

MINUTES OF THE BOARD OF HEALTH

A meeting of the Boston Board of Health (Board) was held at 4:00pm on Wednesday, November 9th, 2022 by Remote Participation Pursuant to An Act Extending Certain COVID-19 Measures Adopted During the State of Emergency.

Board Members Present

Dr. Sandro Galea, Chair, Guale Valdez, Rebecca Gutman, John Fernandez

Others Present

PJ McCann, Dr. Bisola Ojikutu, Michele Clark, Gerry Thomas, Batool Raza, Tim Harrington, Leon Bethune, Duncan Silayo, Tegan Evans, Krystal Garcia, Jen Tracey, Sarah Horsley, Catie Burbage, Jennifer Cook, Steve Simmons, Tori Cowger, Catherine DVileskis, Nancy Lessin, Stacey Kokaram, Vanessa Manzi, Helen Ayanian, Cheryl Buckman, Uchenna Ndulue, Hamilton Paul, Gregory Grays-Thomas, Sarah Horsley.

Chairperson's Remarks

Dr. Galea: Good Afternoon, fellow Board of Health members, Boston Public Health Commission staff, and members of the public. Welcome to our November Board of Health meeting. This meeting is being conducted by remote participation as authorized by state law and any votes will be taken by a roll call of the members.

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

This afternoon, we will hear a report from the Executive Office, as well as a report from our audit team regarding BPHC's financial statements, updates on COVID-19 and other infectious diseases, followed by updates and discussion on BPHC's role in Boston's efforts to address unsheltered homelessness and substance use disorder, particularly in the area of Mass and Cass, as we head into winter months.

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

Executive Office Report

Thank you. I want to start by thanking the staff who worked to organize two staff appreciation events we held over the past month to celebrate and acknowledge staff. These kinds of events are an important part of our Workplace Improvement Initiative and I appreciate that staff across our bureaus and offices came together to pull them off. Mayor Wu joined us at the event at our Northampton Square campus, which I really appreciated.

I want to address recent community violence in Boston, particularly the devastating incidents involving young people. Violence prevention is core public health work. The Child, Adolescent, and Family Health Bureau's Division of Violence Prevention continues to prevent, intervene, and respond to violence in the city of Boston. In addition to programming to support youth violence prevention, the Division's Neighborhood Trauma Teams provide immediate support and referrals for ongoing behavioral health services to anyone affected by community violence. They and others from BPHC also support community meetings and listening sessions following incidents. I want members of the public to know that BPHC is here to help. Access to the NTT support hotline 24/7, 365 days a year at 617-431-0125. We know that more needs to be done; our staff are actively engaged in violence prevention strategic planning efforts with sister City agencies. I hope to share more details about that work in the future.

I also want to acknowledge the connection of youth behavioral health, the ongoing work that the new Center for Behavioral Health and Wellness is developing and I look forward to inviting Dr. Simon to share updates on the planning work he has been engaged in at a future meeting.

Another issue that the region is facing is the increase in migrant individuals and families seeking asylum. I know that this influx has placed an added strain on Boston's hospitals and community health centers, as well as the ecosystem of immigrant-serving organizations. Staff from our Office of Public Health Preparedness, the Homeless Services Bureau, Intergovernmental Relations, and Executive Office have been in close contact with colleagues in City and State government to address the immediate needs and establish emergency plans for potential larger-scale arrivals. I particularly appreciate everything Chief Dillon, the Mayor's Office of Housing, and our colleagues at the State are doing to address the immediate shelter needs of families and our shelters for stepping up to serve recent arrivals. BPHC is committed to doing everything we can to support these efforts.

As you may have seen, BPHC's Biosafety Program was in the news recently following coverage about a preprint of an article about COVID-19 research conducted in BU's Biosafety Level 3 lab. The Boston University Institutional Biosafety committee, Boston Biosafety Committee and Boston Public Health Commission approved this research in March 2020. It appears that this work was consistent with BPHC approvals and was carried out in compliance BPHC's safety requirements. Issues in the press related to the way federal funding sources were cited are being addressed by BU. We have also asked our external biosafety consultants to review our application review processes to identify any recommended improvements.

I would also add that we have been working with the Boston Planning and Development Agency on a Life Sciences Action Agenda document that is intended to provide the public and stakeholders with clear guidance about lab siting and oversight.

As many of you know, this week Boston hosting the annual meeting of the American Public Health Association. I'm pleased to say that BPHC has very well represented at the conference, participating in at least 15 different sessions, showcasing the breath of our team's expertise, our contributions to the field, and the strength of our focus on addressing racism and advancing health equity.

In keeping with our commitment to evaluate all options to confront our most pressing public health challenges, last month I joined several colleagues from BPHC and other agencies in conducting a site visit of New York City's first Overdose Prevention Centers, operated by OnPoint NYC. We were impressed by the sites and the data they shared about their outcomes since opening in November 2021. This trip was an important step in our ongoing evaluation of new models to provide harm reduction services in Boston.

Turning to personnel news; I'm excited to share that we have filled some key positions. First, I am happy to share that Taneesha Peoples will be joining BPHC as our new Director of Human Resources, and second, that Jeanette Desenclos who has previously served as Assistant Director of Operations has accepted the position of Director of Operations on a permanent basis after serving in an interim role. Please join me in welcoming these Taneesha and Jeanette to these new roles that will help to strengthen our organization.

I also want to share that BPHC held a grand reopening and expansion of COVID-19 testing and vaccination services at the Bruce Bolling Municipal Building in Roxbury's Nubian Square.

The free walk-in clinic is open Tuesdays through Saturdays, from 12 to 8pm, serving people 6 months and older. In addition to PCR testing, the clinic offers the J&J Janssen, Moderna, Pfizer BioNTech, Novavax COVID-19 vaccines, and the omicron-specific Moderna and Pfizer BioNTech bivalent boosters. Flu shots are also available, including the high dose flu vaccine for individuals 65 and older.

This expansion is part of BPHC's efforts to improve access to care in communities that face the greatest barriers to care and ensure the city has enough COVID-19 and flu resources in place in the event of a sudden spike in severe illnesses this winter. That is all for today. I welcome any questions.

Dr. Galea: When you look at HR at the position, is the balance of unfilled positions better or worse than it was a year ago?

Dr. Ojikutu: We have fluctuations between 16-22% of open vs. filled. Challenges are different with new positions and existing roles. In short, we have seen an increase in open positions, but hiring and retention is a longstanding cross-public health challenge. We're looking at why. Looking at open positions at the lower end of our scales. That requires work with organized labor and we've been working on this. We are happy to share more in the future. I can say that citywide the City of Boston is working on making itself a better place to work. Housing is the highest need.

Gutman: Thank you for highlighting the Workplace Improvement Initiative, which I appreciate. I'm curious about collaboration and proactive thinking with the unions. There is a lot of opportunity. Also, appreciate your focus on violence prevention. Are there also conversations with neighborhood residents?

Dr. Ojikutu: In labor conversations we have been looking at new ways to recruit and retain. I agree this is about more than just the bargaining process, and it's about meeting pressing needs. In terms of violence, there have been a number of community listening sessions, spearheaded by the mayor with BPD, BPS.

Valdez: With respect to migrant families; what allowances have we made for additional resources?

Dr. Ojikutu: Absolutely; we recognize that meeting these needs will require significant resources; this is why we have been working with City and State; recognizing that we need to continue to work in collaboration.

Acceptance and Approval of Minutes from the September 14th Meeting

Dr. Galea: If there is no discussion, I will accept a motion to approve the revised minutes from the September 14th Board of Health meeting.

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

Dr. Galea: Now I will turn it over to Director of Administration and Finance Tim Harrington to introduce an update on BPHC's annual financial audit.

Finance Audit Update

Tim Harrington, Jennifer Cook from auditors Clifton Larson Allen present posted slides.

Ms. Cook noted that generally the auditors also meet with a member of the Board. Mr. Harrington noted that he will follow up to seek a volunteer from the Board.

Mr. Valdez asked about the status of the negative net position.

Ms. Cook responded that the negative net position is driven by the net pension liability, or OPEB, common to government agencies because these pensions are funded over long periods of time. Without those liabilities the net position would be positive.

Mr. Harrington noted that the Federal Emergency Management Agency (FEMA) reimbursement continues to be a time-consuming process which in part depends on Congress. Those reimbursements will continue to improve our position over time.

Galea: Now we will hear from Deputy Commissioner Dr. Hall for an update on COVID-19 and other infectious diseases.

COVID-19 and Infectious Disease Update

Dr. Hall and Dr. Ojikutu presented posted slides.

Dr. Galea asked: are there plans to collaborate on investigating concerns that masking may inhibit teaching, learning, and social development.

Dr. Hall noted that this is something we are interested in studying more closely in collaboration with other partners, and that there does not appear to be a strong base of research yet on these issues. We are also thinking about how to make learning, make school, easier, make it fun again, and protect children at the same time.

Dr. Galea said thank you, that would be helpful in informing future decisions. We had received updates about efforts to improve air quality in Boston's schools, and there is a lot of heterogeneity in terms of our buildings. Can you share more about where remediation efforts are headed?

Dr. Ojikutu: Thank you for the question; it's an incredibly important one and one that the City has prioritized. As you've noted, we've heard updates from BPS and we can think about presenting additional information and updates to the Board.

Leon Bethune, Community Initiatives Bureau Director added that BPS has increased ventilation, and cleaning throughout schools, and increase cleaning when there is an outbreak. From BPS's previous presentation, we heard about initial steps to assure that air quality is monitored and issues are responded to. We would be happy to facilitate additional information being shared.

Ms. Gutman: I would be interested in hearing how schools differ, and whether there are any differences between neighborhoods, considering race and ethnicity.

Dr. Galea: I agree and think we should follow this conversation at a future meeting.

Unsheltered Homelessness and Substance Use

Note: meeting discontinued prior to delivery of posted presentation due to regional Zoom outage. Presentation materials were distributed to the Board and made available to the public at www.boston.gov/bphc.

Attest:

/s/ PJ McCann

Deputy Commissioner for Policy and Planning, Board Secretary