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>> WITHOUT FURTHER ADO WE'RE
GOING TO GET GOING.

I'M NAME IS KENZIE BOK.

THE DISTRICT 8 CITY COUNCILOR.

AND THE CHAIR OF THE COMMITTEE
ON BAIMS.

IT WILL BE REBROADCAST ON
COMCAST CHANNEL 8, RCN, 82, AND
VERIZON 1964.

WE'RE IN THE MIDST OF A CANCELED
BUDGET REVIEW THAT WILL
ENCOMPASS 27 HEARINGS.

AND WE ARE IN THE FIFTH WEEK.

AND WE STRONGLY ENCOURAGE
RESIDENTS TO TAKE A MOMENT TO
ENGAGE IN THE PROCESS BY GIVING
TESTIMONY.

YOU CAN JOIN THE MEETING.

THERE IS A ZOOM LINK.

YOU CAN WAIT UNTIL THE END OF
THE TESTIMONY.

YOU CAN COME TO ONE OF OUR TWO
DEDZICATED TESTIMONY MANAGERS,
MAY 26, OR MAY 28, AT 6:00 P.M.,
FOCUSED ON ALL OTHER ASPECTS OF
CITY BUDGET.

OR EMAIL THE COMMITTEE AT
BCC.WM.BOSTON.GOV.

THERE'S ALSO A PLACE TO UPLOAD A
TWO-MINUTE VIDEO OF YOUR
TESTIMONY.

IF YOU TESTIFY IN WRITTEN OR
SPOKEN IN ANY LANGUAGE WE WILL
COMMIT TO GETTING THAT
TRANSLATED.

YOU CAN INFORMALLY TWEET US
USING THE HASHTAG BOSBUDGET.
ORDER FOR THE FY- 21 OPERATING
BUDGET.

DOCKET 0591 TO 0592, AND DOCKET
0593-96.

THOSE DOCKETS COLLECTIVELY MAKE
UP THE WHOLE FY- 21 PROPOSED
BUDGET FROM THE MAYOR.

BUT OUR FOCUS AREA TODAY WILL BE
ON THE BOSTON PUBLIC HEALTH
COMMISSION, WHICH IS A
QUASI-INDEPENDENT BRANCH OF THE

CITY, BUT STILL FUNDED THROUGH OUR CITY BUDGET AND WHICH, OBVIOUSLY, HAS BEEN COMPLETELY ESSENTIAL AND INSTRUMENTAL TO OUR COVID-19 RESPONSE, WHICH WE ARE IN THE MIDDLE OF RIGHT NOW. IT'S ALWAYS IMPORTANT FOR US TO GATHER WITH THEM AT BUDGET SEASON AND TALK ABOUT THEIR NEEDS AND PRIORITIES, BUT NEVER MORE SO THAN TODAY.

WE'RE VERY GRATEFUL TO THEM. THIS HEARING WAS LONG DELAYED BY HEARINGS PRIOR TO IT EARLIER IN THE DAY, SO WE'RE GRATEFUL TO THE TEAM WAITING SO LONG AND BEING READY TO SPEAK TO THE COUNCIL.

I'M GOING TO PASS IT OVER TO THE INTERIM EXECUTIVE DIRECTOR FOR THE BOSTON PUBLIC HEALTH COMMISSION AND ALLOW HER TO INTRODUCE HER TEAM.

RITA, THANKS SO MUCH.

RITA, YOU'RE MUTED.

JUST MAKE SURE YOU UNMUTE.

SO I SEE WE'RE WORKING ON SHARING A PRESENTATION.

I DON'T EVEN RITA-- IF RITA IS GOING TO SPEAK TO THIS, HER MICROPHONE NEEDS TO BE UNMUTED. IT'S STILL MUTED.

IF SOMEONE ELSE IS GOING TO SPEAK TO IT, PLEASE PIPE UP.

>> OKAY.

>> LOOKS GREAT.

>> OKAY, PERFECT.

THANK YOU CHAIR WOMAN BOK FOR THE OPPORTUNITY TO SPEAK TODAY.

I'M ACCOMPANIED BY GRACE CONNOLLY, THE DIRECTOR OF ADMINISTRATION AND FINANCE. SHE'S STANDING BY MORE THAN SIX FEET AWAY FROM HER, WITH HER FACE COVERING ON, AND PLEXIGLASS AROUND US, IF YOU'RE WONDERING, IN CASE THERE ARE BUDGET QUESTIONS ULTIMATE HER TO ANSWER.

MY NAME IS RITA NIEVES, AND FOR THOSE OF YOU WHO DON'T KNOW ME OR HAVEN'T MET IN PERSON, I'VE BEEN HERE ABOUT 26 YEARS IN THE BOSTON PUBLIC HEALTH COMMISSION

IN VARIOUS ROLES, INCLUDING-- I WAS THE BUREAU DIRECTOR FOR THE SUBSTANCE ABUSE AND RECOVERY SERVICES BUREAU FOR ABOUT 14 YEARS.

AND AFTER THAT, I SPENT ABOUT THREE YEARS AS DEPUTY DIRECTOR, AND NOW IN THE ROLE OF INTERIM EXECUTIVE DIRECTOR WHICH I STARTED IN DECEMBER RIGHT IN TIME FOR THE COVID-19 PANDEMIC. I'M HAPPY TO BE HERE.

AND I HAD THE PLEASURE TO MEET SOME OF YOU OVER THE YEARS, AND WORK CLOSELY WITH YOU.

I'M LOOKING FORWARD TO MEETING SOME OF THE NEW COUNCILORS AND HAVE A CHANCE TO INTRODUCE THEM TO THE WORK OF THE COMMISSION WHEN WE'RE ALLOWED TO MEET AT SOME POINT IN THE FUTURE.

YOU KNOW, THIS IS AN UNPRECEDENTED TIME FOR PUBLIC HEALTH IN THE CITY OF BOSTON. IT IS A PRIVILEGE FOR ME TO BE HERE TODAY TO SHARE THE VITAL, IMPORTANT WORK THAT WE'RE CARRYING OUT ACROSS THE COMMISSION.

AS YOU CAN IMAGINE, THE GLOBAL COVID-19 PANDEMIC HAS CHANGED OUR WORK DRAMATICALLY AND HAS HAD A TREMENDOUS IMPACT ON OUR RESIDENTS AND HAS DISPROPORTIONATELY AFFECTED COMMUNITIES OF COLOR, AND OTHER HIGH-RISK GROUPS IN OUR CITY. ACROSS THE COMMISSION, OUR TALENTED STAFF HAVE BEEN WORKING 24/7 TO PROTECT THE HEALTH OF BOSTON RESIDENTS COMBATING THE SPREAD OF THE INFECTION, PROVIDING REPORTS TO OUR HEALTHCARE AND COMMUNITY PARTNERS AND CREATIVELY ADAPTING SYSTEM PROGRAMMING TO CONTINUE TO SERVE COMMUNITY NEED IN A TIME.

SOCIAL DISTANCING.

WE CONTINUE TO ADDRESS OUR EFFORTS AS WE LEARN MORE ABOUT THE IMPACT OF THIS DEVASTATING DISEASE.

I'D LIKE TO START BY GIVING A

BRIEF OVERVIEW OF THE COMMISSION.

THEN I WILL PRESENT THE ACCOMPLISHMENTS FOR FY- 20 THROUGH THE EMERGENCY MANAGEMENT.

I FORGOT TO ADD, WE'RE GOING TO HAVE OUR COLLEAGUE JEN TRACY PRESENT.

AND WE WILL BOTH TAKE QUESTIONS. SO A LITTLE BIT OF BACKGROUND. AGAIN, FOR THOSE OF YOU WHO ARE NOT KNOWLEDGEABLE WITH THE WORK OF THE BOSTON PUBLIC HEALTH ADMINISTRATION, WE'RE THE NATION'S FIRST HEALTH DEPARTMENT.

WE TRACE OUR ROOTS BACK TO 1799 WHICH.

THE BOARD OF HEALTH WAS DEVELOPED FOR THE OUTBREAK OF CHOLERA.

AND IT LED AN EARLY-DAY PUBLIC INFORMATION CAMPAIGN TO REDUCE DEATHS DUE TO CHOLERA, WHICH IS A HIGHLY PREVENTIBLE DISEASE.

221 YEARS LATER, THAT TRADITION OF PREVENTION CONTINUES FOR THE BOSTON PUBLIC HEALTH COMMISSION. AND WE FIND OURSELVES RESPONDING TO THE FIRST PANDEMIC THAT WE'VE HAD IN THIS COUNTRY FOR OVER-- MORE THAN 100 YEARS.

WHILE WE'RE THE COUNTRY'S OLDEST HEALTH DEPARTMENT, WE PRIDE OURSELVES ON HAVING SOME OF THE MOST INNOVATIVE SERVICES FOR OUR RESIDENTS.

PUBLIC SERVICE AND ACCESS TO QUALITY HEALTHCARE ARE THE CORNERSTONES OF OUR MISSION TO PROTECT, PRESERVE, AND PROMOTE THE HEALTH AND WELL-BEING OF ALL BOSTON RESIDENTS, PARTICULARLY THOSE WHO ARE MOST VULNERABLE.

I SHOULD SAY WE ENVISION AS AN AGENCY FOR ALL RESIDENTS TO BE HEALTHY AND LEAD A FULFILLING LIFE, PREVENT RACISM, AND VIOLENCE.

ALL RESIDENTS WILL HAVE EQUITABLE OPPORTUNITIES AND RESOURCES LEADING TO OPTIMAL HEALTH AND WELL-BEING.

EVEN AT THIS TIME OF
UNCERTAINTY, WE CONTINUE TO BE
GUIDED BY OUR 2019-2021
STRATEGIC PLAN WE COMPLETED.
RACIAL JUSTICE AND HEALTH
EQUITY.
WORKFORCE DEVELOPMENT.
INFORMATICS AND DATA AND
ESTABLISHING COLLABORATIVE
PARTNERSHIPS.
THE COMMISSION IS GOVERNED BY
SEVEN BOARDS OF HEALTH APPOINTED
BY MAYOR WALSH.
WE'RE MADE UP THE SIX BUREAUS
HAVE A WORKFORCE OF ABOUT 1,100
PERSONS AND MANAGE OVER 40
PROGRAMS, DRIVEN BY OUR MISSION
AND THE MISSIONS ARE RACIAL
JUSTICE AND HEALTH EQUITY.
EARLIER TODAY, YOU HEARD THE
CHIEF TESTIFY ON BOSTON E.M.S.
AND LIKE I SAID, AFTER MY
PRESENTATION, WE WILL COVER THE
WORK THAT HAPPENS.
THIS AFTERNOON, TOIMENT
CONCENTRATE ON TALKING ABOUT THE
OTHER FOUR BUREAUS, WHICH ARE
THE CHILD, ADOLESCENT AND
COMMUNITY HEALTH, COMMUNITY
SERVICES AND INFECTIOUS DISEASE.
I WOULD LIKE TO HIGHLIGHT SOME
OF THE WORK WE PERFORMED IN THE
FIRST HALF OF FISCAL YEAR 20
BEFORE THERE WAS A GLIMMER OF
COVID-19 AND CONSISTENT WITH OUR
GOALS TO BUILD HEALTHY,
RESISTANT COMMUNITIES AND
SYSTEMIC EQUITY.
THE BUREAU IMPLEMENTED THE NEW
BOARD OF HEALTH AND STATE
REGULATIONS, PROTECTING OUR
YOUTH, AND PARTICULARLY YOUTH OF
COLOR.
OUR CHILD, ADOLESC EXTENT FAMILY
HEALTH BUREAU PROVIDED OVER 900
FAMILIES WITH HOME VISITS AND
SERVICES AND LINKED TO RESOURCES
TO ITS HEALTH CHILD PROGRAM.
HOMELESS SERVICES, OUR BUREAU
PERMANENTLY PLACED 351
INDIVIDUALS OUTSIDE OF SHELTER,
AND THAT WAS A 20% INCREASE FROM
THIS TIME LAST YEAR.
AND OUR INFECTIOUS DISEASE

BUREAU WORKED TO REDUCE THE IMPACT OF OTHER INFECTIOUS DISEASES, PRESENT SICKNESS ASSOCIATED, AND CREATE HEALTHCARE FOR EVERYONE IN THE CITY.

WE WANT TO HIGHLIGHT THAT EVEN BEFORE THE PANDEMIC, THE INFECTIOUS DISEASE BUREAU INVESTIGATED THOUSANDS OF DISEASE REPORTS PER YEAR. DURING FY- 20, OR THE BEGINNING OF IT, THE BUREAU INVESTIGATED 11,824 NON-COVID INFECTIOUS DISEASE REPORTS AND MANAGED ABOUT 1,410 CONTACTS ASSOCIATED WITH NON-COVID-19 CONDITIONS. IN THE CURRENT CRISIS, EXISTING INFECTIOUS DISEASE TRACKING INFRASTRUCTURE, ALONG WITH THE DEEP KNOWLEDGE AND EXPERIENCE OF OUR PUBLIC HEALTH NURSES, HAVE PROVEN INVALUABLE.

EVEN DURING THE COVID-19 RESPONSE, OUR TEAM HAS HAD TO INVESTIGATE, AND DO CONTACT TRACING FOR OTHER COMMUNICABLE DISEASES THAT GO ON AND CONTINUE TO HAPPEN IN OUR CITY.

I WOULD LIKE TO HIGHLIGHT A VERY IMPORTANT.

AND IN ORDER TO BE CARED FOR AND RECOVER FROM EMERGENCIES THAT IMPACT HEALTH AND ACCESS TO HEALTHCARE.

IN THE CURRENT CRISIS, WE HAVE THE OFFICE SYSTEM INFRASTRUCTURE TO GROW ON.

INCLUDING OUR MEDICAL RESEARCH CORPS.

THE TIGHT RELATIONSHIPS WE HAVE BUILT OVER THE YEARS WITH HEALTHCARE PARTNERS THROUGH EMERGENCY PLANNING.

AND STAFF WHO HAVE BEEN TRAINED AND READY TO RESPOND TO DISASTERS AND HEALTHCARE CRISES, ESPECIALLY THE COVID-19 PANDEMIC.

THIS IS A QUICK TIMELINE WITH SOME HIGHLIGHTS OF WHAT'S BEEN GOING ON SINCE JANUARY.

WE STARTED A PUBLIC HEALTH PREPAREDNESS AND RESPONSE TO

COVID-19 MID-JANUARY OF 2020.
WE ACTIVATED OUR COMMAND TO
GUIDE OUR PUBLIC HEALTH
RESPONSE.

IN LATE JANUARY, WE DECLARED A
PUBLIC HEALTH EMERGENCY.
IN REALITY, WE STARTED PREPARING
FOR THIS YEAR YEARS AGO.
THE COMMISSIONS, THE OFFICE OF
PUBLIC HEALTH AND PREPAREDNESS,
HAVE LED OUR RESPONSES TO THE
BOSTON MARATHON, EXTREME
WEATHER, AND OTHER EMERGENCIES
THAT WE HAVE HAD TO FACE OVER
THE YEARS.

THE OFFICE MAINTAINS ONGOING
COMMUNICATION SYSTEMS WITH ALL
BOSTON HOSPITALS, HEALTH
CENTERS, AND LONG-TERM CARE
FACILITIES SO THAT WHEN WE NEED
TO SCALE UP AND RESPOND TO AN
EMERGENCY, THEIR POSITIONED TO
DO SO.

THIS WAS THE CASE, OBVIOUSLY,
WITH THE NEED TO RESPOND TO THE
COVID-19 PANDEMIC.

I WANT TO GIVE YOU A FEW UPDATES
OF THE OBJECTIVES WE DEVELOPED
FOR THE COMMISSION'S COVID-19
RESPONSE PLAN.

TO GIVE YOU AN IDEA OF SOME OF
THE WORK THAT WE'VE BEEN DOING.
AND, AGAIN, IT'S JUST AN IDEA
BECAUSE IN THE INTEREST OF TIME,
I COULDN'T POSSIBLY COVER ALL
THE WORK WE HAVE DONE ON THE
RESPONSE.

SO THE FIRST OBJECTIVE OF THE
PLAN HAS TO DO WITH MANAGING THE
BOSTON PUBLIC HEALTH COMMISSION
COVID-19 RESPONSE.

AND WE'VE HAD TO DO WITH
PROVIDING DAY-TO-DAY DIRECTION
AND LEADERSHIP IN THE CITY.
THE RESPONSE INCLUDING
STREAMLINING DECISION MAKING AND
PLANNING FOR PREPAREDNESS
RESPONSE.

AND OBVIOUSLY RECOVERY STAGES
GOING FORWARD.

WE INSTITUTED A COMMAND
STRUCTURE THAT ORGANIZED,
FOCUSED, AND BE VERY
DELIBERATIVE IN EVERYTHING WE

HAVE HAD TO DO IN THE LAST THREE MONTHS.

OUR OFFICE OF PUBLIC HEALTH PREPAREDNESS AND OUR MANAGER AND OUR SENIOR LEADERS JOINED AND PARTICIPATED IN DAILY CALLS WITH THE MAYOR AND OTHER CITY PARTNERS AND LEADERSHIP TO PROVIDE AWARENESS AND DESCRIBE THE EVERYDAY REALITY OF THE DISEASE, ANY EMERGENT ISSUES THAT WERE SEEN, AND PROVIDE ADVICE DURING PREPAREDNESS RESPONSE AND RECOVERY, AND MORE IMPORTANTLY, REOPENING WHEN THE MOMENT COMES.

OUR SECOND OBJECTIVE HAS TO DO WITH MAINTAINING SITUATIONAL AWARENESS FOR INTERNAL AND EXTERNAL PARTNERS.

AND WE DO THAT BY GATHERING AND SHARING INFORMATION ON A DAILY BASIS RELATED TO OUR EMERGENCY RESPONSE AND NEW COVID-RELATED DEVELOPMENTS TO KEY PARTNERS.

SO WE HAVE PARTICIPATED IN NUMEROUS CITY CALLS WITH NUMEROUS STAKEHOLDERS, INCLUDING UNIVERSITIES, HEALTHCARE PARTNERS, COMMUNITY HEALTH CENTERS, RESTAURANTS, THE FAITH-BASED COMMUNITY, TRANSPORTATION, SMALL BUSINESSES TO ANSWER QUESTIONS AND PROVIDE A PUBLIC HEALTH PERSPECTIVE IN THE CONTEXT OF THE OPENING PLANNING.

AND WE HAVE PROVIDED COUNTLESS CLINICAL GUIDANCE WITH PARTNERS AND STAFF AS THE SITUATION HAS PROGRESSED.

WE'VE ALSO DONE MULTIPLE WEBINARS FOR COMMUNITY PARTNERS.

AND WE HAVE THE MAYOR'S HEALTH LINE, WHICH HAS ANSWERED THOUSANDS OF CALLS FROM RESIDENTS ABOUT RESOURCES RELATED TO THE COVID-19.

OUR FOURTH OBJECTIVE ON THE RESPONSE PLAN HAS TO DO WITH SHARING INFORMATION WITH RESIDENTS OF BOSTON AND PROVIDE UP-TO-DATE INFORMATION ABOUT COVID-19.

SO WE HAVE DISTRIBUTING
INFORMATION TO RESIDENTS TO
ENSURE THAT THEY KNOW WHAT THEY
SHOULD BE DOING TO-- AND, ALSO,
WE HAVE DEVELOPED MATERIALS,
F.A.Q.s, AND GUIDELINES.

AND WE ALSO MAINTAIN A WEBSITE
AT BPHC.ORG W/ UPDATED INFORMATION
TO THE DEVELOPMENTS.

YOU KNOW, AND WE'RE ALWAYS-- OUR
INTENTION IS TO SEEK TO PROVIDE
INFORMATION THAT IS CLEAR, THAT
IS ACTIONABLE FOR OUR
RESIDENTS.

WE PUBLISH OUR MATERIALS IN 10
LANGUAGES.

OUR SINGLE OBJECTIVE HAS TO DO
WITH STOPPING THE SPREAD OF
COVID-19, AND IN RESPONSE TO THE
COVID-19 PANDEMIC, THE
COMMISSION WORKED TO INCREASE
THE CONTACT TRACING TEAMS, A
REGIONAL TEAM OF 15 FULL-TIME
PUBLIC HEALTH NURSES, TO BETWEEN
40 AND 50 TODAY THESE NURSES
TRACE AND MONITOR CONTACTS OF
INFECTED PEOPLE.

THEY SUPPORT THE QUARANTINE AND
CONTACT, AND PROVIDE
LINGUISTICALLY AND CULTURALLY
APPROPRIATE RESOURCES.

THE ABILITY TO PERFORM THESE
VITAL FUNCTIONS HAS BEEN,
OBVIOUSLY, INSTRUMENTAL AND KEY
TO OUR RESPONSE EFFORTS.

THE COMMISSION, LIKE I SAID,
WORKS VERY QUICKLY TO INCREASE
OUR CAPACITY TO BE ABLE TO DO
THIS.

WE ACTUALLY COLLABORATED WITH
THE STATE DEPARTMENT OF PUBLIC
HEALTH, WITH THE CONTACTING
TRACING COLLABORATIVE.

AND TO THAT COLLABORATIVE, WE
HAVE BEEN ABLE TO ENHANCE OUR
ABILITY TO CONTINUE CONTACT
TRACING AS THE STATE HAS A
NUMBER OF CONTACT TRACERS TO
JOIN OUR EFFORTS AND HELP US
KEEP UP WITH ALL THE CONTACT
TRACING WE HAVE TO DO.

THE SIXTH OBJECTIVE HAS TO DO
WITH COORDINATING RESOURCES WITH
HEALTHCARE PARTNERS AND OTHERS

AND HELP COMMISSION PROGRAMS TO GET THE RESOURCES THEY NEED TO SUPPORT GUESTS, CLIENTS, AND STAFF.

SO SINCE MARCH 1, WE'VE HAD 150 MEDICAL RESEARCH VOLUNTEERS WHO SUPPORTED 196 SHIFTS, EQUALING 1,670 HOURS TO SUPPORT THE COVID-19 RESPONSE EFFORTS.

WE HAVE ALSO WORK TO FULFILL RESOURCES REQUESTS FROM HEALTHCARE PARTNERS AND ORGANIZATIONS.

AS OF MAY 18, WE HAVE PROVIDED OVER 900,000 REQUESTED ITEMS TO PARTNERS.

THESE INCLUDE OVER 300,000 PAIRS OF DPLOSTLES.

22,000 FACE SHIELDS.

AND OVER 70,000 GOWNS.

IN ORDER TO ACCESS THE RESOURCES, WE ALSO HAVE ADAPTD A SYSTEM PROGRAMMING STAFF BEING DEPLOYED TO SUPPORT THE COVID WORK.

FOR EXAMPLE, SOME OF OUR ENVIRONMENTAL HEALTH INSPECTORS IN THE COMMUNITY RESEARCH BUREAU ARE NOW MEMBERS OF WHAT WE CALL THE CONTAINMENT STRIKE TEAM. MULTIDISCIPLINARY TEAMS.

THIS IS A PICTURE OF ONE OF OUR INSPECTORS WHO HAS BEEN DEPLOYED TO DO THIS WORK.

FOR VULNERABLE POPULATIONS, PART OF THE OBJECTIVE WE MENTIONED, KEEPING OUR HEALTH CENTERS AND LONG-TERM CARE FACILITIES.

WE HAVE FULFILLED A NUMBER OF CRITICAL RESOURCES.

THIS IS A TABLE SHOWING MATERIALS THAT WE HAVE BEEN ABLE TO SHARE WITH OUR PARTNERS.

ANOTHER STRATEGY UNDER THE OBJECTIVE I JUST MENTIONED.

AND IDENTIFYING AND SETTING UP CARE SITES FOR THE HOMELESS INDIVIDUALS.

THE ANTICIPATION OF SHELTERS, BY PLACING SOME OF OUR GUESTS IN DORMS AND PLACES WHERE THEY CAN BE IN INDIVIDUAL ROOMS WHERE THEY DON'T HAVE TO SHARE AND BE COMFORTABLE.

KEEPING OUR DOORS OPEN TO NEW GUESTS AND RETURNING GUESTS. IMPLEMENTING SAFETY PROTOCOL FOR STAFF IN OUR SHELTERS. AND UNIVERSAL COVID-19 TESTING FOR ALL UNHOUSED INDIVIDUALS IN BOSTON.

WE WERE ABLE TO IMPLEMENT COMPREHENSIVE SYSTEM PLAN TO TRACK, TRACE, AND ISOLATE THOSE THOSE WHO WERE COMED TO BE POSITIVE.

A TOTAL OF 2,290 HOMELESS INDIVIDUALS HAVE BEEN TESTED FOR COVID SINCE MARCH 12.

WE WERE ABLE TO ISOLATE THEM IN PROPER SITES.

ALSO PROTECTING OUR COMMISSION FORCE WAS A KEY OBJECTIVE WITHIN OUR PLAN.

SOCIAL DISTANCING TO PROTECT STAFF.

WE ENSURED WE HAD P.P.E.s FOR OUR FRONT-LINE STAFF.

WE DEVELOPED MONITORING STATIONS AT EVERY FACILITY WHERE EVERYBODY HAD TO CLEAN BEFORE COMING IN.

WE ALSO WERE ABLE TO ADOPT-- PROVIDE ACCOMMODATION FOR FRONT-LINE STAFF IF THEY GOT SICK OR NEEDED TO QUARANTINE THEMSELVES AWAY FROM THEIR FAMILY, ALONG WITH OTHER FIRST RESPONDERS.

THEY WERE ABLE TO BENEFIT FROM GOING TO NORTHEASTERN DORMS WHERE SOME OF OUR FOLKS WERE ABLE TO ENJOY, YOU KNOW, BEING AWAY FROM THEIR FAMILIES WHILE THEY NEED TO QUARANTINE OR ISOLATE.

OUR NEXT OBJECTIVE HAD TO DO WITH MEETING HUMAN SERVICES NEEDS.

WE RECOGNIZE THE BURDEN THAT COVID-19 IS PLACING ON INDIVIDUALS, RANGING FROM JOB LOSS TO EMERGENCY CHILD CARE NEEDS TO MENTAL HEALTH CHALLENGES RELATED TO ISOLATION AND FEAR.

SO WE'VE HELPED COORDINATE.

WE ARE PROVIDING VIRTUAL

SERVICES FOR PREGNANT WOMEN THROUGH OUR HEALTHY BABY HEALTHY CHILD PROGRAM.

SERVICE AS OFFERED VIA PHONE, TEXT, FACETIME, OR SKYPE.

WE WERE ABLE TO PROVIDE THIS IN SIX LANGUAGES.

LASTLY, OUR LAST OBJECTIVE HAS TO DO WITH RECOVERY PLANNING.

THE DIFFERENCE BETWEEN THE REOPENING AND RECOVERY. REOPENING IS ABOUT LOOSENING THE RESTRICTIONS AND IN-PERSON OPERATIONS.

RECOVER FROM COVID-19 WILL REQUIRE STRATEGIES AND PROCESSES TO STRENGTHEN AND REBUILD THE HEALTH OF BOSTON.

IT'S IMPORTANT TO BEGIN PLANNING FOR AN EQUITABLE RECOVERY FOR ALL BOSTONIANS.

WE'RE HELPING TO HELP DEVELOP A COVID-19 CITY OF BOSTON DISASTER RECOVERY FRAMEWORK TO GUIDE OUR PLANNING AND ENSURE THAT RECOVERY IS EFFECTIVE, EFFICIENT, AND EQUITABLE.

COVID-19 IS A PUBLIC HEALTH CRISIS THAT IS IMPACTING EVERY SINGLE NEIGHBORHOOD AND COMMUNITY IN OUR CITY.

BUT WE KNOW THAT SOME ARE DISPROPORTIONATELY IMPACTED AND THE NEED TO PRIORITIZE SOCIAL DETERMINANCE OF HEALTH AND RACIAL AND SOCIAL EQUITY.

AIDING IN THE EFFORT TO ADDRESS INEQUITIES IS THE HEALTH EQUITY TASK FORCE ESTABLISHED BY MAYOR WALSH TO PROVIDE ACCOMMODATIONS AND RESOURCES TO ENSURE GREATER EQUITY AND DATA COLLECTION.

ADDITIONAL ACTION, INCREASE ACCESS TO TESTING SITES, AND HEALTHCARE SERVICES FOR BLACK, LATINX, ASIAN, AND IMMIGRANT RESIDENTS.

OUR LONG-TERM GOAL IS TO RESTORE AND ENHANCE THE HEALTH AND WELL-BEING OF OUR RESIDENTS AND THE CITY BY BUILDING NEW SYSTEMS THAT ELIMINATE INEQUITIES AND STRENGTHEN OUR ABILITY TO RESPOND TO FUTURE DISASTERS.

I'D LIKE TO CLOSE BY
ACKNOWLEDGING THE SUFFERING AND
LOSS OF LIFE THAT BOSTON HAS
EXPERIENCED THROUGHOUT THIS
OUTBREAK.

THE IMPACT ON OUR COMMUNITIES,
OUR PARTNERS, AND OUR STAFF HAS
BEEN DEVASTATING.

BUT WE'RE LOOKING AHEAD WITH
HOPE AND RESOLVE FOR THE VITAL
WORK OF PUBLIC HEALTH.

AND THE INTENTION OF NOT GOING
BACK TO NORMAL BUT MOVING
FORWARD.

THANK YOU VERY MUCH.

>> THANK YOU SO MUCH, RITA.

THANK YOU FOR THAT THOROUGH
PRESENTATION, AND ALL THOSE
DETAILS THAT I BE WILL ALSO BE
HELPFUL FOR THE PUBLIC WATCHING
THIS AT HOME.

BEFORE WE GO TO COUNCILOR
QUESTIONS, I'M ACTUALLY GOING TO
ASK JEN TRACY, WHO ALSO WITH US
FROM RITA'S TEAM TO, PRESENT
BECAUSE I THINK IT WILL BE MORE
EFFICIENT FOR US TO ASK
QUESTIONS OF-- RELATED TO BOTH.

BUT BEFORE I GO TO JEN, I WANT
TO ACKNOWLEDGE MY COUNCIL
COLLEAGUES WHO ARE HERE.
THIS WILL ALSO BE OUR ORDER WHEN
WE GO TO QUESTIONS.

COUNCILOR ESSAIBI GEORGE, AT
LARGE COUNCILOR MATT O'MALLEY.
DISTRICT 6.

LIZ BREADON, SIXTH NINE.

ANDREA CAMPBELL, DISTRICT 4.

JANE, DISTRICT SEVEN.

AND COUNCILOR MICHAEL FLAHERTY
AT LARGE, COUNCILOR RICARDO
ARROYO DISTRICT 5.

COUNCILOR JULIA MEJIA, AT LARGE,
AND COUNCILOR ED FLYNN, DISTRICT
2.

THANK YOU MY COLLEAGUES WHO ARE
HERE.

I THINK, OBVIOUSLY, THIS IS A
REALLY IMPORTANT SET OF TOPICS.

I WOULD LIKE TO OFFER JEN THE
CHANCE TO PRESENT NOW.

JEN?

OKAY, WE CAN HEAR YOU.

>> OKAY, ALL SET?

>> ALL SET.
WE CAN SEE YOU AND WE CAN HEAR YOU.
>> OKAY, GREAT.
THANK YOU.
GOOD AFTERNOON.
CHAIRWOMAN BOK--
>> THAT'S GENEROUS.
GOOD EVENING.
>> GOOD EVENING, AND COUNCILORS.
WE'RE GRATEFUL TO BE HERE WITH YOU ALL TODAY.
WE HAVE CONTINUED TO EXPAND THE SCOPE OF OUR EFFORTS AND HAVE WORKED TO MEET THE NEEDS OF OUR MOST VULNERABLE CONSTITUENTS. I'M JOINED BY MY COLLEAGUE DEVIN LARKIN, DIRECTOR OF THE BUREAU OF RECOVERY SERVICES.
THIS YEAR, WITH MAYOR WALSH'S COMMITMENT AND THE EXPHGHT HUMAN SERVICES CHIEF MARTY MARTINEZ, RITA NIEVES, WE HAVE COMBINED AND ELEVATED OUR COLLECTIVE EFFORTS JOINING THE H.H.S. CABINETS.
THANKS TO MAYOR WALSH'S LEADERSHIP AND THE CITY COUNCIL SUPPORT, OUR BUDGETS HAVE STEADILY INCREASED SINCE OUR CREATION.
WE HAVE ALMOST DOUBLED ESTATE'S RESPONSE, AND WE ARE AGGRESSIVELY FOCUSED ON BILGE THIRD-PARTIES.
OUR OUTREACH TEAM COVERS THE MASS. CASS NEIGHBORHOOD. AND IN ADDITION, WE PROVIDE OUTREACH DOWNTOWN AND ACROSS THE CITY IN HIGH-USE NEIGHBORHOODS. THIS INCLUDES MOBILE SERVICES THROUGH THE CAREZONE VAN AND RESPONSE TO 311 CALLS FOR SYRINGE PICKUP.
OUR AHOPE PROGRAM PROVIDES COMPREHENSIVE DRUG USERS HEALTH, PROVIDING HIV, STI TESTING, AND INAR CANE.
ASSISTING PEOPLE IN NAVIGATING ACCESS TO CARE IS A CORNERSTONE OF WHAT WE DO.
PAATHS IS A DROP-IN CENTER OPEN SEVEN DAYS A WEEK PLACING PEOPLE IN TREATMENT ALL OVER THE STATE.

THE STATE MANAGES 311 CALLS FOR RECOVERY SUPPORT.

AT OUR MATTAPAN CAMPUS, WHICH HAS THREE RESIDENTIAL TREATMENT PROGRAMS SERVING HIGH-RISK POPULATIONS, MEN RETURNING FROM THE JUSTICE SYSTEM, BILINGUAL/BICULTURAL WOMEN AND THEIR PROGRAMS AND A CO-ED PROGRAM THAT SERVES INDIVIDUALS FROM THE STREET OR FOLLOWING DETOX.

THE NEXT FEW SLIDES REPRESENT SOME OF OUR METRICS AND INDICATE THE VOLUME AND IMPACT THAT THE WORK AT THE CITY LEVEL, AS WE CONTINUE TO RESPOND TO THE DEVASTATING TOLL OF THE EPIDEMIC.

AS I MENTIONED, PAATHS IS OPEN SEVEN DAYS A WEEK.

THIS YEAR, THE PROGRAM HAS PLACED OVER 3,000 PEOPLE IN TREATMENT FACILITIES ALL OVER THE STATE, INCLUDING TRANSPORTATION.

THERE IS STILL A STRONG DEMAND FOR SERVICES, DESPITE COVID-19. AND PAATHS HAS PLACED AN AVERAGE OF 77 PEOPLE PER WEEK IN TREATMENT SINCE THE SHELTER-IN-PLACE ADVISORY COMPARED TO 87 PEOPLE THE WEEK BEFORE.

URBAN CENTERS ALL OVER THE COUNTRY ARE GRAPPLING WITH QUALITY-OF-LIFE CHALLENGES. WE HAVE INCREASED THE WAY WE COLLECT AND PROPERLY DISPOSE OF SYRINGES.

REQUIRING ALL STAFF ACROSS THE PROGRAM TO JOIN THE EFFORT.

THE MAIN WAYS WE COLLECT SYRINGES ARE THROUGH PARTICIPANTS IN OUR PROGRAM, OUTREACH IN THE MOBILE SHARPS TEAM, AND NEIGHBORHOOD KIOSKS. 74% OF SYRINGE RETURNS ARE FROM CLIENTS AND AT OUR AHOPE PROGRAM, 14% FROM MOBILE SHARPS, 12% FROM KIOSKS.

WE ARE THANKFUL FOR COUNCIL WOMAN ESSAIBI GEORGE'S LEADERSHIP ON THIS ISSUE AS

WELL.

THE ENGAGEMENT CENTER, LOCATED BEHIND THE 112 SOUTHAMPTON SHELTER, AVERAGES ABOUT 72 PEOPLE AT ANY GIVEN TIME THROUGHOUT THE DAY.

AND THIS FLUCTUATES FROM THE MAXIMUM CAPACITY OF 120 INDIVIDUALS TO A MINIMUM OF 40-50 THROUGHOUT THE DAY.

THERE'S A CLINIC INSIDE THE ENGAGEMENT CENTER RUN BY BOSTON HEALTHCARE FOR THE THE HOMELESS, WHICH PROVIDES MUCH-NEEDED MEDICAL CARE TO PRANTSZ.

PARTICIPANTS.

WE HAVE EXPERIENCED AN INCREASE IN THE NEED FOR SERVICES FOR DRUG USERS AND WORKING WITH OTHER COMMUNITIES AND CITIES AND TOWNS TO SCALE UP THEIR EFFORTS TO PROVIDE MUCH-NEEDED HARM REDUCTION SERVICES.

... APPROXIMATELY 10% COMPARED TO HALF THE YEAR.

WE HAVE DISTRIBUTED ALMOST 18,000 DOSES OF NARCAN.

WE DISTRIBUTE NARCAN AND INFORMATION IN MANY WAYS.

SO FAR, IN FY-20, WE HAVE PROVIDED 208 OVERDOSE-PREVENTION TRAININGS, TO 6,711 PEOPLE AND GIVEN OUT 17,820 DOSES OF NARCAN.

WE DO THIS THROUGH STREET OUTREACH, MOBILE SERVICES, OVERDOSE-PREVENTION TRAINING AND OTHER INITIATIVES.

FOR EXAMPLE, THIS YEAR WE IMPLEMENT AID NEW INITIATIVE WHERE WE EQUIPPED ALL CITY BUILDINGS WITH NARCAN.

FATAL OVERDOSES CONTINUE TO HAPPEN BEHIND CLOSED DOORS AND IN PEOPLE'S HOMES.

THE CITY'S POST-OVERDOSE RESPONSE TEAM SAY PARTNERSHIP BETWEEN RECOVERY SERVICES AND FIRST RESPONDERS.

WITH BOSTON FIRE DEPARTMENT TAKING A LEAD ROLE WITH US, ALONG WITH E.M.S., AND CHIEF HOOLEY'S TEAM.

THE INTERVENTION PROVIDES

OUTREACH, NARCAN, AND CONNECTIONS TO SERVICES FOLLOWING A NONFATAL OVERDOSE THAT OCCURS IN A RESIDENCE. THE TEAM CONDUCTED 300 VISITS PRE-COVID, AND ENGAGED WITH 95 INDIVIDUALS AND FAMILY MEMBERS. SO THIS YEAR, RIGHT BEFORE COVID, WE LAUNCHED OUR YOUTH CAMPAIGN, THE COPE CODE CAMPAIGN.

IT'S A CAMPAIGN DEVELOPED BY YOUTH WHICH FOCUSED ON NORMALIZING FEELINGS OF STRESS AND HELPING YOUTH DEVELOP POSITIVE COPING SKILLS.

THE CAMPAIGN MEETS YOUTH WHERE THEY'RE AT BY ENGAGING YOUTH SERVICE ORGANIZATIONS TO DELIVER THE CAMPAIGN.

WE ALSO BUILD CAPACITY WITH OUR PREVENTION TEAM IN YOUTH SYSTEMS BY FOCUSING ON YOUTH ENGAGEMENT, COMPREHENSIVE HEALTH EDUCATION, AND TECHNICAL ASSISTANCE AND TRAINING.

OUR PREVENTION TEAM FACILITATED WORKSHOPS WITH YOUTH DIRECTLY ABOUT SUBSTANCE USE, MARIJUANA, AND HARM REDUCTION.

THEY DEVELOPED MARIJUANA EDUCATION LESSONS WORK CLOSELY WITH OUR PARENTERS IN AT B.P.S.

THE TEAM PROVIDED TRAININGS TO YOUTH-SERVING AGENCIES ON SUBSTANCE ABUSE, MARIJUANA, AND ENGAGING IN CONVERSATIONS AROUND SUBSTANCE ABUSE.

IT ADDRESSES THE NEEDS OF OUR YOUNG PEOPLE, PARTICULARLY NOW. IN OCTOBER, WE LAUNCHED THE MASS CASS 2.0 STRATEGIC PLAN.

THE PLAN FOCUSES ON FOUR MAIN BUCKETS: PUBLIC HEALTH, PUBLIC SAFETY, QUALITY OF LIFE AND COMMUNICATION.

UNDER PUBLIC HEALTH WE DOUBLED THE SIZE OF OUR RECOVERY SERVICES TO OUTREACH TEAM AND UNDER E.M.S.

UNDER PUBLIC SAFETY, THE BOSTON POLICE DEPARTMENT'S YOUTH OUTREACH DEPARTMENT WAS EXPANDED.

AND UNDER QUALITY OF LIFE,
DEPARTMENT OF PUBLIC WORKS
EXPANDED THEIR CLEANING COVERAGE
AND ADDED A TEAM OF FOUR TO THE
NEIGHBORHOOD.

UNDER COMMUNICATION, WE LAUNCH
AID TASK FORCE OF COMMUNITY
STAKEHOLDERS AND ARE FINALIZING
A PUBLIC DASHBOARD WITH
INFORMATION AND METRICS FOR THE
NEIGHBORHOOD.

WE CONTINUE THE GOAL OF THE
COMPREHENSIVE CAMPUS ON LONG
ISLAND.

WE ARE WORKING WITH A TEAM OF
CITY DEPARTMENTS AND
STAKEHOLDERS TO DEVELOP A MASTER
PLAN AND FOCUS ON THE SERVICE
MODEL.

WHICH PROVIDES-- FOCUSING ON
LONG-TERM TREATMENT, EMPLOYMENT
SKILLS, WELLNESS, WRAPAROUND
SERVICES TO HELP PEOPLE MAINTAIN
LONG-TERM RECOVERY.

AS WE ALL ARE AWARE, COVID-19
HAS HAD A DIRECT IMPACT ON OUR
CLIENTS AND OUR STAFF.

WE HAVE REMAINED OPEN AND
OPERATIONAL THROUGHOUT THE
PANDEMIC, MAKING SIGNIFICANT
PROGRAM MODIFICATIONS, INCLUDING
SOCIAL DISTANCING AND EXPANDED
SPACE TO REDUCE TRANSMISSION OF
RISK, INCLUDING DELIVERING OUR
ADDITIONAL HARM REDUCTION SERVICES
COMPLETELY OUTDOORS AND SHIFTING
ALL BEHAVIORAL HEALTH OUTPATIENT
SERVICES TO TELEHEALTH.

THE ENGAGEMENT CENTER HAS
REDUCED INSIDE SPACE AND
EXPANDED THE OUTSIDE SPACE TO
PROMOTE SOCIAL DISTANCING.

THEY HAVE BEEN INSTRUMENTAL IN
ASSISTING WITH COVID-19
SCREENING AND INCREASING ACCESS
TO HANDWASHING, SOCIAL
DISTANCING, AND BATHROOM USE.

WE HAVE IMPLEMENTED SCREENING,
TESTING, AND INFECTION CONTROL
MEASURES ON THE MATTAPAN CAMPUS
AND THE MASS/CASS OUTREACH TEAM
HAS BEEN REDEPLOYED AT TIMES TO
SUPPORT THE ENGAGEMENT CENTER AS
WE MANAGE STAFF ABSENCES DUE TO

ISOLATION AND QUARANTINE.
AS STAFF RECOVER, THE TEAM IS
OUT ON THE STREET AGAIN,
THANKFULLY.

ADJUSTMENTS HAVE ALSO REQUIRED
NEW INITIATIVES.

WE HAVE LAUNCHED COMFORT
STATIONS IN THE MASS/CASS
NEIGHBORHOOD.

THEY PROVIDE PEOPLE SPENDING
TIME ON THE STREET WITH A SAFE
PLACE TO GO, USE THE BATHROOM,
WASH THEIR HANDS.

THE CITY'S RESILIENCY FUND, HAS
HELPED SUPPORT COMMUNITY-BASED
RESIDENTIAL TREATMENT PROVIDERS
ACROSS BOSTON AS THEY RESPOND TO
NEEDS FROM COVID-19.

MANY OF THE RESIDENTIAL
COMMUNITY-BASED, RESIDENTIAL
PROGRAMS ACROSS THE CITY HAD
INCREASED COSTS DUE TO COVID,
INCREASED CLEANING COSTS,
INCREASED TECHNOLOGY COSTS, AND
WE WERE ABLE TO PROVIDE SOME
SUPPORT FOR THAT.

OUR DIRECT SERVICE STAFF ALSO
SUPPORTED THE BOSTON HOPE
HOSPITAL AT B.C.E.C.

THE YOUTH PREVENTION CAMPAIGN
HAS MOVED TO A VIRTUAL CAMPAIGN
THAT IS SUPPORTING YOUNG PEOPLE
AT HOME DURING COVID.

LOOKING AHEAD, WE WILL CONTINUE
WITH THE FOLLOWING GOALS:
EXPANDING HARM REDUCTION ACROSS
ALL COMMUNITIES.

INCREASING ACCESS TO CARE.
AND PROMOTING YOUTH PREVENTION.

WE ARE GRATEFUL THAT THE FY-21
BUDGET INCLUDES A NEW INITIATIVE
TO STUDY THE IMPLEMENTATION OF
AN OVERNIGHT RESPITE, TARGETING
ON-STREET POPULATION WITH
SUBSTANCE ABUSE DISORDER AND
HOMELESSNESS.

THIS WEEK, WE HAVE STARTED
EXPANDING THE AHOPE DROP-IN
SPACE FOR WOMEN-SPECIFIC
PROGRAMMING.

WE WILL CONTINUE THE WORK WITH
THE PUBLIC FACILITIES DEPARTMENT
TO DESIGN AND BUILD A PERMANENT
ENGAGE AM CENTER, INCREASING

OPTIONS FOR ACCESS TO CARE.
AND THE LONG ISLAND RECOVERY
CAMPUS MASTER PLANNING
CONTINUES, FOCUSING ON EXPANDING
ACCESS TO CARE FOR THE REGION.
YOUTH PREVENTION REMAINS A
PRIORITY, AND WE WILL FOCUS NEW
INITIATIVES PROVIDING COMMUNITY
GRANTS AND NEW WAYS TO VIRTUALLY
SUPPORT OUR YOUNG PEOPLE.
BEFORE WE TAKE QUESTIONS, WE
WANTED TO USE THIS OPPORTUNITY
TO THANK ALL OF OUR STAFF THAT
ARE ON THE FRONT LINES OF THE
PANDEMIC AND SHOW UP EVERY DAY.
THANK YOU FOR YOUR SUPPORT, AND
WE LOOK FORWARD TO CONTINUING TO
WORK WITH ALL OF YOU IN THE YEAR
AHEAD.

>> GREAT, THANK YOU SO MUCH, JEN
AND RITA, FOR BOTH THOSE
PRESENTATIONS.

AND I'M ESPECIALLY GLAD THAT WE
WERE ABLE TO ALSO GET THE
PRESENTATION ON RECOVERY
SERVICES, BECAUSE I THINK WE ALL
KNOW THAT THAT WORK CONTINUES TO
BE REALLY ESSENTIAL AND CAN'T BE
OVERSHADOWED BY THE CURRENT
PANDEMIC.

SO WITHOUT FURTHER ADO, WE'LL
JUMP INTO QUESTIONS, TURNING
FIRST TO COUNCILOR ESSAIBI
GEORGE, THEN COUNCILOR O'MALLEY.
FOLKS CAN SEE THE ORDER IN THE
CHAT.

COUNCILOR ESSAIBI GEORGE.

>> THANK YOU, MADAM CHAIR.

AND JUST FOR YOUR OWN
INFORMATION, I WILL LIKELY USE
TWO ROUNDS OF QUESTIONS TODAY.
THANK YOU TO RITA AND JEN AND
BOTH OF YOUR RESPECTIVE TEAMS
FOR THE WORK YOU DO EVERY SINGLE
DAY, ESPECIALLY DURING THIS
TIME.

I KNOW AS YOU WORK TO OUTREACH
TO SOME OF OUR MORE VULNERABLE
RESIDENTS THAT THE WORK IS
ESPECIALLY DIFFICULT.

I ALSO WANT TO GIVE SPECIAL
THANKS TO THE MOBILE SHARPS TEAM
FOR THE WORK THAT THEY'RE DOING,
BOTH IN COLLECTING IMPROPERLY

DISCARDED SHARPS ACROSS OUR CITY, BUT ALSO IN THE DIRECT OUTREACH THAT THEY'RE DOING EVERY DAY TO MAKE SURE THAT OUR RESIDENTS HAVE ACCESS TO THE THINGS THEY NEED TO BE WELL OR TO BE BETTER, AND HOPEFULLY TO ACCESS RECOVERY.

AND THEN, ALSO, YOUR SHELTER PROVIDERS, BOTH AT SOUTHAMPTON STREET AND McMULLIN.

WE KNOW THE WORK, ESPECIALLY TODAY, IS DIFFICULT, AS IT IS EVERY DAY, BUT IN PARTICULAR, THESE DAYS.

AND IN LIGHT OF THAT, I WONDER WITH SORT OF THE SHIFTING NEEDS OF OUR RESIDENTS, ESPECIALLY THOSE EXPERIENCING HOMELESSNESS, ARE WE-- DO WE SEE IN OUR BUDGET AN ADDED COST ASSOCIATED WITH WHAT WILL LIKELY BE AN INCREASE IN THE NEED FOR P.P.E. AND OTHER SORT OF PROTECTIVE & EQUIPMENT? AND THEN, ALSO, THE ADDITIONAL CLEANING.

DO WE SEE AN INCREASE IN THE FY-21 BUDGET FOR NEXT YEAR.

AND IF YOU CAN ALSO MAYBE MENTION AS IT RELATES TO COVID-19 AND THE PANDEMIC, THE WORK THAT YOU'RE DOING IN YOUR-- WHETHER IT'S THE OFFICE OF RECOVERY SERVICES OR THROUGH THE HEALTH COMMISSION, THE GUIDANCE THAT YOU'RE PROVIDING TO OTHERS TO DEPARTMENTS, NOT JUST TO RESPOND TO THIS CURRENT CRISIS BUT BEING BETTER PREPARED FOR FUTURE CRISES OR A SECOND SURGE OR SECOND SORT OF LIKE OF THIS PANDEMIC.

THANK YOU, MADAM CHAIR, AND THANK YOU TO CHIEF MARTINEZ, WHO IS WITH US THIS-- WHAT TIME OF DAY IS IT?

FOR NOW.

THANK YOU.

AND I WILL HAVE FURTHER QUESTIONS FOR FUTURE ROUNDS.

>> I DO WANT TO WELCOME CHIEF MARTY MARTINEZ WHO HAS JOINED US WHO HAS BEEN LEADING THE CITY'S RESPONSE TO THE PANDEMIC ON THE

PUBLIC HEALTH SIDE.

I KNOW RITA AND JEN AND OTHERS ON HIS STAFF WILL BE TAKING THE QUESTIONS AND MANAGING THIS HEARING, BUT WE'RE GRATEFUL FOR HIS PRESENCE HERE.

CHIEF MARTINEZ, IF YOU WANT TO JUST SAY HELLO SO FOLKS WATCHING AT HOME CAN SEE YOU.

>> NO, THANK YOU, COUNCILOR, AND THANK YOU.

I'M JUST HAPPY TO BE ABLE TO BE HERE WITH THESE GREAT LEADERS AND I'M HERE TO SUPPORT THEM. THANK YOU FOR THAT, APPRECIATE IT.

>> GREAT, THANKS SO MUCH.

COUNCILOR ESSAIBI GEORGE I'LL CREDIT THAT TIME BACK TO YOUR ACCOUNT.

RITA AND JEN, DO YOU GUYS HAVE ANY ANSWERS TO THE QUESTIONS THE COUNCILOR ASKED?

YOU'RE BOTH MUTED, JUST SO YOU KNOW.

WE HAVE SLIGHTLY IMPROVED THE MECHANICS.

I SEE JEN IS UNMUTED.

>> HI, JEN.

>> I SEE YOU OVER THERE.

\(LAUGHTER)

SO LET ME SPEAK ABOUT THE BUDGET QUESTION THAT COUNCILOR ESSAIBI GEORGE PUT FORWARD.

SO THIS IS HOW WE'RE APPROACHING THE BUDGET SITUATION.

CLEARLY, WE'VE HAD SOME EXTRA COSTS, YOU KNOW.

AND FOR FY-20 OUR PLANS ARE TO RELY ON FEMA DOLLARS, AND ALSO SOME DOLLARS THAT HAVE BEEN ALLOCATED FOR THE PUBLIC HEALTH RESPONSE.

AND THOSE ARE DOLLARS THAT WE CAN ACCESS.

THE REASON WHY WE HAVEN'T MADE ANY CHANGES TO THE FY-21 BUDGET THAT WE DEVELOPED PRE-COVID-19, OBVIOUSLY, IS BECAUSE WE FEEL THAT WE'RE DOING A COUPLE OF THINGS.

ONE, WE ARE REALIGNING SOME OF OUR RESOURCES AND REIMAGINING HOW WE SHOULD BE DELIVERING

SERVICES BETWEEN NOW AND DECEMBER BECAUSE THERE ARE SO MANY UNKNOWNNS.

SO WE'RE GOING TO ASSUME WE'RE GOING TO HAVE TO STAY A FOOT IN RESPONSE AND ANOTHER FOOT IN THE RECOVERY PHASE, AND ALL THE LEVELS FOR THAT.

AND SO BY REALIGNING AND REIMAGINING HOW TO DELIVER SERVICES GOING FORWARD, WE WILL BE ABLE TO SAVE MONEY IN SOME AREAS, YOU KNOW, AND THEN USE IT TO ACCOMMODATE SOME COSTS THAT WE DIDN'T HAVE PLANNED IN THE BUDGET.

AND THE LAST THING IS-- HAS TO DO AGAIN WITH THE CARES ACT MONEY.

WE FEEL CONFIDENT THERE'S ENOUGH MONEY THERE THAT IS GOING TO ALLOW US TO RESPOND, PURCHASE, DO ALL THE CONTRACTS, BUY ALL THE SERVICES THAT WE ALREADY HAVE AN IDEA THAT WE WILL NEED, AGAIN BETWEEN NOW AND DECEMBER, TO BE ABLE TO CONTINUE TO BE IN THE RESPOND MODE.

AND THAT INCLUDES, YOU KNOW, P.P.E.s, INCLUDES OVERTIME, ADDITIONAL STAFF.

IT INCLUDES COSTS ASSOCIATED WITH QUARANTINE AND ISOLATION, TESTING SUPPLIES, YOU KNOW, PAYING FOLKS TO HELP US TEST. YOU KNOW, WE NEED TO DO UNIVERSAL TESTING, ESPECIALLY IN OUR SHELTERS.

SO WE HAVE ALREADY PLANNED FOR THAT TO BE THE CASE.

AND WE'RE GOING TO-- WE'RE COUNTING ON USING THE CARES ACT MONEY FOR THAT.

I SUPPOSE THAT'S THE QUICKEST WAY TO ANSWER THAT QUESTION.

>> GREAT, THANK YOU FOR THAT.

AND I WILL-- I WILL SAY--

ACTUALLY, I HAVE ONE QUICK QUESTION OF JEN AROUND THE NARCAN DISTRIBUTION.

WE NOTICED WE'VE IMPROVED THE AMOUNT OF DISTRIBUTION OVER OUR PERIOD OF TIME.

ARE WE SEEING THAT THAT'S

BECAUSE IT'S IN MORE HANDS OR IS IT BECAUSE THERE'S MORE NARCAN IN ONE PERSON'S HANDS, SO AN INDIVIDUAL REQUIRING MULTIPLE DOSE OF NARCAN, IF THEY'RE EXPERIENCING AN OVERDOSE? AND THAT WILL BE MY LAST QUESTION FOR THIS ROUND.

>> I THINK WHAT WE'RE SEEING IS WE'RE JUST PUSHING OUT NARCAN IN MORE PLACES. THERE ARE MORE CLIENTS COMING IN FOR SERVICES.

WE'RE ISSUING MORE NARCAN BECAUSE THERE IS MORE NEED. WE HAVE ALSO INCREASED THE AREA WHERE WE GIVE OUT NARCAN. PEOPLE LEAVING INCARCERATION AND TREATMENT.

IT'S NOT SO MUCH THAT WE NEED MORE DOSES IT'S WE'RE SEEING MORE PEOPLE ACCESS IT.

>> GREAT.

AND I KNOW THAT THE TRAINING THAT YOU HOST ACROSS THE CITY ARE REALLY GREAT FOR OUR COMMUNITIES TO PARTICIPATE IN. I IMAGINE THEY'RE NOT HAPPENING RIGHT NOW.

BUT THEY ARE GREAT.

I SEE THE GAVEL IS UP.

I'LL SAVE THE REST OF MY QUESTIONS FOR THE NEXT ROUND.

THANK YOU, ALL.

>> THANK YOU, SOWCH, COUNCILOR ESSAIBI GEORGE.

COUNCILOR O'MALLEY, AND THEN IT WILL BE COUNCILOR BRADEN.

COUNCILOR O'MALLEY?

COUNCILOR O'MALLEY?

ARE YOU THERE?

ALL RIGHT.

WE'RE MOVING ALONG QUICKLY TODAY.

SO WE'LL JUMP STRAIGHT TO COUNCILOR BRADEN.

>> THANK YOU FOR ALL THE WORK YOU'RE DOING.

IT'S BEEN REALLY AN AMAZING PROCESS TO WATCH ALL THE GREAT WORK THAT YOU FOLKS ARE DOING. AND IT'S ALSO BEEN GREAT TO HEAR FROM, FIRSTHAND, YOUR RESPONSE TO STEPPING UP TO MEET THE NEEDS

OF OUR MOST VULNERABLE
POPULATION IN THIS INCREDIBLY
DIFFICULT TIME.
TIME.

A CULTURE OF CARING AND
EXTENDING YOUR SKILLS AND
TALENTS TO BUILD-- AND COALITION
BUILDING TO GET THE JOB DONE.
I'M REALLY IMPRESSED.

I JUST, IN TERMS OF WHAT'S
COMING, LIKE, THIS CRISIS-- THIS
COVID CRISIS IS FAR FROM OVER.
I DON'T KNOW, ARE WE MAKING
CONTINGENCY PLANS TO STOCKPILE
P.P.E.s AND BE READY IF
THERE'S A SECOND SURGE SO THAT
WE CAN MEET THAT HEAD ON WHEN IT
HAPPENS?

NOT IF IT HAPPENS, BUT WHEN IT
HAPPENS, IN MY OPINION.
WHAT ARE YOUR CONTINGENCY PLANS
IN TERMS OF BUDGETING,
ET CETERA, FOR THAT?

>> I WAS MUTED, FOR SOME REASON.
SO, YES, TO ALL THE QUESTIONS.
WE-- THERE ARE SO MANY UNKNOWNNS,
RIGHT, ABOUT WHAT MAY HAPPEN--
WHAT MAY HAPPEN WHEN WE GET TO--
IF WE FOLLOW THE STATES PHASES
FOR REOPENING, PHASE ONE, PHASE
TWO, THERE ARE SO MANY UNKNOWNNS.
WE DON'T KNOW WHAT'S GOING TO
HAPPEN.

AND WE DON'T KNOW IF WE ARE
GOING TO QUICKLY SEE CLUSTERS OF
CASES COME UP, AND IF THAT'S
GOING TO TRIGGER CHANGES TO SOME
OF THE RELAXING OF THE RULES.
SO WE ARE GOING TO BE CAUTIOUS,
AS FAR AS EVERYTHING-- WE'RE
GOING TO BE VERY CAUTIOUS.
AND WE'RE GOING TO-- WE'RE
BUDGETING TO BE ABLE TO HAVE
RESOURCES SO WE CAN HAVE THE
ABILITY TO RESPOND.

AND THAT GOES TO, YOU KNOW, FROM
THE TESTING STRATEGY, TO MAKE
SURE WE TEST AS MANY PEOPLE AS
WE CAN.

WHILE WE DO THAT, WE MAKE SURE
THAT WE'RE ALSO CAPTURING
THOSE... THAT ARE STILL THERE
THAT COULD POTENTIALLY BE THE
FOLKS WHEN THINGS REOPEN A

LITTLE BIT MORE, BEGIN TO INTERACT WITH OTHER FOLKS, AND THEN WILL CONTINUE. THERE'S A TESTING STRATEGY. THERE'S ALSO MAKING SURE THAT WE MAINTAIN A LEVEL OF QUARANTINE AND ISOLATION BEDS THAT WILL BE ADEQUATE. AGAIN, BECAUSE WE SEE CLUSTERS, AND WE SEE A LOT OF CASES, WE NEED TO BE ABLE TO ISOLATE FOLKS, AND WE NEED TO BE ABLE TO PROVIDE QUARANTINE, ESPECIALLY FOR COMMUNITY RESIDENTS AND PEOPLE IN CONGREGATE SETTINGS, AS WELL. AND WE ALSO NEED TO MAKE SURE THAT OUR HOSPITALS CAN TREAT FOLKS THAT GET SICK AND THEY NEED ACUTE CARE. SO THE HOSPITALS, YOU KNOW, WE'VE BEEN SO FORTUNATE THAT WE HAVE SUCH EXPERIENCED, WORLD-CLASS HOSPITALS IN BOSTON, THEY'RE NOT ONLY GOOD AT WHAT THEY DO, BUT THEY'RE GOOD AT PREPAREDNESS. WE HAVE A COALITION AND A VERY STRONG NETWORK THAT COMMUNICATES CONSTANTLY. THEY DO MOCKS OF THIS TYPE OF SCENARIOS ALL THE TIME. SO THE REASON WHY WE HAVE NOT SEEN A WORSE SITUATION IN BOSTON IN TERMS OF HOW-- YOU KNOW, HOSPITALS' INABILITY TO CARE FOR FOLKS, OR THE LAST OF I.C.U. BEDS OR LACK OF VENTILATORS, IS BECAUSE OF ALL THE PLANNING THAT HAS GONE INTO THIS. HOSPITALS HAVE BEEN HAVING THESE CONVERSATIONS THEMSELVES. "HOW DO WE BEGIN TO REOPEN AND SERVE OTHER TYPES OF PATIENTS AND OPEN UP OUR PATIENT FACILITIES? HOW DO WE OPEN OUR SURGICAL BEDSES, OUR ORs, WHILE ALSO MAINTAINING THE ABILITY TO ESCALATE AS NEEDED? THAT'S GOING TO BE OUR STRATEGY. PLAN FOR THE FUTURE, BUT BE AWARE OF ESCALATION. AS YOU SAID, THIS HAS BEEN GOING

ON FOR A LONG TIME.
EVEN IF THE SUMMER GOES WELL AND THINGS, YOU KNOW, DON'T GET OUT OF HAND AND WE DON'T SEE CASES START TO INCREASE RAPIDLY, WE DON'T KNOW WHAT'S GOING TO HAPPEN IN THE FALL.
SO WE'RE GOING TO HAVE TO, LIKE, WE HAVE ALL THE SYSTEMS IN PLACE READY TO PUSH THE BUTTON AND ESCALATE THEM QUICKLY, AND HAVE THE RESOURCES TO BE ABLE TO AFFORD TO DO THAT.
>> THANK YOU.
I REALLY DO THINK IT'S AN IMPORTANT OF TEAM WORK AND COLLABORATION.
MANY OF OUR COLLEGES ARE PLANNING TO BRING THEIR STUDENTS BACK ON CAMPUS AT THE END OF AUGUST.
I'M A LITTLE FEARFUL OF THAT, GIVEN THAT WE HAVE TENS OF THOUSANDS OF THOSE STUDENTS LIVING IN OUR NEIGHBORHOODS. AND WE HAVE SOME VERY VULNERABLE ELDERS AND IMMIGRANTS AND LOW-INCOME POPULATIONS HERE THAT ARE MORE VULNERABLE TO THIS DISEASE.
THE COLLEGES ARE PROPOSING TO DO THEIR OWN TESTING, AND I HOPE THAT THEY WILL SHARE THAT DATA WITH YOU FOLKS AND THAT WE WILL BE AND
THAT WE WILL BE ABLE TO STRATEGIZE IF THERE IS A HOT SPOT THAT DEVELOPS FROM A STUDENT POPULATION.
THAT'S MORE OF A RHETORICAL QUESTION.
>> BUT WE HAVE REASSURANCE.
THE STATE HAS DEVELOPED A WORKING GROUP WHO WORK WITH UNIVERSITIES.
THAT WILL GIVE US SOME GUIDANCE. AND ALSO, YOU KNOW, THE MAYOR, YOU KNOW, IS LOSING OUT ON WHAT TO DO, IT'S LOCAL UNIVERSITIES AND THIS WEEK ACTUALLY IS THE COMMUTER COLLEGE, AS WELL, SO WE'RE IN CONVERSATIONS WITH ALL THE SYSTEMS.
THEY'RE ALSO FEELING VERY

CAUTIOUS, YOU KNOW, ASKING QUESTIONS, COMING TO US, ASKING FOR ADVICE.

WE'RE AT THE TABLE WITH THEM, AND YOU KNOW, THINGS -- THESE ARE RESOURCES WITH LOTS OF RESOURCES AND CAPACITY.

SOME OF THEM MAY BE ABLE TO DO A LOT OF WORK ON CAMPUS, YOU KNOW, WITH THEIR INFRASTRUCTURE, AND WE'LL BE THERE TO GUIDE THEM AND TO SUPPORT THEM AND GIVE THEM SOME ADVICE.

OTHER COLLEGES WILL NOT HAVE THAT.

THEY MAY STAY ONLINE OR THEY MAY OPEN UP LATER AT THE BEGINNING OF THE YEAR.

SO THOSE CONVERSATIONS ARE HAPPENING, BUT I SUSPECT THEY WILL HAPPEN FOR THE NEXT MONTH OR SO, AND WE'RE NOT READY TO MAKE DECISIONS ABOUT THAT, BUT THE MOMENT WILL COME.

WE'LL TELL YOU THE DIFFERENCE.

>> THANK YOU.

THANK YOU ALL.

I HEAR THE LITTLE DING-A-LING, SO I HAVE TO GO.

>> THANK YOU, CONTINUES HAIR BREEDON.

NEXT UP COUNCILOR CAMPBELL AND THEN IT WILL BE COUNCILOR JANEY.

COUNCILOR CAMPBELL?

COUNCILOR CAMPBELL, ARE YOU THERE?

>> I'M YELLING, YES, I AM, BUT YOU CAN'T HEAR ME BECAUSE I'M ON MUTE.

FIRST OF ALL, RITA AND JEN, THANK YOU SO MUCH.

JEN, I THANKED YOU LAST BUDGET HEARING FOR YOUR WORK AND YOUR TEAM'S WORK ON THE FRONT LINE BEFORE COVID-19, IN THE MIDST OF COVID-19 TO REALLY APPRECIATE YOU, AND RITA, YOU KNOW, YOU'VE ALWAYS BEEN A DEDICATED EMPLOYEE AT THE HEALTH COMMISSION FOR DECADES.

I APPRECIATE YOU AND YOUR TEAM. CHIEF MARTINEZ I KNOW WAS ON AT SOME POINT.

THANK YOU TO HIM, AS WELL.

I KNOW YOUR JOBS ARE NOT EASY.
LY KEEP THIS SHORT SO WE DON'T
GO TO ANOTHER ROUND, BECAUSE I
KNOW THIS HEARING IS INCREDIBLY
LATE, AND I WOULD LOVE TO ALSO
RESPECT COUNCILOR BOK'S TIME, AS
WELL.

SO THE FIRST -- ACTUALLY, I
THINK ALL OF MY QUESTIONS ARE
DIRECTED TO YOU, RITA, AND
THEY'RE MORE HIGH-LEVEL VERSUS
IN THE WEEDS ON SOME OF THE
BUDGET QUESTIONS.

I CAN ALWAYS E-MAIL.

I KNOW THERE WERE SOME QUESTIONS
THAT WERE SENT BACK AND FORTH TO
SAVE TIME HERE.

BUT OBVIOUSLY YOU TALKED ABOUT
AND HAVE BEEN ON NOAM ROUSE
CALLS AROUND THE INEQUITIES OF
COVID-19 AND THE HEALTH
DISPARITIES THAT EXISTED IN THE
COMMUNITY WHICH ARE NOW
EXACERBATED BY THIS.

I'M CURIOUS, FROM YOUR
PERSPECTIVE, WHERE DO YOU THINK
WE SHOULD BE MAKING THE GREATEST
INVESTMENTS?

THAT'S ONE QUESTION.

AND ANOTHER IS WHAT ARE THE TOP
STRATEGIES THAT YOU THINK WE
NEED TO BE INVESTING IN TO
ERADICATE THOSE HEALTH
DISPARITIES THAT WE'VE BEEN
TALKING ABOUT FOR SO LONG?

AND THEN MY LAST QUESTION HAS TO
DO WITH... THIS EXISTED BEFORE,
BUT NOW YOU'RE SEEING IT, HOW
DIFFICULT IT IS FOR SOME

RESIDENTS SOMETIMES TO NAVIGATE
THE VARIOUS HEALTH SYSTEM, THE
HOSPITAL, COMMUNITY HEALTH
CENTERS, OUR CITY, YOU NAME IT.

AND, YOU KNOW, THE HEALTH
INSURANCE PIECES OF IT, TOO.

HAVE YOU GUYS CONSIDERED OR HAS
THE COMMISSION CONSIDERED
INVESTING IN HEALTH NAVIGATORS,
FOLKS IN THE COMMUNITY LIKE A
TEAM OF FOLKS WHO ARE ALSO
MULTILINGUAL TO HELP RESIDENTS
NAVIGATE WHAT CAN SOMETIMES BE
VERY COMPLEX PROCESSES IN ORDER
TO BE SERVED?

THOSE ARE MY QUESTIONS.
THANK YOU, RITA, AND JEN, THANK
YOU AND YOUR TEAM TREMENDOUSLY.
>> I'LL TRY TO ANSWER WHAT YOU
ASKED.

SO IN TERMS OF HEALTH
STRATEGIES, I THINK THAT RIGHT
NOW IN TERMS OF INEQUITIES IN
TERMS OF SOME OF THE
CONVERSATIONS WE'VE HAD WITH THE
TASK FORCE, I THINK WE NEED TO
CONTINUE TO CONCENTRATE ON
ENSURING THAT WE'RE MAKING
TESTING ACCEPTABLE TO FOLKS.
WE HAVE A TESTING TRACT THAT HAS
TO DO WITH BEING CONCENTRATED ON
PROVIDING ACCESS THE GROUPS BY
COVID-19, BUT WE HAVE EVIDENCE
THAT INFECTION RATES ARE LOW AND
IN HIGH-DENSITY AREAS, YOU KNOW,
THERE IS A LARGE AREA THERE, AND
WE ALSO HAVE EVIDENCE THAT A LOW
TESTING NUMBERS.

WE ALSO HAVE VULNERABLE GROUPS
IN SETTINGS, LIKE SHELTERS.

>> SORRY, RITA.

I PROBABLY WASN'T CLEAR.

I APOLOGIZE, BECAUSE IT'S BEEN A
LONG DAY.

IT WAS REALLY LOOKING PAST
COVID, ALL OF THOSE UNDERLYING
DISPARITIES, WHAT'S THE TOP
STRATEGY TO ADDRESS THOSE, WHICH
CONTINUE TO BE CONVERSATIONS FOR
DECADES, RIGHT?

>> YEP.

>> AND WHERE DO WE MAKE THE
GREATEST INVESTMENT TO
COMPLEMENT THOSE STRATEGIES WHEN
THEY DID SOMETHING DIFFERENT.

AND THIS IS REALLY LOOKING
BEYOND COVID, WHICH I'M
CONFIDENT, YOU KNOW, WE'LL GET
OF THIS.

THANK YOU.

>> IT MAY BE BEYOND CROWDED, BUT
IT NEEDS THE START AT SOME POINT
WE NEED TO HAVE THE
CONVERSATIONS AND HOPEFULLY HAVE
LESSONS LEARNED AND WE
INCORPORATE IN OUR PLANNING HOW
WE CAN IN A MORE SYSTEMATIC WAY
START ADDRESSING SOCIAL
DETERMINANTS OF HEALTH.

ONE THING THAT HAS BEEN -- THE COVID-19 RESPONSE HAS REALLY FACILITATED IS THE DEPARTMENTAL COME KNEW TRACES ABOUT EACH ONE. SO I'M SURE YOU'VE HEARD THAT EVERY MORNING AT 8:00 A.M., THERE'S A CALL WITH THE MAYOR, AND I DON'T KNOW, THEY'RE ALL HAVING CHIEFS AND DEPARTMENT HEADS AND OTHERS AND LEADERSHIP. AND WE'RE ALL TALKING ABOUT THE PROBLEMS EMERGING, AND THOSE THAT WE KNOW HAVE BEEN THERE BECAUSE OF COVID-19 AND THAT, YOU KNOW, DEALING WITH ISSUES AROUND HOUSING AND FOOD ACCESS AND ALL THOSE THINGS.

I THINK ONE STRATEGY GOING FORWARD IS MAYBE TAKE LESSONS FROM WHAT WE'RE ABLE TO DO TOGETHER AS A LARGER TEAM, BECAUSE I THINK IT'S PROVEN HOW POWERFUL IT CAN BE WHEN WE COME TOGETHER.

AND FIGURE OUT A WAY TO STOP WORKING INSIDE THOSE, BECAUSE THAT'S HOW THE SIGNAL WENT, THE GOVERNMENT TENDS TO OPERATE. FROM THESE TWO CATEGORIES FOR THE MOST PART.

WE'RE ALL GOING TO OUR AREAS OF EXPERTISE.

WE EARN MONEY AND TRY THE MAKE AN IMPACT.

WE KNOW THAT IN ORDER TO MAKE AN IMPACT AND REALLY ACHIEVE SOME HEALTH EQUITY, WE'RE GOING TO HAVE TO FIGURE OUT WAY TO COME TOGETHER.

SO I WONDER, YOU KNOW WHAT, STRATEGY TO KEEP UP, TO FIGURE OUT A WAY TO KEEP SOME OF THE ELEMENTS OF THE PROLIFERATION THAT'S HAPPEN, GOING FORWARD SO WE CAN HAVE HEALTH AND EQUITY GOING FORWARD.

>> AND MY LAST PIECE, AUBURN WE CAN FOLLOW-UP, I KNOW THEY'RE BIG QUESTIONS, TOO, BUT ON THE HEALTH NAVIGATOR'S PIECE, AND THAT'S MY LAST QUESTION.

THANK YOU, RITA.

THANK YOU, COUNCILOR BOK.

>> SO WE HAVE ONE IDEA THAT

WE'RE CONSIDERING THAT WILL BE PART OF OUR -- SO ONE IDEA, JERRY BY MY SIDE IS REMINDING ME THAT WE RUN THE MAYOR'S HEALTH LINE, AND WE HAVE NAVIGATOR IN THE SENSE OF PEOPLE WHO CAN CONNECT US TO HEALTH INSURANCE AND OTHER SERVICES, AND THOSE SERVICES CAN BE DONE BY PHONE. AND ALSO BE WORKING ON THOSE SERVICES.

BUT THE IDEA WE HAVE AS PART OF OUR RECOVERY PLANNING AND GOING FORWARD INTO THE FUTURE IS TO FIGURE OUT WHETHER WE CAN CREATE THIS ONE-STOP & STOP SHOP FOR RESOURCES WE KNOW PEOPLE ARE GOING TO MEAN, BECAUSE THERE'S FOOD INSECURITY, HEALTH INSECURITY, ECONOMIC INSECURITY, LACK OF INSURANCE.

THEY CAN CALL AND MAYBE THESE THINGS CAN BE IN NEIGHBORHOODS SO WE CAN, YOU KNOW, IMPLEMENT THAT NAVIGATOR TYPE CONTEST.

>> THANK YOU, RITA.

>> YOU'RE WELCOME.

[BABY CRYING]

>> AIDEN SAYS THANK YOU, IN HIS WAY.

THANK YOU.

THANK YOU COUNCILOR CAMPBELL AND AIDEN.

NEXT UP IS COUNCIL PRESIDENT JANEY.

COUNCILOR JANEY.

AND THEN COUNCILOR FLAHERTY.

COUNCILOR JANEY?

>> HOW ARE YOU?

CAN YOU HEAR ME?

>> YES, WE CAN HEAR YOU GREAT.

>> YES.

THANK YOU SO MUCH, DIRECTOR NIEVES.

THIS IS HELPFUL.

I WAS NOT ABLE TO PARTICIPATE IN A WORKING SESSION, MADAM CHAIR, SO FORGIVE ME FOR NOT HAVING PRESENT QUESTIONS.

IS THIS THE AREA WHERE THERE ARE SOME OF THE GRANTS FOR ANTI-VIOLENCE AND PREVENTION?

>> ARE YOU TALKING ABOUT THE NTT?

>> I DON'T KNOW THE ACRONYM?

>> THE NAME --

>> THE COMMITTEE FOR VIOLENCE PREVENTION?

>> YES, WE HAVE A WHOLE DIVISION ON VIOLENCE PREVENTION.

>> YES.

>> THAT'S PART OF OUR CHILD AND FAMILY

>> TO FOLLOW UP, IF YOU HAVE ANY INFORMATION NOW, THAT WOULD BE GREAT.

I'M WONDERING JUST ON HOW THESE PROGRAMS ARE EVALUATED, HOW MUCH MONEY THEY'RE GETTING, WHAT THEIR SUCCESS RATES RUSSIA WHAT PROGRESS WE'RE MAKING, HOW WE CAN RAMP UP AND SCALE UP ANYTHING THAT WE REALLY SEE THAT SUCCESS AND CERTAINLY IF THERE ARE AREAS WHERE WE'RE NOT SEEING SUCCESS, OBVIOUSLY REDIRECT THE RESOURCES.

AND SO THIS -- I WOULD APPRECIATE THE INFORMATION REGARDING THIS AREA.

>> SURE.

SO WE WILL BE MORE THAN HAPPY. WE COULD PUT UP A CALL, SO WE CAN GIVE YOU AN ORIENTATION ON THE WHOLE PORTFOLIO.

SO WE'RE HAPPY TO SCHEDULE A CALL WITH YOU AND ALSO SEND YOU INFORMATION SHARING OUR IDEAS. WE'RE TAKING NOTES, AND WE WILL BE HAPPY TO SEND YOU SOME STUFF SO YOU CAN READ AHEAD OF TIME, AND THEN WE'LL BE HAPPY TO SET UP A TIME.

>> THAT WOULD BE WONDERFUL.

I APPRECIATE THAT, I DO INDEED.

AND ONE OF THE AREAS OF CONCERN IS AROUND TRAUMA AND JUST THE SOCIAL, EMOTIONAL WELLNESS.

CERTAINLY OF ALL OF OUR CITY EMPLOYEES AND FOLKS IN OUR COMMISSIONS AND EVERYTHING, BUT I THINK PARTICULARLY ABOUT OUR FAMILIES AND OUR CHILDREN WHO EXPERIENCE THIS, AND I THINK ABOUT THEM SHOWING UP TO SCHOOL AND ONE QUESTION I ASK IN BUDGET HEARINGS IS, YOU KNOW, AROUND WHAT KIND OF SYSTEM CAN WE BUILD

TO ENSURE BETTER WRAPAROUND SERVICES FOR CHILDREN WHEN THEY SHOW UP IN SCHOOLS AND SCHOOLS THAT MAY NOT -- BECAUSE OUR CHILDREN GO TO SO MANY DIFFERENT SCHOOLS, THEY CAN LIVE ON ONE STREET WHERE AN INCIDENT HAPPENED, BUT THEY CAN SHOW UP TO 10, 20 DIFFERENT SCHOOLS, WHICH MAY OR MAY NOT BE AWARE OF WHAT TRANSPIRED.

AND, SO YOU KNOW, I WONDER HOW WE SET UP A COMMUNICATION LINE AND HOW WE USE TECHNOLOGY TO HELP GET THE WORD OUT TO ANY OF THE SCHOOLS WHERE CHILDREN IN A PARTICULAR GEOGRAPHIC AREA HAVE EXPERIENCED THIS SO THAT THEY ARE, YOU KNOW, BETTER PREPARED. I KNOW MANY OF THEM HAVE ADOPTED TRAUMA SENSITIVE LEARNING AND ARE TRYING THEIR BEST TO BE TRAUMA INFORMED AND RESPONSIVE, BUT I JUST WONDER IF THERE IS A WAY TO SET UP A COMMUNICATION SYSTEM USING TECHNOLOGY TO GET THE WORD OUT, AND I SEE CERTAINLY THE PUBLIC HEALTH COMMISSION IS BEING, YOU KNOW, CRITICAL TO THE SUCCESS OF SOMETHING LIKE THIS.

I WONDER IF YOU JUST HAD ANY INITIAL THOUGHTS ON WHAT WE CURRENTLY THIS AND HOW WE MIGHT RAMP THAT UP JUST THE MAKE SURE WE'RE NOT HAVING CHILDREN WHO FALL THROUGH THE CRACKS.

>> YEAH.

YOU'RE RIGHT.

THE CHALLENGE OF HAVING CHILDREN WHO MAY BE IN A NEIGHBORHOOD OR GO TO ANOTHER SCHOOL IS COMPLETELY DIFFERENT FROM THE CHALLENGE.

THE TYPES OF WORK WE DO, WE WANT SIX NEIGHBORHOOD TRAUMA TEAMS IN DIFFERENT PARTS OF THE CITY.

PART OF THE WORK THEY DO HAVE -- HAS TO DO A LOT WITH HOW TO RESPOND IN THE INSTANCES OF VIOLENCE IN A PARTICULAR PLACE THAT.

INCLUDES NOT ONLY THAT NEIGHBORHOOD IN PARTICULAR, BUT

ALSO IN SCHOOLS WHICH SOMETIMES UNFORTUNATELY WE HAVE HAD INCIDENTS OF VIOLENCE RIGHT OUTSIDE OF SCHOOLS THAT HAVE STUDENTS, FOR EXAMPLE.

SO PART OF THE WORK THEY DO IS CONNECT NOT ONLY WITH THE NEIGHBORHOODS AND RESIDENCE IN THAT AREA, BUT NEARBY.

SO THAT COULD BE ON REACH THROUGH MATERIALS THAT WE CAN BRING.

WE HAVE MENTAL HEALTH COUNCILORS AND WE HAVE FOLKS THAT DO -- THAT ALREADY DO SOME OF THAT WORK.

OF COURSE, YOU KNOW, WE COULD NEVER... GROWING UP IN THAT AREA, YOU ALSO HAVE HEALTH EDUCATION IN OTHER SCHOOLS. ALL TOGETHER, YOU KNOW, I DON'T HAVE THE NUMBER IN FRONT OF ME, BUT I THINK WE HAVE ABOUT FOUR OR FIVE LOCATIONS, AND WE TALK ABOUT SIX OR SEVEN, AND IN THOSE SCHOOLS, WE HAVE MENTAL HEALTH COUNCILORS THAT ARE IN SCHOOL AND IT'S CONNECTED WITH STAFF AND FACULTY AND MEDICAL PERSONNEL, AND WE DO HEALTH EDUCATION, WE DO COMMON FORMS, WORDS, THEY TALK ABOUT WORKSHOPS.

THEY DO A NUMBER OF THINGS THAT IS MORE HARD TO MENTION, BUT IT ALSO COMES VERY USEFUL WHEN THERE ARE PEOPLE THAT ARE AFFECTED IN THE SCHOOL COMMUNITY, BECAUSE WE HAVE RESOURCES.

WE CAN MOVE THEM TO ANOTHER SCHOOL.

THERE IS A SOURCE OF SUPPORT, A SOURCE OF INFORMATION THAT THE SCHOOLS CAN COUNT ON.

BUT, YOU KNOW, WE HAVE SO MANY SCHOOLS IN THE SYSTEM, AND THAT IS AN AREA THAT OBVIOUSLY WILL BE LOOKED AT AT SOME POINT.

THERE'S A LOT OF GROUND TO COVER

>> I APPRECIATE, THAT AND I APPRECIATE YOUR WORK.

AND I'VE HAD THE OPPORTUNITY TO GO ON THE WALK.

I APPRECIATE YOUR WORK.
I SEE GAVEL IS UP.
I WANT TO RESPECT THE TIME AND
THE HOUR, SO THANK YOU, THANK
YOU TO YOUR TEAM.
CONTINUE TO BE SAFE.
THANK YOU, MADAM CHAIR.
>> THANK YOU.
>> GREAT.
THANK YOU SO MUCH, MADAM
PRESIDENT.
NEXT UP IS COUNCILOR FLAHERTY,
AND THEN IT WILL BE COUNCILOR
BAKER.
>> THANK YOU, MADAM CHAIR.
IT'S GOOD TO SEE EVERYONE.
RITA, THANK YOU FOR YOUR TIME
AND TALENTS.
LITTLE DID YOU KNOW WHEN YOU
WERE HIRED IN DECEMBER THAT YOU
WOULD EMBARK ON A COVID-19
MISSION, BUT WE ARE SO LUCKY TO
HAVE YOU
>> THANK YOU.
>> YOU'RE A STANDOUT IN YOUR
FIELD, AND, OF COURSE, I GOT TO
GIVE A SHOUT-OUT TO CHIEF
MARTINEZ.
HE'S BEEN AWESOME ON THE PHONE
WITH US EVERY MORNING.
NOT QUITE SURE HOW MUCH SLEEP
EITHER OF YOU ARE GETTING, BUT
JUST WANT TO LET YOU KNOW WE
APPRECIATE IT AS MEMBERS OF THE
BOSTON CITY COUNCIL, BUT ALSO
MEMBERS OF THE PUBLIC HAVE ALL
COMMENTED ON OUR RESPONSE AND
IT'S BEING FACILITATED BY PUBLIC
HEALTH OFFICIALS LIKE YOURSELF
AND THE CHIEF.
AND THE OPIOID CRISIS IS NOT
IMMUNE TO THIS.
SO JEN AND HER TEAM, THEIR WORLD
HAS CHANGED SIGNIFICANTLY, SO A
SHOUT-OUT TO HER, AS WELL.
HOPEFULLY WHAT CAN COME OUT OF
THIS, IF IT EVER BOOMERANG, WE
REALLY ALL -- AND I'VE
CHALLENGED MY COLLEAGUES IN
THEIR RESPECTIVE DISTRICTS TO,
TRY TO GET AS MANY PEOPLE AS
THEY CAN, THEIR CONSTITUENTS ON
THE HEALTHCARE ROLLS.
IT'S REIMBURSABLE CARE, AND THAT

WILL GO A LONG WAY TO HELPING
OUR HOSPITALS AND HEALTHCARE
CENTERS, IF THEY CAN GET A
PRIMARY CARE PHYSICIAN SOME WHEN
WE'RE DOING FOOD DISTRIBUTION OR
WHEN WE'RE GETTING THE TESTING
SITES, WE OUGHT TO HAVE A THIRD
LINE ENGAGING FOLKS AND GETTING
THEM ON THE HEALTHCARE ROLLS.
WE ARE GOING TO MISS A HUGE
OPPORTUNITY IF WE DON'T DO THAT.
I GO BACK TO COUNCILOR KELLY AT
THE TIME.

WE GOT FOLKS IN OUR NEIGHBORHOOD
TO SIGN UP FOR OUR LOCAL
COMMUNITY HEALTH CENTER.

I THINK THAT'S PAYING DIVIDENDS
IN THIS COVID-19 RESPONSE.

A LOT OF THE FOLKS IN PUBLIC
HOUSING DID NOT HAVE HEALTHCARE
BUT THEY HAVE WORKED HARD.

SO THAT'S MY OPINE.

I HAVE ALSO BEEN A STRONG
ADVOCATE OVER THE YEARS ON ORAL
HEALTH AND ORAL HEALTH CARRIERS
THAT ARE VULNERABLE IN
UNDERSERVED POPULATIONS.

AND ALSO, IT CAN LEAD TO OTHER
MAJOR HEALTH ISSUES SOME IF
WE'RE TALKING ABOUT, YOU KNOW,
HEALTHCARE AND R INEQUITY AND
WE'RE TALKING ABOUT DISPARITY
AND PREEXISTING CONDITIONS, YOU
CAN TRACE A LOT OF IT BACK TO
ORAL HEALTH.

SO I THINK THAT THE BUDGET IS
\$5.7 MILLION.

AND I JUST WANT TO GET A SENSE.
HOW IS COVID-19 IMPACTING THIS
OFFICE'S WORK, PARTICULARLY THE
OFFICE OF ORAL HEALTH, GIVEN
THAT A LOT OF FOLKS CAN'T SEE
THEIR DENTIST.

DENTISTS ARE ARGUABLY SHUT DOWN.
I'M CONCERNED ABOUT THOSE
LONG-TERM IMPACTS THAT WILL
HAVE.

THEN ALSO AFTER, THAT I WANT TO
SHIFT GEARS TO THANK THEM FOR
THE HARD WORK THEY'RE DOING, AND
THE ACCESS TO CARE.

I KNOW THAT THE SECTION 35s
HAVE BEEN WORKING.
THEY'RE IN A NEW FORM.

I'VE BEEN HAVING SOME SUCCESS WITH THAT.
BUT ALSO I WANT TO CONTINUE TO ADVOCATE THAT WHEN WE ADMINISTER NARCAN, THAT SHOULD BE SOME TYPE OF RECORDING EVENT AND/OR TRANSPORT FOR THE HOSPITALS. THERE ARE A LOT OF FOLKS THAT OVERDOSED. THEIR OWN LOVED ONE, THEIR FAMILY MEMBERS DON'T EVEN KNOW ABOUT THE EVENTS AND/OR THE ABILITY TO JUMP IN AND TRY TO GET TREATMENT.
SO I KNOW WHEN WE ADMINISTER NARCAN ON THE STREET, THE INDIVIDUAL JUMPS UP LIKE JACK-IN-THE-BOX AND IN MANY INSTANCES JUST WALKS AWAY. WE'RE ALMOST POWERLESS. I WOULD LOVE TO HAVE A SYSTEM WHERE WE ADMINISTER NARCAN IT'S A MANDATORY TRANSPORT TO THE HOSPITAL AND TRY TO WRAP OURSELVES AROUND THEM FOR TREATMENT AND RECOVERY. AT THE VERY LEAST LET THEIR LOVED ONES KNOW ABOUT THE EVENT SO THEY'RE ON NOTICE SO THEY CAN DO WHAT THEY CAN AS FAMILY MEMBERS.
THAT'S IT WITH ME.
TOUCH BASE ON ORAL HEALTH AND TOUCH BASE ON RECOVERY.
THANK YOU.
>> COUNCILORS, ORAL HEALTH, I THINK THE AMOUNT THAT YOU SEE IN THE BUDGET, I BELIEVE HAS TO DO WITH THE ORAL HEALTH FUNDING THAT COMES TO US. AND THOSE ARE FOR CONTRACTS THAT WE PUT OUT INTO THE COMMUNITY.
>> I'M LOOKING TO SEE IF YOU HAVE ANY INFORMATION.
>> RITA, I CAN AMEND IT JUST THE SAY, I GUESS WHAT IS... I GUESS... I KNOW THERE ARE A LOT OF COMMUNITY PARTNER, BUT MAYBE I CAN ASK A QUESTION ON WHAT'S THE OVERALL BUDGET FOR THAT OFFICE?
I KNOW THAT OFFICE OF BOARD OF HEALTH LOOKS LIKE IT'S \$5.7 COMMUNITY INITIATIVE BUREAU

BUDGET, BUT I WOULD LIKE TO KNOW.

>> SORRY.

WE'RE JUST PLAYING A LITTLE AROUND HERE.

SO WE'LL GET YOU THAT BUDGET FOR THE OFFICE OF ORAL HEALTH.

WE ACTUALLY HAVE TWO PROGRAMS.

ONE IS IN THE RYAN WHILE PROGRAM, AND THE OTHER IS IN THE COMMUNITY BUREAU.

WE'LL GET THAT INFORMATION OUT TO YOU AND MAKE SURE.

>> THANK YOU VERY MUCH, AND THROUGH THE CHAIR, IF YOU COULD GET THAT INFORMATION, THAT WOULD BE WONDERFUL.

AND THEN JEN, MAYBE ON THE RECOVERY, JUST THE NARCAN, IN MY OPINION, OR THE PUBLIC HEALTH POSITION ON WHETHER IT SHOULD BE A REPORTING EVENT.

>> THANK YOU, COUNCILOR.

TO ADDRESS THAT, OUR RESPONSE TEAM OFTEN GOES INTO HOMES AND TALKS TO FAMILY MEMBERS, AND THAT'S BEEN A VERY SUCCESSFUL INTERVENTION, PROVIDING INFORMATION AND EDUCATION.

RIGHT NOW THERE ARE HIPAA LAWS PROHIBITING US DOING THE

NOTIFICATION, BUT I WILL SAY

THAT I THINK WE HAVE BEEN REALLY SUCCESSFUL WITH OUR TEAM

FOLLOWING UP ON OVERDOSES AND PROVIDING INFORMATION AND

EDUCATION, EVEN DURING COVID-19,

WHEN WE WEREN'T DOING

FACE-TO-FACE FOLLOWUPS, WE PUT

THAT ON HOLD DURING COVID-19,

BUT WE CONTINUE TO WORK WITH THE

FIRE DEPARTMENT AND OUR TEAM

HERE AT PUBLIC HEALTH TO GO INTO

NEIGHBORHOODS, DROPPING

INFORMATION EDUCATION FOR

INDIVIDUALS AND THEIR FAMILIES.

>> THANK YOU, JEN.

THANK YOU, MADAM, CHAIR.

>> THANK YOU SO MUCH, COUNCILOR FLAHERTY.

NEXT UP, COUNCILOR BAKER, AND

THEN IT WILL BE COUNCILOR

ARROYO.

COUNCILOR BAKER.

>> THANK YOU, MADAM CHAIR.
I JUST MORE WANT TO SAY THANK
YOU TO RITA, THANK YOU TO JEN,
AND THANK YOU TO DEVIN THERE.
THE WORK THAT'S HAPPENED IN THE
PAST, I HAVE BEEN ON THE
COUNCIL, I'M IN MY NINTH YEAR,
THE WAY WE USED TO DEAL WITH
HOMELESS AND THE WAY WE USED TO
DEAL WITH PEOPLE WITH SUBSTANCE
ABUSE ISSUES, IF WE WERE STILL
DOING THOSE THINGS TODAY, WE
WOULD BE FARCE WORSE OFF.
AND THE FACT THAT WE HAVE HAD
THESE NUMBERS, SO MANY
ADDITIONAL PEOPLE ON OUR STREETS
AND WITH MUCH MORE COMPLEX
ISSUES, THAT WE'RE ACTUALLY ABLE
TO, YOU KNOW, MAKE STRIDES IN
WHAT YOU GUYS ARE DOING.
SO THAT'S, YOU KNOW, A GREAT
THING YOU GUYS ARE DOING.
I JUST WANT TO MAKE SURE THAT I
SAID THAT TO YOU, BECAUSE I
REMEMBER THE WAY I USED TO DO
IT, THE FIRST THING I FILED FOR
A CITY COUNCILOR IS FOR A 311
LINE FOR US TO BE ABLE TO
CONNECT PEOPLE TO HELP, WHETHER
IT WAS FAMILY MEMBERS LOOKING TO
GET SOMEONE INTO A DETOX OR
ANYTHING ALONG THOSE LINES.
WE HAVE COME SO FAR, AND IT'S
DUE TO YOU GUYS.
SO THANK YOU FOR THAT.
AND I JUST CAN'T STRESS ENOUGH
THE IMPORTANCE OF OUR NEXT STEP,
WHICH IS LONG ISLAND, AND I
DON'T HAVE TO SAY LET'S STAY ON
TOP OF IT, LET'S KEEP MOVING
ALONG, BECAUSE I KNOW YOU GUYS
ARE.
I JUST THINK WHEN WE'RE ABLE TO
GET THAT LONG ISLAND CAMPUS
OPEN, WE'LL BE ABLE TO REALLY
DELIVER LONG-TERM CARE TO PEOPLE
THAT NEED IT, AND THAT'S ABOUT
IT FOR ME.
THANK YOU GUYS.
RITA, YOU'VE BEEN AROUND A LONG
TIME, AND YOU KNOW, YOU'VE JUST
BEEN GREAT.
SO THANK YOU ALL.
AND THAT'S IT FOR ME.

THANK YOU, MADAM CHAIR.

>> THANK YOU, COUNCILOR.

>> GREAT.

THANK YOU, COUNCILOR BAKER.

RITA, DO YOU HAVE ANY COMMENTS
ON THAT?

>> ACTUALLY, SHE'S GOING THE
LEAD ON LONG ISLAND, SO KIM, DO
YOU WANT TO DO THAT UPDATE?

>> I'LL IN THE SURE WHAT THE
QUESTION WAS.

>> JUST STAY FOCUSED ON LONG
ISLAND.

I KNOW YOU ARE FOCUSED.

MAYBE WHAT'S OUR NEXT STEP?

WHAT IS OUR BIG NEXT HURDLE?

>> SO OUR ROLE IN THE MASTER
PLANNING PROCESS, WE HAVE NOT
SKIPPED A BEAT WITH COVID.

WE CONTINUE TO MEET AT LEAST
ONCE WEEKLY, SOMETIMES MORE THAN
ONCE WEEKLY TO CREATE THE
COMPREHENSIVE RECOVERY CAMPUS,
WHICH INCLUDES LEVELS OF CARE,
AND SERVICES AND WRAPAROUND
SERVICES, AND LOOKING AT THE
BUILDING, THEY ARE ACTUALLY
WORKING ON THE LONG ISLAND
CAMPUS IN ALL ASPECTS.

SO WE'RE STILL AT IT, AND WE'RE
VERY HOPEFUL THAT WE'LL BE ABLE
TO MOVE FORWARD AND GET TO THE
NEXT LEVEL, AND AT SOME POINT
THAT'S A PROCESS FOR THE BRIDGE.
WE'LL MOVE FORWARD, AND WE'LL BE
READY WHEN THAT HAPPENS.

>> THANK YOU.A-THANK YOU, EVERYBODY.

>> THANKS SO MUCH, COUNCILOR
BAKER.

NEXT UP IS COUNCILOR ARROYO, AND
THEN IT WILL BE COUNCILOR MEJIA
AND THEN COUNCILOR FLYNN.
COUNCILOR ARROYO?

>> THANK YOU, MADAM CHAIR.

THANK YOU BOTH, GENERAL -- JEN
AND REE TAMP I THINK I WILL BE
ABLE TO DO THIS IN ONE ROUND.
SO I WANT TO JUMP RIGHT INCH I
APPRECIATE THE QUESTIONS ABOUT
TRAUMA THAT COUNCILOR AND
PRESIDENT JANEY BROUGHT UP.
JUST SPECIFICALLY ON CULTURAL
COMPETENCY WHEN IT COMES TO
COUNSELING, LANGUAGE ACCESS WHEN

IT COMES TO TRAUMA RESOURCES AND ALL OF THOSE IMPORTANT THINGS, THERE'S A LOT OF TRAUMA THAT I THINK FEEDS INTO A LOT OF THE INEQUITIES THAT WE SEE, AND SO IN WHAT WAYS DOES THIS BUDGET SERVE TO MAKE, YOU KNOW, MAKE TRAUMA RESOURCES AND COUNSELING RESOURCES MORE ACCEPTABLE FOR COMMUNITIES OF COLOR AND COMMUNITIES THAT SPEAK LANGUAGES OTHER THAN ENGLISH WOULD BE ONE QUESTION.

SECOND, THE SECOND QUESTION I HAVE IS SIMILAR.

HOW IS THE BOSTON PUBLIC HEALTH COMMISSION SUPPORTING RESIDENTS' MENTAL HEALTH, WHICH I KNOW COUNCILOR BRAYDEN MENTIONED, SO SPECIFICALLY THIS THIS BUDGET, HOW IS THAT REFLECTED?

AND THIRD, IS THERE ANY PART OF THIS SPECIFIC BUDGET THAT LOOKS SPECIFICALLY AT WAYS IN WHICH WE CAN ADDRESS HEALTH INEQUITIES THAT ARE BASED ON RACE AND ETHNICITY, AND THEN FINALLY, IS THERE ANYTHING NOT FUNDED, AND THIS IS FOR BOTH PARTY, IS THERE ANYTHING NOT FUNDED BY THIS BUDGET THAT YOU WOULD LIKE ADDITIONAL FUNDING TO DO?

SO IS THERE ANY PROGRAM OR SPECIFIC AREA THAT YOU WOULD LIKE TO SEE MORE FUNDING THAN IS CURRENTLY ALLOTTED IN THIS BUDGET?

SO THAT'S -- IF THERE WAS ANYTHING YOU WOULD GO TO BAT FOR, WHAT WOULD IT BE?

THAT'S FOR BOTH OF YOU.

AND WITH THAT, THOSE ARE MY QUESTIONS.

THANK YOU BOTH IN ADVANCE.

>> THANK YOU, COUNCILOR ARROYO.

SO A COUPLE OF THINGS ABOUT THE CULTURAL COMPETENCE WORK, SO WE HAVE A DIVISION THAT'S CALLED THE TRAINING INSTITUTE.

WE HAVE DEDICATEED GROUP OF TRAINERS THAT WORK REAL CLOSELY WITH THE COMMUNITY TO QUIZ THEM ON HOW TO DO COMMON TRAINING AND CARE.

SO, YOU KNOW, IN THIS TRAINING, THEY'RE DONE IN THAT TRADITIONAL COMMUNITIES OF COLOR AND THAT HAVE LANGUAGE CAPACITIES TO SERVE, YOU KNOW, FOLKS THAT ARE NON-ENGLISH SPEAKERS.

SO THAT'S ONE OF THE THINGS THAT WE DO TO INCREASE CAPACITY AND INVEST IN THE CAPACITY OVER COMMUNITIES THAT WILL BE ABLE TO DELIVER THAT KIND OF CULTURAL COMPETENCE, TRAINING AND SUPPORT FOR OUR COMMUNITIES.

BUDGET, IN TERMS OF HEALTH EQUITY, IT IS... IT FUNDS THE WHOLE HEALTH COME BONE.

YOU ALREADY KNOW THAT WE'VE HAD A HEALTH EQUITY OFFER FOR US OVER 12 YEARS, AND MUCH OF THE WORK WE HAVE DONE HAS BEEN TO REALLY BUILD CAPACITY IN THE PUBLIC HEALTH COMMISSION SO WE CAN ENSURE THAT ALL THE WORK THAT OUR PROGRAM DOES AND EVERYTHING THAT WE DELIVER ARE DONE WITHIN A HEALTH EQUITY APPROACH.

IN THE LAST, YOU KNOW, YEAR, WE DEVELOPED A COMMUNITY ENGAGEMENT PLAN THAT IS MEANT TO REALLY ENSURE THAT ALL OF OUR PROGRAMS AND ALL SERVICES EITHER CREATE THAT EXPECTATION THAT FOR ANY OF US TO DO ANYTHING, WHETHER IT'S CREATING A NEW PROGRAM OR ANYTHING, WE NEED TO MAKE SURE THE RIGHT COMMUNITY ENGAGEMENT HAPPENS AND THAT WE BUILD SYSTEMS TO BRING TO THE TABLE RESIDENTS THAT WILL BE THE RECIPIENTS OF THE SERVICES THAT WE'RE GOING TO PROVIDE.

SO WE ALSO HAVE SOME... THE HEALTH OFFICE HAS JUST CREATED A PROGRAM FOR CHAMPION, AND AN ADVISORY GROUP THAT WE CREATED IN THE SECOND ROUND.

COMMUNITY FOLKS FROM DIFFERENT AREAS, ECONOMIC, RACIAL, ETHNIC BACKGROUNDS, AND THIS IS THE GROUP THAT OUR BOARD OF HEALTH AND SOME OF OUR OTHER PROGRAMS MEET AROUND PROGRAMMING AND ANYTHING WE HAVE TO DO THAT WE

WANT THE MAKE SURE THAT THERE'S
COMMUNITY AND CONSUMER VOICE AND
INPUT.

SO OUR BUDGET, THE THING THAT
YOU WILL FIND IN OUR BUDGET
THAT'S DISTINCTLY ABOUT HEALTH
EQUITY IS ALL THE HEALTH EQUITY
THAT HAPPENED IN THE OFFICE.
AND WHAT'S NOT FUNDED, THIS IS
IN GENERAL TERMS I IMAGINE THE
QUESTION.

I THINK, YOU KNOW, WE WERE ABLE
TO GET MOST OF OUR INVESTMENTS
COVERED IN THE BUDGET THAT WE
SUBMITTED.

WE GOT SOME DOLLARS TO THWART
OUR TRAINING INSTITUTE AND SOME
OF OUR INFRASTRUCTURE ON THEIR
VIOLENCE PREVENTION, AN WE ALSO
GOT, YOU KNOW, RECOVERY GOT SOME
FUNDING TO DO A HOUSING STUDY.
AND WE ALSO GOT MONEY THAT WAS
VERY IMPORTANT FOR US TO REALLY
INCREASE OUR CAPACITY TO HAVE
THAT DATA COLLECTION THAT INFORM
S THE DATA, SO WE GOT
MONEY TO BE ABLE TO EXPAND OUR
SAMPLE AND THEN BE ABLE TO DO
SOME ADDITIONAL DATA ANALYSIS
AND GOING TO SUBGROUP THAT IS
TRADITIONALLY ARE NOT ABLE TO
DO.

SO I THINK, YOU KNOW, THE
BUDGET, WE WERE ABLE TO GET THE
BIG INITIATIVE FUNDED.

WE'RE FINE TACT BUDGET.

I DON'T KNOW IF YOU HEARD, FOR
ALL THE OTHER COVID-19 THINGS
THAT WE EXPECT GOING FORWARD,
WE'RE UNITED ON THE CARES ACT
FUNDING TO BE ABLE TO HELP US
WITH OUR COSTS.

YOU KNOW, THE MAYOR, YOU KNOW,
HAS BEEN GREAT AT SUPPORTING
EVERYTHING THAT WE'VE DONE AND
WE'RE VERY GRATEFUL FOR HIS
SUPPORT, AND WE NEED TO LOOK AT
THE FY21 WORK.

>> THANK YOU, COUNCILOR.

I WOULD ALSO, AS YOU KNOW, YOU
SHOWED THE GRAPH OF OUR INCREASE
IN OUR BUDGET EVERY YEAR.

SO WE'RE VERY GRATEFUL TO THE
MAYOR AND CITY COUNCIL FOR THAT,

AND ALSO ONE OF OUR GOALS FOR
FY21 BEING INCREASING SERVICES
THROUGHOUT THE CITY, AND SO
REALLY WORKING WITH COMMUNITIES,
NON-PROFIT COMMUNITY PROVIDERS
TO FILL UP THEIR CAPACITY TO
WORK WITH PEOPLE.

THAT WON'T AFFECT OUR BUDGET,
BUT I THINK THAT'S AN AREA THAT
WE'RE HOPING TO BE MORE INVOLVED
IN NEXT YEAR.

>> GREAT.

THANK YOU SO MUCH.

THANK YOU, COUNCILOR ARROYO.

NEXT UP IS COUNCILOR MEJIA.

THEN IT WILL BE COUNCILOR FLYNN,

AND I'LL NOTE FOR COLLEAGUES

THAT WE WILL DO A SECOND ROUND

OF QUESTIONS, BUT I'LL ASK

ANYBODY WHO HAS A SECOND SET OF

QUESTIONS TO RAISE THEIR BLUE

HAND, BECAUSE WE'LL DO THEM

OPTIONALLY.

COUNCILOR MEJIA, YOU HAVE THE

FLOOR.

>> YES, HI.

GOOD EVENING.

AGAIN, THANK YOU TO COUNCILOR

BOK FOR THE LONG DAY.

WE NEED THE APPRECIATE HOW YOU

HAVE TORTURED US ALL DAY TODAY,

AND TO MY COLLEAGUES IN THE

BOSTON PUBLIC HEALTH COMMISSION,

CHIEF MARTINEZ AND YOUR WHOLE

ENTIRE TEAM AND COMMISSIONER

NIEVEZ, REALLY EXCITED TO HAVE

THE OPPORTUNITY TO BUILD

ALONGSIDE YOU.

I DO HAVE A LOT OF QUESTIONS,

AND I'M GOING TO SAY THEM ALL,

AND THEN MAYBE YOU CAN GET

THROUGH AS MUCH AS YOU CAN, AND

WE CAN PICK UP IN ROUND TWO IF

WE NEED TO, OKAY?

I ACTUALLY ONLY HAVE FIVE.

MY QUESTIONS ARE SPECIFICALLY

FOR THE FIRST ROUND, ONE OF THE

DPH'S GOALS IS TO MAKE THE

DEPARTMENT HAVE RACIAL EQUITY.

I WOULD LOVE TO KNOW YOUR

STRATEGY ABOUT THAT.

WHAT OPPORTUNITIES ARE THERE TO

INVOLVE THE VOICES OF THE PEOPLE

IN THE PROCESS, AND HOW CAN CITY

COUNCIL BE PART OF THAT PROCESS,
AS WELL?

I'M CURIOUS ABOUT THE YOUTH
DEVELOPMENT PROGRAM THAT'S LED
BY THE BOSTON PUBLIC HEALTH
COMMISSION.

IT'S A PROGRAM THAT WORKS WITH
STUDENTS WHO ARE CHRONICALLY
ABSENT.

I THINK IT'S A GREAT MODEL.

I KNOW THAT YOU ARE IN
CHARLESTOWN, THE BERGS, MADISON
PARK AND BRIGHTON AND SCHOOLS
THAT ARE IN NEED.

I'M JUST CURIOUS WHAT IF ANY
OPPORTUNITIES EXIST TO EXPAND
THAT MODEL TO MIDDLE SCHOOLS,
BECAUSE WHAT I'M HEARING AND
SEEING IS THAT KIDS IN THE LOWER
GRADES ARE ALSO EXPERIENCING
SOME NEED FOR TARGETED
INTERVENTION.

I'M CURIOUS IN TERMS OF CULTURAL
COMPETENCY, YOU KNOW, I THINK
WHEN WE FIRST STARTED TALKING
ABOUT SOCIAL DISTANCING, IT FELT
LIKE A FOREIGN CONCEPT.

I JUST -- ONE THING IS
TRANSLATION.

I JUST THINK IT'S REALLY
IMPORTANT FOR US TO THINK ABOUT
HOW ARE WE BEING CULTURALLY
COMPETENT WITH EVEN THE
INFORMATION THAT WE'RE SHARING
WITH FOLKS SO IT'S A LITTLE
EASIER FOR US TO UNDERSTAND SOME
OF THESE CONCEPTS THAT ARE
COMING OUT WITH COVID.

I'M ALSO CURIOUS ABOUT DOMESTIC
VIOLENCE AS A RESULT OF THIS
CRISIS.

THERE HAS BEEN AN UPTICK.

I'M CURIOUS ABOUT HOW WE'RE
RESPONDING TO THAT AS A CITY, AS
WELL AS I'M ALSO CURIOUS ABOUT
S.T.D.s I BELIEVE PEOPLE ARE
ENGAGING IN HIGHER-RISK
BEHAVIOR, SO KIND OF WHAT IS THE
GAME PLAN AROUND HELPING TO
REDUCE THE SPREAD OF SEXUALLY
TRANSMITTED DISEASES.

AND THEN FOR ORS, I'M JUST
CURIOUS IN TERMS OF ARE THE
NARCAN TRAININGS OFFERED IN

MULTIPLE LANGUAGES.
IF SO, WHICH LANGUAGES ARE THEY.
THIS SUMMER IS THE HIGHEST
SEASON FOR ADMINISTERING NARCAN
AND GIVEN THE IMPACTS OF
COVID-19 AND THE RATE OF
OVERDOSES DURING THE SUMMER,
WHAT PLANS ARE IN PLACE TO
ADDRESS THESE ISSUES AND WHAT
CAN WE DO TO IMPROVE UPON THE
SYRINGE RETURN RATE.
THANK YOU SO MUCH.

>> SO COUNCILOR, ON THE QUESTION
OF EQUITY AND COMMUNITY ENGAGE.
, CREATING OPPORTUNITIES FOR
COMMUNITY VOICES AND ALSO
COUNCIL VOICES, YOU KNOW, I WAS
MENTIONING BEFORE WHEN I WAS
ENTERING COUNCILOR ARROYO'S
QUESTION THAT, YOU KNOW, WE'VE
HAD HELP THAT'S MORE THAN 12
YEARS OLD AND, YOU KNOW, FOR
MANY YEARS WE WORKED TO INCREASE
OUR ABILITY TO CONNECT AND
ENGAGE COMMUNITY RESIDENTS IN
DRIVING FEEDBACK INTO IT AND
ALSO TO MAKE SURE THAT WE GAIN
THEIR VOICE IN INFORMING OUR
PROGRAMMING.

SO WE HAVE -- THERE ARE A COUPLE
OF THINGS THAT ARE GOING ON.
FOR MANY YEARS NOW ACTUALLY, THE
COMMISSION IS USUALLY IN THE
SUMMER, IT STARTS IN MAY, AND
THEN LIKE IN SEPTEMBER, WE HOLD
COMMUNITY MEETINGS OVER THE
YEARS.

WE'VE DONE IT FOR SO MANY YEARS.
WE USE METHODS.

SO WE WENT TO EVERY SINGLE
NEIGHBORHOODS.

SO WE'VE HAD OCCASIONS IN WHICH
WE SELECT FROM NEIGHBORHOODS AND
THEN ROTATE THROUGHOUT THE
YEARS, AND WE'VE ALSO HAD YEARS
WHICH WE HAVE SEEN, FOR EXAMPLE,
ABOUT TWO, THREE YEARS AGO, WE
HAD THE TEAM OF TRAUMA.

>> I'M SORRY, COMMISSIONER.
JUST BECAUSE MY TIME IS SO
LIMITED AND I ASKED LIKE 101
QUESTIONS, I'M GLAD TO HEAR THAT
YOU GUYS ARE DOING YOUR DUE
DILIGENCE ON THE OUTREACH, SO

THANK YOU FOR THAT.

I WOULD LOVE TO SPEND THE REST
OF TIME ON SOME OF MY OTHER
QUESTIONS IF YOU DON'T MIND.

>> OKAY.

>> ABOUT THE YOUTH DEVELOPMENT,
I'M JUST CURIOUS AS TO WHETHER
OR NOT THAT PROGRAM I KNOW IT
REALLY WELL.

JUST CURIOUS AS TO WHETHER OR
NOT THERE'S BEEN ANY DISCUSSIONS
AROUND EXTENDING ITS TO MIDDLE
SCHOOLS JUST BECAUSE FOR
TARGETED INTERVENTION?

YES NOR WILL BE FINE?

>> HOW ABOUT I GET BACK TO YOU.
I DON'T KNOW THE ANSWER TO THAT.
I HAVE TO CONSULT WITH THE
PROGRAM HEAD.

>> AND THEN IF YOU COULD TELL ME
A LITTLE BIT ABOUT WHAT ARE WE
DOING AROUND CULTURAL
COMPETENCY.

ONE THING IS TO BE ABLE TO
TRANSLATE.

BUT WHERE ARE YOU GETTING ADVICE
AROUND CULTURAL COMPETENCY
LANGUAGE THAT PEOPLE CAN
UNDERSTAND AND IN THE HOOD MORE
SPECIFICALLY.

>> YEAH, THAT'S A GREAT POINT,
AND YOU'RE RIGHT, YOU KNOW, THIS
MESSAGING AROUND SOCIAL
DISTANCING, I THINK IT'S BEEN
HARD TO SHARE WITH FOLKS, YOU
KNOW, ESPECIALLY PEOPLE WHO WITH
SOME OF THEIR CULTURES, THE
CONCEPT OF NOT HUGGING OR
SHAKING HANDS OR KISSING, IT'S
BECOME LIKE ANOTHER PLANET.

SO I THINK WE NEED -- EVEN
THOUGH WE'RE TRYING TO KEEP IN
MIND WHAT ARE THE BEST WAYS FOR
US TO MESSAGE, YOU KNOW, MAKING
SURE THAT WE KEEP IN MIND DIFFERENT
CULTURES AND LANGUAGE, THIS IS
AN AREA WHERE WE CAN SEE
IMPROVEMENT.

WE PUT STUFF OUT THERE.

YOU KNOW, OUR CULTURE IS
DIVERSE.

THAT DOESN'T MEAN THAT IT'S NOT
GOING TO IMPROVE.

SO WE'RE GOING TO HAVE CHANCE,

YOU KNOW, AND THE UPCOMING MONTHS, MESSAGING IS NOT OVER. WE'RE GOING TO CONTINUE TO SHARE THE SAME MESSAGES AROUND PRECAUTIONS AND ALSO OTHER MESSAGES THAT WE'LL HAVE. SO THIS IS AN OPPORTUNITY FOR US TO HOPEFULLY GET IT RIGHT.

>> THANK YOU.

AND I SEE THAT GAVEL.

I'M GOING TO NEED THERAPY AFTER I GET DONE WITH YOU WITH ALL THIS GAVELING.

SO I JUST WANTED TO MAKE SURE I GET MY OTHER QUESTIONS IN HERE. JUST CURIOUS ABOUT DOMESTIC VIOLENCE, THE UPTICK ON THAT AND I WHAT YOU ALL ARE DOING AROUND THAT.

>> WE HAVE A CENTER.

WE HAVE A COMMUNITY SITUATION. WE'RE A DOMESTIC VIOLENCE VIOLENCE GROUP.

SO THEY'RE WORKING VIRTUALLY AND PROVIDING SERVICES BY PHONE, SKYPE, YOU KNOW, DOING STUFF VIRTUALLY AND CONTINUING TO PROVIDE THE SERVICES THAT THEY DO.

>> AND MY TIME IS UP, SO I WILL ASSUME THAT THE RECOVERY WILL BE THE NEXT TIME AROUND.

COMMISSIONER NIEVES, I WOULD LOVE AN INVITATION THE MEET WITH YOU AND TO FIGURE OUT HOW OUR OFFICE CAN BE PARTNER.

I STARTED OFF MY CAREER IN PUBLIC HEALTH, AND I'M DEEPLY COMMITTED TO THIS CONVERSATION

>> HAPPY TO HAVE YOU OVER.

WE'LL ARRANGE THAT.

>> THANK YOU.

>> GREAT.

THANK YOU SO MUCH, COUNCILOR MEJIA.

PROUD TO HAVE THE FAMILY JUSTICE CENTER IN MY DISTRICT.

COUNCILOR ED FLYNN?

COUNCILOR FLYNN, YOU HAVE THE FLOOR.

>> THANK YOU.

THANK YOU, COUNCILOR BOK, AND THANK YOU TO THE DEDICATED AND PROFESSIONAL PUBLIC HEALTH

COMMISSION STAFF.

THANK YOU, RITA, AND FOR ALL YOUR HARD WORK AND TO JEN AND THE OTHERS THAT ARE HERE: I DON'T HAVE ANY QUESTIONS. I JUST WANT TO SAY THANK YOU FOR THE TREMENDOUS WORK YOU'RE DOING ACROSS THE NEIGHBORHOODS OF BOSTON.

I WORK WITH COUNCILOR CAMPBELL ON DOMESTIC VIOLENCE AND WITH THE PUBLIC HEALTH CHAIN. I WORK WITH JEN ON RECOVERY OUTREACH AND WITH RITA AND MARTY MARTINEZ ON LANGUAGE ACCESS AND MAKING SURE THAT, YOU KNOW, WE THIS ALL WE CAN IN THE ASIAN COMMUNITY, AS WELL.

SO I JUST WANT THE SAY THANK YOU THE RITA AND TO JEN AND THE ENTIRE PUBLIC HEALTH TEAM THAT REALLY THE UNSUNG HEROS IN OUR CITY.

YOU DO A LOT OF TREMENDOUS WORK AND I JUST WANT TO SAY THANK YOU ON BEHALF OF MY CONSTITUENTS IN DISTRICT TWO.

>> THANK YOU, COUNCILOR.

>> THANK YOU.

THAT'S ALL I HAVE, COUNCILOR BOK.

THANK YOU.

>> COUNCILOR BOK, IT LOOK LIKE SHE MAY HAVE STEPPED AWAY FOR A MOMENT.

FOLLOWING COUNCILOR FLYNN WOULD BE COUNCILOR BOK.

THE FLOOR IS YOURS.

>> SORRY, MY INTERNET CUT OUT, WHICH IS NOT GOOD

>> THAT'S WHAT I'M HERE FOR, MADAM CHAIR.

>> OKAY.

I'M GOING TO SLIDE MY QUESTIONS IN AND WE'LL GO BACK TO THE TOP TO YOU, ESSAIBI GEORGE.

THANKS SO MUCH FOR JUMPING IN. RITA, I HAD A FEW BUDGET-RELATED QUESTIONS, SO I SENT AHEAD.

ONE WAS JUST ABOUT I KNOW THERE WERE SOME SALARY SAVINGS RELATED TO EMPLOYMENT ATTRITION AND SOME INCREASED OVERTIME EXPENSES AND I JUST WONDER, I KNOW THERE

CERTAINLY ARE A FEW MONTHS WHEN IT WAS QUITE HARD TO HIRE PEOPLE BUT ALSO THAT YOU HAVE BEEN ACCELERATING TRYING THE HIRE PEOPLE SOME JUST WONDERING IF YOU COULD SPEAK TO THAT A LITTLE BIT AND SORT OF HOW MUCH SUCCESS YOU HAVE HAD LATELY IN STAFFLING UP AND WHAT IS THE PLAN FOR GETTING FULLY STAFFED UP AND REDUCING THOSE OVERTIMES AND HAVING THE PEOPLE YOU NEED TO FIGHT THIS SITUATION.

>> SO WE HAVE CONTINUED TO RECRUIT.

ONE THING WE'RE ABLE TO DO IS WE'RE ABLE TO QUOTE A NUMBER OF COUNCILORS.

THIS IS MOSTLY AROUND OUR HOMELESS SERVICES AND RECOVERY. THEY CAN SPEAK THE THAT.

AND ONE THING WE DID EARLY IS THE PANDEMIC WAS TO UPGRADE THE SALARY SO WE COULD BE REACHING MORE FOLKS.

BUT I THINK ONE OF THE THINGS THAT HAS CREATED SOME OF THE OVERTIME COSTS HAVE TO DO WITH, YOU KNOW, OUR FOLKS IN THE FRONT LINES.

IT DOESN'T GET, YOU KNOW, MORE UP CLOSE THAN THAT.

AND AS A RESULT, YOU KNOW, WE'VE HAD PEOPLE GET SICK AND BE OUT, OR, YOU KNOW, WE'VE HAD FOLKS THAT THEY HAVE UNDERLYING CONDITIONS, AND THEY HAVE NEEDED TO LEAVE OBVIOUSLY THEIR POST BECAUSE OF THAT.

SO STUFF LIKE THAT HAS BEEN RAISED, SOME OF THAT OVERTIME THAT WE'VE HAD TO PAY FOR ADEQUATE STAFFING.

BUT WE CONTINUE TO RECRUIT THE BEST WE CAN, AND LIKE I SAID, THE FEELING, COUNCILOR, THE SALARY, YOU KNOW, HELPS.

AND THIS IS AN ONGOING THING.

WE ALWAYS HAVE CHALLENGES, YOU KNOW, FINDING FOLKS THAT WANT TO WORK ON THE FROM THE LINES.

SO I DON'T KNOW.

>> I THINK THERE ARE JUST ROUTINE OVERTIME COSTS.

OUR MANAGE.
DEPARTMENT AS THE FIRE ALARM
GOES OFF IN THE MIDDLE OF THE
NIGHT, THEY ALSO AS PART OF 2.0,
THEY'RE CLEANING ON THE
WEEKENDS, THEY WORK ALL WEEK,
AND THEN THERE ARE A COUPLE
OVERTIME SHIFTS TO HELP CLEAN UP
THE NEEDLES IN THE TRASH THAT
ACCUMULATE.
THEN OUR PUBLIC SAFETY
DEPARTMENT ALSO SHARE
EMERGENCIES.
THEY FUND HOMELESS SERVICES.
WE GET CALL-OUTS.
SO THERE'S ALWAYS GOING TO BE
SOME OVERTIME, BUT YOU'RE RIGHT,
IT WAS VERY TOUGH AT THE
BEGINNING OF THE YEAR THE HIRE
PEOPLE, AND I THINK, YOU KNOW,
ONE OF THE THINGS THAT WILL COME
OF THIS, IT MAY BE A LITTLE
EASIER, WHICH IS REALLY
UNFORTUNATE IF YOU LOOK AT THE
BIG PICTURE, BUT IT WAS SUPER
DIFFICULT AT THE BEGINNING TO
HIRE PEOPLE.
AND I THINK WE'RE GOING TO SEE
THAT.
>> UH-HUH.
YEAH, AND CERTAINLY IT SEEMS TO
ME, IN THIS COUNTRY I WOULD SAY,
YOU KNOW, WE HAVE MASSIVELY
UNDER INVESTED IN OUR PUBLIC
HEALTH INFRASTRUCTURE.
AND THAT ALSO IS ABOUT SALARIES,
RIGHT?
AND IT'S ABOUT, YOU KNOW, WE CAN
WAVE OUR ARMS AT THAT AT THE
NATIONAL LEVEL.
IT'S INCUMBENT UPON US IN BOSTON
TO MAKE SURE THAT WE'RE NOT
PARTICIPATING IN THAT.
AND I THINK WE'RE AS MUCH PART
OF THAT AS EVERYBODY REALLY.
I GUESS TO THAT POINT WE'RE
WONDERING, I THINK OUR DIRECTOR
OF THE BUREAU OF INFECTIOUS
DISEASES IS STILL VEIGH CONTACT,
IS THAT RIGHT?
>> THAT'S RIGHT.
>> AND I WONDER WHAT DRVE
OBVIOUSLY, IT'S BAD LUCK THAT
THAT WAS VACANT AT THE TIME OF

THIS, THIS LAUNCHED AND I THINK AS A NUMBER OF PEOPLE HAVE SAID, THIS IS GOING TO BE WITH US FOR A WHILE, AND IT SEEMS TO ME LIKE WE WOULD WANT TO BE REALLY LOOKING FOR A VERY TALENTED CAPABLE PERSON AND OFFERING THE SALARY, ET CETERA, IN ORDER TO MAKE THAT HAPPEN AS WE THINK ABOUT A COUPLE YEARS AHEAD, BECAUSE IT WOULD BE GREAT TO HAVE THAT CAPACITY, NEVER MIND, YOU KNOW, FOR THE NEXT ONE. SO I WONDER WHERE WE ARE ON THAT SEARCH AND THAT PROCESS.

>> WE ARE ACTIVELY SEARCHING, CHALLENGING THE ISSUE.

I THINK WE HAVE A SALARY.

I SEE ALL THE THINGS THAT MAY BE AN ISSUE AT SOME POINT IN SOME CANDIDATE THAT HAS TO DO WITH RESIDENCY REQUIREMENTS.

BUT WE'RE ACTIVELY LOOKING. YOU KNOW, WE'RE DOING SOME INTERVIEWS.

WE'RE ACTUALLY DOING INTERVIEWS NEXT WEEK I BELIEVE, AND, YOU KNOW, WE'VE BEEN FORTUNATE TO HAVE OUR MEDICAL DIRECTOR WHO HAS REALLY ALSO ASKED OUR DIRECTOR, AND WE HAVE THE DIRECTOR WHO DID FANTASTIC JOB AND HELPED US, YOU KNOW.

AN WE'VE ALSO HAD THE BENEFITS OF HAVING MARIA, WHO USED TO BE THE STATE EPIDEMIOLOGIST OF INFECTIOUS DISEASE SPECIALIST AND, YOU KNOW, OVERSTATING YEARS OF EXPERIENCE.

THAT'S WHAT HE DID.

AND SO HE'S A PHONE CALL AWAY. HE'S BEEN SUPPORTING US IN OUR INFECTIOUS BUREAU TEAM EVERY STEP OF THE WAY.

SO IT WAS UNFORTUNATE THAT IT WAS VACANT, BUT WE HAD AN INFRASTRUCTURE, AND WE HAD A SYSTEM IN PLACE ON HOW TO GET THE INFECT -- INFECTIOUS DISEASE EXPERT THAT WE NEEDED AND EXPLAIN THE GOAL UNTIL WE CAN FIND A PERMANENT PERSON

>> GOT IT.

EVERYBODY STEPPED UP, WHICH IS

GREAT.
I JUST THINK THE LINE THAT KEEPS
RESONATING IN MY HEAD THROUGH
THIS IS THE CAVALRY IS NOT
COMING.
LIKE WE ARE... LIKE NO ONE... IF
SOMEONE IS GOING TO SOLVE
CONTACT TRACING AT SCALE, IT'S
GOING TO BE HERE IN
MASSACHUSETTS.
IT'S GOING TO BE HERE.
THERE IS A DECENT CHANCE THAT
ONE OF OUR FOLKS IN BOSTON WILL
FIND A VACCINE.
WE'RE KIND OF IT, RIGHT?
AND UNFORTUNATELY I WISH THAT
WEREN'T TRUE VIS-A-VIS OUR
FEDERAL GOVERNMENT, BUT IT JUST
SEEMS TO ME LIKE THAT'S GOING TO
BE A LONG ENOUGH CAMPAIGN THAT
WE WANT SOMEBODY REALLY TALENTED
IN THAT ROLE TO AUGMENT OUR
CURRENT STRONG TEAM, AND I WOULD
JUST SORT OF SAY THAT IF WHAT IT
TAKES IS SOMEONE TALENTED IN
THAT ROLE AS A TRANSITIONAL
HOUSING ALLOWANCE OR SOMETHING
THAT LETS THEM SETTLE IN THE
CITY, I THINK WE SHOULD BE
LOOKING AT ALL OPTIONS.
>> YEAH, NO, IT'S... WHEN WE
FIND SOMEBODY AND THAT'S AN
ISSUE, WE WILL DEFINITELY LOOK
AT ALL THE OPTIONS AND DO
WHATEVER NEEDS TO HAPPEN SO WE
CAN REALLY SECURE THE MOST
COMPETENT PERSON.
>> GREAT.
THAT'S MY TIME FOR THE FIRST
ROUND.
SO WE'LL GO BACK UP TO THE TOP.
COUNCILOR ESSAIBI GEORGE, AND
I'LL REMIND OTHERS, IF YOU HAVE
A SECOND ROUND OF QUESTIONS,
JUST RAISE YOUR BLUE HAND.
COUNCILOR ESSAIBI GEORGE?
>> THANK YOU, MADAM CHAIR, AND
THANK YOU AGAIN FOR STICKING IT
OUT WITH US FOR SUCH A LONG DAY.
I DO HAVE A COUPLE QUESTIONS, SO
I'LL GO UNTIL I GET STOPPED.
ONE, WE HAD A CONVERSATION
EARLIER TODAY WITH PUBLIC
SAFETY, BOSTON POLICE, BOSTON

FIRE, BOSTON E.M.S.

AND ONE OF THE QUESTIONS I HAD ASKED IN THE POLICE SECTION WITH THE COMMISSIONER WAS AROUND RESPONSE TIMES TO THE SEAPORT AREA.

AND I FAILED TO ASK THE CHIEF ABOUT THIS, AND I'M NOT SURE IF YOU COULD ANSWER THE QUESTION BECAUSE OF THE CONNECTION BETWEEN THE HEALTH COMMISSION'S BUDGET AND E.M.S.'S BUDGET.

THERE WAS A CAPITAL PROJECT AT ONE POINT.

I DON'T KNOW IF GRACE IS AVAILABLE TO ANSWER THOSE QUESTIONS.

I MISSED SEEING GRACE IN THE CHAMBER, IF I COULD ACTUALLY SAY THAT OUT LOUD.

>> I'LL MAKE SURE SHE SAYS HELLO NOW.

SHE'S TOTALLY SITTING RIGHT HERE

>> PERFECT.

PERFECT.

SO ONE OF THE CONCERNS IS THIS SORT OF PART OF THE CITY, THE SOUTH BOSTON WATERFRONT, THE SEAPORT AREA, THERE IS SOME ISSUES AROUND JURISDICTION WHEN IT COMES TO POLICE.

SO WE ALSO RECOGNIZE BECAUSE OF TRAFFIC AND SORT OF THE WAY THAT IT'S SITUATED AND THE WAY THAT IT'S LAID OUT THAT THERE IS A LACK OF ACCESS FOR OUR FIRST PRIZE UP FOR BIDS TODAY ON THE "PRICE IS RIGHT."

-- FIRST RESPONDERS.

SO I FADE TO BRING IT UP IN E.M.S., BUT IT'S RELATED TO A CAPITAL PROJECT, SO IF SOMEONE COULD ANSWER THAT.

AND THEN THE SECOND PART OF THAT QUESTION, RITA, I'M SORRY, BEFORE YOU GET UP, BECAUSE THEY ARE RELATED AND IT IS A QUESTION THAT I STARTED WITH THE CHIEF, BECAUSE OF THE RELATIONSHIP WITH E.M.S. TO THE HEALTH COMMISSION, AS OPPOSED TO IT BEING AND I THINK IT SHOULD BE, THE THIRD LEG ON THE STOOL IS PART OF OUR PUBLIC SAFETY DEPARTMENT, WE --

THE BUDGET ISN'T ITEMIZED FOR
E.M.S. THROUGH THE HEALTH
COMMISSION.
IT IS SORT OF A SINGLE LINE WITH
A DOLLAR AMOUNT.
I'M CURIOUS WHY THAT IS AND
WHETHER WE COULD GET A DEEPER
BREAKDOWN OTHER THAN THE
PRESENTATION WITH THE CHIEF GAVE
EARLIER TODAY.
WHOEVER CAN ANSWER THAT
QUESTION, WHETHER IT'S THE CHIEF
OR GRACE, THAT WOULD BE GREAT.
>> WELL, IT'S AN EASY ANSWER.
YOU CAN HAVE THE BUDGET.
I DON'T KNOW WHY IT WENT OUT
THAT WAY.
BUT YOU CAN HAVE THE BUDGET FOR
E.M.S., NO PROBLEM.
WE'LL GET IT TO YOU.
>> GREAT.
THANK YOU.
DO I GET TO SEE GRACE
>> YES, YES.
>> HOW ARE YOU?
>> I SUE YOU ON CNN LAST NIGHT.
YOU WERE GREAT
>> THANK YOU.
THANK YOU VERY MUCH.
>> HE'S BURSTING OUT BECAUSE OF
THE TALK.
>> THAT'S THE DIFFERENCE HERE.
>> I DON'T MEAN TO BRING YOU
BACK IN, CHIEF, AFTER THE
MARATHON THAT YOU RAN THIS
AFTERNOON WITH US.
BUT I AM CURIOUS TACT CAPITAL
PROJECTED AND THE SEAPORT AND
WITH GRACE THERE, PERHAPS YOU
COULD JUST GIVE US AN UPDATE ON
THAT PROJECT.
THEN I'M --
>> OKAY.
>> OKAY.
ON THE CAPITAL BUDGET.
WE HAVE A COUPLE IDEAS.
THEY WERE TALKING ABOUT THINGS.
AND IT KIND OF HUNG OUT THERE
FOR A WHILE.
THEN WE TALKED ABOUT THE 22.
THAT WOULD BE --
>> YES, YES.
>> NOW WE CAN TALK ABOUT THAT.
>> GREAT.

>> THE NUMBER OF CASES RIGHT NOW --

>> I'M ACTUALLY AM NOT --

>> IT'S GREAT.

I JUST WANT TO KNOW THAT IT'S HAPPENING AND WE'RE MOVING FORWARD.

>> WHAT THEY LOOKED AT IS THEY SAID THE PROPERTY THAT WAS CITY OWNED IS GREAT.ñi

THEY WANTED TO KNOW IF IT WAS EFFICIENT TO BID ON.

I ASKED THEM, COULD YOU LOOK AT MAYBE DOING TRYING TO GET CREATIVE TO DO IT.

THEY SAID THEY WOULD.

I STILL HAVEN'T HEARD BACK YET.

>> OKAY.

SO I THINK THERE'S AN INTEREST BY THE COUNCIL, AT LEAST A FEW OF US TO, MOVE ON, THAT BECAUSE WE RECOGNIZE THAT AS A REAL GAP IN SERVICE.

WE'VE ALLOTTED IT THROUGH CAPITAL, AND WE HAVE -- I WOULD LIKE THE SEE SOME MOVEMENT ON THAT EFFORT.

THANK YOU VERY MUCH FOR THAT. AND ALSO, AS IT RELATES TO CAPITAL, JEN, I KNOW YOU'RE THERE, AND DEVIN, TOO, THERE ISN'T A QUESTION HERE.

IT'S A STATEMENT, BECAUSE I KNOW COUNCILOR BAKER BROUGHT IT UP. THE CAPITAL INVESTMENT FOR LONG ISLAND, YOU KNOW, WANT TO HELP ADVOCATE HOWEVER I CAN, I UNDERSTAND AND APPRECIATE THAT YOUR EFFORTS HAVE CONTINUED ON THAT PART AND I WANT TO APPLAUD THAT PERSISTENCE AND THAT CONTINUED COMMITMENT TO IT, BECAUSE IT'S A GREAT DEAL OF WORK.

LAST FOR ME, MAYBE THE CHIEF COULD COME BACK.

THIS MAY BE A MORE APPROPRIATE QUESTION FOR HER OR FOR SOMETHING TO MAKE SURE THAT SHE HEARS THIS.

I WOULD LIKE JUST TO UNDERSTAND WHAT IT MIGHT MEAN TO INCREASE THE MOBILE TEAM.

I THINK THAT WE CONTINUE TO SEE

IMPROPERLY DISCARDED NEEDLES
ACROSS OUR CITY.
WE KNOW THAT WE'RE COLLECTING
BACK OVER MORE THAN 1 TO 1 ON
WHAT WE'RE PUTTING OUT, AND SO
IF THERE NEEDS TO BE SOME SORT
OF ADVOCACY AROUND INVESTING AND
INCREASING AN INVESTMENT IN THAT
MOBILE SHARPS TEAM, BECAUSE I DO
KNOW FOR SURE, BECAUSE I'VE
SPENT TIME WITH THEM, I HAVE
SPENT TIME IN PARTICULAR WITH
SARAH, WHO IS AN ANGEL IN THE
EFFORT THAT SHE PUTS OUT IN
ASSISTING INDIVIDUALS.
THAT HAVE REALLY DEALING WITH OR
ARE IN THE MIDST OF A CRISIS.
AND GIVING HER AND HER TEAM THE
RESOURCES THEY NEED TO NOT JUST
DO SIMPLY THE PICK-UP, BUT TO DO
THE OUTREACH PIECE, TOO, I WANT
TO BE ABLE TO ADVOCATE FOR
WHATEVER YOU NEED IN THAT PLACE
AS SAFE.
AND THEN LASTLY, I KNOW THAT
MOST OF YOUR WORK IS AROUND THE,
YOU KNOW, SUPPORTING INDIVIDUALS
WHO HAVE... WHO ARE EXPERIENCING
HOMELESSNESS AND IF MAYOR'S
BUDGET THROUGH DND, THERE IS AN
A LOT.
FOR AN ADVISER ON FAMILY
HOMELESSNESS.
I HAVE DONE A LOT OF WORK AROUND
ADVOCA+
THE COMMITMENT TO END FAMILY
HOMELESSNESS IN THE CITY OF
BOSTON.
I REMIND YOU, I KNOW THAT YOU
KNOW THIS WORK IS HAPPENINGMENT
I REMIND YOU THAT THE HEALTH
COMMISSION AND THE OFFICE OF
RECOVERY SERVICES CERTAINLY
WOULD PLAY A ROLE IN THAT EFFORT
AND THAT WORK.
SO JUST SORT OF PUTTING IT OUT
THERE FOR ALL OF YOU TO REALLY
UNDERSTAND AND APPRECIATE THE
AMOUNT OF WORK THAT YOU'RE
UNDERTAKING EVERY SINGLE DAY,
AND ADD ON TOP TO IT, LAYER ON
TOP A PANDEMIC, A GLOBAL
PANDEMIC THAT WE REALLY HAVE
BEEN FOR A MONTH OR TWO IN THE

NORTHEAST JUST, YOU KNOW, AND
YOUR WORK OBVIOUSLY CONTINUES.
A LOT OF US ARE ABLE TO DO THESE
MEETINGS AND ZOOM FROM HOME AND
OTHER PLACES.

YOU'RE OBVIOUSLY IN THE OFFICE,
AND I KNOW YOU ARE EVERY DAY.
SO THANK YOU.

THAT IS MY CUE.

MADAM CHAIR, I THINK I'M DONE
WITH QUESTIONS.

THANK YOU.

>> GREAT.

THANK YOU.

THANK YOU SO MUCH, COUNCILOR
ESSAIBI GEORGE.

AND COUNCILOR JANEY, PRESIDENT
JANEY, DID YOU WANT TO JUST...

WE'RE COMING TO YOU, COUNCILOR
MEJIA.

ONE SECOND.

COUNCILOR JANEY JUST WANTED TO
SAY GOOD NIGHT.

>> I JUST WANTED TO SAY THANK
YOU TO THE TEAM.

I HAD TO RUSH BACK.

I WOULD AFFIRM WHAT COUNCILOR
ESSAIBI GEORGE SAID AROUND ANY
NEEDED INVESTMENT AROUND THE
MOBILE SHARKS, BUT I WANTED TO
SAY THANK YOU FOR EVERYTHING.

>> GREAT.

THANK YOU SO MUCH, MADAM
PRESIDENT.

ALL RIGHT.

NOW COUNCILOR MEJIA?

>> I HAD A TECHNICAL GLITCH

HERE.çó

I'M SORRY.

I HOPE I DIDN'T BUST YOUR
EARDRUMS.

I'M JUST CURIOUS.

I DIDN'T GET MY QUESTIONS IN
WITH REGARD TO THE OFFICE OF
RECOVERY SERVICES.

I WANTED TO PICK BACK UP ON THE
NARCAN TRAINING, WHETHER OR NOT
IT'S DONE IN MULTIPLE LANGUAGES.

AND I'M JUST ALSO CURIOUS ABOUT
KIND OF THE RATES OF OVERDOSE
DURING THE SUMMER, WHAT IF
ANYTHING IS IN PLACE KNOWING
THAT COVID-19 IS GOING TO MAKE
IT A LOT HARDER FOR US FOR

PHYSICAL CONTACT.

SO JUST CURIOUS ABOUT WHAT THAT LOOKS LIKE.

>> OKAY.

THANKS.

SO FOR PREVENTION TRAINING, WE HAVE PRE-COVID WE DID IN-PERSON AND DROP-IN.

WE HAVE DROP-IN SESSIONS HERE AND WE ALSO GO OUT INTO THE COMMUNITY.

WE ALSO HAVE A SUCCESSFUL PROGRAM IN SPANISH AND ENGLISH.

SO THE IN-PERSON TRAINING IS SPANISH AND ENGLISH, AND THE ONLINE TRAININGS ARE ALSO IN SPANISH AND ENGLISH.

>> ARE THERE OTHER LANGUAGES BESIDES SPANISH AND ENGLISH?

>> RIGHT NOW, NO, JUST SPANISH AND ENGLISH.

>> OKAY.

DO YOU EVER SEE A NEED TO EXPAND IT TO OTHER LANGUAGES, LIKE HAITIAN CREOLE?

IS THERE A NEED?

WOULD YOU BE ABLE TO IF YOU HAD THE RESOURCES TO PROVIDE IT IN DIFFERENT LANGUAGES?

>> I THINK WE'RE LOOKING TO INCREASE ACCESS TO ALL COMMUNITIES ONLINE.

>> CAN YOU ANSWER THAT QUESTION?

>> YEAH.

AND THEN AFTER WE RETURN...

>> YEAH.

I'M JUST CURIOUS ABOUT IN THE WHOLE STATE OF PHYSICAL DISTANCING, JUST WONDERING WHAT NARCAN AND, YOU KNOW, OVERDOSES, WHAT'S THE PLAN GOING TO LOOK LIKE FOR THE SUMMER?

I'M JUST CURIOUS.

HOW ARE YOU DOING WITH THAT?

>> THAT'S A GREAT QUESTION.

I'LL LET YOU ANSWER THAT.

>> WELL, WE'RE STILL PUSHING OUT NARCAN INTO ALL COMMUNITIES, AND OUR TEAMS ARE WELL EQUIPPED TO RESPOND TO OVERDOSES, AND WE HAVE LOOKED AT ADDITIONAL POINTS SIS ON P.P.E. AND RESPONSE.

SO WE'RE LOOKING AT ADDITIONAL TRAINING AND PUTTING ON PIECES

OF P.P.E.

WE WOULD SEEK GUIDANCE FROM OUR TEAM FROM E.M.S. AND FROM THE PEOPLE TO HELP THE HOMELESS. BUT RIGHT NOW I FEEL LIKE WE'RE VERY WELL EQUIPPED AND SUPPORTED BY ALL OF OUR PARTNERS AND, YOU KNOW.

>> THAT'S GREAT.

I'M HAPPY TO HEAR THAT.

I'M ALSO CURIOUS, IN TERMS OF JUST A LOT OF THE STIGMA THAT WHEN WE TALK ABOUT ISSUES OF ASSESSMENT YOUTH DISORDER, THERE IS A LOT OF STIGMA, AND I AM JUST WONDERING WHAT IF ANY SUPPORT OR OUTREACH OR ANYTHING THAT YOU ALL ARE THINKING AROUND HELPING TO REMOVE THE STIGMA AROUND ISSUES OF SUBSTANCE DISORDERS.

>> I THINK IN ALL COMMUNITIES, WE DO COALITION WORK IN CERTAIN NEIGHBORHOODS.

THE GOAL IS TO INCREASE SORT OF OUR COALITIONS ACROSS NEIGHBORHOODS TO BRING PEOPLE TOGETHER TO HAVE THOSE CONVERSATIONS.

THAT'S REALLY IMPORTANT.

AND THE MORE INFORMATION PEOPLE HAVE, THE MORE OPPORTUNITIES THEY HAVE TO KIND OF SHARE THEIR CONCERNS AND NOT BE JUDGED BY THAT.

IT'S REALLY IMPORTANT.

>> HAVE YOU SEEN ANY CORRELATION BETWEEN S.T.D.s AND USE?

I'M CURIOUS IF THERE IS ANY CONNECTION AND HOW YOU ARE DEALING WITH IT AS A COMMISSION.

>> RITA?

DOES THAT QUESTION HAVE YOU CRAZY?

>> I'M JUST CURIOUS ABOUT LIKE... I'M LOOKING AT THE CORRELATION BETWEEN SUBSTANCE ABUSE AND S.T.I.s.

>> YES.

>> IT SEEMS LIKE THOSE TWO THINGS ARE USUALLY INTERCONNECTED.

I'M WONDERING.

>> OF COURSE THEY ARE.

I CAN START AND THEN YOU CAN TALK MORE IN DETAIL ABOUT H.I.V. PREVENTION.

H.I.V. IS A GOOD EXAMPLE, RIGHT, OF OUR NUMBERS GOING DOWN BETWEEN I THINK IT WAS LIKE 2008 AND 2015, THEY WENT DOWN ABOUT 25%.

AND THEN

>> IN 2003 WE HAD A CLUSTER OF PROTECTIONS, AND DROPPED AND THEN MOVED TO BOTCH AND WE HAVE HAD TWO OCCASIONS, LAST YEAR AND THEIR ALL LOCATED ABOUT -- DRUG USE AND YOU KNOW, REPEAT SEXUAL BEHAVIOR, AND HOW THOSE TWO THINGS, YOU KNOW, YOU PUT THEM TOGETHER.

>> YES.

>> AND THEY WILL MAKE UP -- ARE NOT ABLE TO MAKE UP AND THEN WE END UP HAVING TO DEAL WITH THAT AND WE SHOULDN'T BE HAVING TO HAVE -- WE TRY TO MAKE UP AND THEN YOU MAKE SURE THAT WE -- AND I DON'T KNOW IF YOU WANT TO ADD --

>> I SEE THE GAVEL, AND I DON'T KNOW IF WE'RE GOING TO HAVE ENOUGH TIME TO ADD BUT I DO APPRECIATE SOME OF THE HIGH LEVEL CONVERSATION YOU MADE AND THINGS YOU'RE DOING.

ONE LAST QUESTION AND THIS IS MORE ABOUT PROCUREMENT, AND CONTRACTING OPPORTUNITIES, IF ANY EXIST TO SUPPORT MINORITY BUSINESSES IN THIS PROCESS.

I'M CURIOUS ABOUT WHAT THE COMMISSIONER IS --

>> I'M GOING TO COVER THAT.

>> I HAD COUNCILOR.

>> HI, HOW ARE YOU.

>> I SEE THEY'RE GOING TO GAVEL YOU IN A MINUTE SO HURRY UP.

>> OK.

SO WE DID A NEW EQUITABLE ASSURANCE IN RESPONSE TO THE COVID RESPONSE FOR VENDORS AND WE HAVE EIGHT MINORITY VENDORS, AND FOUR WOMEN VENDORS AND WE ADDED LGBT AND VETERAN VENDORS. THE ONES WE HAVEN'T HAD SUCCESS IS LOOKING FOR VENDORS WHO HAVE

A DISABILITY.

SO WE'RE GOING TO REALLY FOCUS
ON THAT.

OVER ALL WE HAVE A 5 PERCENT
INCREASE IN OUR CONTACT TEAM
WITH OUR VENDORS AND WE'RE
CALLING THEM TO CERTIFY A
BUSINESS ENTERPRISES AND WE'RE
STRIVING TO MAKE CHANGES HERE,
AND WE HAVE AL BIG CONTRACT THAT
WOULD LIKE TO USE AND WE'RE
DOING A LOT OF BUSINESS WITH
THEM NOW.

>> I'M HAPPY TO HEAR THAT GRACE.
I'LL MAKE SURE THAT NEAL PUTS ME
IN TOUCH WITH YOU.

FOLKS THOSE ROPES.

GET ME IN TOUCH WITH GRACE.

WE WILL GO, GO.

THANK YOU SO MUCH COUNSELOR.
YOU KNOW, IT'S BEEN A LONG DAY
IN BUDGET HEARINGS WHEN YOU CAN
GET NEAL TO UN-MUTE IN SESSION.
OK.

I THINK THAT IT'S JUST ME, AND
THEN WE WILL BE WRAPPING UP.
SO I WILL JUST -- AND I WILL BE
BRIEF.

I DO WANT TO JUST SAY I THINK
THE -- I HAD THE OPPORTUNITY TO
DO ONE OF THE NARCAN TRAININGS
AND I WITNESSED AN OVERDOSE IN
LAST MAY AND I WENT TO THE JUNE
TRAINING AND IT WAS REALLY GREAT
AND IT ENABLED ME AT A CARRY
AROUND NARCAN EVER SINCE.
AND IT WAS AN AMAZING SECTION OF
THE CROWD THAT WERE TAKING THE
TRAINING.

IT'S REALLY A GREAT SERVICE.

I'M GLAD WE'RE FINDING WAYS TO
HAVE THAT PROGRAM EVEN IN COVID
TIMES ALTHOUGH I KNOW IT'S HARD
TO ADJUST.

I JUST HAD A COUPLE MORE BUDGET
QUESTIONS.

SORRY.

BUT ONE IS JUST -- I DID SEE
THAT -- AND I THINK THIS MIGHT
BE RELATED TO SOMETHING THAT YOU
SAID EARLIER, BUT, YOU KNOW, THE
NUMBER OF OUR ADMINISTRATIVE AND
UNPAID LEAVE INCREASED FROM 54
TO 125 WHICH IS ABOUT A 10TH OF

THE FTE'S IN THE DEPARTMENT SO I'M JUST WONDERING IF -- I COULDN'T TELL IF THOSE NUMBERS WERE PRE-COVID OR IF THEY REFLECTED A POST COVID TREND AND I WONDERED IF YOU WOULD SPEAK TO THAT.

>> YES, WE HAVE THE ANSWERS TO YOU.

SO IN THE DATA, ONE OF THE THINGS THAT HAPPENED THIS YEAR WITH COVID IS IS THAT WE WERE PUTTING SOME FOLKS ON ADMIN LEAVE BECAUSE THEY WERE EXPOSED AND WE DIDN'T HAVE ANY WAY TO DO THAT BEFORE WE ISSUED THIS POLICY SO WE ACTUALLY FACTORED THAT OUT AND THE UNPAID LEAVE IS 43 INDIVIDUALS. SO IT'S ACTUALLY FROM LAST YEAR.

>> SO FROM COVID.

>> RIGHT.

>> AND I GUESS MY OTHER QUESTION IS -- MY SORT OF STRUCTURAL BUDGET QUESTION IS, YOU REFERRED TO THE FACT THAT WE'RE COUNTING ON SIX BEDS TO COME THROUGH WITH THE MONEY, AND WE HAVE, SENT THEM THE MONEY THAT WE'RE PLANNING ON USING FOR REIMBURSEMENT ACCOUNT WAS ALREADY APPROVED FOR 120 MILLION FROM THE CARES ACT.

BUT IF I STILL FIND MYSELF WONDERING HOW WE FEEL LIKE WE MIGHT NEED TO CHANGE OUR PUBLIC HEALTH INFRASTRUCTURE, LIKE THE SORT OF CITY OPERATING BUDGET SIZE STUFF.

JUST BASED ON THINGS THAT WE LEARN FROM THIS AND ALSO WAYS THAT WE'RE GOING TO HAVE TO SUPPORT THAT COVID WORK THAT WON'T BE REVERSIBLE.

IN THAT SENSE IT GIVES ME A LITTLE BIT OF PAUSE TO BE TALKING ABOUT A PRE-COVID BUDGET, A BUDGET THAT WAS WRITTEN FOR THE MOST PART, BEFORE WE KNEW IN JANUARY, ALTHOUGH WE KNEW THERE WERE LAST MINUTE ADJUSTMENTS AND ESPECIALLY BECAUSE I KNOW THE EPHC BUDGET IS GOING UP THIS YEAR MORE THAN OTHER DEPARTMENT

BUDGETS IN THE CITY, I ALSO NOW ONE KEY FACTOR IN THE FACT THAT IS EPCH -- IT'S NOT AS MUCH OF AN INCREASE OVER OTHERS BECAUSE IT'S LIKE 10 PERCENT BUT PENSIONS AND SUCH HAVE GONE UP LIKE 9 PERCENT AND WE SEE THAT WHERE IT'S BROKEN OUT IN THE BUDGET.

SO I JUST -- I'M JUST WONDERING ABOUT WHAT THE CONVERSATIONS HAVE BEEN ABOUT WHAT WE NEED TO DO STRUCTURALLY TO SUPPORT THAT SORT OF FEMA-ELIGIBLE CARES ACT ELIGIBLE WORK ON OUR SIDE.

>> SO WE'RE WORKING ON THE FEMA REIMBURSEMENTS AND YOU KNOW FEMA HAD THE 75 PERCENT PAYOUT AND WE'RE HOPING THEY WILL GO UP TO 90 OR EVEN A HUNDRED SO WE'RE JUST STARTING TO PUT THAT TOGETHER.

AND THEN SPEAKING ABOUT BUDGET CHANGES, WE STARTED A CONVERSATION ABOUT THAT.

AND WE'VE BEEN REALLY BUSY AND HAVEN'T HAD A LOT OF TIME TO DIG INTO THAT.

AND THE BUDGET INCREASE IT WAS SALARY INCREASES FOR THE MOST PART, AND MOST OF THAT WAS ACTUALLY IN THE DAY UNIT AND NOT A LOT TO ADD TO ADDITIONAL PROGRAMMING BUT THERE'S A LOT MORE TO THINK ABOUT HOW WE'RE DOING THE BUDGETING.

>> GREAT.

THANKS SO MUCH FOR THAT.

I THINK THOSE ARE ALL MY QUESTIONS, AND I'M VERY CONSCIOUS OF THE EXTRAORDINARY LATE HOUR, ESPECIALLY GIVEN WHEN WE THOUGHT WE WOULD BE STARTING THIS, SO IF ALL OF MY COLLEAGUES ARE ALL SET, COUNSELOR, I SEE YOU, ALL SET?

>> THANK YOU.

ALL RIGHT.

THEN I JUST WANT TO TURN TO -- I DO HAVE FOUR PEOPLE IN THE ATTENDEE BOX AND THEY MAY BE WATCHING BUT I WANT TO MAKE SURE THAT DR. SANDRA AND IF ANY OF YOU ARE HERE TO TESTIFY PUBLICLY

IF YOU COULD JUST RAISE YOUR
BLUE HANDS IN THE CHAT.
THEN I CAN ADMIT YOU.
I WILL -- JUST HANG TIGHT FOR
ONE SECOND.
I UNDERSTAND.
DERRICK IS NOT GOING TO PUBLICLY
TESTIFY.
ALL RIGHT.
ONE MORE TIME.
DR. MANGUAL, STEPHENS AND
DAWN -- ALL RIGHT.
SEEING NONE, I THINK IT'S TIME
SAY THANK YOU, RITA AND YOUR
WHOLE TEAM AND ALSO PROBABLY THE
MVP OF THE DAY, CHIEF PULLEY FOR
REAPPEARING.
>> SPECIAL APPEARS BY CHIEF
PULLEY.
>> INDEED.
I WOULD LIKE TO -- IT HAS NOW
BEEN NINE HOURS AND 13 MINUTES
SINCE WE BEGAN THIS FROM --
>> AND YOU CHECK YOUR BOX FOR
PUTTING UP WITH US ALL DAY.
WE APPRECIATE YOUR SUPPORT AND
EVERYTHING YOU DID TO MAKE OUR
JOBS GO WELL IN HERE.
AND THOSE OF YOU THAT WE HAVEN'T
MET I HOPE TO BE ABLE TO IN THE
FUTURE.
>> LOOKING FORWARD TO THAT.
ALL RIGHT.
WITH THAT, THIS MEETING OF THE
BOSTON CITY COUNCIL WAYS AND
MEANS COMMITTEE IS ADJOURNED.
THANK YOU ALL.
>> BYE EVERYBODY.
THANK YOU.
>> YOU ALL NEED BETTER MASKS.
[LAUGHTER]
>> GOOD-BYE.