**MINUTES OF THE PUBLIC HEALTH COUNCIL**

**Meeting of July 10, 2019**

**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: Wednesday, July 10, 2019 - 9:00 AM**

1. **ROUTINE ITEMS**
   1. Introductions
   2. Updates from Commissioner Monica Bharel, MD, MPH.
   3. Record of the Public Health Council June 12, 2019 Meeting. **(Vote)**
2. **PRESENTATIONS** 
   1. Overview of Health Care Associated Infections in Acute Care Hospitals, 2018.
   2. Overview of Massachusetts Healthcare Personnel Influenza Vaccination in Health Care Facilities, 2018.
   3. Overview of the Massachusetts Substance Use Helpline.

*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, July 10, 2019

**Start Time:** 9:10am **Ending Time:** 11:14am

| **Board Member** | **Attended** | **Record of the Public Health Council June 12, 2019 Meeting (Vote)** |
| --- | --- | --- |
| Monica Bharel | Yes | Yes |
| Edward Bernstein | Yes | Yes |
| Lissette Blondet | Absent | Absent |
| Derek Brindisi | Yes | Yes |
| Harold Cox | Yes | Yes |
| John Cunningham | Yes | Yes |
| Michele David | Yes | Yes |
| Michael Kneeland | Yes | Yes |
| Keith Hovan | Yes | Yes |
| Joanna Lambert | Absent | Absent |
| Paul Lanzikos | Yes | Yes |
| Lucilia Prates-Ramos | Yes | Yes |
| Secretary Francisco Ureña | Yes | Yes/Absent during Vote |
| **Summary** | **11 members present, 2 members absent** | **10 members approved, 3 members absent, 0 member abstained** |

**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, July 10, 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; John Cunningham, PhD; Paul Lanzikos; Lucilia Prates-Ramos; Derek Brindisi; Harold Cox; Michael Kneeland, MD; Keith Hovan; Secretary Francisco Ureña and Michele David, MD.

Absent member(s) were: Joanna Lambert and Lissette Blondet.

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

Commissioner Bharel called the meeting to order at 9:11 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 across the state. Commissioner Bharel announced the Red Sox center-fielder Jackie Bradley, Jr. agreed to record a public service announcement for the Department aimed at reducing the stigma of addiction, part of our State Without Stigma campaign that we will be bringing back. Jackie and his wife Erin recorded the PSA with us at Fenway Park and they were so glad to assist us in this effort. We wanted the PSA also recorded in Spanish, and the Sox made available team manager Alex Cora who also joined in the filming. While the PSA is being finalized, I do have pictures from the shoot on-site at Fenway Park to share with you all. You can also read about the behind-the-scene filming on our DPH blog.

*Capital Plan Update:*

After several years of planning by DPH working with the state Division of Capital Asset Management and Maintenance (DCAMM) the Governor last month announced in his FY2020-2024 capital investment plan changes to the State Lab. The Tower Building at DPH’s Jamaica Plain campus is slated for a multi-year phased renovation. This building houses the State Public Health Laboratory and the majority of staff from the Bureau of Infectious Disease and Laboratory Sciences, as well as the Food Protection Program and the Massachusetts Environmental Radiation Laboratory of the Bureau of Environmental Health. While the building has had critical systems fixed since it was completed and dedicated in 1974, this renovation will give us the ability to keep up with advances in laboratory science. The operations of the lab will not stop during the renovation. The target date for completion of the work is early 2024.

*DPH Investigation Results in Recall:*

Last week, the FDA announced a voluntary, multistate recall of some packaged varieties of fresh vegetable products sold under the brand names Green Giant Fresh, Growers Express, Signature Farms and Trader Joe’s over concerns about possible listeria contamination. It was actually DPH’s Food Protection Program’s surveillance activities that triggered the nationwide announcement. You may remember that last year our investigative efforts also initiated a multistate food recall, through which both Bureau of Environmental Health and Bureau of Infectious Disease and Laboratory Sciences traced a rare strain of Salmonella to frozen shredded coconut. Both of these are great examples of public health and private industry working together to protect residents and our food supply.

*Vaping Video:*

Commissioner Bharel shared the Department’s most recent efforts to inform the public about what has become an epidemic of e-cigarette use by young people, DPH has teamed up with the Massachusetts Medical Society to educate physicians. Our goal is to encourage physicians across the Commonwealth to speak to their patients about the dangers of e-cigarettes and vaping, just as they would talk about using a bike helmet or wearing a seatbelt. We recorded a short video to be shared with every physician in the state. The 3-minute video outlines the dangers of e-cigarette use and vape products and urges physicians to have the conversation with patients and their families.

*OPEM July 4th Debrief:*

As the Department has done previously, the Office of Preparedness and Emergency Management activated the Department Operations Center last Thursday to monitor July 4th events in the Commonwealth, including the concert and fireworks display that drew more than 500,000 spectators to the Boston Esplanade. DPH staff in the Department Operations Center were in place to monitor and ensure that communications were maintained with hospitals and other health and medical partners. Extreme heat and humidity were the most challenging factors during the celebrations. In Boston, 93 individuals were treated in the 11 medical tents, with six transports to area hospitals. Those numbers are fairly typical when compared to the last two years.

*Expedited LADC Certifications for Veterans:*

Here at the Department, we continue to respond to a critical need to promote the recruitment and retention of veterans into our workforce. Recently, our Bureau of Addiction Services worked with the MassHire Department of Career Services within Labor and Workforce Development to formally announce an expedited process for veterans to pursue licensed alcohol and drug counselor (LADC) certifications. More on this collaboration and the process for veterans looking to apply can be found on the MassHire website. We will follow up after this meeting with a link to that information.

*Personnel Updates:*

Commissioner Bharel announced that after serving Tewksbury Hospital since 1992 and currently as CEO since 2012, Deb Tosti is retiring from the hospital. I want to thank Deb for her commitment to our public health hospital system, and for staying on to support our Assistant Commissioner Frank Doyle as he came on board with the Department. Tewksbury Hospital’s COO, Betsy Schwechheimer, will assume the role of interim CEO upon Deb’s retirement in August, providing a smooth transition for the hospital.

Mr. Lanzikos asked how many staff will be moving to a new work location.

Commissioner Bharel stated that the majority of the Bureau of Health Care Safety and Quality staff moved to Marlborough from Chauncy Street.

Mr. Lanzikos asked how many physical locations for DPH.

Commissioner Bharel stated roughly 15 locations.

Dean Cox stated that the Boston Public Health Commission reviewed all 351 cities and towns in MA for public health resources in order to be sure that all local public health services are available for all and would like to have a more formal presentation for the PHC in the future.

Dr. David asked if the PHC members could be helpful with this project.

Dean Cox stated advocacy from the PHC would be important to move the process forward.

Mr. Brindisi asked how the Community Health Officer exam connects with this work.

Dean Cox stated that it is incorporated in the requirements and recommendations.

Mr. Brindisi stated that this would be particularly useful for local leadership for public health development.

Dean Cox stated it is important to get the perspective of the MMA and determine the implementation process.

Commissioner Bharel stated that she will pass this information to Ron O’Connor for a future presentation to the PHC.

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

**1. ROUTINE ITEMS**

**c. Record of the Public Health Council June 10, 2019 Meeting (Vote)**

Commissioner Bharel asked if any members had any changes to be included in the June 12, 2019 meeting minutes.

Commissioner Bharel asked for a motion to accept the minutes. Motion to accept minutes, Mr. Lanzikos made the motion and Dr. Kneeland seconded it. All other present members approved.

**1. Presentation**

**a. Overview of Health Care Associated Infections in Acute Care Hospitals, 2018.**

Secretary Urena arrives at 9:25am.

Commissioner Bharel invited Kate Fillo, Director of Clinical Quality Improvement for the Bureau of Health Care Safety and Quality; Christina Brandeberg, Epidemiologist with the Bureau of Infectious Disease and Laboratory Sciences; and Eileen McHale, Healthcare Associated Infection Coordinator for the Bureau of Health Care Safety and Quality, to the table for an overview of healthcare associated infections in acute care hospitals during 2018.

Dr. Cunningham asked if they are exploring what is causing the knee prosthetic infections.

Ms. McHale stated DPH has reached out to facilities reporting higher than expected surgical site infections. Hospitals haven’t identified commonalities and have reviewed operative processes and procedures including those in the preoperative, intraoperative and post-operative phases. Hospitals have also been encouraged to participate in a national quality improvement initiative facilitated by the Agency for Healthcare Research and Quality. Dr. Kneeland asked if the post op infections were related to not receiving antibiotic prophylaxis treatment in the correct time window.

Ms. McHale stated it hasn’t been for that reason.

Mr. Lanzikos asked if there are techniques utilized to promote the appropriate use of antibiotics in outpatient settings.

Ms. Fillo stated DPH works with dentistry and provided feedback to prescribers about antibiotic use. Secondly the New England Quality Improvement Organization has been working with outpatient providers to promote the appropriate use of antibiotics. A component of the program includes providing patients who do not require antibiotics with information on diagnosis, general instructions and over the counter medications that may ease symptoms rather than a prescription.

Ms. Fillo stated there are new federal requirements for infection prevention training for individuals responsible for the infection prevention and control programs in nursing homes

Dr. David asked if dentist and orthopedics are using antibiotics prophylaxis for endocarditis

Although official guidelines for antibiotic prophylaxis to prevent endocarditis have changed over the years, Dr. David commented that there are occasions where she has seen orthopedists and dentists prescribe them prior to dental procedures.

Ms. Fillo stated yes DPH is working with both groups about the appropriate use of antibiotics.

Dr. David stated patient education is important for setting the correct expectation regarding the updated endocarditis dental prophylaxis guidelines.

Ms. Prates-Ramos stated the Choosing Wisely Campaign educates consumers on having good dialogue with their providers to encourage asking important questions. One piece of the campaign is regarding antibiotic use.

Dr. Bernstein asked if a consumer considering a knee replacement have access to this data.

Ms. Fillo stated yes the information is available online.

Dr. Bernstein asked if there is accurate reporting.

Ms. Fillo stated DPH routinely communicates with hospital infection preventionists to ensure completeness and accuracy of the reported data. DPH provides quarterly data cleaning reports to hospitals that identify incomplete or unexpected data elements. DPH also conducts on-site validation of selected measures to identify over or under reporting. External validation of reported measures has identified only a small number of discrepant cases. When discrepancies are identified, DPH requires the hospital to make the necessary changes to the reported data.

Commissioner Bharel stated that this is not actually new data but just being reported differently for ease of use.

With no further questions to comments, Commissioner Bharel proceeded with the next item on the docket.

**2. Presentation**

**b. Overview of Massachusetts Healthcare Personnel Influenza Vaccination in Health Care Facilities, 2018.**

Commissioner Bharel invited Joyce Cohen and Hillary Johnson, Epidemiologists in the Bureau of Infectious Disease and Laboratory Sciences, to join Kate and Eileen at the table for an overview of influenza vaccination among healthcare workers during 2018.

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

Dr. Bernstein is concerned about the higher level of elderly deaths and asked for feedback.

Ms. Fillo stated that the vaccination rate of residents in nursing homes is very high; CMS reports that for the 2018-2019 influenza season over 95% of long stay residents in Massachusetts were vaccinated. This is evidence that increasing the vaccination rates is something nursing homes are committed to doing and DPH will continue to support.

Dean Cox stated that there have been improvements over the years but the idea of mandating vaccinations had not genuinely been addressed in the past and wonders if this might be a good time to consider vaccination mandates since the data is not showing a significant improvement in this population.

Dr. Cunningham asked if non acute has consequences for declining.

Ms. Fillo stated that acute care hospitals have implemented a variety of interventions to promote influenza vaccination and prevent declination among healthcare personnel. DPH is aware that some facilities beyond the acute care setting have implemented similar interventions such as mask requirements for non-vaccinated healthcare personnel during influenza season and influenza vaccination as a condition of employment.

Mr. Lanzikos asked if home health agencies, senior centers and elderly housing under the secretary of elder Affairs could join forces with DPH.

Ms. Fillo stated that DPH has a robust vaccination program that entails disseminating information and providing access. DPH will ensue that influenza prevention activities are coordinated with additional state partners including the Executive Office of Elder Affairs.

Dr. Kneeland stated the ability to receive vaccines at pharmacies has improved rates for the entire population.

Dr. David asked if vaccinations are available onsite from LPNs to administer at nursing homes.

The scope of practice for Massachusetts Licensed Practical Nurses includes the administration of vaccinations in all settings of care including nursing homes.

Dr. Bernstein asked about the type of vaccine being used for elderly people that tend to have weaker immune system.

Ms. Cohen stated that Fluzone High-Dose is licensed specifically for people 65 years and older. It contains four times the antigen of standard-dose inactivated influenza vaccines. The higher dose of antigen in the vaccine is intended to give older people a better immune response, and therefore, better protection against flu.

Dean Cox asked if the staff can come back to PHC with a specific recommendation to determine if mandates are the right action.

Commissioner Bharel stated yes and DPH can look at the short term stay rate and come back with the analysis at a future meeting.

Dr. Bernstein asked about the death reporting of influenza.

Ms. Fillo stated that the death report is published annually included death by influenza and pneumonia in the most recent report, calendar year 2016. Updated information: Influenza and pneumonia are listed as the eighth leading underlying cause of death among all age groups reported in the Massachusetts Deaths 2016 report.

<https://www.mass.gov/files/documents/2018/12/26/DPH-Death-Report-2016_FINAL.pdf>

With no further questions to comments, Commissioner Bharel proceeded with the next item on the docket.

**3. Presentation**

**c. Overview of the Massachusetts Substance Use Helpline.**

Commissioner Bharel stated for the final agenda item Deirdre Calvert, Director of the Bureau of Substance Addiction Services, and Julia Reddy, Women’s Service Coordinator for the Bureau, to the table for an overview of the recently updated Helpline and treatment access among priority populations.

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

Mr. Lanzikos asked is the male head of household are seeking service for themselves or someone else.

Ms. Reddy stated males are typically seeking service for themselves and can bring a child with them to the program while in recovery with multiple service provided for the family.

Mr. Lanzikos asked if there are many programs that serve males in other states.

Ms. Reddy stated it’s rare and Massachusetts is one of the few in the country.

Dr. David asked about services that are culturally sensitive for people of color.

Ms. Reddy stated that there are two family residential programs that are culturally responsive treatment centers.

Commissioner Bharel stated that maternal child health is a priority for our health data warehouse for maternal morbidity and mortality and recognizes there is disparity among race.

Secretary Urena asked who is taking the calls.

Ms. Reddy stated that they contract with Health Resources in Action for call takers.

Secretary Urena asked about access for deaf and hard of hearing.

Ms. Reddy responded that there is a TTA line available for those individuals.

Secretary Urena asked if there are out of state calls coming to the helpline.

Ms. Reddy stated yes but primarily is MA residents.

Mr. Brindisi asked if patient outcomes are tracked.

Ms. Calvert stated they are not sure but can find out and the completed call and re-engagement is tracked.

Dr. Bernstein asked if the video will be accessible online.

Ms. Calvert stated they are hoping to share more broadly to the general public.

Dr. Bernstein asked if there is data on the medication for treatment, recovery coaches and access to beds.

Ms. Reddy stated the residential waitlist management system addresses the access to resources.

Commissioner Bharel stated they are working on real time access for connecting callers with resources.

Mr. Lanzikos asked if we can have an update on gaming for the next meeting.

Commissioner Bharel stated yes.

With no further presentations, the Commissioner reminded the Council that the next meeting is Wednesday, August 21, 2019 at 9AM.

She then asked for a motion to adjourn. Dr. David made the motion, Dr. Bernstein seconded it. All present members approved.

The meeting adjourned at 11:14AM.