS**

**Updates from Commissioner Monica Bharel, M.D., MPH**

Dr. David 9:24am

Commissioner Bharel began updates by announcing that Massachusetts was recently recognized as one of two states in the nation for our public health preparedness.

The Trust for America’s Health (TFAH), found Massachusetts to be one of the two most prepared states when it comes to preventing, responding to, and recovering from public health emergencies such as disease outbreaks, bioterrorism, and natural and manmade disasters.

The Commonwealth and Rhode Island were identified as the only states to have met 9 out of 10 public health preparedness indicators in its report Ready or Not 2017? Massachusetts’ score reflects our work across the Department including on health security preparedness, flu vaccination, climate change readiness, food safety, healthcare associated infections, and state public health laboratory biosafety measures.

The score also is a reflection of our collaboration with the Massachusetts Emergency Management Agency which has put in place a system to support emergency access for healthcare staff and supplies during emergencies.

DPH’s critical emergency preparedness and response tactics were recently deployed to provide assistance to the Boston Medical Center.

The Commissioner then discussed an incident that recently occurred at Boston Medical Center in which the Department was contacted by the Boston Public Health Commission regarding a frozen sprinkler head at Boston Medical Center (on the 6th floor of the Yawkey Building. A pipe burst and caused extensive flooding with impacts to the hospital’s Labor & Delivery unit as well as its Neonatal Intensive Care Unit (NICU).

An alert was issued to EMS services indicating that all labor and delivery patients were to be transported to other area hospitals and that BMC had established a triage area in their Emergency Department for patients self-presenting. Additionally, all women on site in active labor were transferred to nearby hospitals and all NICU patients were transferred to BMC’s Pediatric ICU.

Since then the Department’s Office of Preparedness and Emergency Management has been coordinating with BPHC, BMC and area hospitals to ensure BMC patient access to Labor & Delivery and NICU services as the hospital makes repair to the sprinkler system and addresses damages and clean up.

The Department has supported these efforts through the use of the Health and Homeland Alert Network and our situational awareness platform, WebEOC, to ascertain real-time information on bed availability and BMC patient admissions. Requests are made to Boston-area hospitals twice a day for updates. DPH continues to monitor events at BMC and will support any emerging needs over the coming days until the hospital is able to re-open all of its Labor & Delivery and NICU services.

The Commissioner then thanked all of the OPEM staff members who have supported BMC as it recovers from this event.

Next, Commissioner Bharel noted the Department’s discovery of a rare Salmonella strain that led to a multistate recall of frozen coconut by the distributor and an acknowledgement by the FDA of the role DPH played. The FDA said testing performed by DPH led Evershing International Trading Company to announce a recall of Coconut Tree Brand Frozen Shredded Coconut, distributed in multiple states.

Staff from DPH’s Food Protection Program in the Bureau of Environmental Health, the State Public Health Laboratory and the Epidemiology Program housed in the Bureau of Infectious Disease and Laboratory Sciences, and the Boston Public Health Commission discovered the unusual Salmonella strain while investigating a case of Salmonella.

As part of the investigation, staff from DPH and Boston Inspectional Services collected samples of various food products used as ingredients from a Boston restaurant and interviewed people who fell ill.

Those food samples were brought back to the State Public Health Laboratory for testing, which confirmed that one of the samples, an unopened package of raw frozen coconut meat, was positive for Salmonella. DPH shared the lab results with the FDA and the US Centers for Disease Control and Prevention, which ultimately led to the decision by the distributor to announce the recall of all lots of the frozen shredded coconut sold between Jan. 3, 2017 and Jan. 3, 2018.

This case demonstrates how public health in Massachusetts works in a coordinated way to protect the food supply and enable consumers to shop at grocery stores and eat at restaurants with confidence. She applauded all the DPH staff involved in the effort.

Lastly, the Commissioner mentioned that 3 campaigns have recently won national and international health and communications marketing awards. “You’re Never too Old to be an Organ Donor” –which encourages men and women over the age of 50 to register as organ donors— won 2 awards.

“State without Stigma” which targets active users and their friends and family with messaging to reduce the stigma associated with opioid misuse that prevents so many people from seeking help has won 4 awards. And the Department’s most recent campaign, “Stop Addiction before It Starts” which targets parents with a message that they can protect their teens by talking to them about Rx opioids has won 2 awards so far.

The awards include the Davey Award, the Telly Award, the Communicator Award and the MarCom Award. These are all highly coveted awards that draw international competition and that recognize big ideas in marketing and communications.

The Commissioner then asked if there were any questions or comments on the updates.

Dr. Woodward inquired on whether there would be any media coverage on the salmonella discovery.

Commissioner Bharel confirmed that press release would be going out shortly.

Mr. Lanzikos noted that Boston.com reported that a national study ranked Massachusetts as the first state for “best to raise a family” in which healthcare was a major fact. He then suggested that an opportunity be taken to read the report of a recent committee on the patient quality of life for nursing home residents.

Commissioner Bharel stated that is something that can be brought to the Council and also noted that they can bring a follow-up updated regarding the SPOT campaign.

With no further questions, the Commissioner proceeded with the docket.

**1. ROUTINE ITEMS**

**c. Record of the Public Health Council December 13, 2017 Meeting (Vote)**

Commissioner Bharel asked if any members had any changes to be included in the December 13, 2017 meeting minutes.

Seeing none, the Commissioner asked for a motion to accept the minutes. Dr. Woodward made the motion and Mr. Lanzikos seconded it. Dr. Kneeland, Dr. David, Dr. Bernstein, Ms. Blondet abstained as they were not present at the November 8th meeting. All other present members approved.

**1. ROUTINE ITEMS**

**d. Request to Renew PHC Delegations of Authority to the Commissioner of Public Health (Vote)**

Commissioner Bharel then invited Deputy General Counsel, Sondra Korman, to the table to review with the Members several Department administrative and operational functions the Public Health Council previously delegated to the Commissioner of Public Health. After an overview, the Council will be asked to reaffirm delegation of these functions.

After Ms. Korman’s presentation, the Council was asked if they had any questions.

Dr. Woodward inquired as to why this was brought before the Council now.

Ms. Korman informed him that due to change in membership and as a housekeeping item they believed it would be most prudent to bring before the Council.

Dr. Woodward suggested that it should be brought before the Council when a significant change occurs in the composition of the Council.

Mr. Lanzikos agreed with Dr. Woodward and asked for Ms. Korman to repeat the last delegation and inquired about agency decisions.

Commissioner Bharel noted that the delegation refers to administrative rather than strategic and that she brings certain things before the council such as the introduction of the Office of Population Health and the combination of the State Lab and the Bureau of Infectious Disease.

With no further questions or comments, the Commissioner requested the Council to reaffirm these delegated functions. To do so, she asked for a motion and vote to renew delegation for each function:

With respect to the request to confirm and renew the delegation of authority to approve licenses for facilities and entities, the Commissioner asked for a motion from the Public Health Council to confirm and renew its delegation to the commissioner (or designee) its authority to approve initial and renewal licenses for facilities and entities subject to the Department’s licensing authority.

Dr. Bernstein made the motion, Ms. Blondet seconded it. All present members approved.

With respect to the request to confirm and renew the delegation of authority to issue final agency decisions when the aggrieved party fails to appeal or withdraws the appeal the Commissioner asked for a motion from the Public Health Council to confirm and renew its delegation to the commissioner (or designee) its delegation to the Department program that initiated the agency action, the authority to issue final agency decisions in cases where the aggrieved party fails to request an adjudicatory hearing or withdraws such hearing request.

Dr. David made the motion, Secretary Ureña seconded it. All present members approved.

With respect to the request to confirm and renew the delegation related to the public health hospital by-laws, the Commissioner asked for a motion from the Public Health Council to confirm and renew its delegation of authority to the Commissioner for approval and amendment of the organizational bylaws governing the four public health hospitals: Lemuel Shattuck Hospital, Mass. Hospital School, Tewksbury Hospital, and Western Massachusetts Hospital.

Mr. Lanzikos made the motion, Ms. Blondet seconded it. All present members approved.

With respect to the request to confirm and renew the delegation of authority to review and approve tentative decisions in adjudicatory cases, the Commissioner asked for a motion from the Public Health Council to confirm and renew its delegation of authority to the Commissioner to review and approve tentative decisions issued by the hearing officer following adjudicatory hearings. The commissioner shall continue to submit semiannual reports each January and July to the PHC with regard to the final agency decisions reached pursuant to this delegation.

Dr. David made the motion, Dr. Woodward seconded it. All present members approved.

Commissioner Bharel asked the Public Health Council for a motion to confirm and renew the determination that it deems approved the personnel appointments set forth in Massachusetts General Law, Chapter 17, Sections 4 through 7, that are made by the Commissioner in accordance with the hiring procedures of the Executive Office of Health and Human Services.

Dr. Woodward made the motion, Secretary Ureña seconded it. All present members approved.

The Commissioner asked for a motion from the Public Health Council to confirm and renew the determination that it deems approved the organizational changes made by the commissioner in accordance with Massachusetts General Law, Chapter 17, Section 4. The Commissioner shall, on an annual basis, submit a report to the PHC of senior staff appointments and any organizational changes to the Department made pursuant to these determinations.

Mr. Lanzikos made the motion, Dr. David seconded it. All present members approved.

With all votes confirmed, the delegation of these functions to the Commissioner or designee has been renewed.

**2. FINAL REGULATIONS**

**a. Request for final promulgation of proposed amendments to 105 CMR 141.000, Licensure of Hospice Programs (Vote)**

The Commissioner then invited Sherman Lohnes, Director of the Division of Health Care Facility Licensure and Certification within the Bureau of Health Care Safety and Quality, Lauren Nelson, Director of Policy and Regulatory Affairs, and Rebecca Rodman, Deputy General Counsel, to the table to request approval to promulgate the proposed changes to 105 CMR 141.000, Licensure of Hospice Programs.

Upon the conclusion of their presentation, the Council was asked if they had any questions or comments.

Dr. David inquired if those changes have affected dementia training.

Ms. Nelson replied that any concern that dementia training of a hospice worker would not be transferable to other hospice agencies or long term care facilities has been addressed by the addition of transferability language in the Administration section of the regulation.

With no further questions, the Commissioner asked if there is a motion to accept the amendments to 105 CMR 141.000.

Dr. Woodward made the motion, Dr. Bernstein seconded it. All present members approved.

**3. INFORMATIONAL PRESENTATIONS**

**a. Informational presentation on Massachusetts Preparations for Hurricane Relief Efforts**

For the day’s last agenda item, the Commissioner invited Kerin Milesky, Director of the Office for Preparedness and Emergency Management, to the table for a debrief on Massachusetts’ role in responding to last year’s series of hurricanes. She is joined by a special guest, Dr. Paul Biddinger, Director of Mass General Hospital’s Center for Disaster Medicine and Chief of Emergency Preparedness, who will present on Massachusetts’ and MGH’s response in Puerto Rico to the devastation caused by Hurricane Maria on that island.

Dr. Biddinger is also joined by Hilarie Cranmer, Lynn Black, David Reisman, Jacky Nally, and Lindsey Martin.

Dr. Kneeland leaves at 10:22am and does not return.

Upon the conclusion of their presentation, the Council was asked if they had any questions or comments.

Dr. David thanked them for their presentation and asked if they foresee these requests happening more often. She then discussed the possibility of more than one institution being involved and a potential for collaboration.

Dr. Biddinger also noted the importance of the linguistic and cultural competency when responding to these situations. He also discussed the difficulty in securing individuals with specific expertise given the short notice. He also discussed the desire to broaden the request in order to receive a team with various expertise.

Mr. Lanzikos asked why Dr. Biddinger believes these activations will occur more frequently. He also asked how well prepared we are as a state and nation to handle that response.

Dr. Biddinger replied that with the change in federal administration there is now a new assistance secretary for preparedness and response within HHS. There have been presentations that suggest a pivot from federal team to deployments to regional and state deployments. The federal system currently requires a number of resources to deploy the assets and allowing the states and regions to assist could lower cost and speed response time.

Mr. Brindisi inquired about the local DMAT team and if they were deployed.

Dr. Biddinger replied that they were there but EMAC teams were deployed since federal resources were limited.

Mr. Brindisi then discussed inter-institutional relationships.

Dr. Woodward discussed the importance of integration and coordination and that some of the lessons that were learned are very critical. He noted that he hoped that feedback was received on the state, federal and regional level.

Dr. Bernstein questioned the number of people they saw versus the number of people in Puerto Rico as a whole.

Dr. Biddinger stated that when they are deployed like this that are asked to stay in a very narrow lane thus having a specific mission and limiting their experience. They worked with others prior to the deployment for emergency medications and equipment.

Ms. Martin also discussed the disconnect between the huge need and the number of individuals in their shelter (33). She also noted that when their team went to visit a patient in the hospital they noted that the ED was overwhelmed and her team didn’t have the logistical capacity to take care of their patients despite the need.

Ms. Cranmer also discussed the trifecta incorporating public health, disaster management, and clinical medicine.

Dr. David concurred with Ms. Cranmer’s statement and discussed her experience in Haiti.

Mr. Lanzikos asked how they handled the pharmaceutical issue and if the UN has a role.

Dr. Biddinger replied that they found a pharmacist to sign off in Puerto Rico. Also, there is quite a bit going on the UN and WHO level due to the events after Haiti.

Ms. Blondet asked if they had any experience in working with Community Health Workers.

Dr. Biddginer replied that they have quite a bit experience within their internal system but on the deployment side it is a bit more difficult. There is no community health support on the federal level and he discussed their importance within integration process.

Ms. Black also discussed the importance of community health workers since the death tolls tend to rise after the disaster and the need for on the ground support.

With no further questions or comments the Commissioner asked for asked for a motion to adjourn. Dr. Woodward made the motion Dr. Bernstein seconded it. All present members approved.

The Commissioner reminded the Council that the next meeting is Wednesday, February 14, 2018 at 9AM.

The meeting adjourned at 10:53AM.

**ATTACHMENT A: MOTIONS FOR PHC DELEGATION OF AUTHORITY:**

 **VOTE NO. 1**: With respect to Department’s staff’s request to confirm and renew the delegation of authority to approve licenses for facilities and entities:

The Public Health Council hereby confirms and renews its delegation to the commissioner (or designee) its authority to approve initial and renewal licenses for facilities and entities subject to the Department’s licensing authority.

**VOTE NO. 2**: With respect to the request to confirm and renew the delegation of authority to issue final agency decisions when the aggrieved party fails to appeal or withdraws the appeal:

The Public Health Council hereby confirms and renews its delegation to the Department program that initiated the agency action, the authority to issue final agency decisions in cases where the aggrieved party fails to request an adjudicatory hearing or withdraws such hearing request.

**VOTE NO. 3**: With respect to the request to confirm and renew the delegation related to the public health hospital by-laws:

The Public Health Council hereby confirms and renews its delegation of authority to the Commissioner for approval and amendment of the organizational bylaws governing the four public health hospitals: Lemuel Shattuck Hospital, Mass. Hospital School, Tewksbury Hospital, and Western Massachusetts Hospital.

**VOTE NO. 4**: With respect to the request to confirm and renew the delegation of authority to review and approve tentative decisions in adjudicatory cases:

The Public Health Council hereby confirms and renews its delegation of authority to the Commissioner to review and approve tentative decisions issued by the hearing officer following adjudicatory hearings. The commissioner shall continue to submit biannual reports (January and July) to the PHC with regard to the final agency decisions reached pursuant to this delegation.

DEEMED APPROVED VOTES:

**VOTE 5**:

The Public Health Council hereby votes to confirm and renew the determination that it deems approved the personnel appointments set forth in M.G.L. c. 17, §§4 through 7, that are made by the Commissioner in accordance with the hiring procedures of the Executive Office of Health and Human Services.

**VOTE 6:**

The Public Health Council hereby votes to confirm and renew the determination that it deems approved the organizational changes made by the commissioner in accordance with M.G.L. c. 17, §4. The Commissioner shall, on an annual basis, submit a report to the PHC of senior staff appointments and any organizational changes to the Department made pursuant to these determinations.