

MINUTES FOR THE MEETING OF THE BOARD OF DIRECTORS December 16, 2010

The monthly meeting of the Board of Directors of the Boston Public Health Commission was held on Thursday, December 16, 2010 in the Hayes Conference Room at the offices of the Boston Public Health Commission, 1010 Massachusetts Avenue, Boston, MA 02118.

Board Members Present:

Paula Johnson, MD, MPH, Chair Ruth Ellen Fitch, JD Harold Cox Jack Cradock Joseph Betancourt, MD, MPH (remote)

Board Members Absent:

Celia Wcislo Kathleen Walsh

Also Present Were:

Barbara Ferrer, PhD, MPH, MEd, Nancy Norman, John Townsend, Nakisha Skinner, Maia Brodyfield, Pam Jones, Debra Paul, Chuck Gagnon, James Hooley, Bernie Killarney, Fred Brack, Gerry Thomas, James Salvia, David Pia, Sharyn Imonti, Fatema Fazendeiro, James Montgomery, Jian Shang, Anne McHugh, Megan McClaire, Patty Hall, Erline Achille, Denise Dodds, Margaret Reid, Jeanne Cannata

Visitors:

Laura Macklin, Regis College; Katharine Bachman, Wilmer Hale; David Carlson, Boston Redevelopment Authority; Cynthia Parker, Interaction Institute for Social Change; Vince Droser, Eva Erlich, Patrick Lee, Trinity Financial; Scott Mason, Massachusetts League of Community Health Centers

Proceedings:

Chairwoman's Comments

Dr. Paula Johnson, MD, MPH

The meeting was called to order at 4:12 PM.

Executive Director's Report

Barbara Ferrer, PhD, MPH, Med

- The inter-agency Council on Housing and Homelessness for Region One met on December 15, 2010 at the Boston Public Health Commission's (Commission's) Long Island Campus. Dr. Ferrer thanked Dr. Norman, Ms. Conley, and the staff from the homeless bureau for aiding in a successful site visit. Issues surrounding chronically homeless individuals, funding sources, and long term sustainability for programs were discussed. Board Member Fitch noted that the Region One Director of the Department of Health and Human Services had expressed support for the programs out on Long Island at a board meeting of the Massachusetts League of Community Health Centers.
- On December 6, 2010 the Emergency Shelter Commission held the annual Homeless Census under
 Director Jim Greene, with over 300 volunteers participating. Along with individual volunteers on the
 street, private medical centers, drug treatment centers, and shelters all contributed to the census.
 Finalized census results will be provided to the board when available. It was noted that there seemed
 to be a fewer number of individuals, and an absence of homeless families on the street. The number
 of individuals and families in shelters has increased, due in part to the fact that beds and shelters have
 been lost, resulting in an increased demand in the shelters that are still open.
- The Conference of Boston Teaching Hospitals (COBTH) meeting was held last week. The Commission's overarching goals and work with Communities Putting Prevention to Work (CPPW) were presented. It was requested that hospitals appoint staff to assist in promoting healthy hospital environments pertaining to tobacco control and sugar sweetened beverages, and it was noted that the importance of hospital involvement in the campaign to limit the consumption of sugar sweetened beverages was mutually understood and agreed upon and that hospitals appreciated the Commission's support and respect for individual processes. There was more difficulty regarding tobacco control goals as they pertain to the hospital campus as well as employee benefit packages and cessation tools available to patients.
- The Commission's employee award celebration will be held on January 6, 2011. The board members were invited to attend and tickets to the event were included in their board material.
- Everyone was encouraged to stop and see the *can-struction* in 2nd floor reception area. The Department of Intergovernmental Relations staff built the Commission's logo out of cans donated for the *Can Share* project.

Northampton Square: A Proposal

Patrick Lee, Vice President, Trinity Financial Vince Droser, Vice President, Development, Trinity Financial Eva Erlich, Assistant Project Manager, Trinity Financial

- Trinity Financial (Trinity) acknowledged the importance to the Commission that current residents and the low income/low market nature of the property be protected into the future and feels it is vitally important to promote smoke free housing and homeless programs in support of the Commission's values and requests. Trinity also recognized the importance of Northampton Square to the Commission because of financial support it provides to various programs.
- The project team was outlined and Trinity's accomplishments to date were listed, including \$1.45 billion in projects, four Leadership in Energy and Environmental Design (LEED) Certified Projects, over 5,600 mixed income units, and the 1st smoke free housing developments in Boston. Larger scale projects include the Regency Tower, Washington Beech, and the Mattapan Campus, 23.6% of which is occupied by former homeless individuals.
- Current goals for Northampton Square include providing financial stability, setting aside fifty units for Commission program clients, redeveloping all units while maintaining them at below market value with

low rent, improving energy, and minimizing disruption during construction. Trinity also plans to work with residents and the community through a healthy resident initiative, and to hire a healthy resident coordinator. There is also potential to add units to the existing campus at Northampton Square for additional housing.

• Ms. Skinner outlined RFQ process for Northampton Square and noted that the review committee recommends acceptance of Trinity's proposal to redevelop Northampton Square.

VOTE

• The board voted to accept Trinity Financial's proposal to redevelop Northampton Square

The votes were as follows: 5 in favor, 0 opposed, 2 absent.

Who We Are: An Organizational Identity Statement

Pam Jones, Director, Policy and Planning

- The organizational identity statement was outlined and it was noted that this statement is still a
 working draft and that Director Pam Jones could return at a later date to go into more detail. The Anti
 Racism Advisory Committee (ARAC); created in 2008, is staffed by 22 employees across the
 Commission. Focus for ARAC is on racism at the Commission and methods of engaging employees to
 facilitate improvements.
- The context and process of ARAC were outlined. It was decided in the early stages of the program that in order to facilitate changes the organization environment also needed to be changed. In November of 2009 ARAC believed that their organizational identity statement did not reflect the aspired accomplishments so additions were made, including references to emergency services, social services, and advocacy. ARAC wanted to promote social determinants of health, and dismantle racism, poverty, and other forms of oppression. ARAC believes it is important to lead by example through ensuring the Commission's policies are fair and equitable and that external partners are utilized.
- The next steps in finalizing the organization identity statement were outlined, including soliciting staff, and board involvement and gathering input from external stakeholders. A summary will be provided based on input from April to September 2011, and a final identity statement will be developed and presented to the board. After receiving the board's approval, ARAC will move on to policy and action.
- The board expressed a desire to set aside time to discuss this further. Because there are limited resources, it was noted that the process of how these goals are to be completed should be discussed. The board also agreed that it supports ARAC soliciting staff input on the organization statement.

EMS Data Sharing

James Hooley, Chief, Boston EMS James Salvia, Paramedic, Boston EMS

- Chief Hooley introduced Jian Shang as the Senior Data Processing System Analyst for EMS and Dr. Ferrer noted that Ms. Shang will be part of a team awarded the Commission's John Auerbach Team Award for Innovations in Public Health. It was noted that often Emergency Medical Services (EMS) data collection focuses mainly on response times; however, while it was acknowledged that this information is important, it was noted that it does not provide insight into the performance of EMTs once they arrive on the scene. A Computer Aided Dispatch system (CAD) enables more information to be recorded, including dispatcher, EMT, and Paramedic identification, as well as the date, time, and address of the call.
- One goal is to reduce the number of calls given to private ambulances. With the extra information provided by CAD, supervisors and managers can determine the propriety of a call that had been

delegated to a private ambulance and see why a Boston EMS unit may not have been available. They can also see reasons for a non-transport, track the number of overtime hours, and compare information to past weeks' data. In the data collection process, information is recorded on a CAD to the electronic Patient Care Report (ePCR). Once the ePCR is sent the information becomes available on the server and is automatically faxed to hospital. Any field is searchable and information can be documented from ambulances by Paramedics and EMTs. Also, certain information, such as shootings, bicycle accidents, and stabbings can be sent as alerts automatically to email or blackberries; however, Boston EMS is careful to remain HIPPA compliant. Information gathered can also be utilized by other sources. Mayor Menino's summit on bike safety, and the Boston Cyclists Union were cited as examples of areas where this information can be utilized by creating a map of bicycle accident locations.

- A grant proposal has been submitted to the Attorney General's Office to support an EMS Navigator Project. The project will be designed to reduce racial and ethnic disparities in asthma and diabetes by connecting low income individuals suffering from poorly managed diabetes or asthma with services. The board noted that EMS should take a look at repeat asthma visitors and make a note of where they went to ensure that there is no issue with the treating facility. Information sharing with police and emergency departments will be facilitated in response to high users of EMS to provide more holistic care and more appropriate care for cases of substance abuse and "secondary gain" such as warmth. Narcotic related illnesses will also be tracked.
- Hues to Home is a new initiative that has identified the 35 most frequent homeless patients for the Boston Medical Center. Chart reviews have been completed for each individual, with goals to reduce expensive emergency healthcare in favor of promoting retention in permanent housing and stabilization.
- Information fields have been developed for the inclusion of elderly referrals in patient care reports to serve as referral mechanism for further assistance. Board Member Cradock noted that the East Boston Community Health Center transports several hundred elderly persons each week and that EMS might want share this information with those drivers.
- The board requested that EMS return to talk about general observations across the city and map selected categories found in ePCRs to show locations in the city where these categories are clustered.
- Board Member Fitch wanted to know whether any other EMS agency is using these same practices. It
 was noted that Cambridge is doing something similar, but the presenters were unsure. Dr. Ferrer
 stated that she does not know of any that are and Mr. Montgomery stated it is possible that Boston
 EMS could present at the national forum.
- Chairwoman Johnson urged Boston EMS to think about operations early on to avoid this tool becoming burdensome.

Approval of Minutes

The minutes of the board meeting held November 18, 2010 were approved.

Requests

 Board Member Cradock requested that there be more discussion regarding the Partnerships Advancing Community Together (PACT) Program at a future meeting.

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