



Public Health Council Meeting

November 12, 2025

Robert Goldstein, Commissioner

Today's presentation is available on mass.gov/dph under "Upcoming Events" by clicking on the November 12 Public Health Council listing.

Immunizations and Community Health Centers



Native American Heritage Month



National Family Caregivers Month



**NATIONAL FAMILY
CAREGIVERS MONTH**

Pappas Working Group Report



The Governor appointed the Pappas Working Group to conduct a review of the pediatric care offered at Pappas Rehabilitation Hospital for Children and make viable assessments about the best provision of high-quality pediatric care within the Public Health Hospital System.

National Veterans + Military Families Month



PTSD Commission

Special Commission on Post Traumatic Stress Disorder

The Special Commission on PTSD was established in 2024 with the enactment of Section 149 of Chapter 178 of the Acts of 2024: An act honoring, empowering, and recognizing our servicemembers and veterans.

New DPH Logo



**Massachusetts Department
of Public Health**



Federal Updates



Determination of Need:

Everest Hospital, LLC

Transfer of Ownership

Teryl Smith

Director-Bureau of Health Care Safety
and Quality

Operations and Management or Consulting Agreements

Questions: Please provide more information about the management of operations at the Long-Term Care Hospital (LTCH) and how will those plans be impacted by the anticipated management or consulting agreement with Whittier Health Network? What are the terms of the agreement with Whittier Health Network?

Applicant Response:

- The Executive Director from the Applicant will be onsite at the hospital at least 4 days a week and will oversee operations.
- Whittier Health Network engaged through a consultant agreement for a 3-year term.
- The consultant agreement does not contain a weekly minimum or maximum time commitment.
- Whittier will not take a management fee
- Whittier's consultant fee is a fixed percentage of revenues and is not deferred.
- Whittier's consultant agreement includes: Admissions, marketing, provider contracting, medical coverage, case management, revenue cycle management, regulatory filings, budgeting, staffing and operational reviews

Staffing Plans and Coverage - Physicians

Request: Please provide more information related to physician staffing and coverage plans

Applicant Response:

- The Hospital has a Medical Director and 24/7 physician coverage as required for LTCHs. No anticipated change.
- Contract with UMass Memorial Health Physician Group (Hospitalists and Specialists) and other physician groups supports appropriate physician coverage.
- Existing Medical Director will remain in their role.
- The Applicant will look to expand physician staffing.
- Attract additional physicians to form consulting arrangements, enhancing back-up coverage

Staffing Plans and Coverage- Nursing

Request: Provide a description of nurse staffing including but not limited to the current nursing coverage and plans for future nursing staff

Applicant Response:

- Day and Evening: 1 nurse to 4-5 patients depending on acuity.
- Night: 1 nurse per 8 patients.
- Certified Nursing Assistant support, 24-hour respiratory therapy care, and an inpatient rehabilitation department.

Staff Training

Request: Provide a description of the applicant's plan for training new staff.

Applicant Response:

- Leverage and build upon Vibra's existing training program.
- Onboarding program that includes a 12-week preceptorship.

Revenue Projections

Request: Please re-evaluate and provide an expanded description of your revenue projections

Applicant Response:

- Small changes in a number of operational areas, including but not limited to staffing, as well as increased census will result in significant financial improvements.
- Improved reputation, foster local relationships, and ensure efficient back-office operations.

Background on the Applicants/Owners

Request: Please provide additional background information about the three applicants/owners including their experience relevant to operating a LTCH.

Applicant Response:

- Additional detail outlined the experience of all applicants/owners, and underscored Whittier is serving as a consultant assisting with the LTCH-specific operational and compliance requirement

Continued Operation of Vibra Hospital and SNF Without a Transaction

Request: Please describe more information about the risk of closure to the Vibra Hospital and SNF without the implementation of the Proposed Project

Applicant Response:

- The SNF that would be acquired under the same transaction is outside the statutory and regulatory authority of the Determination of Need process for transfers of ownership.
- Applicant's acquisition of the SNF is dependent on approval of the Proposed Project and acquisition of the hospital.
- Vibra's continued operation without the transaction is not certain, however, the SNF would close and Vibra anticipates renegotiating their lease before embarking on a decision to close the Hospital.

Thank you for the opportunity to present this information today.

Please direct any questions to:

Teryl Smith

Director-Bureau of Health Care
Safety and Quality

Teryl.A.Smith@mass.gov



Massachusetts Department of Public Health

Tribal Health Program

**Office of the Assistant Commissioner of Health Equity
Division of Community Engagement**

Cheryl Cromwell, Tribal Health Strategist
Bethany Griles, Program Coordinator

**November 12, 2025
Public Health Council**



Agenda

- Historical Context and Demographics of Native American Tribes and Tribal Serving Organizations in Massachusetts
- Timeline of Tribal Health Program at DPH
- Past and Current Tribal Health Work
- Proposed Tribal Health Program Framework
- Summary and Q&A

We Are Still Here

- Assonet Wampanoag Tribe of the Wampanoag Nation
- Wampanoag Tribe of Gay Head Aquinnah
- Chappaquiddick Tribe of Wampanoag of the Wampanoag Indian Nation
- Chaubunagungamaug Band of Nipmuck Indians
- Herring Pond Wampanoag Indian Tribe
- Mashpee Wampanoag Tribe
- Hassanamisco Nipmuc Band
- Massachusetts Tribe of the Ponkapong
- Pocasset Wampanoag Tribe of the Pokanoket Nation
- Nipmuc Nation Tribal Council
- Seekonke Wampanoag Tribe
- Mattakeeset Tribe
- Stockbridge Munsee of Mohican Indians



Native American Population in the Commonwealth

According to the 2020 U.S. Census, there are 9.7 million US residents identified themselves as American Indians.

In Massachusetts:

- 94,000 residents identify themselves as American Indian (1.3 % of the population)
- American Indian population grew by 43,000 people from 2010 to 2020
- Multiracial American Indian population grew by 120% from 2010 to 2020
- Approx. 48 Tribal Nations are represented here in Massachusetts



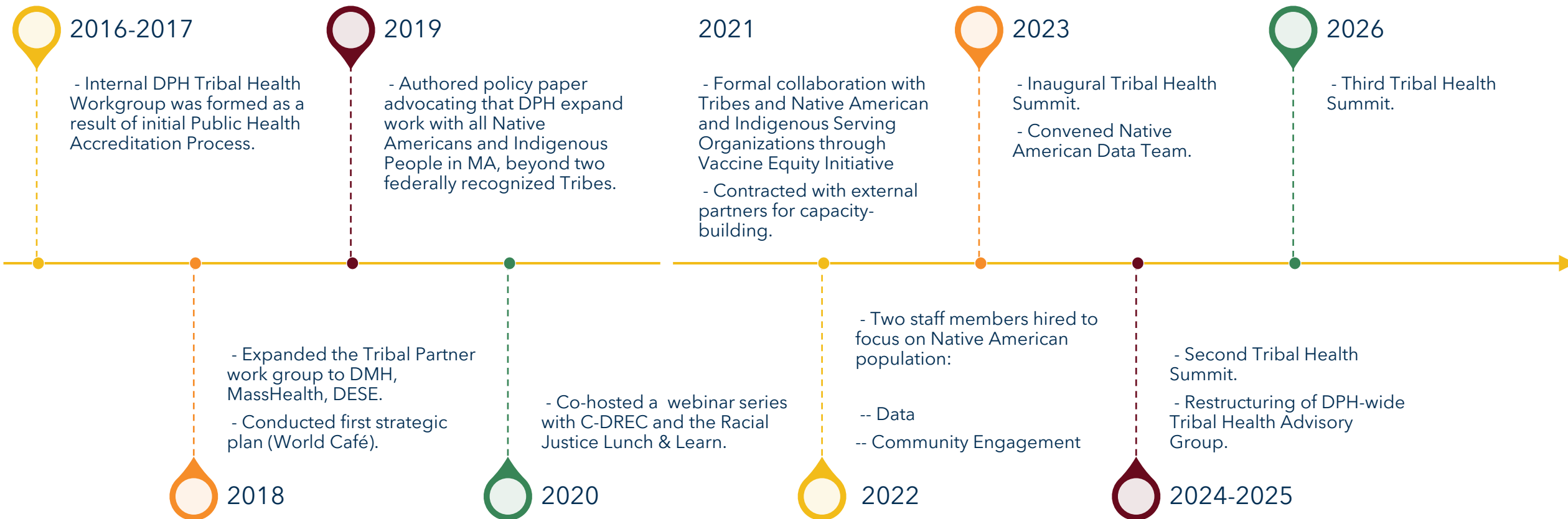
*Scan here for an overview on
Indigenous population data by Boston
Planning and Development Agency*



Serving Native Americans in Massachusetts



History of Tribal Work at DPH (2016-Present)



Current DPH Tribal Work

BIDLS

Bureau of Infectious Disease and Laboratory Sciences

- Mass Virtual Epidemiologic Network (MAVEN) data project

OACHE

Office of Asst. Commissioner for Health Equity

- Vaccine Equity Initiative, Tribal Health Program

BSAS

Bureau of Substance Addiction Services

- Indigenous Photo Essay Project, Prevention programming with Tribal Communities
- Community Advisory Board w/ Institute New England Native Studies @UMASS Boston- Lifting Up Indigenous Voices grant
- Co-leads Statewide Interagency Tribal Partnership Mtg

OLRH

Office of Local and Regional Health

- Co-lead of DPH Tribal Advisory Group
- FPHS
- Administrative Support to Tribal Work, TrainMA Training Offerings

BCHAP

Bureau of Community Health and Prevention

- Housing Report, Tribal Youth & Adult Suicide Prevention Grants, Tobacco Cessation Survey , CHEI Data Sovereignty

OHDSI

Office of Health, Data, Strategy, and Innovation

- Tribal Data Standards- Tribal Affiliation, Cell Suppression, Racial Equity Road Map

BCEH

Bureau of Climate and Environmental Health

- Housing Climate Fact Sheets and PFAS Project

OWD

Office of Labor and Workforce Dev.

- Paid Internship Program

Commissioner's Office: Commissioner, Office of General Counsel, Point of Service, PMQI

External Partnerships

UMASS Medical School Indigenous Health Population Clerkship

Attorney General Office Community Engagement and Antitrafficking Unit

Kinship Heals: Domestic Violence & Sexual Assault

Sweet Grass Cultural Center: Missing and Murdered Indigenous Women

Department of Conservation and Recreation – Environment and Health Conditions

Association of State and Territorial Health Officials- State Tribal Liaison Peer to Peer

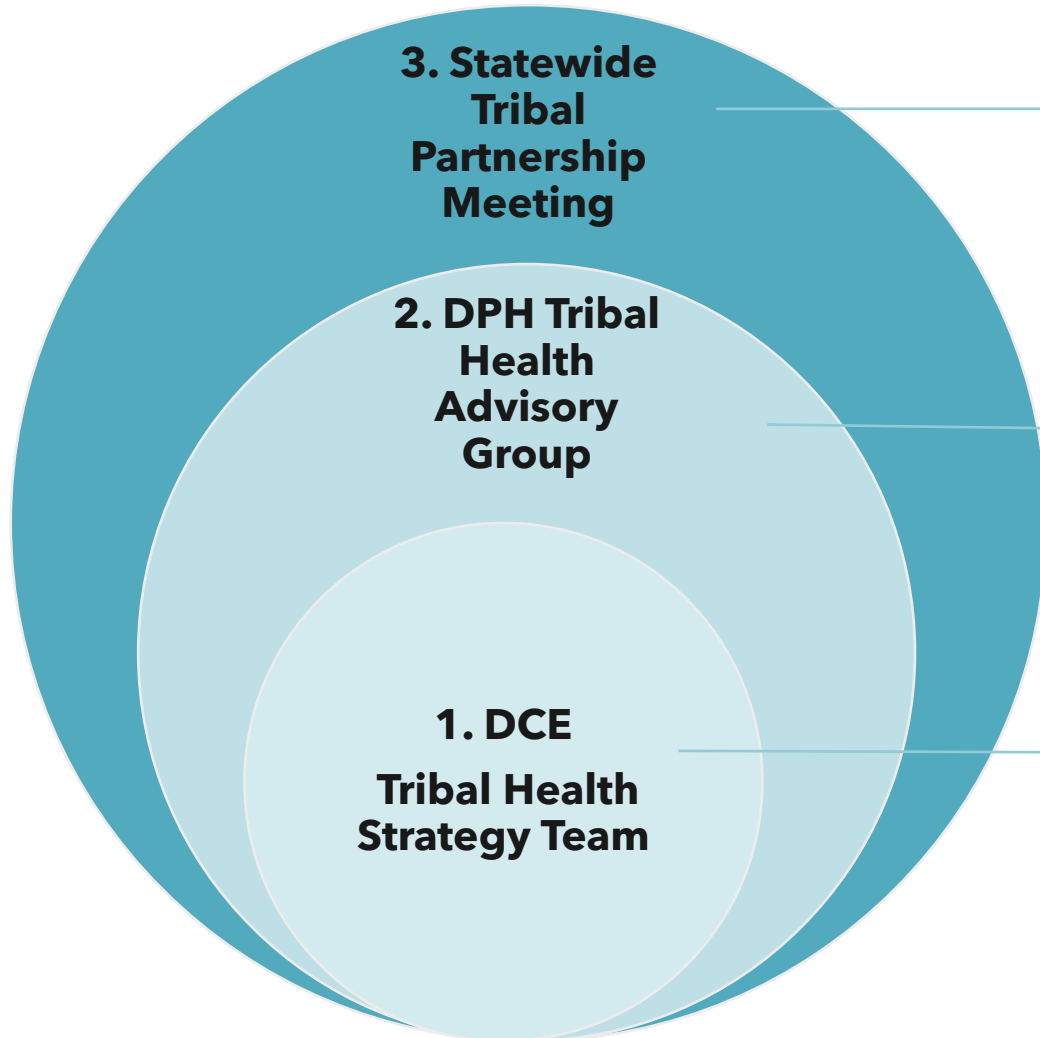
Vision and Mission: Tribal Health Program Framework

Vision: To develop an infrastructure that dismantles and replaces the historic and current inequities in the data methodology, distribution of resources and policy development that has critical implications that impacts Native American Peoples.

Mission: To implement a department-wide framework that strengthens relationships, enhances collaboration, and improves communication across all levels of DPH – engaging every bureau, office, hospital and Commissioners Office – to prioritize Tribal Health and Wellness, integrate Tribal voices and advance health equity while honoring Tribal Sovereignty.



Tribal Ecosystem



- Statewide platform that **encourages collaboration** between Tribes, state agencies, non- profit health organizations and programs.
- Fosters **culturally responsive education, partnership-building** and **resource sharing** to support alignment between Tribal needs and state/federal programs.

- Develops a Tribal and Indigenous health **framework to drive and implement initiatives to action.**
- **Develops subgroups** to support program development and disseminate information on **best practices for working with Tribes.**

- Develops and **strengthens DPH's relationships** with Tribes through lifting up Tribal voices and elevating Tribal priorities.
- Identifies technical assistance and **capacity building supports for Tribes** and Tribal Serving Organizations.
- Develops **strategies for measuring and documenting success.**

Tribal Advisory Workgroup

Benefits of the Workgroup:

- Break down silos, streamline efforts and elevate Tribal work within DPH.
- Involve and educate all bureau, office and hospitals about Tribal/Indigenous history, land, language, culture and Tribal affairs.
- Bring awareness of the Tribe's priorities, needs, concerns and barriers.
- Co-create solutions to promote equitable outcomes for Tribal and Indigenous peoples.
- Identify where the unmet service needs and critical gaps are within the current DPH system.

Core Functions of the Tribal Workgroup



Conduct a comprehensive inventory of current initiatives, grants and collaborations related to Tribal Health and align the work with DPH priorities



Refine Internal processes to be more efficient and effective when allocating resources to Tribes and Tribal Serving Organizations



Draft key performance indicators (KPIs), success measures and provide ongoing monitoring and reporting



Establish meaningful communication to share best practices for the development and implementation of programming, policy, standards and recommendations



Elevate key asks and provide recommendations to Commissioner at regular intervals

Workgroup Pillars



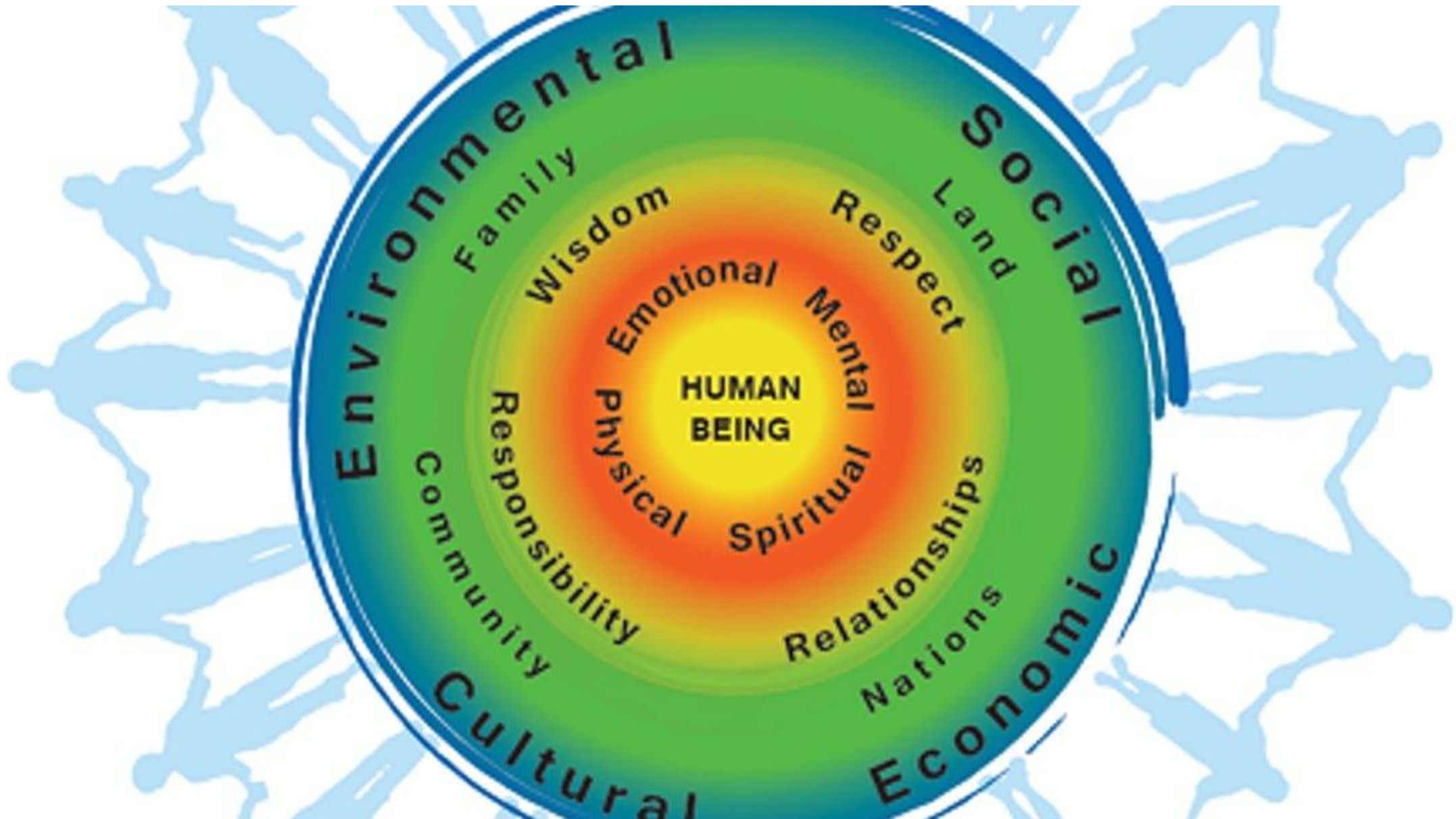
Data

Communication,
Education, and
Engagement

Sustainability

Legal/Legislation

Summary





Massachusetts Department of Public Health

Thank You!

Questions?



Next Meeting:
Wednesday, December 10, 2025
