

#### Board of Health Meeting June 14, 2023 4:00 pm

#### **AGENDA**

- 1. Chairperson's Remarks
- 2. Executive Office Report
- 3. Acceptance and Approval of Minutes
- 4. Fiscal Year 2024 Budget Vote
- 5. Mission Statement Updates
- 6. Strategic Planning Updates
- 7. Health of Boston Reports
- 8. Adjourn



### **Executive Office Report**

#### **BPHC Celebrates Pride!**

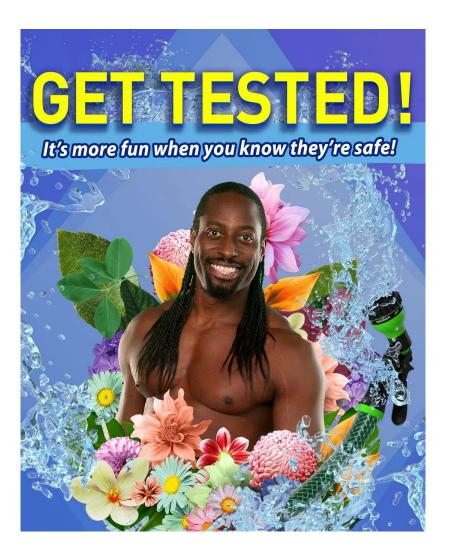






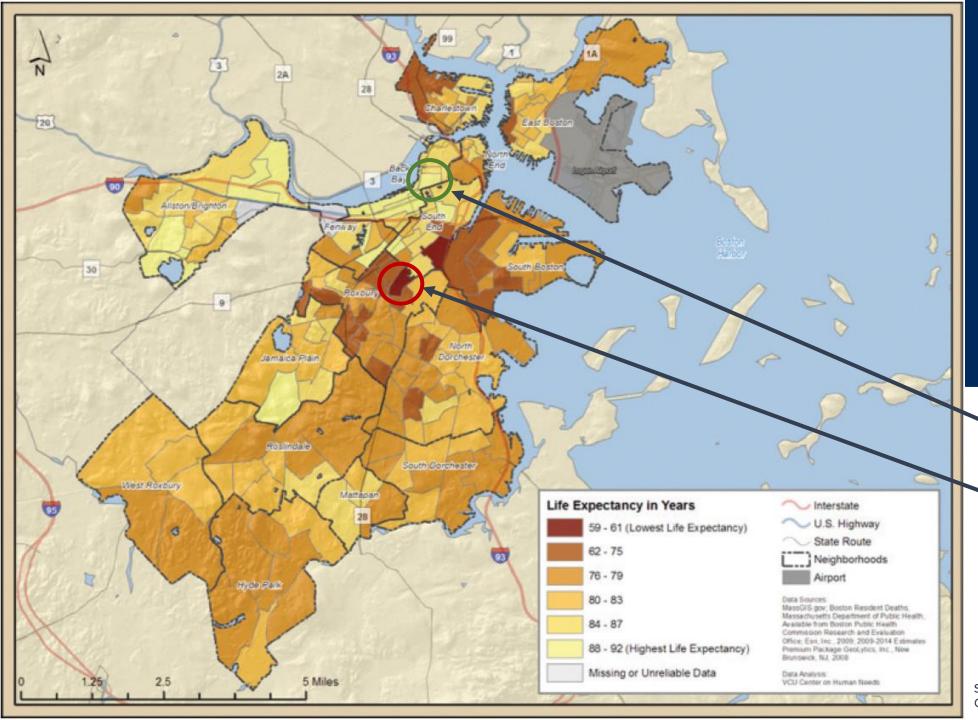
# Increasing Sexual Health Awareness and Access to Resources





- Partnership with Boston Pride for the People
- Launched a series of sex-positive ads on dating aps promoting HIV/STI and Mpox vaccination resources
- Distributed 10,000 condoms during Pride
- Established new HIV/STI and Mpox vaccination landing page: bostonpublichealthtesting.com
- Conducting a citywide LGBTQ+ Health Equity Assessment
- Thank you to the Infectious Disease Bureau and others who have been involved in this work!

Find a testing location nearest you!



Health of Boston:



Life
Expectancy in
Boston
By Census
Tract
2003-2007

Back Bay: 92 years

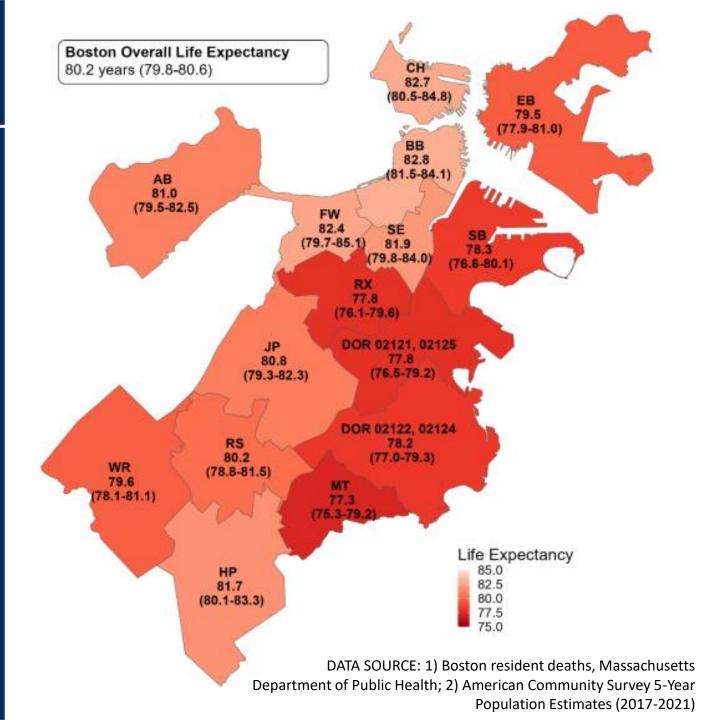
Roxbury: 59 years

33-year difference

SOURCE: Virginia Commonwealth University Center on Human Needs, 2012

## Life Expectancy in Boston 2017-2021 by Neighborhood (years)

Boston (average)	80.2 years
Roxbury	77.8
Dorchester 02121, 02125	77.8
Dorchester 02122, 02124	78.2
South Boston	78.3
East Boston	79.5
West Roxbury	79.6
Roslindale	80.2
Jamaica Plain	80.8
Allston/Brighton	81.0
Hyde Park	81.7
South End	81.9
Fenway	82.4
Charlestown	82.7





# Life Expectancy in Boston by Census Tract 2015-2021

#### A Census Tract in Back Bay



#### 92 years

Median Income: \$141,250

College Degree: 91%

White: 82%

Black/African-American: 1%

Latinx: 8%



# Life Expectancy in Boston by Census Tract 2015-2021

#### A Census Tract in Back Bay

#### A Census Tract in Roxbury









#### 92 years

Median Income: \$141,250

College Degree: 91%

White: 82%

Black/African-American: 1%

Latinx: 8%



#### 69 years

Median Income: \$41,211

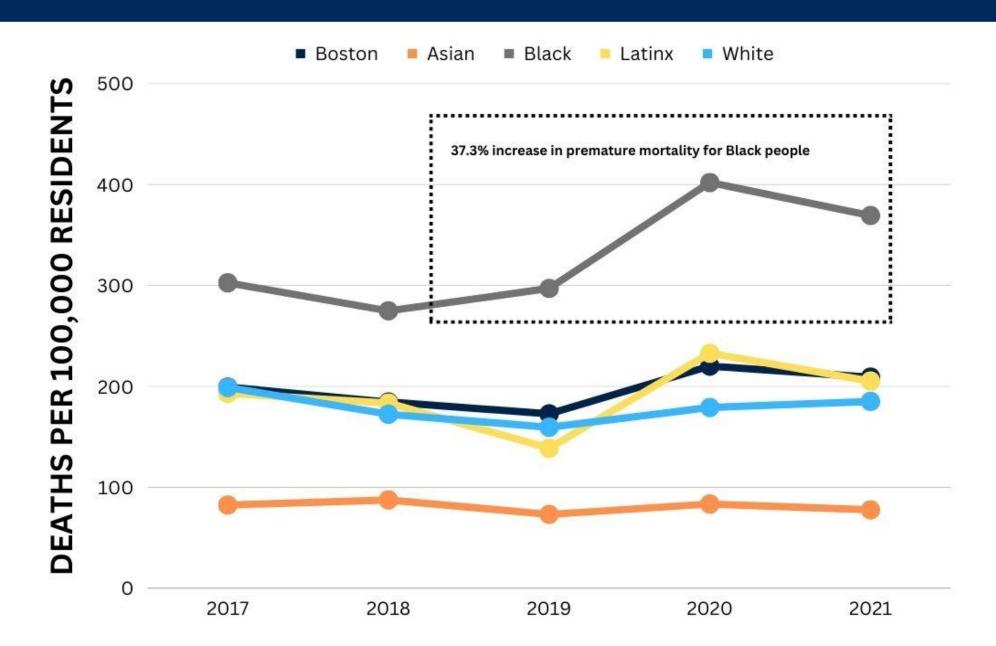
College Degree: 44%

White: 13%

Black/African-American: 50%

Latinx: 32%

#### Premature Mortality<sup>†</sup> by Race/Ethnicity and Year, 2017-2021





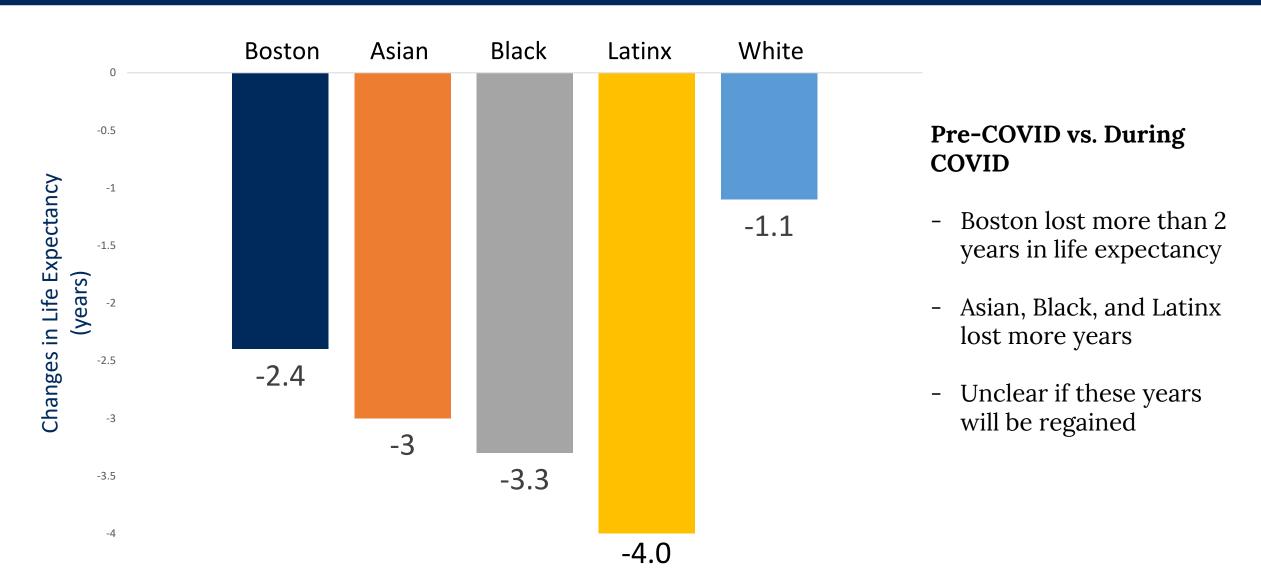
# Leading Causes of Premature Mortality among Black Boston Residents, 2017-2021

	#1 Cause of Death	
2017	Cancer	
2018	Cancer	
2019	Heart Disease	
2020	Accidents	
2021	Accidents	

<sup>\*</sup>Accidents are unintentional injury deaths and include deaths due to drug overdose



## Change in Life Expectancy in Boston by Race and Ethnicity 2018-2019 vs 2020-20212



# Advancing Health Equity in Boston Symposium, April 26th











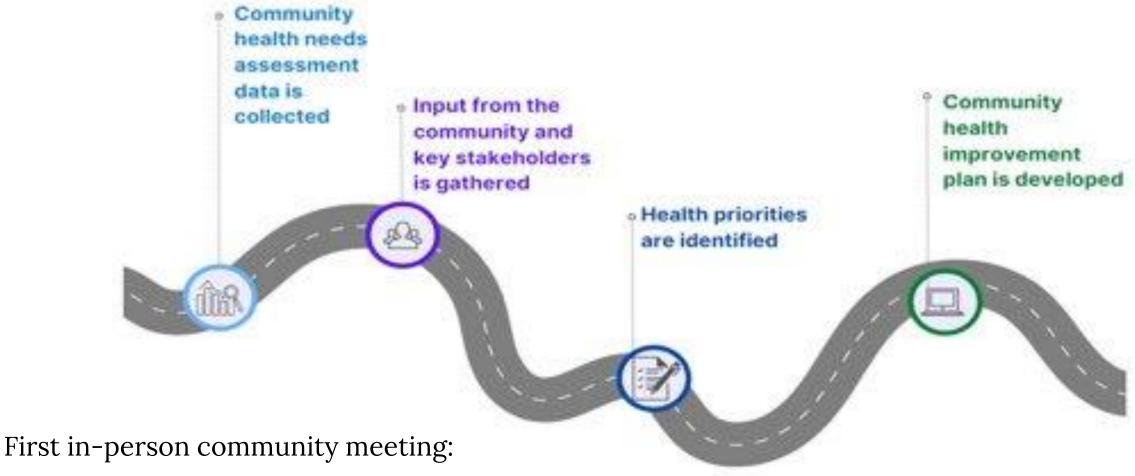






#### Health of Boston/CHIP Community Dissemination





Whittier Street Health Center June 21st, 6 pm

# Substance Use Disorder and Unsheltered Homelessness











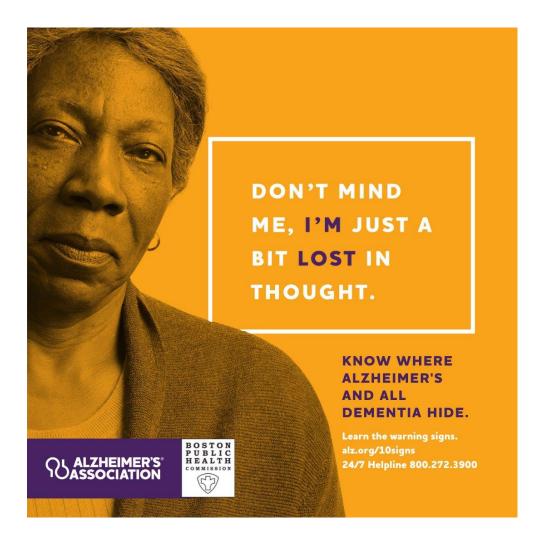


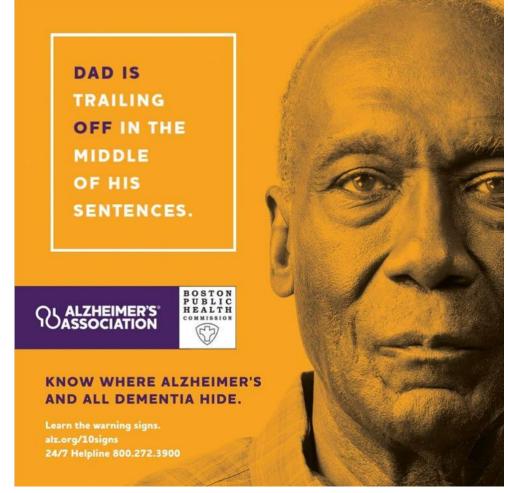


Request for Information available at:
<a href="https://doi.org/10.2007/bj.10.2007/">Opioid Remediation | Boston.gov</a>



#### **Alzheimer's and Brain Awareness**







# Acceptance and Approval, March 8<sup>th</sup> Meeting Minutes





### FY24 Budget Update and Vote

Tim Harrington Director, Administration & Finance June 14, 2023

### **FY24 Budget Timeline**



1/09/23	Initial FY24 meeting with Office of Budget Management and Mayor's Office
1/11/23	January Board Meeting with Budget Process Update
1/13/23	FY23 Draft maintenance budget submitted to the City
1/18/23	Capital requests submitted to City
2/03/23	FY24 external funds budget due to the City
January/ March	Further meetings with OBM and Mayor's Office around potential new budget proposals and revisions to draft FY24 maintenance budget
3/8/2023	March Board meeting to review and vote to formally submit FY24 maintenance budget to the Mayor for review and approval
April 2023	City Council hearing
6/14/2023	Final Board vote to approve FY24 budget



### **FY24 Budget Summary**

Bureau	FY23 Adopted	FY24 Proposed	Variance	% Change
ORS/BRS	8,987,229	9,264,496	277,267	3.09%
CAFH	14,915,709	15,249,633	333,924	2.24%
CIB	5,920,234	6,046,658	126,424	2.14%
EMS Total	71,512,680	72,974,876	1,462,196	2.04%
EMS Revenue	(37,888,780)	(40,343,750)	(2,454,970)	-6.48%
EMS Net	33,623,900	32,631,126	(992,774)	-2.95%
HSB	8,092,965	11,259,022	3,166,057	39.12%
IDB	6,302,999	6,538,010	235,011	3.73%
PHSC	22,177,491	22,595,741	418,250	1.89%
ADMIN	10,552,141	13,529,697	2,977,556	28.22%
PROPERTY	5,061,409	5,868,788	807,379	15.95%
OPEB	2,250,000	2,250,000	-	0.00%
		-	-	
Total	117,884,076	125,233,171	7,349,095	6.23%

#### **Proposed New Investments**

Proposal	Description	Financial Impact	FTE impact
Increased Administrative Capacity	7 FTEs for additional administrative capacity support in Human Resources, Labor, IT, Finance, and IDB	\$1,127,493	7.0
EMTs	5 FTEs to help with increase in call volumes	\$485,000	5.0
EMS Increased Administrative Capacity	5 FTEs to support EMS administrative staff	\$485,000	5.0
Low Threshold Sites	Funding for Low Threshold sites	\$3,312,184	0.0
Enhanced Trauma Response	2 FTEs for additional support in Trauma Support within the Child Adolescent and Family Health Bureau	\$200,000	2.0
Infrastructure Support	Additional salary support for staff in Human Resources, Finance, Labor Relations and General Counsel	\$300,000	0.0





# Infrastructure Investment: Increased Administrative Capacity

#### **Seven FTEs:**

- Human Resources: Two HR generalist positions
- Labor: Additional Labor and Employment Associate counsel
- Finance: Senior Grants Analyst and Senior Accounts Payable Analyst
- Infectious Disease: Senior Fiscal Manager
- IT: Senior Network Engineer



### Fiscal Year 2024 Budget Vote



### Mission Statement Updates





Black women are more likely to die after being diagnosed with breast cancer than women of other races. These women beat the odds. You can too. Know your body and your options.

See your doctor. Get screened. Get treatment. For more information, visit www.pinkandblack.org





#### **Boston Declares:**





### **BPHC Anti-Racism Policy**



Budgeting for Equity



Equitable Community Engagement



Equitable Procurement & Contracting



Workforce Diversity & Development



Race/Ethnicity
Data Collection &
Evaluation



Department Racial Equity Plans



All-Staff Anti-Racism Training



**Create a Culture** of Belonging



## Mission Statement Engagement

Current Statement

Proposed #1

Proposed #2

Proposed #3

To protect, preserve, and promote the health and well-being of all Boston residents, particularly the most vulnerable

To work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequity

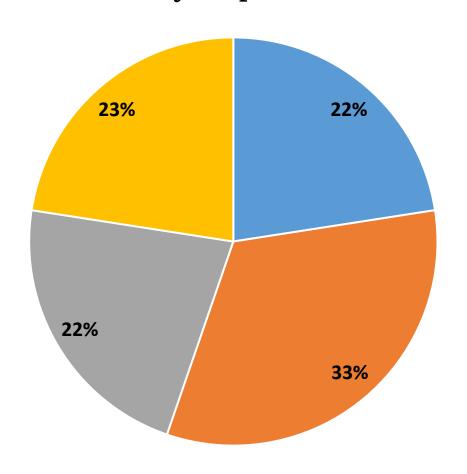
To work in partnership with communities to mitigate preventable health inequities and to protect and promote the health and well-being of all Boston residents

To work in partnership with communities to protect and promote the health and well-being of all Boston residents by dismantling systems of oppression that cause poor health outcomes



# Mission Statement Engagement Results

#### My top mission statement is:



- Current Statement: To protect, preserve, and promote the health and well-being of all Boston residents, particularly the most vulnerable.
- 1) Proposed: To work in partnership with communities to protect and promote the health and well-being of all Boston residents, especially those impacted by racism and systemic inequity.
- 2) Proposed: To work in partnership with communities to mitigate preventable health inequities and to protect and promote the health and well-being of all Boston residents.
- 3) Proposed: To work in partnership with communities to protect and promote the health and well-being of all Boston residents by dismantling systems of oppression that cause poor health outcomes.

# At a glance: **275** total survey responses.

- Current: 62/275
- Proposed #1: 90/275
- Proposed #2: 61/275
- Proposed #3: 62/275



## **Strategic Planning Updates**



We are

here!

#### **Timeline**



Late May



June-July

- Identify Key Stakeholders
- Environmental Scan & Review
- Progress on Existing Plans
- Kick-Off; Gather Insight
- Key Informant Interviews
- All-Staff Town Hall and Survey

- Listening and working sessions
- Review Insight and Refine
- Develop Framework for New Strategic Plan

- Prioritize and refine
- Senior Leadership Team Planning session
- Working sessions
- Review and Finalize Draft
- Plan for Implementation and Monitoring



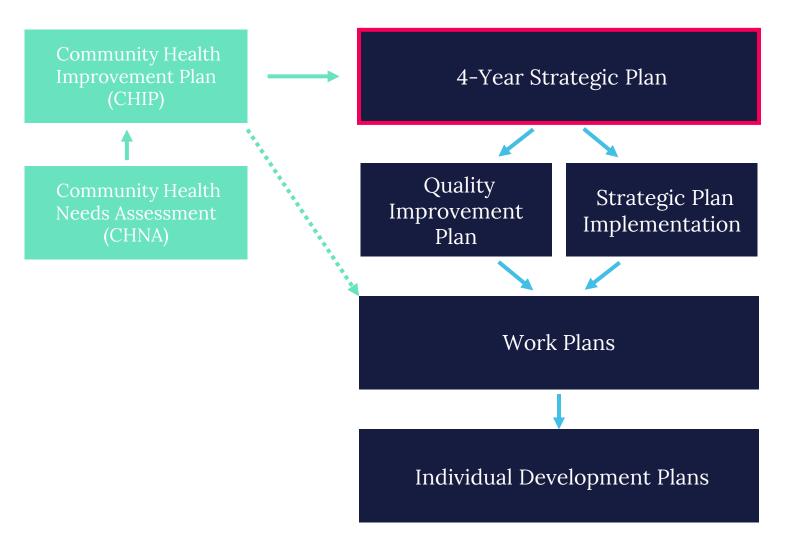
### Alignments and Inputs

- ✓ BPHC Strategic Plan (2019-2023)
- ✓ BPHC Anti-Racism Policy (2021)
- ✓ BPHC Performance Management & Quality Improvement Plan (Dec 2022)
- ✓ BPHC Workforce Development Plan (Dec 2022)
- ✓ PHAB 2016 Reaccreditation Guidance, Measures 5.3, 8.1.1,9.1.1.c , 9.2.2.c
- ✓ 2022 Community Health Needs Assessment (CHNA)
- ✓ 2022 Community Health Improvement Plan (CHIP)
- ✓ FY23 City Performance Measures
- ✓ Results of All-Staff Town Hall
- ✓ Results of All-Staff survey
- ✓ Stakeholder Meetings and 1:1 Interviews

2024 – 2027 Strategic Plan



### Planning Relationships





### **Working Priority Areas**

- 1. Workforce Improvement & Infrastructure
- 2. Anti-Racism and Equity
- 3. Innovation and Data
- 4. Partnerships and Community Engagement



#### **Next Steps**

- ✓ Share progress with Board
- ☐ Follow-up working sessions to prioritize and refine each section
- ☐ Review and finalize draft
- ☐ Plan for implementation and monitoring



#### Health of Boston

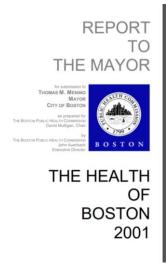
Kathryn T. Hall, PhD, MPH
Center for Public Health Science Technology and Innovation
SciTech
Boston Public Health Commission

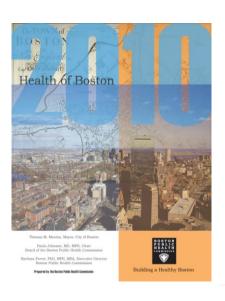
June 14, 2023



Reporting on the health of Boston residents is an essential public health service that has been part of BPHC's mission since its creation by the legislature with the Boston Public Health Act of 1995

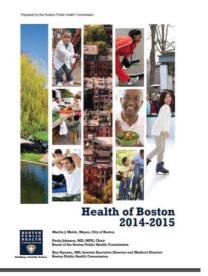
#### The Health of Boston 2023 report builds on this important tradition









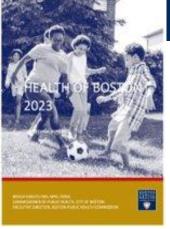




## **Health of Boston 2023**

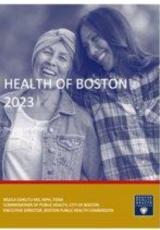
- Reports released in May
  - Asthma
  - Diabetes
  - Heart Disease
  - Cancer
  - Provisional Mortality and Life Expectancy
- Upcoming reports in July and August
  - Mental Health
  - Violence
  - Infectious Diseases
  - Access to Care partnering with MHQP
  - Maternal and Child Health
  - Environmental Health
  - Mortality and Life Expectancy Report partnering with Place Matters, VCU













### **Data Sources**

### Massachusetts DPH

- Vital Statistics
- Infectious Diseases MAVEN and MIIS
- Massachusetts Cancer Registry

#### • BPHC

- Behavioral Risk Factor Surveillance System BRFSS
- Unhoused and Uncounted: The Health of Boston Survey of People Experiencing Homelessness

10.5

• COVID-19 Wastewater surveillance

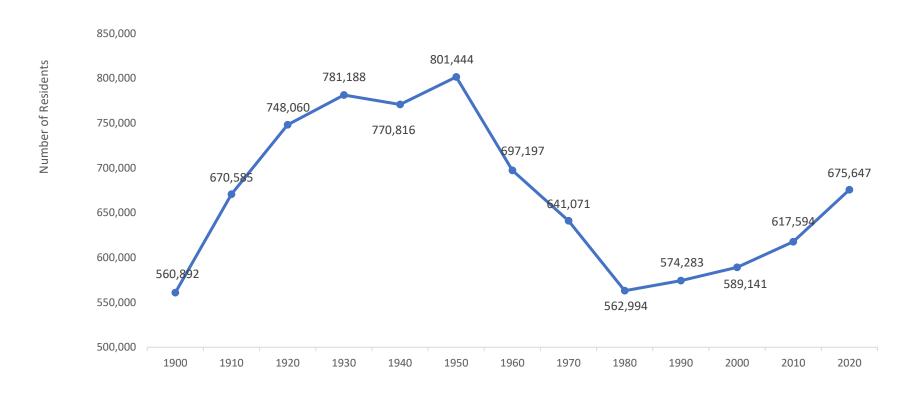
# Boston Public Schools (BPS)

- Youth Risk Behavior Surveillance System (YRBSS)
- US Census Bureau
  - American Community Survey
  - Decennial Census
- Massachusetts Center for Health Information and Analysis
  - Acute Hospital Case Mix Database



# **The Boston Population**

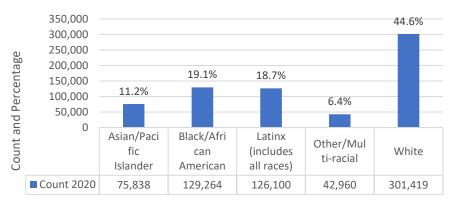




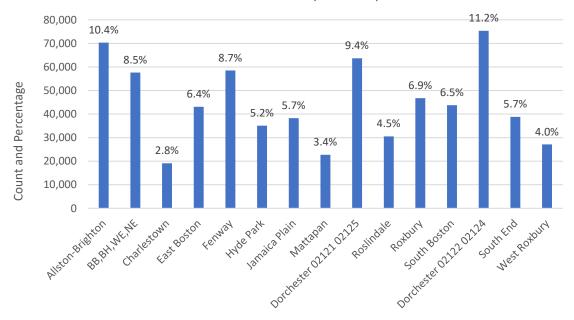


## What did we see?

Estimated Population by Race: Counts and Percent Distribution, Boston, 2020



Estimated Population by Neighborhood: Counts and Percent Distribution, Boston, 2020

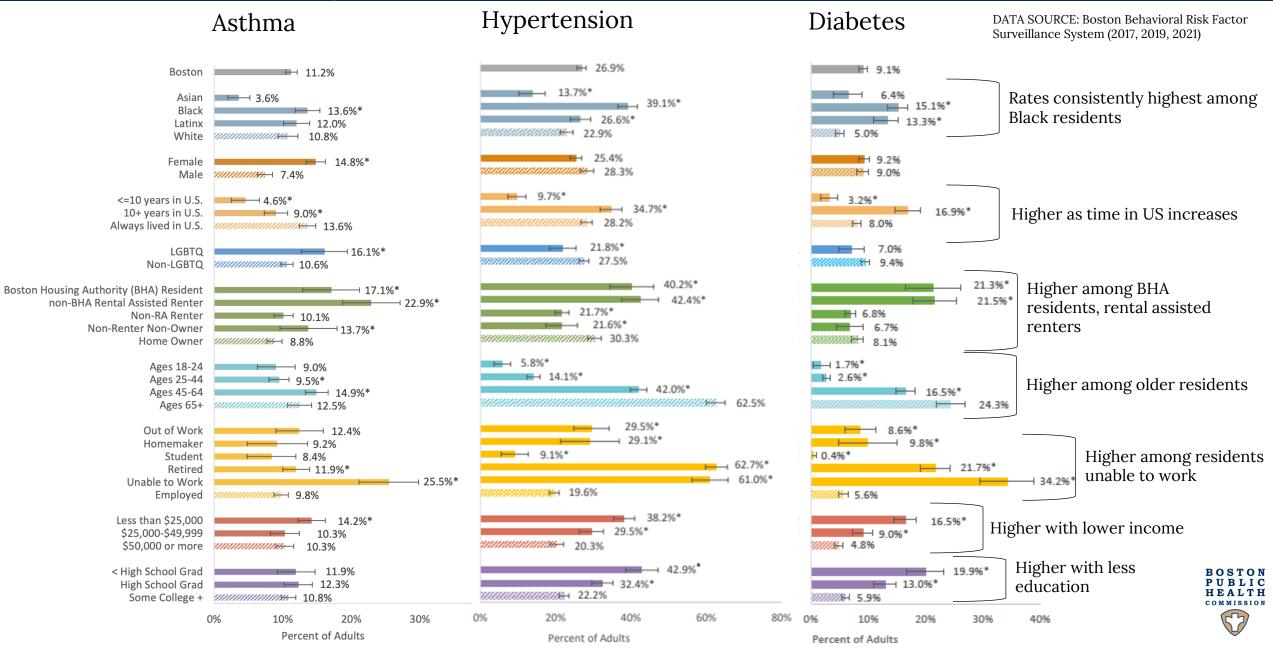


We saw striking differences in disease prevalence, hospitalizations, mortality and life expectancy by:

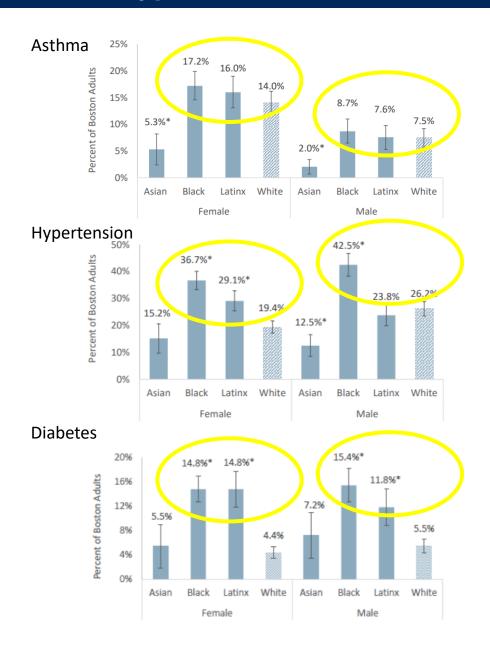
- Race/Ethnicity
- Neighborhood
- SDOH (housing, education, income)
- Year (before vs COVID-19+)



# Chronic Diseases Asthma, Hypertension, and Diabetes – 2017, 2019 and 2021



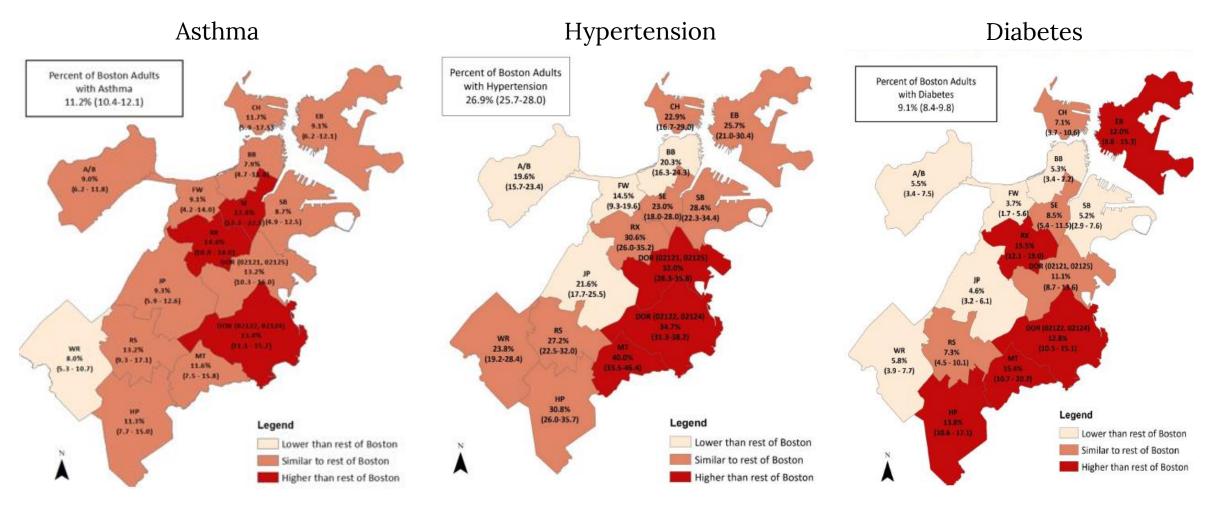
# Chronic Diseases Asthma, Hypertension, and Diabetes – 2017, 2019, 2021 by Sex and Race/Ethnicity



- Among female residents, rates of asthma, hypertension and diabetes were highest among Black and Latinx residents
- Rates of these chronic diseases tended to be lower among Asian and White residents
- The same pattern observed among male residents



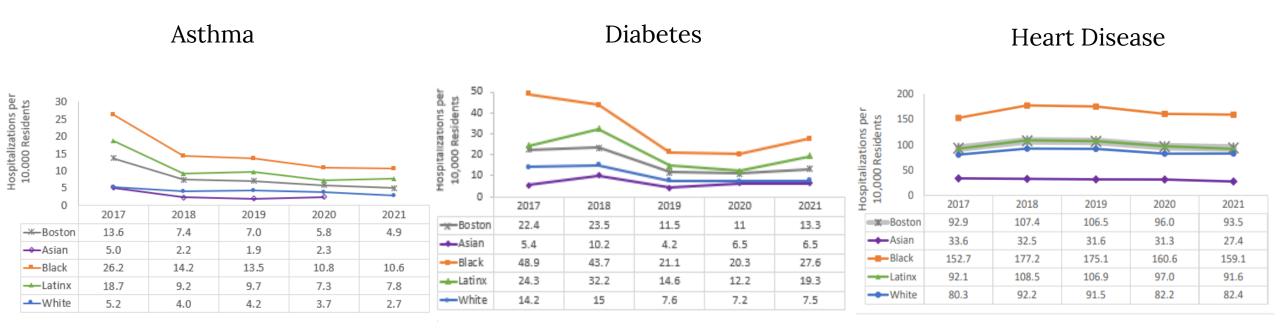
# Prevalence of Asthma, Hypertension and Diabetes by neighborhood (2017, 2019 and 2021)



- In 2021, prevalence of asthma in Boston (13.1%) was higher than MA (11.7%) and US (9.8%)
- In 2021, Boston prevalence of **hypertension** in Boston (28.5%) was lower than US (47%) and MA (28.1%)
- In 2021, prevalence of **diabetes** in Boston (9.1%) is lower than the US (10.9%) and similar to MA (8.9%)
- Dorchester (02122, 02124) was consistently among the neighborhoods with the highest rates of these chronic diseases



# Hospitalizations for Asthma, Diabetes, Heart Disease

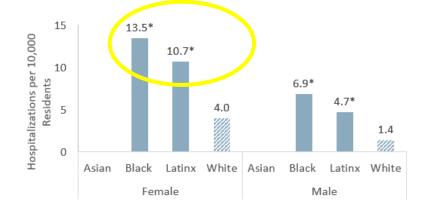


- Overall rates of hospitalizations trended down between 2017 and 2021
- Rates were highest among Black residents across all 5 years (orange)
- Rates among Latinx residents were second highest (green)
- Rates were lowest for Asian residents (purple)

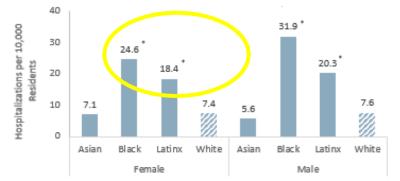


# Hospitalizations by Sex and Race/Ethnicity, 2021

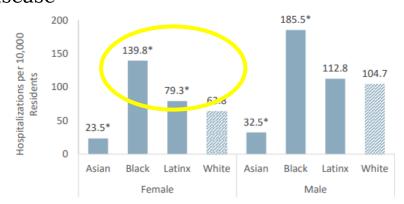
#### Asthma



#### **Diabetes**



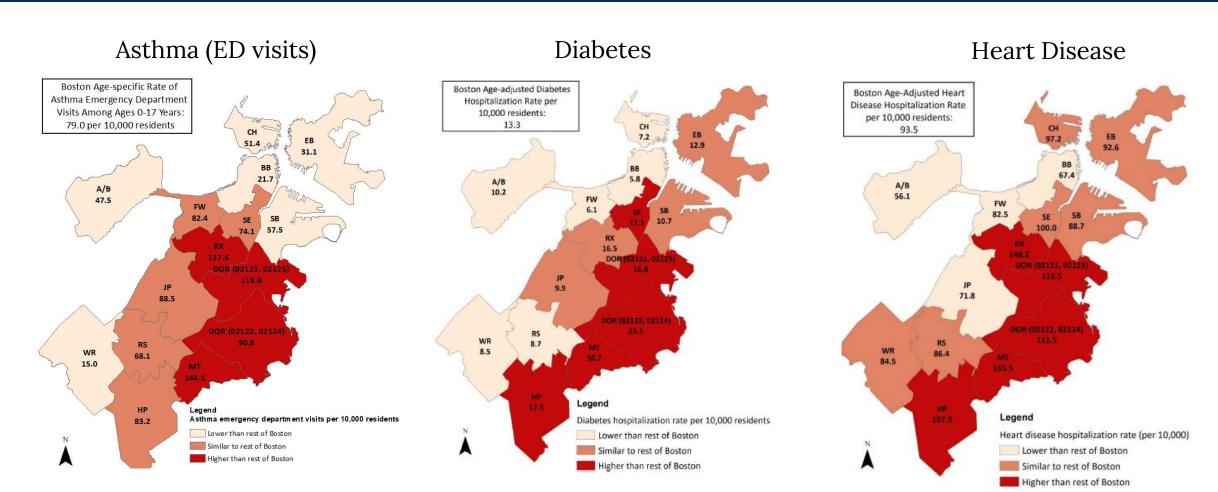
#### **Heart Disease**



- Age-adjusted **asthma** hospitalizations per 10,000 for Black female residents were 3.4x rate for White female residents
- **Asthma** hospitalization for Latinx female residents were 2.7x rate for White female residents
- **Asthma** hospitalizations for Black male residents were 5.1x rate for White male residents
- **Asthma** hospitalizations for Latinx male residents were 3.4x rate for White male residents.
- Age-adjusted **diabetes** hospitalizations per 10,000 residents for Black female residents were 3.3x rate for White female residents
- **Diabetes** hospitalizations for Latinx female residents were 2.5x rate for White female residents
- **Diabetes** hospitalizations for Black male residents were 4.2x rate for White male residents
- **Diabetes** hospitalizations for Latinx male residents were 2.7x rate for White male residents.
- Age-adjusted **heart disease** hospitalizations per 10,000 residents for Black female residents were 2.2x rate for White female residents
- Heart disease hospitalizations for Black male residents were 1.7x rate for White male residents



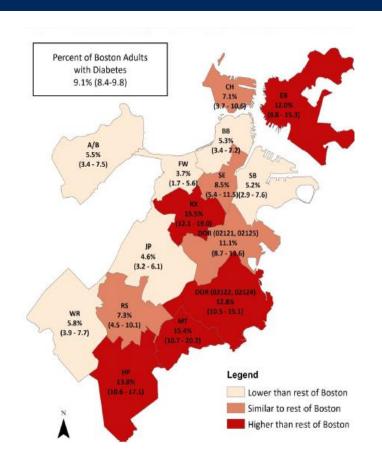
# Hospitalizations and ED visits by Neighborhood

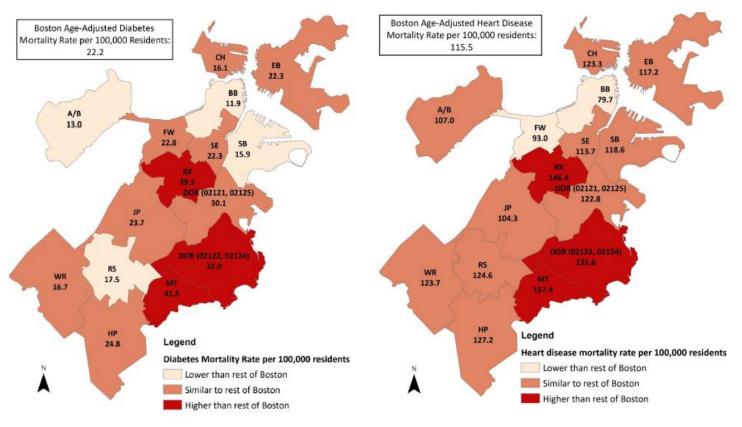


- Roxbury, Mattapan and Dorchester (02122 and 02124) were consistently among the neighborhoods with the highest rates of hospitalizations and ED visits for chronic diseases
- Back Bay was the neighborhood with the lowest rates



### Diabetes Prevalence and Mortality by neighborhood



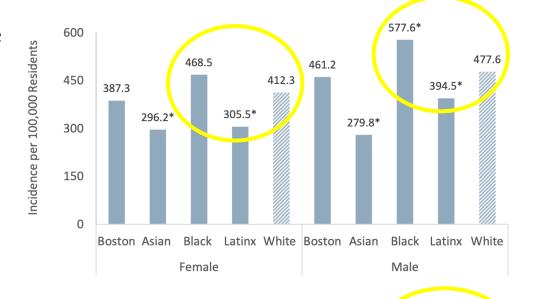


- Roxbury, Mattapan and Dorchester (02122 and 02124) had higher mortality rates from Diabetes and Heart Disease than the rest of Boston
- Back Bay had a lower rate of mortality from Diabetes and Heart Disease than the rest of Boston



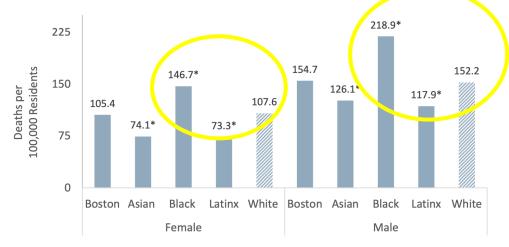
# **Cancer Incidence and Mortality**

#### Cancer Incidence



- Black residents had the highest rates of invasive cancers
- In comparison to White residents:
  - female † 1.1x
  - male †1.2x

#### Cancer Mortality

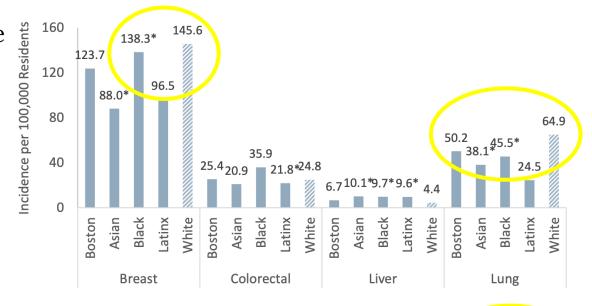


- Black residents had highest rates of cancer deaths
- In comparison to White residents:
  - female 1.4x
  - male ↑1.4x



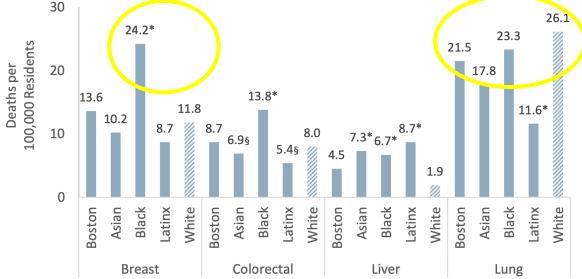
# Cancer Incidence and Mortality - Female Residents

#### Cancer Incidence

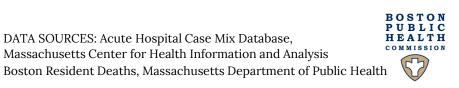


- Breast cancer was the most common invasive cancer among Boston female residents, with highest rates among White female residents (145.6/100,000)
- Lung cancer was the second most common cancer with the highest rates among White female residents (65/100,000)

#### Cancer Mortality

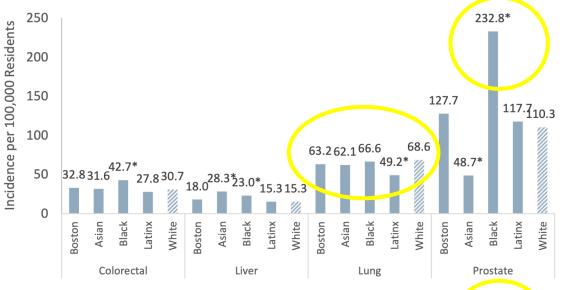


- The highest rates of deaths from invasive cancer were attributed to lung cancer with the highest rates among White female residents (26/100,000)
- Although breast cancer rates were highest among white female residents, deaths from breast cancer were 2x as high among Black female residents (24/100,000) compared to White female residents (12/100,000)



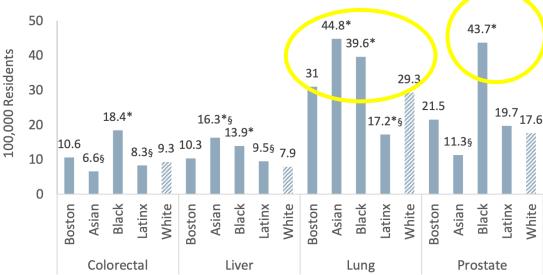
# Cancer Incidence and Mortality - Male Residents

Cancer Incidence (2016-2018 combined)



Cancer Mortality (2019-2021 combined)

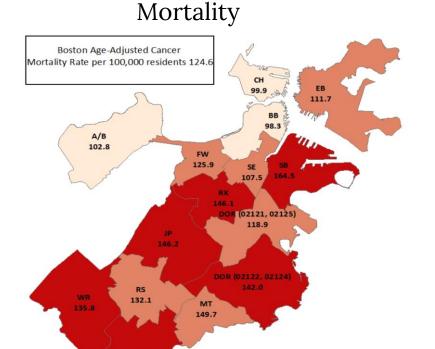
Deaths per



- Prostate cancer was most common invasive cancer among Boston male residents (128/100,000)
- **Prostate cancer** rate among Black male residents (233/100,000) >2x White male residents (110/100,000)
- Lung cancer was second most common cancer (63/100,000) with highest rates among White male residents (65/100,000)
- Mortality from cancer was highest for lung cancer (31/100,000)
- High rates of death from **lung cancer** among Asian (45/100,000) and Black (40/100,000) male residents were 2.5x White male residents (29/100,000)
- Death from **prostate cancer** significantly higher for Black male residents (44/100,000) vs. White male residents (18/100,000)



### **Cancer Mortality and Premature Mortality by neighborhood**

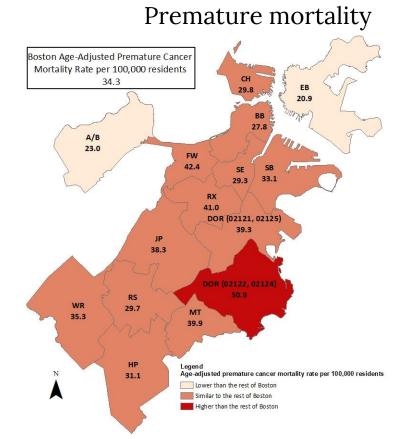


Age-adjusted cancer mortality rate per 100,000 residents

her than the rest of Boston

With cancer being the leading cause of death in Boston it is not surprising that there is a broad spread of neighborhoods with cancer mortality rates greater than the rest of Boston

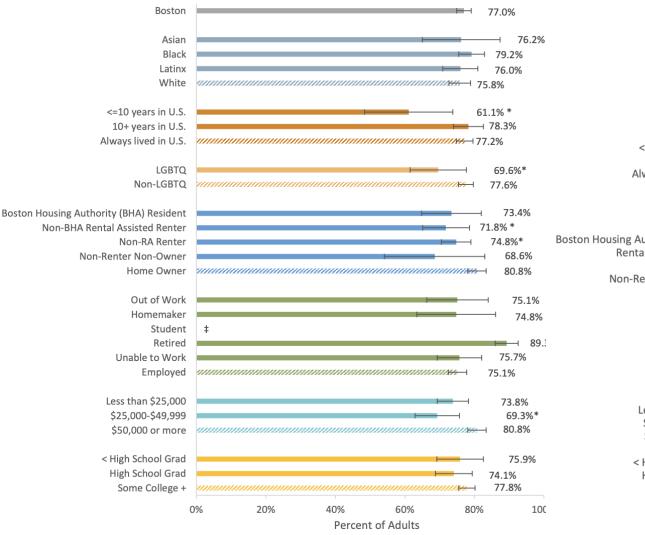
However, it is striking that premature mortality is higher than the rest of Boston solely in Dorchester 02122, 02124



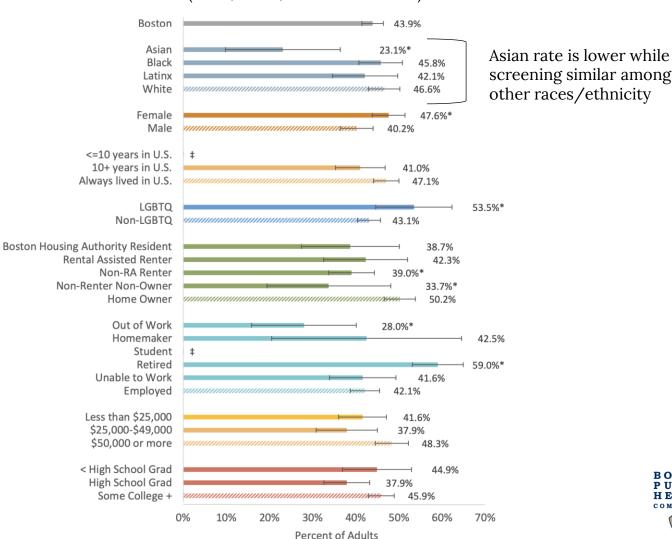


# **Cancer Screening**

# Mammogram in the past 2 years (2017, 2019, 2021 combined)



# Colonoscopy in the past 5 years (2017, 2019, 2021 combined)





# **Considerations and Limitations**

### Population data

- Relied on imputation for population estimates
- Census data updated in May
- Need for granularity/data disaggregation
  - Ethnicity
  - Census tract

#### Small numbers

- Small area estimates
- Suppression of low population numbers and rates

## Gaps in available data

• Pollution, gentrification

# Causality to guide action

Strategic collaborations for deeper dive into data

### Qualitative Data

strengthen and contextualize health equity evidence base



# **Next Steps**

## Broaden data availability

- Part of our data modernization initiative
- All Payers Claims Database (APCD)
- Environmental Health EJ Screen

### Expand Collaborations

- Center on Human Needs, VCU
- BUSPH Linda Sprague Martinez, Eleanor Murray
- HSPH and FXB Tori Cowger

#### Build collaboration infrastructure

Data sharing agreements, creating access

# Increase Community meetings to discuss findings

- Biweekly Weds Community forum
- Boston in Common
- Partnering with the CHNA
- Translate findings to interventions and practice

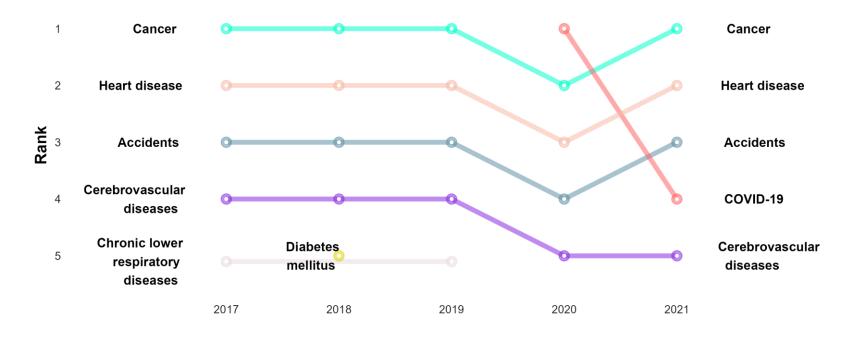


# Acknowledgements Thank You!

		<u></u>
Center for Public Health Science and Innovation (SciTe	ech) Bureaus	
Kathryn Hall	Homeless Services Bureau - Gerry Thomas	
Population Health and Research – Dan Dooley		
Johnna Murphy	Infectious Diseases - Sarimer Sanchez, Alex Toups	
Nikki Shen	Community Initiatives Bureau – Leon Bethune, Eugene Barros	
Jaylen Clarke	Mark Kennedy, Paul Shoemaker, Catherine Fine	
Melanie Mackin	Child Adolescent Family Health - Uchenna Ndulae, Becky Cruz-Crosson,	
Soraya Underwood	Mark Scott, Alain Davis, Bronwen White, David Goldsztajn, Jess Alder	
<b>Epidemiology</b> – Shoba Nair		
Neelesh Batra	Communications	
Sumaiya Miah	Catherine D'Vileskis	
Eline Van Es	Lisa Costanza	
Program Management - Helen Ayanian	Jon Latino	
<b>Evaluation</b> – Sunday Taylor	Mental Health	
Shannon O'Malley	Kevin Simon	
ITS	Samara Grossman	
Puneet Sharma	Morgan Chen	
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FXB Center for Health & Human Rights - Tori Cowger	Ally Huh	
Boston Public Schools	Ada Romero	

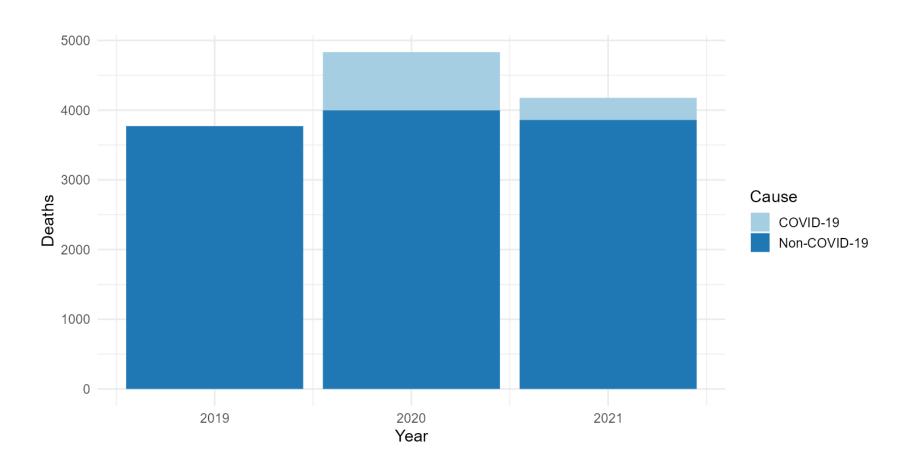
# **Leading Causes of Mortality**

Figure 13. Leading Causes of Mortality by Year All residents

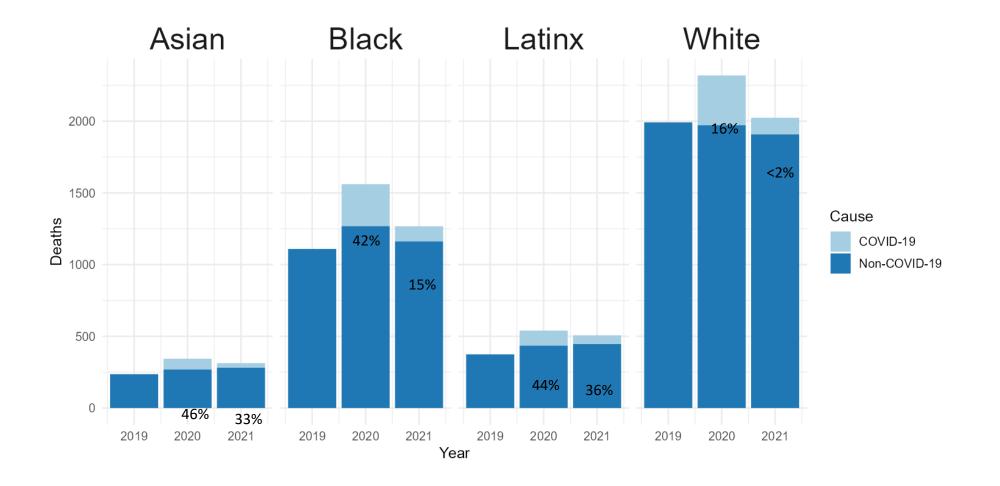




- The number of deaths increased by almost 30% from 2019 to 2020 and this increase was in large part due to COVID.
- In 2021 we still saw an increase in deaths compared to 2019. Although this was a smaller increase, 10% was due to COVID

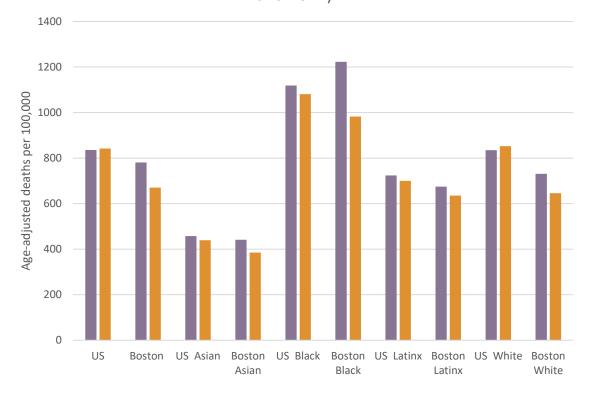








# Mortality Rates in the US and Boston by race/ethnicity (2020 and 2021)



- Black residents in Boston (1223/100,000) had the highest mortality rates in 2020
- Asian residents (442/100,000) had the lowest rates in 2020
- The rate among White residents (781/100,000) was similar to the average rate for Boston (731/100,000)
- Overall, Boston saw a 14% decrease in mortality from 2020 to 2021 while the rate went up in the US by 0.7%
- The greatest decrease in the mortality rate from 2020 to 2021 was among Black residents (20%) which was better than the US (3.4%)
- The smallest decrease in mortality rates in Boston was among Latinx residents (5.8%)
- Nationally the mortality rate from 2020 to 2021 went up among White people (2.1%) but was decreased in Boston (11.6%)



### **Excess Death was highest in Mattapan**

Highest: 17.1% in Mattapan Lowest: 9.0% in Back Bay

