



**MINUTES FOR THE MEETING OF THE BOARD OF THE
BOSTON PUBLIC HEALTH COMMISSION
Thursday, February 7, 2013**

The monthly meeting of the Board of the Boston Public Health Commission (“Commission”) was held on Thursday, February 7, 2013 in the Hayes Conference Room at the Commission’s offices at 1010 Massachusetts Avenue, 2nd floor, Boston, MA 02118.

Board Members Present:

Paula Johnson, MD, MPH, Chair
Ruth Ellen Fitch, JD
Harold Cox
Kate Walsh
Celia Wcislo

Also Present Were:

Dr. Barbara Ferrer, John Townsend, Fatema Fazendeiro, Kathy Hussey, Chuck Gagnon, Maia BrodyField, Dr. Huy Nguyen, Janine Anzalota, Pam Jones, Paul (PJ) McCann, Nick Martin, Bradley Moore, Mitchell Thomas, Gerry Thomas, Megan McClaire, Jose Masso, Jim Hooley, Lauren Kreitman, Lauren Van Aken, Jonathan Coveney.

Proceedings:

Chairwoman’s Comments

Paula Johnson, MD, MPH

- Vice Chairwoman Fitch opened the meeting as Dr. Johnson was delayed. She inquired if we had a quorum, was informed we did not at that time, then Ms. Fitch turned the meeting over to Dr. Ferrer.

Executive Director’s Report

Barbara Ferrer, PhD, MPH, MEd

- Dr. Ferrer thanked Members Fitch, Cox and Johnson for participating in the all-day Local Public Health Assessment retreat held at the Whittier Street Health Center. She noted that Pam Jones would report on the results later in the meeting. Dr. Ferrer acknowledged Board participation in the event and what a big difference it made in the community. She particularly singled out Gerry Thomas and Pam Jones for their tremendous efforts in organizing the event.
- Board Member Cox also commended Ms. Thomas and Ms. Jones and all the staff for an excellent job noting that the event was very well organized, very thoughtful, and a great process for involving the community in the public health of Boston.
- Dr. Ferrer indicated influenza is on a downward trend in the City of Boston with the rates for emergency room visits down to about 2% from a high of 6.5% - 7%; also only 45 new cases have been reported in the last week.

- Dr. Ferrer announced the launch of the *Boston Moves for Health* corporate challenge “Race to the Beach.” Boston Moves Director, José Massó, explained over 100 teams and over 20 organizations are participating city-wide in a *virtual* race to Miami Beach competing for the most miles accumulated. Mr. Massó said the challenge lasts four (4) weeks.
- Dr. Ferrer informed the Board that Mayor Menino declared a snow emergency beginning at noon Friday; all Boston public schools will be closed and Boston City departments will be closed with the exception of essential services; Boston EMS, Homeless Services and the Methadone clinic will be open. The Mayor urged other organizations to follow suit to limit the number of non-essential people coming into the City.

Discussion: Public Health Department Accreditation

Dr. Huy Nguyen, Medical Director

- Dr. Nguyen explained accreditation is a status providing public notification that an organization meets certain quality standards and noted certain state legislatures have passed laws requiring local health departments to become accredited. He clarified that this is entirely voluntary at this point and that this a national accreditation and national standards put forth by the non-profit organization Public Health Accreditation Board (PHAB), whose goal is to drive an ongoing commitment to self-study, quality improvement, and external peer review.
- Dr. Nguyen stated the PHAB standards are based on 12 domains organized around the 10 essential public health services which include monitoring the health status of the community; enforcing laws and regulations; maintaining administrative and management capacity; and maintaining the capacity to engage the governing entity, i.e. the Board. Dr. Nguyen mentioned meeting with the Massachusetts Department of Public Health (DPH) regarding what they see as their role in public health accreditation.
- Dr. Nguyen said we received two grants from NACCHO that support the BPHC exploring accreditation: one supports a coordinator - Bradley Moore; the other supports costs of the project and provides technical assistance and coaching. Dr. Nguyen stated these grants would help us to get an idea of our readiness and help with developing a work plan.
- Dr. Nguyen explained there are 7 steps involved with the accreditation process noting the accreditation is good for 5 years; there are annual reports to submit, an ongoing commitment to quality improvement as well as a commitment to reapply after 5 years. He stated costs for time, staff, materials and other resources would be incurred in addition to a PHAB fee of \$31,800 spread out over the 5-year period.
- Dr. Nguyen noted some implications with this process including: ongoing commitment; unknown risks from failure to achieve or loss of accreditation; unknown outcome of quality or performance of public health departments; unknown impact on BPHC racial health equity framework; and no guarantee of sustained support beyond the first 5 years.
- Member Wcislo wanted clarification on the point regarding unknown outcome of quality and asked for an example of public health quality. Dr. Nguyen responded an example would be the production of a community health assessment or a community health profile. He stated the actual standard denotes several things that would be important for a high quality profile including things like community engagement and broad participation by stakeholders in the community.
- Dr. Nguyen described potential internal benefits such as quality improvement and a process for accountability; staff engagement; and engagement with the Board. He noted some of the potential

benefits such as national, state and local recognition and credibility; participation in a growing database of best practices; and the possibility of access to funding streams and streamlined grant reporting.

- Dr. Nguyen presented information from November, 2012, indicating 108 health departments have begun the accreditation process nationwide with the ultimate goal of having 60% of the nation's residents served by accredited health departments by 2015.
- Dr. Nguyen would like to enlist the Board's leadership and advice during this process by becoming involved with learning about national public health accreditation and contributing to the accreditation development and preparation.
- Mr. Cox thanked Dr. Nguyen for his efforts and encouraged us to move forward. Mr. Cox, familiar with PHAB, agreed that it is not completely clear what accreditation actually means in terms of improving quality.
- Another issue Mr. Cox raised was the fact no other communities in Massachusetts have moved forward on accreditation with the reason being some health departments are very small and do not have the capacity or resources to do so. He encouraged Dr. Nguyen to reach out and work with other health departments outside the city who might also consider doing this.
- Dr. Ferrer pointed out that we would be getting accredited and be judged on a set of services and systems without any funding source to support it. She noted that unlike hospitals, health centers, or schools that get a funding source which guarantees them a basic infrastructure, BPHC does not. Given the small amount of federal funding we do get, Dr. Ferrer noted that BPHC would not be able to operate if the City Dr. Johnson also wanted to know if there is an inclusive process by which PHAB makes its policies. Dr. Nguyen said the short answer is yes and that what matters most is how the standards were developed over a long period of time. Lastly, Dr. Johnson inquired if we, or PHAB, have estimated the costs to the Commission for accreditation. Dr. Nguyen replied that right now, it's unknown. Dr. Ferrer anticipates the costs for us will be significant, mostly in terms of people's time pulling together documents, using the retreat on Saturday as an example. She will defer to the Board on whether we go forward with accreditation and that has been made clear to PHAB.
- Member Wcislo and Dr. Johnson asked for a list of pros and cons and more information about what the process would look like and the costs involved before the Board is prepared to decide on whether the BPHC should seek accreditation as well a time line of how long the process may take.

Acceptance and Approval of Board Meeting Minutes

- Dr. Johnson called for a motion to approve the January minutes. Board Members Wcislo and Fitch seconded Dr. Johnson's motion with no objections. The Board Members then unanimously approved the January 10, 2013 Board Meeting Minutes.

Discussion: The Boston REACH Obesity & Hypertension Demonstration Grant

Janine Anzalota, Director for the REACH Obesity and Hypertension Demonstration Grant

- Ms. Anzalota explained the overall goal of the REACH Grant, which was awarded by the U.S. Centers for Disease Control and Prevention (CDC), includes the development and implementation of strategies that reduce inequities in obesity and hypertension in people of color within the City of

Boston and the evaluation of strategy impact and dissemination of lessons learned. She noted that the CDC would like strategies that work in Boston to be replicated nationally.

- Ms. Anzalota described the leadership group: BPHC's Chronic Disease Prevention and Control division would be the Project Lead with Core Partners being the Boston REACH Coalition, the YMCA of Greater Boston and the Harvard School of Public Health.
- Ms. Anzalota noted that Boston was one of only two cities awarded this very competitive grant worth \$4.6 million to be used over a three year period from September 30, 2012 through September 29, 2015.
- Ms. Anzalota stated the target populations for the project are Black and Latino adults, youth and children, which is why the project is targeting the neighborhoods of Dorchester, Mattapan, Roxbury, East Boston and Hyde Park.
- Ms. Anzalota continued by noting that there is a Work Plan which is divided into six categories: healthy beverages; community physical activity; "out of school" time; hypertension; communications; and mentoring. She noted they want to integrate some of the framework from the Commission's Professional Development Series into their work plans.
- Ms. Anzalota indicated the timeline for the grant began with the submission of Work Plans on January 28, 2013, and will continue with the assessment and implementation of activities beginning April 1, 2013. She went on to explain some of the broad objectives for each of the Work Plans over the three year period. Ms. Wcislo inquired how would they evaluate or measure whether or not they reached an objective. Ms. Anzalota responded that there are detailed work plans associated with each objective to help evaluate and measure.
- Ms. Anzalota presented information from the CDC on factors that affect health, especially the socioeconomic factors that impact health inequities the BPHC sees throughout the City. She reiterated that the CDC is explicit that we use the funding to change the context to make individuals' default decision to make healthy choices. Noting the aggressive, complicated and extensive timeline, she asked the Board for suggestions on how to extend the project's reach.
- Ms. Wcislo commented that there is a large population of Black and Latino union members in the City and wondered if there was a way to use our database or some of our other sites to get materials out to them. Dr. Ferrer also wondered if there would be opportunities for unions in general to use contract negotiations as a way of getting management to provide greater access to healthier food options. Ms. Wcislo responded that rather than be part of a formal legal contract, she believes there would be interest of stewards, delegates, members and employers to sit down and figure out how to collectively contribute to this issue as part of labor management meetings.
- Ms. Wcislo suggested facilitating a presentation by Ms. Anzalota to the Greater Boston Labor Council.
- Ms. Walsh wanted to know what measure we have taken to gain input through community meetings. Ms. Anzalota replied that the REACH Coalition and the VIP Coalition have been getting feedback from the community meetings and will share their feedback with Ms. Anzalota.
- Ms. Fitch thought it might be a good idea to work with the neighborhood small stores; the people who are selling the services, food, etc. She believes there may be some creative, low-level ways which would be worth the effort to get them involved.
- Dr. Johnson commented that the community members, Boston REACH coalition and others have been built such a strong foundation in the community which is part of the BPHC's success in being awarded the grant.

Discussion: Boston's Public Health System Assessment

Pam Jones, Director of Policy & Planning

- Dr. Johnson commended Ms. Jones and Ms. Thomas on the tremendous effort and incredible job that was done on the assessment. Ms. Jones then presented background on the Local Public Health System Assessment (LPHSA) retreat held February 2, 2013 at the Whittier Street Health Center. She explained that LPHSA is based on the 10 Essential Public Health Services which is part of the Mobilizing for Action through Planning & Partnership (MAPP) process and done in partnership with the Boston Alliance for Community Health (BACH).
- Ms. Jones gave a broad overview of the retreat. She stated that 140 people registered for the event and that there was broad representation among the participants ranging from young people to seniors, community based organizations to faith-based organizations, three members of our own Board, and a number of people from our sister city agencies.
- Ms. Jones stated this was the first assessment done in Boston and Massachusetts. She stated it reflected the health equity/racial justice lens framework and that people were impressed with the quality of the discussions. Ms. Jones indicated that the Local Public Health System Assessment fulfills one of four MAPP requirements. She noted this will also contribute to the accreditation process should we decide to go down that road.
- Ms. Jones acknowledged all the participants, Board Members, Dr. Ferrer, the Planning Committee, the facilitators and note takers, all the BPHC and BACH staff and contributors.
- Ms. Jones noted the next steps would be to submit the data to the CDC; convene debrief meetings with the Planning Committee and others; develop a communications/dissemination plan; feed results into the MAPP process; and determine how to act on recommendations beyond MAPP.
- Ms. Jones posed some questions to the Board: What are the strengths and challenges from the Board's perspective? How does the data from LPHSA get used by the Board/the Commission? How might the results influence what we do?
- Dr. Johnson commented that this was a phenomenal piece of work and she would like to hear some of the results at a later time to have a robust discussion about the process, the responses and the next steps. Ms. Fitch commented that the success was directly attributed to the planning.
- Ms. Wcislo was impressed with the 84% turnout for the retreat. Dr. Johnson concluded by thanking Ms. Jones, Ms. Thomas and all those involved for an outstanding job.

Adjournment

At this point, Dr. Johnson called for a motion to adjourn. Ms. Wcislo and Ms. Fitch seconded the motion with no objections. Dr. Johnson then called for a second motion to go into Executive Session. Dr. Ferrer and Ms. Wcislo seconded that motion with no objections. The meeting was adjourned at 5:45p.m.

Submitted By:

Kathy Hussey, Secretary