

BOARD MEETING

By Remote Participation Pursuant to An Act Extending Certain COVID-19 Measures Adopted During the State of Emergency. Public Access Link:

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Wednesday, June 14th, 2023 4:00 p.m.

Board Members Present

Dr. Galea, Dr. Bell, Ms. Gutman, Ms. Laptiste, Dr. Taveras, Mr. Valdez, Mr. Wilmot

Others Present

Dr. Bisola Ojikutu, PJ McCann, Ally Huh, Samara Grossman, Chief James Hooley, Laura Segal, Dr. Kevin Simon, Julia Frederick, Kathryn Hall, Michele Clark, Tegan Evans, Tim Harrington, Catherine D'Vileskis, Catie Burbage, Gerry Thomas, Jennifer Goldsmith, Julia Gunn, Jill Melendez, Krystal Garcia, Leon Bethune, Malika Sabharwal, Melissa Hector, Meredith Brown, Morgan Chen, Sam Gonzalez, Sergio Gonzalo, Shieda Gilles, Sonia Carter, Stephanie Santizo, Steve Simmons, Taneesha Peoples, Uchenna Ndulue.

Chairperson's Remarks

<u>Mr. McCann</u>: Unfortunately, our Chair, Dr. Galea is not able to join us for at least part of this afternoon's meeting. In the Chair's absence, our bylaws call for the Board to vote to select a member to serve as a temporary chair for the purpose of the meeting. I would welcome a volunteer at this point.

<u>Mr. Valdez</u>: I would be happy to serve in this capacity unless anyone else would like to volunteer. I believe we need a roll call vote for this; I would welcome a motion.

A motion was made by Mr. Wilmot, seconded by Ms. Gutman, and approved unanimously.

Now I will take a vote by roll call: Ms. Gutman, Ms. Laptiste, Dr. Taveras, Mr. Wilmot, and myself.

<u>Mr. Valdez</u>: Good Afternoon, fellow Board of Health members, Boston Public Health Commission staff, and members of the public. Welcome to the June 2023 meeting of the Boston Board of Health.

This meeting is being conducted by remote participation as authorized by state law and any votes will be taken by a roll call of the members.

In keeping with the Board's usual practice, members of the public are welcomed to observe the proceedings and Board staff will use the moderating features on the Zoom application to keep all on mute other than Board members and BPHC presenters.

This afternoon, we will hear a report from the Executive Office, a presentation and vote on the Fiscal Year 2024 Budget, as well as updates on the efforts to review the Commission's mission, develop a new strategic plan, and hear more about the first round of new Health of Boston Reports, that have already drawn a great deal of attention to persistent health inequities in Boston.

I will start by turning it over to Dr. Ojikutu for the Executive Office Report.

Executive Office Report

Dr. Ojikutu:

I'd like to start by wishing everyone a Happy Pride Month. During this month we celebrate diverse LGBTQ+ communities and uplift LGBTQ+ voices at BPHC, in Boston, and throughout the US. On Saturday, June 10th, Boston Pride for the People, a coalition formed to transform Pride into a community-centered organization that centers queer, Black, Indigenous, and people of color LGBT voices, will be hosting the first Pride parade in the city since the COVID-19 pandemic.

This year, we partnered with Boston Pride for the People to raise awareness about HIV, STI, Mpox health services. I want to thank the Infectious Disease Bureau for leading this collaboration and for the ongoing work at the Commission to improve LGBTQ+ health, including through direct care, conducting needs assessments, and being innovative in the ways that we engage community. It is absolutely necessary that public health be a vocal ally and partner to our LGBTQ+ communities during this era of unprecedented attacks on their rights and health care BPHC will continue to work with Boston Pride for the People and the diverse LGBTQ+ community in Boston to ensure access to critical and affirming care.

On April 26th, BPHC hosted a symposium *Advancing Health Equity in Boston: Building on Lessons Learned from the COVID-19 Pandemic,* which was a great day and opportunity to come together to examine challenges, innovations, and key learnings that emerged from the COVID pandemic. I want to thank our co-sponsors and all the Commission staff who helped to make this day a success and the Board members who participated.

My key takeaways from the conversations were that we know that inequities persist and that we need to work together across organizations and systems and do things differently if we want to make real progress.

As many of you are aware, BPHC is a leading organization within the Boston Community Health Needs Assessment and Community Health Improvement Plan (CHNA-CHIP) Collaborative. We are partnering with community-based organizations to disseminate information regarding the CHNA-CHIP effort and sharing important updates from the Health of Boston reports by holding community meetings in different neighborhoods and languages. The first in-person community meeting will be held at Whittier Street Health Center on June 21st at 6pm.

We also want to make sure that these community engagements focus on the work that we are doing to address systemic racism and health inequities.

I'm also happy to report that we awarded \$1.4 in funding across six Boston Community Health Centers through the 2023 COVID-19 Community Health Equity Response Grant to supports efforts to re-engage

community members and patients into the health care system by actively work to improve access to prevention, intervention, and response strategies that reduce health inequities through the services they provide within the communities they serve.

I also want to note again that Office of Racial Equity and Community Engagement BPHC issued a Request for Proposals to identify up to three universities, colleges, community-based organizations, and/or nonprofits to administer a novel, need-based scholarship program, the "Generational Health Scholarship," for Boston-area first-year college students of color studying for careers in STEM, the Health Sciences and Public Health, and Behavioral Health.

I also would like to provide and update on the City's Warm Weather Plan in the Mass. & Cass area, and BPHC's role in the response.

During warm weather, we are continuing to see a heavy congregation of people and structures on Atkinson Street, the location of BPHC's Engagement Center and Men's Shelter. This presents an ongoing challenge to providing services to people as well as ensuring the safety of people in the area. The crowding also often prevents outreach workers and medical providers from delivering urgently needed services and support.

To advance the City's goals to promote health and safety, reduce crowding, and better connect residents to services and stable housing, the cross-departmental teams have begun implementing measures to address these issues which started on Monday, June 12, 2023, including:

Prohibiting tents, tarps, and other structures on Atkinson Street from 8:00 am - 8:00 pm to create a structure-free environment. Note tents, tarps, and other structures will not be permitted on Southampton or neighboring streets. The city will enforce this 8:00 am – 8:00 pm daily through messaging, daily cleanings, and potential placement of additional barriers.

Crowd control to limit the number of individuals on Atkinson Street to maintain street access and support service delivery. No one will be denied access to services at the Engagement Center, shelter, or van services even if the street capacity is met. Vehicular traffic in the area is also limited to those working in the area to support a safe environment.

Ware Security, contracted by BPHC to provide public safety on the street, in concert with Boston Police Department, are key to ensuring public safety.

Conducting daily cleanings with Department of Public Works, including on the weekends. Cleanings will happen every day, with possible adjustments due to rain. During this time hazardous items are removed, as well to ensure a safe environment. Cleaning efforts are also supported by Newmarket Cleaning crew, an innovative program created and funded by BPHC to provide employment to individuals experiencing homeless in the neighborhood.

The Engagement Center on Atkinson Street hours will not change and capacity will be maintained at 75 individuals. Recovery Services will continue to provide street outreach and harm reduction services and substance use treatment referrals.

112 Men's Shelter also on Atkinson Street continues to provide critical emergency shelter and lowthreshold shelter beds to individuals, along with housing support services.

Day spaces in the City are being promoted and van service will continue to support decongestion of crowds in the area and safe transport to other day spaces.

As part of the City's public health led efforts, we will continue case management, assessment, and triage services with our partners, prioritizing unsheltered individuals led by our partner Eliot Community Human Service, funded by BPHC's Recovery Services Bureau. Data collection of people sleeping outside and in need of services is a key component of this initiative, along with overnight outreach by BPHC's Recovery Services Bureau, to manage the individual needs of people in the area.

BPHC's outreach teams and our partners continue to provide street outreach, harm reduction services, overdose response, substance use and treatment referrals, and promote day spaces in the City. Our van service will continue to support decongestion of crowds in the area and safe transport to other day spaces.

Our goal through these efforts with the coordinated response team is to keep people in the area safe and encourage engagement in services.

We also wanted to provide an update on low-threshold housing in the City of Boston. BPHC, through the leadership of Jen Tracey from the Office of Recovery Services, is continuing to coordinate the LTS providers and ensure coordination around placements and sharing of best practices. As planned, the Roundhouse will be winding down operations at the end of September due to the end of the lease and funding, including from ARPA. We are working with Boston Medical Center in this process and offering alternative placements and permanent housing to the guests. Through city and state funding, the other five Low Threshold Sites will continue operations in the next year, and BPHC will be assuming the contract for the women's low threshold shelter space operated by Victory Programs at our women's shelter, Woods-Mullen.

In 2021, the Centers for Disease Control and Prevention awarded BPHC a two-year, \$700,000.00 grant under the Building Our Largest Dementia Infrastructure for Alzheimer's Act, or "BOLD," grant for Public Health Programs to Address Alzheimer's Disease and Related Dementias (ADRD). Under the grant, BPHC has been working to build public health infrastructure and advance policy, systems, and environment changes to support Boston residents living with and at highest risk of ADRD, and their caregivers.

We're leveraging this grant to address racial and ethnic disparities in ADRD risk and prevalence and has built a stakeholder coalition comprised of partners with broad reach and strong connection to the BOLD Project's priority population: African American, Black, Hispanic, Latino and other populations who national trends show have disproportionate risk of ADRD and who bear the highest burden of ADRD prevalence and caregiving.

To date, we've conducted a community needs assessment and developed a strategic plan to guide Boston in five priority areas: 1) connecting people living with ADRD to community-based supports; 2) building the capacity of the medical and social services provider workforces to serve patients with ADRD; 3) improving family caregivers' financial stability, health, and well-being; reducing ADRD risk and increasing screening and early diagnosis; 5) and improving ADRD surveillance data collection at the city level.

I also want to acknowledge that June is June is Alzheimer's & Brain Awareness Month. We have a social media campaign in the field now in partnership with the Alzheimer's Association to help increase awareness about early detection and care.

BPHC has applied for a \$3 million dollar grant through the CDC to implement this strategic plan. We anticipate a decision on this funding award soon, and will keep the Board informed.

As you know, the City will be receiving a significant amount of funds from opioid manufacturer and distributor settlements. The exact amount may change depending on ongoing proceedings, Boston is currently estimated to receive at least \$22 million dollars over the next 15 years. The settlement funding represents a major opportunity and responsibility because, as we know too well, opioid use disorder has devastated communities and families. Our hope is that the use of funds should be thoughtful, reflecting the wishes of stakeholders affected by opioids.

These Opioid Remediation Funds offer considerable flexibility, and can support a wide variety of programming focused on prevention, treatment, harm reduction, recovery supports, and more. Guidance from the state focuses on filling gaps in the system and encourages innovative approaches.

To that end, BPHC's Recovery Services team is taking the lead on soliciting input into Boston's use of this funding from residents and organizations most impacted by the opioid epidemic, and working to ensure that we reach populations who have been historically marginalized. In addition to an ongoing series of meetings and conversations – you see some photos from a meeting in Nubian Square here – we are seeking input through a request for information that is live on boston.gov/bphc and will be open through July 12th. I would welcome your support in ensuring that residents and organizations are aware of this opportunity to engage.

That is all for my updates; I welcome any questions.

Mr. Valdez: Thank you, Dr. Ojikutu. Are there any questions from my fellow members?

<u>Mr. Wimot</u>: Related to the HoB listening sessions and communities that will be visited: are there plans for East Boston? I would like to propose it, given that it is isolated geographically and has a unique population.

Dr. Ojikutu: Yes, we plan to have a session hosted in East Boston.

<u>Mr. Valdez</u>: Are there any efforts being made to change these life expectancy statistics? Any collaboration with state and federal partners?

<u>Dr. Ojikutu</u>: Yes, there has been some progress—collaboration across sectors that are underway. I am talking to commissioners and health directors around the country such as through the Health Equity Compact. We are also working on improving workforce diversity and increasing diversity within health operations, and there has been discussion of a health empowerment zone in Massachusetts to target specific geographies.

Dr. Taveras: How are you thinking about the allocation for the opioid remediation fund?

<u>Dr. Ojikutu</u>: The exact amount of money is not confirmed, but around \$22 million over the disbursement of 15 years. You all will be informed of any decisions made. How these funds will be dispersed over time has not been determined yet, as we are still in the early stages. We have four more listening sessions scheduled back-to-back.

<u>Ms. Gutman</u>: Is there any way to drill down on premature mortality related to hazardous neighborhood or work incidents, perhaps by neighborhood?

<u>Dr. Ojikutu</u>: This falls under accidents. I'll speak to our Public Health Science, Innovation, and Technology team to gather more information.

Mr. Valdez: Hearing no more questions, we can move to the approval of the minutes.

Acceptance and Approval of Minutes from the March 8th, 2023 Meeting

<u>Mr. Valdez</u>: If there is no discussion, I will accept a motion to approve the minutes from the March 8th Board of Health meeting.

A motion was made by Mr. Valdez, seconded by Mr. Wilmot, and approved unanimously by roll call vote.

Now I will take a vote by roll call: Ms. Gutman, Ms. Laptiste, Dr. Taveras, Mr. Wilmot, and myself.

<u>Mr. Valdez</u>: Now I will turn it over to Director of Administration and Finance Tim Harrington to provide an update and vote to approve BPHC's FY24 Budget.

Fiscal Year 2024 Budget Presentation and Vote

Mr. Harrington presents.

<u>Mr. Wilmot</u>: Are we tying our budget to gaps in life expectancy, how are our resources complimenting the challenges through our other reporting efforts?

<u>Mr. Harrington</u>: We are thinking about other money needed to acquire for these efforts.

Mr. Valdez: Are there any major changes from the City Council or the Mayor?

<u>Mr. Harrington</u>: City Council has new authority to make amendments to line-by-line budget items. Any significant changes will be communicated to the Board at our next meeting.

<u>Dr. Galea</u>: Hearing no additional questions, I will take a motion to approve the FY2022 Boston Public Health Commission Budget subject to City Council and Mayoral approval.

A motion was made by Mr. Valdez, seconded by Mr. Wilmot, and approved unanimously by roll call vote.

<u>Dr. Galea</u>: Now I will turn to Triniese Polk, Director of the Office of Racial Equity and Community Engagement to share some updates about BPHC's mission statement review process.

Mission Statement Updates

Ms. Polk presents.

<u>Dr. Galea</u>: Congratulations on this comprehensive process! Hearing no questions, I'll turn to PJ McCann, Deputy Commissioner for Policy and Planning for an update on BPHC's ongoing strategic planning process.

Strategic Planning Updates

Mr. McCann presents.

Mr. Wilmot: I would just like to acknowledge the importance of strategic planning.

<u>Dr. Galea</u>: Now I will turn to Dr. Kathryn Hall, Deputy Commissioner for Population Health and Health Equity to speak about the latest Health of Boston Reports.

Health of Boston Reports

Dr. Hall presents.

<u>Dr. Galea</u>: Thank you to Dr. Hall and the team for this important work. I look forward to the forthcoming chapters and hearing more about how BPHC is engaging the community in dissemination and working toward solutions.

<u>Adjourn</u>

Dr. Galea: Hearing no further discussion, we can stand adjourned. Thank you all again.