MINUTES OF THE PUBLIC HEALTH COUNCIL

Meeting of November 10, 2021

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, November 10, 2021 – 9:00AM**

***Note: The November 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://statema.webex.com/statema/onstage/g.php?MTID=e7e848b76fe9fb75e369acf74a10d1c22

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1. **ROUTINE ITEMS**
	1. Introductions.
	2. Updates from Acting Commissioner Margret Cooke.

Review of Opioid-related Overdose Deaths, data as of 3rd Quarter, 2021.

* 1. Record of the Public Health Council Meeting held October 13, 2021. **(Vote)**
1. **DETERMINATIONS OF NEED**
	1. Request by Heywood Hospital for a substantial capital expenditure. **(Vote)**
2. **PRELIMINARY REGULATIONS**
	1. Overview of proposed repeal of 105 CMR 216, *Massachusetts Wellness Tax Credit Incentive.*
3. **FINAL REGULATIONS**
	1. Request to promulgate amendments to 105 CMR 150, *Standards for Long-Term Care Facilities.* **(Vote)**
	2. Request to promulgate amendments to 105 CMR 141, *Licensure of Hospice Programs.* **(Vote)**
	3. Request to promulgate 105 CMR 159, *COVID-19* *Vaccinations for Certain Staff Providing Home Care Services in Massachusetts.* **(Vote)**
4. **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: November 10, 2021

Start Time: 9:12am Ending Time: 11:14am

| **Board Member** | **Attended** | **First Order: Approval of October 13, 2021 Meeting Minutes (Vote)** | **Second Order: DON: Request by Heywood Hospital for a substantial capital expenditure. (Vote)** | **Third Order: FINAL REGULATIONS: Request to promulgate amendments to 105 CMR 150, *Standards for Long-Term Care Facilities.*** **(Vote)** | **Fourth Order:** **FINAL REGULATIONS:** **Request to promulgate amendments to 105 CMR 141, Licensure of Hospice Programs. (Vote)**  | **Fifth Order: FINAL REGULATIONS: Request to promulgate 105 CMR 159, COVID-19 Vaccinations for Certain Staff Providing Home Care Services in Massachusetts. (Vote)** |
| --- | --- | --- | --- | --- | --- | --- |
| **Acting Commissioner Margret Cooke**  | Yes | Yes | Yes | Yes | Yes | Yes |
| **Edward Bernstein** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Lissette Blondet** | Yes | Abstained | Yes | Yes | Yes | Yes |
| **Kathleen Carey** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Secretary Elizabeth Chen** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Harold Cox** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Alba Cruz-Davis** | Absent | Absent | Absent | Absent | Absent | Absent |
| **Michele David** | Yes | Absent | Absent | Yes | Yes | Yes |
| **Elizabeth Evans** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Michael Kneeland** | Yes | Yes | Recused | Absent | Yes | Yes |
| **Keith Hovan** | Absent | Absent | Absent | Absent | Absent | Absent |
| **Joanna Lambert** | Yes | Abstained | Yes | Yes | Yes | Yes |
| **Mary Moscato** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Acting Secretary Cheryl Poppe** | Yes | Yes | Yes | Yes | Yes | Yes |
| **Summary** | 12 Members Present; 2 Absent | 9Members Approved; 2 Abstained; 3 Absent | 11 Members Approved; 1 Recused; 2 Absent | 11 Members Approved; 3 Absent | 12 Members Approved; 2 Absent | 12 Members Approved; 2 Absent |

**PROCEEDINGS**

A regular meeting of the Massachusetts Department of Public Health’s Public Health Council (M.G.L. c. 17, §§ 1, 3) was held on Wednesday, November 10, 2021 by the Massachusetts Department of Public Health, 250 Washington Street, Boston, Massachusetts 02108.

Members present were: Margret Cooke; Edward Bernstein, MD; Lissette Blondet; Kathleen Carey, PhD; Secretary Elizabeth Chen; Harold Cox; 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 9:12AM and made opening remarks before reviewing the agenda.

**1. ROUTINE ITEMS**

b. Updates from Acting Commissioner Margret Cooke

Commissioner Cooke proceeded to update the council on the following:

**Farewell to Dr. Cunningham**

Commissioner bid farewell to Dr. John Cunningham, who served the Council for 14 years. She then presented him with a Commissioner’s Citation for his service to the Council.

Commissioner Cooke then turned it over to Dr. Cunningham and to any other Council members to share their comments.

Dean Cox thanked Dr. Cunningham for his service and stated that he’d enjoyed working with him.

Dr. Cunningham thanked Dean Cox and Commissioner Cooke and stated his appreciation of the DPH staff dedicated to public health in Massachusetts.

CMR Cooke thanked Dr. Cunningham for all his dedication on the council.

Ms. Blondet and Secretary Chen both thanked Dr. Cunningham for his service.

Dr. Bernstein thanked Dr. Cunningham for his service and specially his work in the Worcester region of the state.

**Flu Shot Reminder**

Commissioner Cooke reminded the council members about flu season and the importance of getting a flu shot.

* It’s important to protect yourself and your family against the flu and against COVID-19.
* Individuals can get both shots at the same time.
* These messages have been shared in our paid flu campaign ads, social media and with billboards going up this month.

**COVID and Vaccination Update**

Commissioner Cooked stated she was pleased to join Governor Baker at Boston Children’s Hospital to announce that vaccines are now approved and available for children ages 5-11, the next cohort to be vaccinated.

* DPH has been working with health care providers and other partners to be ready to vaccinate this group, which totals about 515-thousand children in the state.
* Most parents and guardians may feel most comfortable getting their child the COVID vaccine in the office of their health care provider, but vaccines are also available at pharmacies, community health centers, community vaccination clinics, and also at non-traditional, kid friendly venues, like children’s museums, across the state.
* DPH is encouraging schools to consider school-based clinics.
* DPH continues to work with colleagues in the Department of Elementary and Secondary Education, the Department of Children and Families, MassHealth, and within our own Division for Children & Youth with Special Health Needs.

**Vaccine Booster Update**

Commissioner Cooke announced that eligible Massachusetts residents now have access to Pfizer, Moderna, and Johnson & Johnson booster shots. CDC recommendations allow for individuals to choose which vaccine they receive as a booster dose.

**Vaccine Equity Initiative**

Commissioner Cooke reminded the council members of the state’s focus on the 20 priority communities with lower vaccination rates.

* This progress of this initiative was presented at a DPH all-staff meeting last week.
* All 20 municipalities had equal or higher two-week vaccination rate increases in October, compared to Massachusetts overall.
* While all communities have made strides in their vaccination rates, some continue to exceed the state average: Chelsea, Everett, Framingham, Leominster, Malden, Randolph, and Revere -all continue to exceed the state average.
* This work is data-driven. It focuses on communities and populations experiencing the greatest health inequities and it targets our resources to those in most need.

**Staff Award Announcement**

Commissioner Cooke announced that DPH Assistant Commissioner Jana Ferguson was the recipient of the 2021 President’s Award from the Massachusetts Health Officers Association. She stated that Jana has led our efforts with local public health departments during this most challenging time.

Commissioner Cooke shared that in her Commissioner’s Message that went to all DPH staff the day prior to the Council meeting, she noted several employee awards, including some national recognition. She offered to share this message with the Council members as a follow up to this meeting.

**Veterans Day**

Commissioner Cooke acknowledged Veterans Day by stating the following:

* DPH Veterans Employee Resource Network is hosting a virtual event featuring members of the 54th Massachusetts Volunteer Infantry, Company A, a nonprofit organization of US Army historians, who will speak about the history of their unit and Veterans Day.
* The organization works to preserve the history of African American soldiers who served in the US military during the Civil War.
* The unit is known for the valor shown by members during Civil War battle.
* Commissioner Cooke encouraged everyone to take a moment this Veterans Day to remember those who served our country and the families of our military who sacrifice so much on our behalf.

**Opioid Data Report**

Commissioner Cooke then turned her attention to a review conducted this month of data on fatal and non-fatal opioid overdoses as part of DPH’s ongoing surveillance of, and in response to, the opioid epidemic.

These data provided snapshots in time using confirmed and estimated data to help us respond effectively based on the most recent information available.

She then presented the data.

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

Dr. Bernstein asked when will the data on municipalities be available to review and identify the hotspots and address inequities.

Ms. Candice Nelson, DPH stated the 2021 data it will be available in May of 2022.

Dr. Bernstein asked if there is data on the treatment of opioid overdoses at emergency departments. He would like to know if the data reflects a successful treatment.

Ms. Nelson stated that she will discuss this topic with BSAS to determine if this data can be available.

Commissioner Cooke stated that EMS data is shared on a regular basis and can be provided to the council members.

Dean Cox requested a presentation on the coordinated effort across the state regarding harm reduction strategies, such as naloxone administration and needle exchange programs in the state.

Commissioner Cooke stated there are many great programs in place and that DPH will provide an update on these topics.

Ms. Blondet asked to add a request for more information on the roles of various health care workers, such as community health workers, in these efforts.

Dr. Bernstein asked for a report with data for individuals with both substance use disorder and experiences of homelessness for the whole state, specifically with the Mass x Cass initiative recently launched.

No further questions or comments from the council members.

**1. ROUTINE ITEMS**

**c. October 13, 2021 Minutes (Vote)**

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

Dr. Bernstein made the motion, which was seconded by Secretary Chen.

Ms. Blondet and Ms. Lambert abstained. All other members present approved.

Dr. Kneeland recused himself at 9:44am.

**2. DETERMINATIONS OF NEED**

*a. Request by Heywood Hospital for a substantial capital expenditure. (Vote)*

Commissioner Cooke invited Determination of Need Program Director, Lara Szent-Gyorgyi, to review the staff recommendation for Heywood Hospital’s request for a Substantial Capital Expenditure. She was joined by Rebecca Rodman, General Counsel.

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

Dr. David arrived at 10am.

Ms. Blondet asked if there is more data on Latino/Hispanic individuals getting care at Heywood Hospital.

Winfield Brown, President and CEO of Heywood Hospital, stated the hospital serves Latino patients and provides translation services. The number one language is Spanish followed by Arabic and these populations are currently being served.

Barbara Nealon, Director of Care Transitions at Heywood Hospital stated there is a Hispanic/Latino indicator that extracts that data. Spanish speaker interpreters are available and reach out to the hospital to ensure needs are met.

Ms. Szent-Gyorgyi stated that there was additional data included on the report that speaks to Hispanics/Latino data.

Ms. Nealon stated these indicators are included by the interpreter services in the needs assessment report.

Ms. Blondet asked how the scope of work will be defined regarding community health workers and how will they be supported.

Ms. Nealon stated they are actively involved with community health workers and provide guidance and support with social determinants of health.

Ms. Blondet asked if the scope of services can be clearly defined and reflect the skills and assets of the community health workers.

Ms. Nealon stated they are working closely with Joanne Callista in Worcester to provide community health workers with navigating the system, offering guidance and continuity.

Dr. Carey asked there is information on referral ambulatory surgery centers (ASC) to address surgical needs of outpatients, as they are lower cost to hospitals through Medicare.

Mr. Brown stated the closest ASC is in Worcester and there is an endoscopy ASC in Leominster. Heywood patients skew older, and patients opt to stay closer for their care. There is a lack of transportation infrastructure and providing the care locally is important for these patients.

Secretary Chen appreciated all the work they are doing to modernize their facility while managing pandemic impacts. This will allow the population to remain in the community with modern medical services.

Dr. Evans asked how this expenditure will increase capacity with patients with SUDs and behavioral health issues.

Mr. Brown responded that this expenditure will allow more people to be cared for in the community, including patients with behavioral health needs, and will improve the continuum of care. This will allow Heywood to do more work in the community and keep surgeries in the community as well.

Dawn Casavant, Vice President of External Affairs, Heywood Hospital stated there is a significant focus on behavioral health and the campus has expanded their partial hospitalization program, outpatient psychiatric programs, geriatric psych unit and residential programs. Additionally, they have focused on the youth population for behavioral health in coordination with community health workers in a school-based model. They are now offering telehealth behavioral health services to students in multiples districts both individually and in group settings.

Ms. Moscato asked if there will be an increase in staff members as well as increase in wages and diversity.

Mr. Brown stated they are planning to increase the staff and invested in increases in compensation last year. They are also offering tiered healthcare and a higher compensation for lower income staff. There is also a recruitment program to help support and retain staff. He also reported they lost 13 staff out of 1,600 with the vaccine mandate.

Ms. Casavant stated they are working with community partners to address equity and improve workforce development.

Dr. Bernstein asked why there is a 49% difference in reimbursement to Heywood compared to UMass.

Dr. Brown stated that size and location are factors as well as negotiating strength.

Dr. Bernstein stated these issues stem from the economy and should be addressed.

Mr. Brown stated Heywood is the largest employer from Fitchburg to interstate 91. The economic vitality of the region is improving, but struggles compared to urban areas but still improving from an economic standpoint. They are critical partners, including Mt. Wachusett Community College and Fitchburg State University to fuel the workforce with a strong partnership. There is also strong local government and schools.

Dr. Bernstein asked if the catchment areas are able access these services.

Mr. Brown stated that there is still work to be done, but most of our broader areas have access due to the tele behavioral health services through private homes and schools.

With no further questions from the Council members, Commissioner Cooke asked if there is a motion to approve Heywood Hospital’s request for a substantial capital expenditure.

Dr. Carey made the motion which was seconded by Dr. Bernstein. All present members approved. Dr. David had heard this discussion, but due to technical difficulties, was unable to speak up during the roll-call vote. However, she later voiced her affirmative vote during the next docket item.

1. **PRELIMINARY REGULATION**

*a. Overview of proposed repeal of 105 CMR 216,* *Massachusetts Wellness Tax Credit Incentive.*

Commissioner Cooke invited Ben Kingston, Policy Director for the Department’s Bureau of Community Health and Prevention, to present an overview of a proposed repeal of the Department’s regulations regarding employee wellness programs.

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

With no questions from the Council members, Commissioner Cooke moved on the to the next docket item.

**4. FINAL REGULATIONS**

*a. Request to promulgate amendments to 105 CMR 150, Standards for Long-Term Care Facilities.* **(Vote)**

Commissioner Cooke invited Marita Callahan, Director of Policy and Health Communications for the Bureau of Healthcare Safety and Quality, to present on a request to promulgate amendments to the Department’s regulations addressing standards for long-term care facilities. She was joined by Dr. Kate Fillo, Director of Clinical Quality Improvement.

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

Dr. Bernstein asked for clarifications on the conditions for declination of the flu vaccine.

Ms. Callahan stated the amendments approved in September to the flu vaccine requirements reflect the language for the COVID-19 vaccine requirements for a sincerely held religious belief. If an individual declines the flu vaccine, they must be able to perform their job function with a reasonable accommodation without an impact to the facility. If an exemption is requested, the facility will determine through an assessment if there can be a reasonable accommodation for the individual.

Dr. David asked if this regulation applies to assisted living facilities.

Ms. Callahan stated this regulation does not apply to assisted living residences, which are overseen by the Executive Office of Elder Affairs.

Secretary Chen stated there are similar requirements that apply to assisted living.

With no further questions, Commissioner Cooke asked if there is a motion to promulgate amendments to 105 CMR 150.

Dr. Bernstein made the motion which was seconded by Dr. David. All present members approved.

**4. FINAL REGULATIONS**

*b. Request to promulgate amendments to 105 CMR 141, Licensure of Hospice Programs. (Vote)*

Commissioner Cooke again invited Marita Callahan and Dr. Kate Fillo to present on a request to promulgate amendments to the Department’s regulations addressing licensure of hospice programs.

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

Dr. Kneeland returned at 10:40am.

With no questions from the council members, Commissioner Cooke asked if there is a motion to promulgate amendments to 105 CMR 141.

Ms. Moscato made the motion which was seconded by Dr. Bernstein. All present members approved.

**4. FINAL REGULATIONS**

*c. Request to promulgate 105 CMR 159, COVID-19 Vaccinations for Certain Staff Providing Home Care Services in Massachusetts.* ***(Vote)***

Commissioner Cooke again invited Marita Callahan and Dr. Kate Fillo to present on a request to promulgate the Department’s regulations addressing home care.

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

Dr. Bernstein asked if the state mask mandate applies to this population as an adjunct to vaccination.

Dr. Kate Fillo stated that staff wear face coverings when appropriate and caring for any patient. DPH’s guidance on comprehensive PPE applies to various care settings, including home care.

With no further questions, Commissioner Cooke asked if there is a motion to promulgate 105 CMR 159.

Dr. Kneeland made the motion which was seconded by Dr. David. All present members approved.

Dr. David left the meeting at 11:03am.

**5. 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 our COVID-19 Community Impact Survey with a focus on rural health.

Kirby Lecy, Project Coordinator, Office of Rural Health presented.

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

Ms. Blondet thanked Ms. Lecy for a “fabulous and enlightening” report.

With no further questions, Commissioner Cooke reminded Council members the next meeting would be held on Wednesday, December 8, 2021.

Commissioner Cooke asked if there was a motion to adjourn. Dr. Kneeland made the motion which was seconded by Dr. Bernstein. All present members approved.

The meeting adjourned at 11:14am.