**MINUTES OF THE PUBLIC HEALTH COUNCIL**

**Meeting of January 9, 2019**

**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 9, 2019 - 9:00 AM**

1. **ROUTINE ITEMS**
	1. Introductions
	2. Updates from Commissioner Monica Bharel, MD, MPH.
	3. Record of the Public Health Council December 12, 2018 Meeting. **(Vote)**
2. **DETERMINATIONS OF NEED**
	1. Request by CareGroup, Inc. for substantial capital expenditure related to a new hospital inpatient building on the Beth Israel Deaconess Medical Center-West Campus. **(Vote)**
	2. Request by Medford Surgery Center, LLC for construction of a freestanding ambulatory surgery center on the campus of Lawrence Memorial Hospital. **(Vote)**
	3. Request by Steward Health Care System, LLC for amendment to build out shell space associated with a previously approved determination of need for substantial capital expenditure at St. Elizabeth’s Hospital. **(Vote)**
3. **PRESENTATIONS**
4. The Hepatitis A outbreak in vulnerable populations: public health response.

*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, January 9, 2019

**Start Time:** 9:18am **Ending Time:** 11:30am

| **Board Member** | **Attended** | **Record of the Public Health Council December 12, 2018 Meeting (Vote)** | **DETERMINATIONS OF NEED:****a. Request by CareGroup, Inc. for substantial capital expenditure related to a new hospital inpatient building on the Beth Israel Deaconess Medical Center-West Campus. (Vote)** | **DETERMINATIONS OF NEED:****b. Request by Medford Surgery Center, LLC for construction of a freestanding ambulatory surgery center on the campus of Lawrence Memorial Hospital. (Vote)** | **FINAL REGULATIONS****c. Request by Steward Health Care System, LLC for amendment to build out shell space associated with a previously approved determination of need for substantial capital expenditure at St. Elizabeth’s Hospital. (Vote)** |
| --- | --- | --- | --- | --- | --- |
| Monica Bharel | Yes | Yes | Yes | Yes | Yes |
| Edward Bernstein  | Yes | Yes | Yes | Yes | Yes |
| Lissette Blondet | Yes | Yes | Yes | Yes | Yes |
| Derek Brindisi | Absent | Absent | Absent | Absent | Absent |
| Harold Cox | Yes  | Yes | Yes | Yes | Yes |
| John Cunningham | Yes | Yes | Yes | Yes | Yes |
| Michele David | Absent | Absent | Absent | Absent | Absent |
| Meg Doherty | Absent | Absent | Absent | Absent | Absent |
| Michael Kneeland | Yes | Yes | Yes | Yes | Recused |
| Joanna Lambert | Yes | Abstained | Yes | Yes | Yes |
| Paul Lanzikos | Yes | Yes | Yes | No | Yes |
| Lucilia Prates-Ramos | Absent | Absent | Absent | Absent | Absent |
| Secretary Francisco Ureña | Yes | Yes | Yes | Yes | Yes |
| Alan Woodward | Yes | Yes | Yes | Yes | Yes |
| **Summary** | **10 members present, 4 members absent** | **9 members approved, 4 members absent, 1 member abstained** | **10 members approved, 4 members absent** | **9 members approved, 4 members absent, 1 member opposed** | **9 members approved, 4 members absent, 1 member recused** |

**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 9, 2019 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; Lissette Blondet; Harold Cox; John Cunningham, PhD; Michael Kneeland, MD; Secretary Francisco Ureña; Paul Lanzikos; Joanna Lambert and Alan Woodward, MD.

Absent member(s) were: Derek Brindisi; Michele David, MD; Meg Doherty; and Lucilia Prates-Ramos.

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

Commissioner Bharel called the meeting to order at 9:18 AM and made opening remarks before reviewing the agenda.

**1. ROUTINE ITEMS**

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

Commissioner Bharel began by highlighting some of the public health work that is taking place at the Department and across the state including a rise in Massachusetts life expectancy breaking the national trend. Data show that the average life expectancy of Massachusetts residents rose to 80 years and 8 months in 2016, whereas national trends show a decline in how long Americans are expected to live. In 2016, there were 832 fewer deaths, and the age-adjusted death rate declined for white non-Hispanics, Asian non-Hispanics, and Hispanics when compared to 2015.

However, during this same time the death rate increased for black non-Hispanic residents and was more than three times higher for Massachusetts residents who completed high school or less as compared to those who completed education beyond high school. As we continue our public health efforts to close the gap in health disparities, findings like this play a key role in helping us shape our prevention efforts so they are targeted where they are most needed.

Commissioner Bharel also highlighted that just prior to Tobacco 21 taking effect December 31st, Commissioner Bharel wrote an op-ed on vaping that was published in a variety of outlets including the Patriot Ledger, Brockton Enterprise, Marlborough Enterprise and others. The op-ed discussed the vaping epidemic, the dangers to youth and young adults, called on parents to learn more about e-cigarettes and cited the December 31st effective date of the new tobacco law raising the age for purchase of tobacco or vaping products from 18 to 21. Commissioner Bharel will be sure to send a copy so you can share with your networks as we all continue to sound the alarm on the harmful effects of vaping and vaping marketing have on our youth.

In addition to 2019 being a new year, it is also marks the 150th anniversary of the Department of Public Health. The official anniversary will come in September, but I wanted to highlight this milestone. There will celebrations for this achievement throughout the year, and hope to involve you all in those activities. There will be more to come on plans to mark our ses-qui-centennial over the course of the year.

Commissioner Bharel announced that Nora Mann, Director of the Determination of Need program, will be retiring from state service at the end of January. Upon her departure and during the search for a new program director, Assistant Commissioner Elizabeth Chen will step in as Interim Program Director. While you will hear from Nora later this morning, please join me in thanking Nora for her time at DPH leading the DoN program.

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

**1. ROUTINE ITEMS**

**c. Record of the Public Health Council December 12, 2018 Meeting (Vote)**

Commissioner Bharel asked if any members had any changes to be included in the December 12, 2018 meeting minutes.

Dr. Kneeland stated he had recused himself from the determinations of need for Tenent Healthcare and asked for amendment.

Commissioner Bharel asked for a motion to accept the minutes. Motion to accept minutes as amended, and Mr. Lanzikos made the motion and Dr. Cunningham seconded it. Joanne Lambert abstained. All other present members approved.

**2. DETERMINATIONS OF NEED**

**a. Request by CareGroup, Inc. for substantial capital expenditure related to a new hospital inpatient building on the Beth Israel Deaconess Medical Center-West Campus. (Vote)**

Commissioner Bharel invited Nora Mann, Determination of Need Program Director, and Rebecca Rodman, Deputy General Counsel, to the table to present the DoN staff recommendation for substantial capital expenditure request from CareGroup related to a new hospital inpatient building at Beth Israel Deaconess Medical Center. Additionally, there are representatives of the applicant here with us today, available to respond to questions after Nora’s presentation.

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

Dr. Woodward asked for applicants to respond to upcoming questions.

Peter Healy, President, Beth Israel Deaconess Medical Center; Marsha L. Maurer, RN, MS, Senior Vice President Patient Care Services, Chief Nursing Officer; Walter Armstrong SVP, Capital Facilities and Engineering

Dr. Woodward asked if there will be adequate parking for the increase in patients and visitors, he also asked if traffic flow analysis was considered relative to the Longwood area with a concern for patients and ambulances to efficiently navigate through the area to the hospital.

Mr. Armstrong stated there are an adequate number of parking spaces since the net new number of beds that would reduce the number of parking spaces needed as well as offsite parking locations for staff. They recently leased spaces in Longwood area. In terms of traffic, there were 14 intersections analyzed traffic moves smoothly and the incremental increase will not have a substantial effect on traffic. There will be a total net increase of 89 beds.

Dr. Woodward stated that with 89 new beds that would be a lot of staff and visitors.

Mr. Healy stated that 200 additional spaces were leased in Longwood with a plan to shift staff there and offsite in order to use current spaces for patients and families for the net increase.

Dr. Woodward asked if anyone has done a traffic flow analysis.

Mr. Armstrong states that there was a traffic flow analysis done as required by the city to look at 14 intersections and approved by the city process. The incremental impact of the building was perceived as not substantial.

Mr. Healy stated that there are also traffic directional changes that can be controlled and widening of the roadways around the building.

Mr. Armstrong stated the building will be 100% valet supported.

Dr. Woodward asked about funding and there was only about half the funds raised half of the 40% finding, is the expectation that you raise the other 20%.

Mr. Healy stated there is a capital campaign in the second year with the requirement to raise the remainder of the funds.

Dr. Woodward asked if the projection is still 40% even though they are short 20%.

Mr. Healy said yes there is no change in the budget.

Dr. Woodward asked what percent of med surge patients are currently boarded in the ED.

Ms. Maurer stated that ED boarding a regular event and challenge with limited private rooms creates problems with proper matching and create huge inefficiencies.

Dr. Woodward asked if she is suggesting that they will eliminate boarding when the project is complete.

Ms. Maurer stated that we can’t project to eliminate boarding, but there is no doubt that the flow of patient through private rooms will be more efficient.

Dr. Woodward asked if there will be beds lost during construction.

Ms. Maurer said no.

Dr. Woodward asked the number of the current total Emergency Department bed count.

Ms. Maurer stated that she didn’t know the current total bed count, but there are close to 60,000 visits per year.

Dr. Woodward asked if they are able to create additional surge space.

Ms. Maurer stated that was an imperfect solution and not a long term solution. We don’t’ have other unused clinical spaces with the additional beds will impact this issue.

Ms. Blondet stated her disappointment that there was not a more thorough description of priorities and community engagement plan asked Ben Wood to come to the table to discuss the requirements for community engagement.

Ben Wood, Director, Office of Community Health Planning and Engagement, Massachusetts Department of Public Health, stated there is a joint collaborative process is underway but not fully planned. The group is coming together about a community engagement plan and data collection to complement information. Applicants can layer in their process for planning and that the analysis of materials submitted includes looking at the transparency of process, types of decisions, and emphasizing resident level engagement.

Ms. Blondet asked if there are any assessments for level or depth for community engagement.

Mr. Wood responded that there is a community engagement standard guideline that dictates whether or not there is a good process in place.

Ms. Blondet asked when will there be a more thorough plan.

Nancy Kasen, Director, Community Benefits.

Ms. Kasen stated that data collection is beginning in February with two workgroups comprised of residents and community based leaders, and the BPHC co leading the community engagement workgroup as well as the secondary data workgroup that is expected by the end of March. There has been focus on meeting residents and other cohorts that aren’t typically heard from such as previously incarcerated residents. Because this is something new, there is time needed to build the infrastructure with a commitment to move it forward.

Dean Cox thanked Nora Mann for all her work. He asked if the assessment was Boston based or statewide project.

Mr. Wood stated it is Boston based.

Dean Cox asked about the state wide fund.

Mr. Wood responded it’s the same CHI initial fund.

Mr. Lanzikos asked if they expect any other operational impact and if so how to mitigate it.

Mr. Healy stated there is construction concern with interruption of service and will plan to have constant communication with staff and active monitoring daily.

Mr. Lanzikos asked how you will have proper staff for the expansion.

Ms. Maurer stated they have years of experience for new units and recruit staff with much experience with well-defined process for staffing and will first look into internal staffing and then external candidates.

Mr. Lanzikos asked how much to you rely on foreign trained personnel.

Ms. Maurer said that they do not currently.

Dr. Bernstein asked about implications on the finances.

Mr. Healy stated there is a need to increase revenue with new building as we grow in services.

Dr. Bernstein asked how they will commit to improve the social determinants of health (SDOH).

Ms. Kasen stated they have a long history of working with underserved communities and SDOH work has been done for past 6-7 years and looking forward to funds to be able to focus on and support upstream root causes of SDOH.

Ms. Blondet stated that she was looking forward to see the impact of such a significant amount of money, but is concerned it will be subdivided with no impact and looking forward to future proposals with significant investments.

Dr. Woodward asked if there an equally comprehensive planning program for state funding.

Mr. Wood stated they are working with an advisory committee that made some progress but more progress needed and looking forward to reporting progress in the future.

Dr. Woodward asked what level of LEED certification.

Mr. Armstrong stated required by the city for silver.

Dr. Woodward stated he would like to see you get gold.

Commissioner Bharel asked if there is a motion to accept the staff recommendation to approve CareGroup’s request for substantial capital expenditure. Dr. Woodward made the motion, and Dr. Kneeland seconded it, all other present members approved. The staff recommendation for approval of this substantial capital expenditure is approved.

**2. DETERMINATIONS OF NEED**

**b. Request by Medford Surgery Center, LLC for construction of a freestanding ambulatory surgery center on the campus of Lawrence Memorial Hospital. (Vote)**

Nora Mann, Determination of Need Program Director, and Rebecca Rodman, Deputy General Counsel, remained at the table to present the DoN staff recommendation for substantial capital expenditure request by Medford Surgery Center, LLC for construction of a freestanding ambulatory surgery center on the campus of Lawrence Memorial Hospital.

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

Mr. Lanzikos asked how accessible the site is by public transportation.

Presenters: Carmel Shields, Executive VP, Shields Health Care

Stephen Sbardella: Senior VP and CMO at Melrose/Wakefield

Andy Levine: Attorney, Barrett and Singal

Ryan Fuller: Melrose/Wakefield Healthcare

Dr. Sbardella stated there is currently no bus route and there is a concern, will be working with state representatives to supply access to patients.

Mr. Lanzikkos asked if there are transportation options under consideration.

Mr. Levine stated there is ample parking and they are looking into support for taxi programs and other ride programs.

Mr. Fuller stated they partnered with Armstrong ambulance to utilize for other services and looking into expanding this partnership for further services.

Ms. Shields stated they will provide ride sharing.

Mr. Lanzikos commented a concern about the haphazard plan for transportation is insufficient.

Dr. Sbardella pointed out that the planned ASC is on the campus of Lawrence Memorial and that in the past, thy addressed transportation issues for patient needs, and worked with the local ambulance companies to provide access and determine patient’s needs.

Mr. Lanzikos would have liked to see an incorporation of the planning into the proposal.

Mr. Levine stated that there is a dedicated case manager to work of the transportation issues.

Dean Cox asked if the Ten Tax Payer group has seen the process of community engagement and what is there response.

Ms. Mann stated they received information and is involved in the process but had not offered post-send-out comments or concerns.

Dean Cox asked if there will there be a review of process of the community engagement group to report back to DPH.

Ms. Mann said yes.

Dr. Bernstein asked what arrangements will be made for language interpretations.

Ms. Shields stated there are top five languages available in pre-op and post-op forms, translation service offered and instructions for foreign languages as operating in Shrewsbury Surgery Center.

Dr. Bernstein asked if they are the same services currently used written and some feedback for comprehension with read back.

Dr. Woodward asked if there the psych beds are the only site service the extent of the inpatient care.

Dr. Sbardella stated there is only geriatric psych unit currently.

Dr. Woodward asked about what the rest of the plant is being used for.

Dr. Sbardella stated that it is being used as an outpatient facility with plans to increase ambulatory services and urgent care and the plan is to increase services in coordination with other specialties to improve patient flow.

Dr. Woodward asked if they were going to use any of the existing structure.

Dr. Sbardella stated that the current OR is outdated, so a free standing development is in construction.

Dr. Woodward asked what percentage of the SF of the hospital is being utilized.

Dr. Sbardella stated they plan to develop an ACO model progression, offering efficiency and cost effective for patients.

Dr. Woodward: Is it sustainable to run the geriatric care without medical back up.

Dr. Sbardella responded that they will need medical back up for geri-medical psych.

Dr. Woodward asked what kind of imaging beyond x-ray do you have there.

Dr. Sbardella responded that there is no advanced diagnostics, but standard radiation services.

Ms. Blondet commented on language barriers and how to ensure there is community engagement and asked how you can ensure language barriers are broken for patient comprehension of procedures and interested in efforts investing in community engagement of minorities and plan.

Dr. Sbardella stated they are currently engaged on this topic but could be doing more and are looking at social needs of patients and we are willing to address those needs to improve health outcomes.

Ms. Blondet asked if addressing language barriers is going to be on an ongoing basis of community engagement.

Eileen Dern, Director of Community Services for MelroseWakefield.

Ms. Dern stated there are diverse staff with programs that cater to these needs such as WIC and mobile food markets and we are partnered with many community organizations to speak to cultural and language issues.

Dr. Bernstein asked if there are standards in place for opioid and pain management and monitoring patients for addiction after they leave the facility.

Ms. Shields responded that there are standards in place including an EMR to track prescriptions, have Narcan on-site, and discuss medication disposal for patients after they leave the facility.

Dean Cox stated that the two Ten Taxpayer Groups concerned there is not enough community engagement and asked if there a formal way to be in contact with the community to ensure concerns is being addressed.

Ms. Dern responded that this is a different population of the community than the ten tax payer group which is more of the affluent community.

Ms. Shields stated community engagement will be done in the future.

Mr. Levine stated they are committed to keep the site revitalized with community engagement by addressing these issues with the neighbors and the ten taxpayer group.

Dr. Sbardella stated that since August there were more than twenty meeting with the community and started a community advisory group and increased the communication.

Commissioner Bharel asked if there is a motion to accept the staff recommendation to approve Medford Surgery Center, LLC’s request to build an ASC. Dr. Cunningham made the motion, Secretary Urena seconded it, Mr. Lanzikos opposed, all others approved.

**2. DETERMINATIONS OF NEED**

**c. Request by Steward Health Care System, LLC for amendment to build out shell space associated with a previously approved determination of need for substantial capital expenditure at St. Elizabeth’s Hospital. (Vote)**

10:44am Secretary Urena leaves. Commissioner Bharel indicated the Council would take a brief recess until a quorum of members returned to the room.

10:45am Bernstein, Blondet, Dr. Cunningham, Dr. Woodward leaves.

10:48am Secratery Urena, Dr. Woodward, Ms. Blondett, Dr. Bernstein, and Dr. Cunningham returns.

10:50am Commissioner Bharel called the meeting back to order and invites Ms. Mann to present the DoN staff recommendation for Steward Health Care’s amendment request for build out of shell space associated with a previously approved DoN at St. Elizabeth’s Hospital.

Before the staff presentation, Commissioner Bharel indicated Dr. Kneeland recused himself from participating in this application and gave him a moment to leave the room. Dr. Kneeland leaves the room at 10:50.

At the conclusion of Ms. Mann’s presentation, Commissioner Bharel asked if there were questions for the staff or applicant. Seeing none, Commissioner Bharel asked if there was a motion to accept the staff recommendation to approve Steward Health Care’s amendment request. Mr. Lanzikos made the motion, and Secretary Urena seconded it, all other present members approved. The staff recommendation for approval of this approval of this amendment request is approved.

10:59am Dr. Kneeland returns.

**3. PRESENTATIONS**

**a. The Hepatitis A outbreak in vulnerable populations: public health response.**

Commissioner Bharel invited Kevin Cranston, Assistant Commissioner and Director of the Bureau of Infectious Disease and Laboratory Sciences, and Dr. Catherine Brown, State Epidemiologist and State Public Health Veterinarian, to the table for an update on the current Hepatitis outbreak in Massachusetts and overview of our public health response.

Mr. Lanzikos asked if there is an association between co-infection and deaths.

Dr. Brown responded that most deaths are in individuals with severe liver damage.

Dr. Bernstein asked about needle safety.

Mr. Cranston responded that there are many factors affecting, specifically in vulnerable populations and there is not enough access to sanitary practices.

Ms. Lambert asked if there is any teaching hand hygiene in the school systems.

Dr. Brown responded yes, many school systems use literature and materials for this that are readily available free of charge, but there may not be regularly observed hand washing.

Dr. Woodward stated there are presentations done in schools regarding hand washing.

Secretary Urena asked if there are any correlations to other New England states for Hepatitis A.

Dr. Brown responded that none of the other New England states are seeing an outbreak, just a few individual cases.

Mr. Lanzikos asked if other jurisdictions are experiencing outbreaks like this and whether or not other states have as robust disease monitoring systems as we do in Massachusetts.

Dr. Brown responded that they are having conversations with other jurisdictions, including the CDC, to figure out the cause of outbreak, but do not have an answer yet, and noted we are working to perform additional genetic analysis to determine why it is happening in MA.

Mr. Lanzikos asked about the current status for shingles vaccine.

Mr. Cranston responded that it is expensive to make and economically risk as far as shelf life and is recommending people to continue to call the pharmacies for when the supplies are available.

Dr. Kneeland asked if genotype 1A is contracted does it confirm immunity to genotype 1B.

Dr. Brown responded yes.

Dr. Bernstein asked if anyone contracting the disease from visitors from places where the disease is more common.

Dr. Brown responded that no clear link has been identified, and that 77% of cases are in white non-Hispanic individuals.

Dr. Bernstein asked, since this is a social network cluster, whether or not we’ve infiltrated those social networks for purposes of vaccine promotion.

Dr. Brown responded they are attempting to reach public to encourage community response in order to protect people but it is often hard to reach population.

Mr. Lanzikos asked why there is a disparity among states.

Dr. Brown responded that it is transmitted through social networks and states that are under resourced and where outbreaks are occurring in more rural areas may have more difficulty controlling their outbreaks.

Commissioner Bharel stated after 2004 outbreak, opioid epidemic could be introducing new individuals. This is preventable and the reason this is being raised with the council and this is a prime example of contributing to prevention and surveillance.

With no further presentations, the Commissioner reminded the Council that the next meeting is Wednesday, January 9, 2019 at 9AM.

She then asked for a motion to adjourn. Mr. Lanzikos made the motion, Ms. Blondet seconded it. All present members approved.

The meeting adjourned at 11:30AM.