

PUBLIC HEALTH COUNCIL

March 8, 2023

Please standby – the meeting will begin shortly

Today's presentation is available on the mass.gov/dph website under "Upcoming Events" by clicking on the March 8th

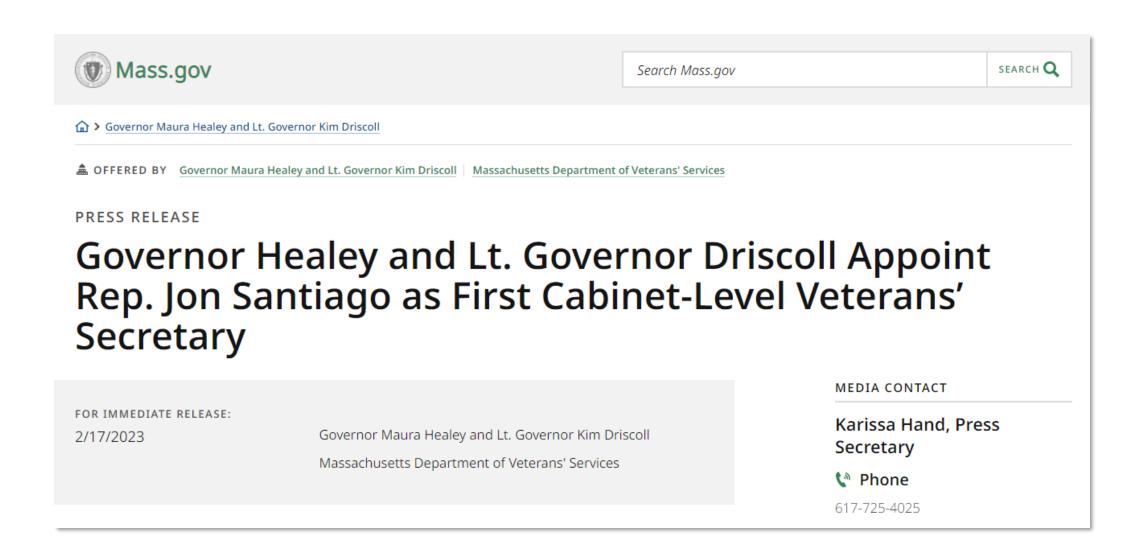
Public Health Council listing



PUBLIC HEALTH COUNCIL MEETING MARCH 8, 2023

Margret R. Cooke, Commissioner

Welcome, Secretary Santiago!



Thank you, Secretary Poppe!



Suicide Prevention State House Award Day



"Time for More" Campaign



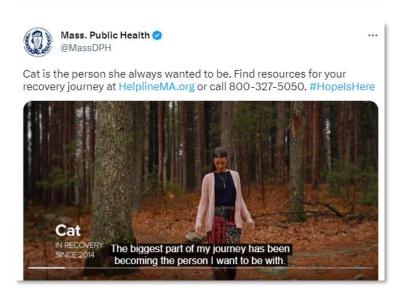
Discover the many alternatives to gambling. mass.gov/TimeForMore



MA Substance Use Helpline Campaign









IN RECOVERY



You gotta have hope and you

gotta start loving yourself.

Learn more at HelpLineMA.org

Budget Highlights

PRESS RELEASE

Governor Healey and Lieutenant Governor Driscoll File Fiscal Year 2024 Budget, Tax Relief and Housing Bills

"Meeting the Moment: Strong Economy. Livable Communities. Sustainable Future": Healey-Driscoll Administration's \$55.5 billion budget makes historic investments in education, transportation, climate action, and workforce development

FOR IMMEDIATE RELEASE:

3/01/2023

Governor Maura Healey and Lt. Governor Kim Driscoll

Executive Office for Administration and Finance

Office of Climate Innovation and Resilience

Executive Office of Housing and Economic Development

Executive Office of Public Safety and Security

Executive Office of Technology Services and Security

Executive Office of Health and Human Services

Executive Office of Labor and Workforce Development

Massachusetts Department of Transportation

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PUBLIC HEALTH COUNCIL MEETING MARCH 8, 2023

Margret R. Cooke, Commissioner



Post-Comment Revisions to Proposed Regulations

105 CMR 800.000: Registration of Sanitarians

105 CMR 801.000: Certification of Health Officers

Samuel S. Wong

Director, Office of Local and Regional Health

Background - Statutory Change 1

Chapter 39 of the Acts of 2021

- Moving 13 health boards from Division of Occupational Licensure (DOL) to Department of Public Health (DPH)
- Licensees of 2 of these health boards are primarily employed by local public health agencies
 - Board of Registration of Sanitarians Registered Sanitarians (RS)
 - Board of Certification of Health Officers Certified Health Officers (CHO)
- Transition to DPH completed February 2023

Background - Statutory Change 2

Chapter 268 of the Acts of 2022

- New statutes, M.G.L. c. 111 §§ 27E and 27F, enacted for DPH's administration of RS and CHO credentials
 - Defines sanitarian and health officer
 - DPH to establish requirements, duties, qualifications, and application process, and promulgate rules and regulations to administer the two credentials
- Effective January 1, 2023

Proposed DPH Regulations for RS and CHO

Proposed DPH regulations:

- Similar to DOL regulations
- Retain licensure of current licensees
- Consistent with each other and other credentials issued by DPH, such as EMT
- Presented to Public Health Council in January 2023

Public Comment Period

A public hearing on the proposed regulations was held in January 2023, following the presentation to the Public Health Council.

- Twenty-seven comments were received for the two proposed regulations,
 resulting in thirteen changes
- No additional changes resulted from comments outside the scope of the precomment proposed regulations

Final Proposed Regulations – Changes based on comments received **Section .020**: *Definitions*

Summary of Pre-Comment Regulation

- Definition of Certified Health Officers or CHO includes those with active certification by Division of Occupational Licensure pursuant to their applicable regulation
- Definition of Registered Sanitarians or RS includes those with active registration by Division of Occupational Licensure pursuant to their applicable regulation

Summary of Proposed Final Regulation

 Definitions are edited to clarify that current RS and CHO are grandfathered

Final Proposed Regulations – Changes based on comments received Section 801.200: Minimum Standards and Qualifications

Summary of Pre-Comment Regulation

 Subsection (1)(c)(i)1. has a typographical error with the word "biologically"

Summary of Proposed Final Regulation

The word is corrected as "biological"

Final Proposed Regulations – Changes based on comments received Section .200: *Minimum Standards and Qualifications*

Summary of Pre-Comment Regulation

 Subsection (3) provides a way for applicants that do not meet minimum standards and qualifications to be eligible for certification as a CHO or registration as a RS

Summary of Proposed Final Regulation

 Subsections are edited to clarify that this is at the discretion of DPH and not an alternate pathway to certification or registration

Final Proposed Regulations – Changes based on comments received Section .300: Establishment of Continuing Education Requirements

Summary of Pre-Comment Regulation

 Included both "Continuing Education Units" and "Continuing Education Contact Hours"

Summary of Proposed Final Regulation

 The section is edited to use "Continuing Education Contact Hours" only

Final Proposed Regulations – Changes based on comments received **Section .310:** *Standards for Continuing Education*

Summary of Pre-Comment Regulation

 Included both "Continuing Education Units" and "Continuing Education Contact Hours"

Summary of Proposed Final Regulation

 The section is edited to use "Continuing Education Contact Hours" only

Final Proposed Regulations – Changes based on comments received Section .320: Verification of Continuing Education

Summary of Proposed Regulation

 Subsection (4) directs continuing education program providers to retain program materials for four years

Summary of Proposed Final Regulation

 Subsection is edited to include a list of information related to such continuing education program for record retention purposes

Next Steps

- Based on a comprehensive review of 105 CMR 800.000: Registration of Sanitarians and 105 CMR 801.000: Certification of Health Officers, and the incorporation of comments from stakeholders, DPH recommends Public Health Council approval of these proposed regulations for promulgation.
- The Office of Local and Regional Health will provide sub-regulatory guidance on the proposed regulations as needed to ensure awareness, consistency, and compliance.

Thank you for the opportunity to present this information today.

For more information regarding Registration of Sanitarians and Certification of Health Officers, please find the relevant statutes and regulations here:

Proposed DPH Regulations:

https://www.mass.gov/lists/registration-of-sanitarians-and-certification-of-health-officers

Massachusetts Law:

https://malegislature.gov/Laws/SessionLaws/Acts/2021/Chapter39

https://malegislature.gov/Laws/SessionLaws/Acts/2022/Chapter268



Thank you!



Update on the Office of Problem Gambling Services:

Engagement, Equity, and Empowerment

Victor Ortiz

Director of the Office of Problem Gambling Services

Problem Gambling: Key Points

National

- Problem gambling has high co-morbidity with substance use disorders and mental health disorders, and disproportionately impacts communities of color (Alegría, Petry, Hasin, Liu, Grant, & Blanco, 2009).
- Community-level experiences of gambling and communities of color are often not the focus of problem gambling services and efforts.

Massachusetts

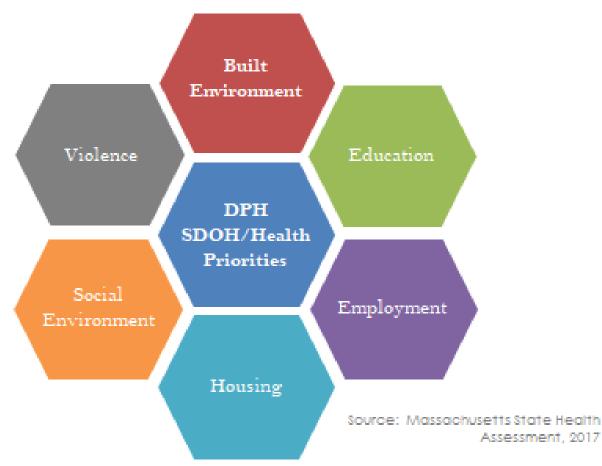
- The overall annual prevalence of recreational gambling in Massachusetts was 57.4% in 2013.
- Gamblers are more likely to be obese, smoke heavily, use alcohol, and use
 prescription drugs (Okunna, N. C., Rodríguez-Monguió, R., Smelson, D. A., Poudel, K. C., & Volberg, R.
 2016).

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Problem Gambling and Social Determinants of Health

Problem gambling is governed by a complex set of interrelating factors, causes and determinants ranging from biology and family history, to social norms and existing statutes (Messerlian, Derevensky, Gupta, 2005).

The Office of Problem Gambling Services (OPGS) takes a community-driven approach that is rooted in the Social Determinants of Health, with a racial equity lens.



Session 6: Improving Health Outcomes



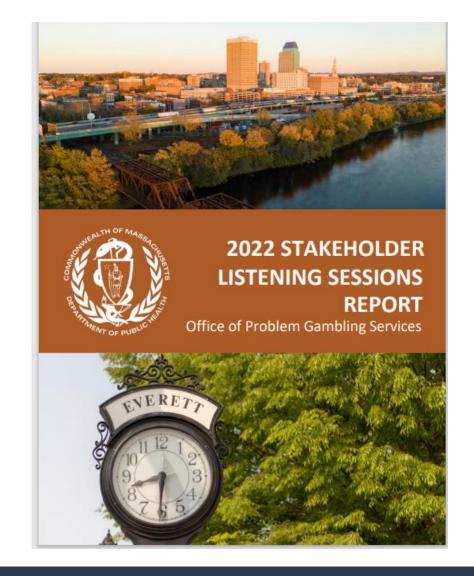
Problem Gambling: Data to Action

Since 2016, OPGS has engaged over **2,000** individuals at the community level along with 40 community-based partners to inform over 23 initiatives.

OPGS has produced over **13 community engagement reports** centered on our Annual Stakeholder Listening Sessions (SLS).

In 2023, OPGS will establish a **Data to Action Framework**, aimed at building a surveillance of problem gambling in the Commonwealth.

LINK: OPGS Community Engagement Reports



Expanded Gaming in the Commonwealth

The Expanded Gaming Act (2011) allows for up to three destination resort casinos to be opened in three geographically diverse regions across the state. Additionally, a single slots facility can be competitively awarded for one location statewide.

The Act to Regulate Sports Wagering in the Commonwealth (2022) allows for sports wagering at the established resort casinos, along with additional mobile platforms scheduled for launch in March 2023.

REGION

REGIO

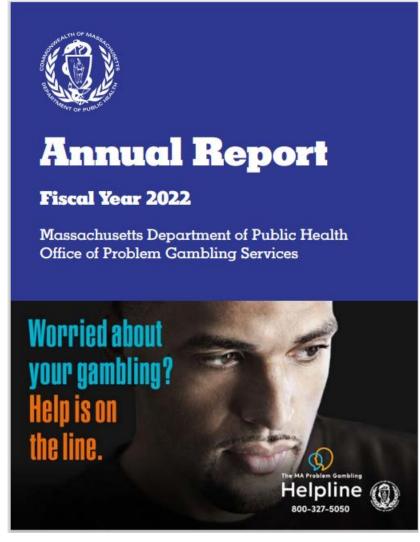
Public Health Trust Fund

The Expanding Gaming Act established the Public Health Trust Fund (PHTF) to allocate significant resources to research, prevention, intervention, treatment, and recovery support services in order to mitigate the harmful effects of problem gambling and related issues.

LINK: Public Health Trust Fund | Mass.gov

OPGS Annual Report: highlights our programmatic milestones and budget and promotes our commitment to transparency.

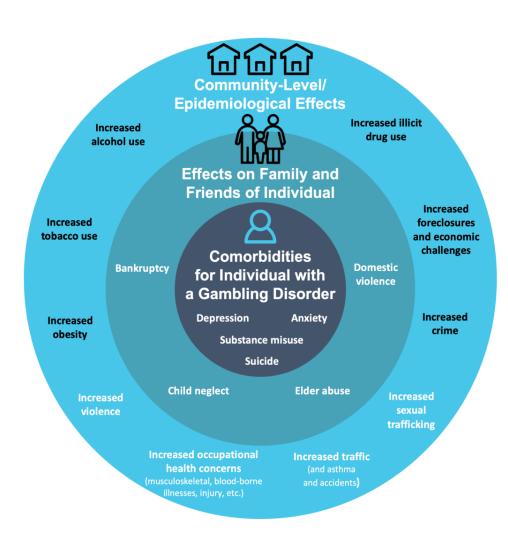
LINK: FY2022 OPGS Annual Report



Public Health Trust Fund: Strategic Plan – 2016-2021

Priorities / Key Areas of Concern:

- Prevention for youth
- Prevention for high-risk populations
- Focus on community-level interventions
- Coordination of problem gambling services
- Integration of addiction services, mental health services, and primary care
- Decrease in stigma and unsupportive social norms
- Increase in availability of support services
- Increase in availability of culturally appropriate services
- Contribute to the evidence base for problem gambling services
- Establishment of an evaluation infrastructure
- Expansion of institutional capacity to address problem gambling and related issues



Office of Problem Gambling Services Strategic Plan - 2022

Working Together to Mitigate Harms Associated with Problem Gambling: 2022-2026

OPGS will continue to operate in concert with colleagues across DPH, in alliance with an array of local, state, and national partners.

OPGS will work to continue maximizing impact by ensuring reach and effectiveness of problem gambling prevention, treatment, and recovery services.

LINK: Working Together to Mitigate Harms Associated with Problem Gambling: 2022-2026

Strategic Plan 2022-2026

Working Together to Mitigate Harms Associated with Problem Gambling

January 2023





COMMUNITY ENGAGEMENT

Regional Planning Process
CHW Needs Assessments
Stakeholder Listening Session

OVER 2,000 INDIVIDUALS ENGAGED WITH 40 COMMUNITY PARTNERS ACROSS ALL THREE REGIONS

PRIMARY PREVENTION

Community Level Health Project

Community: Springfield and Everett

Community Campaigns

Targeting Youth and Parents

Suicide Prevention

Community Driven Activities

SECONDARY PREVENTION

Photovoice

Youth and Parents

Ambassador Project

Men of Color

CHW Community Pilot

Community: Springfield

AAPI Empowerment Initiative

Community

TERTIARY PREVENTION

Community Campaigns

Priority Populations

MassMen

Gambling Screen

TECHNICAL ASSISTANCE

Provides structured support, guidance & coaching

EVALUATION

Community Centered & Culturally Responsive

2020: Community Level Health Project: Springfield & Everett

Goal:

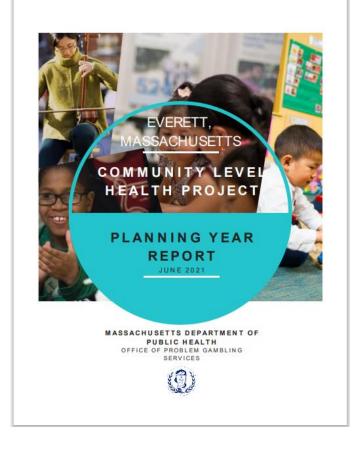
Work alongside communities disproportionately impacted by gambling to develop and implement a community level plan (building from Community) Health Improvement Plans) to address gambling-related health concerns in casino host communities of Greater Springfield and Everett.



Planning Year Report June 2020

Massachusetts Department of Public Health Office of Problem Gambling Services





Full report here: Problem Gambling Evaluation & Community Engagement Reports | Mass.gov

2022: Community Level Health Project: Springfield

Springfield: Provide resources and support to improve youth behavioral health in Springfield and reduce stigma.

- Youth Trainings
- Information Dissemination
- Promotion of Alternative Activities





2022: Community Level Health Project: Everett

Everett: The community overwhelmingly called for an intervention that integrated behavioral health, racial equity, and access to culturally appropriate services.

Individual

- Non-clinical peer support
- Referrals to outside clinicians when needed
- Support groups

Family

- Intake process for the family
- Family Support groups
- Workshops



- Community workshops
- Recreational activities
- Community events





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2022: OPGS Communications Campaign

PLATFORM: "Let's get real about gambling"

EXECUTIONS: Website Explainer video Brochure Helpline brand

PRIORITY POPULATIONS:

AUDIENCE

Men of color w/ history of

substance misuse

TAGLINE

"Different stories. Same problem."

EXECUTIONS

Campaign 2020

AUDIENCE

Youth & Parents

TAGLINE

"Teen Gambling. It's a risk."

EXECUTIONS

Parent & Teen Toolkit, Social Media Campaign, Lottery Holiday Campaign **AUDIENCE**

Older adults

TAGLINE

"Discover the many alternatives to gambling."

EXECUTIONS

Social Media Campaign (Videos),

Webpage

EXAMPLES OF CREATIVE:



Men of Color Campaign 2020



Youth & Parent Toolkit



Older Adults social media campaign



Platform Brochure



Platform Explainer video

2021: Holiday Campaign

Objective: Spread awareness that lottery tickets are not a suitable holiday gift for children, reaching parents during the busy holiday season.

Target Audience & Geography: Parents and trusted adults with children under 18

Tactics: Social Media, Radio & Streaming, Convenience Stores, And Gas Stations (English & Spanish).

Metrics

- 2020: The OPGS Holiday campaign delivered 787,407 Facebook impressions with an overall CTR of 1.06%
- **2021: 7,065,590** impressions across social media, radio, and out of home.
- For Facebook specifically 496,360 impressions with a 3.08% CTR



2022: Holiday Campaign

Flight Dates: 1 Month, December 1-31st

Tactics: Social Media, Radio & Streaming, Convenience Stores, Gas Stations, and print ads (Chinese, Khmer, Korean, and Vietnamese language publications).

Metrics

- The OPGS Holiday campaign delivered
 8,137,519 million impressions across all channels.
- Reached 50,000 print subscribers in multiple languages
- CTR rates for Facebook/Instagram: 3.56%





Key Principles for a Public Health Path Forward

- Utilize data to inform the allocation of resources for precise public health.
- Focus on the social determinants of health to address, plan, and develop problem gambling services.
- Engage communities to inform, develop, and implement services with a specific emphasis on marginalized populations.
- Break down silos and create meaningful integration that will promote health and wellness for everyone.



Resources

- Suicide & Crisis Lifeline: 988
- MA Problem Gambling Helpline: 800-327-5050
- MassMen: https://www.massmen.org
- PG Awareness Materials: https://massclearinghouse.ehs.state.ma.us/c ategory/GAMB.html





Thank you!

Victor Ortiz

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Office of Problem Gambling Services

https://www.mass.gov/opgs



Next Meeting: April 19, 2023