MINUTES OF A MEETING OF THE BOARD OF DIRECTORS
April 1, 2010

A meeting of the Board of Directors of the Boston Public Health Commission was held on Thursday, April 1, 2010 in the Hayes Conference Room at the offices of the Boston Public Health Commission, 1010 Massachusetts Avenue, Boston, MA 02118.

Director’s Present:

Paula Johnson, MD, MPH, Chair
Celia Wcislo
Ruth Ellen Fitch, JD
Harold Cox
Joseph Betancourt, MD, MPH
Kathleen Walsh

Director’s Absent:

Jack Cradock

Also Present Were:

Barbara Ferrer, Ph.D., MPH, M.Ed, John Townsend, Maia BrodyField, Mark Campbell, Timothy Harrington, Jim Hooley, Gerry Byrne, Anita Barry, Pam Jones

Guests:

Demar Coleman, Khari Anderson, Mbakure Okafor, Louis Santos, Brian Lawrence, Tishonda Leo, Katelyn Bushy, Kathleen Brill

Counsel Present:

Nakisha L. Skinner, General Counsel

Call to Order

Dr. Paula Johnson, Chair, called the meeting to order at 5:10 PM. A quorum of directors was present and the meeting, having been duly convened, proceeded with business.
Approval of Minutes

Dr. Paula Johnson, Chair presented to the Board the minutes of the March 2, 2010 meeting of the Board for approval, whereupon a motion was duly submitted, seconded and unanimously adopted.

Executive Director’s Report
Barbara Ferrer, PhD, MPH, MEd

Dr. Ferrer welcomed Kathleen Walsh to the Commission’s Board of Health. Kathleen Walsh is the new President and CEO of Boston Medical Center.

The Commission has received official notification on the two major grants pertaining to the Tobacco Control Initiative and to Chronic Disease Prevention and Health Promotion. The grants are referred to as the CPPW (Communities Putting Prevention to Work) grants. The focus for both grants will be on policies. The Board will be actively involved as discussions happen around policies. Both grants require that the Mayor set up a leadership team to govern the grants. The grants will support 50 full time jobs for a 2 year period and 15 youth stipends.

The State has received funding in the amount of $300,000 to support chronic disease prevention work.

The Commission has identified three overarching Commission goals for FY11:

- Reducing the low-birth weight gap: Maternal and Child Health Division;
- Reducing obesity gap: Chronic Disease Prevention and Control, and
- Reducing STI gap: Infectious Disease Bureau

The Commission will be developing materials and will use the materials so that each bureau will have the opportunity to go through a strategic planning process which will allow them to figure out how to align their work differently in order to achieve the FY11 overarching goals.

Starting this fall the Commission will engage participants at our community meetings as well as community partners and residents in understanding the work that the Commission is doing.

Demand on the primary care system has increased as a result of the state’s landmark health care reform law. Frustration among patients and providers has been growing about how primary care services are delivered. In response, the Mayor convened the Mayor’s Task Force on Improving Access to Primary Care in Boston. The task force developed a primary care framework for the City of Boston and issued a series of related recommendations. In 2009, following the final recommendation from the task force, the Mayor outlined three of the recommendations for immediate implementation:

- Convene a consortium of health career awareness and pipeline programs;
- Establish a Mayoral prize for innovations in primary care, and
- Develop a website that would act as a portal for the recruitment and retention of primary care providers.

Presentations and Updates

FY11 Budget: Approval and Vote
John M. Townsend, Director of Administration and Finance
The original FY11 budget, submitted to the Mayor, was based upon a 4% cut in City funding. The City restored 3% of the funding leaving a proposed 1% cut in funding for FY11.

The following items have been restored or added to the FY11 budget based upon the renewed City funding:

- Improve capacity to serve families and children in the Circle of Promise;
- Maintain capacity to provide services at Weintraub Center and Long Island to help transition chronically homeless to support housing;
- Maintain capacity to provide Opioid treatment services;
- Maintain capacity to support community based STI and HIV/AIDS prevention grants; and
- Maintain support for Community Health Centers.

The Commission will continue with the following cuts contained in the proposed budget in order to meet the 1% reduction in City funding:

- Reduction in position (7 layoffs, 1 retirement, 3 positions with reduced hours, 17 vacant positions eliminated;
- Elimination of the Health Connection Program; and
- Small reduction in Community Health Center Contracts.

In addition to the restoration of funding, the following adjustments were made to the FY11 Budget:

- The Emergency Shelter Commission for the COB was added as a Public Health Service Center;
- Other post employee benefits identified as a separate line item under other expenditures;
- Restored the position of Deputy Director; and
- City of Boston GO Debt number, under other expenditures finalized.

The Commission has received new external funding from the Centers for Disease Control as part of the ARRA initiative, Communities Putting Prevention to Work.

Continuing uncertainties for FY11 are utility costs, collective bargaining agreements and state funding.

**Vote to Approve the FY11 Budget**

Dr. Johnson invited a motion to vote to approve the FY11 Budget. The motion was made, seconded and approved.

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**Nutrition Action Club: Junk Food Free Month Campaign**

Codman Academy Charter Public School

The Codman Academy Charter Public School has started a nutrition action club. The nutrition action club, comprised of a group of students, are organizing April as junk-food free month (not bringing any junk food into the school from outside) to focus on reducing hypertension, a preventable condition which is greatly aggravated by high salt content in junk food. Salt and diet are major contributors to hypertension and food quality is an area of concern at most schools as well as at the Codman Academy Charter Public School. At Codman Academy Charter Public School all nutrition action club students are trained as health ambassadors promoting a culture of health which is the foundation of safety, equity and justice. The nutrition action club teaches students details about nutrition and health as healthy food is a priority.
Junk food is described as any food or drink that is high in saturated fat, trans fat, sugar, salt, calories, and that has little or no nutritional value. Junk food and soda poison and adversely affect academic performance.

Examples of healthier foods to look for are: fruits, vegetables, beans, lean meat (chicken-not fried), whole grain carbs, brown rice, whole grain bread, water and tea.

Examples of junk foods to avoid are: carbonated beverages, sports and energy drinks, candy, fast food, packaged foods (chips, cookies) and juices.

**Salmonella: Report on Community Outreach Education Campaign**
Anita Barry, MD, Bureau Director, Infectious Disease

Salmonella is a bacteria that causes an intestinal illness in people and animals. Some symptoms of salmonella are stomach cramps, diarrhea, fever, nausea and sometimes vomiting.

Salmonella is an infection that is reportable to the Commission. Once cases are identified, they are sent to a nurse or an epidemiologist who will conduct a case investigation and implement control measures. Cases of salmonella are identified by risk factors and demographics and every summer there is a peak in salmonella.

Salmonella is particularly high in infants and children under 14 years of age. Most cases are identified in the Chinatown area of downtown Boston in the Chinese community. There are many different strains of salmonella. In 2007 there was a new strain called Salmonella Schwarzengrund which affected 14 Boston residents.

In 2007 the Commission convened a food safety summit focused on the Asian/Pacific Islander community whose residents were directly affected by the outbreak. The food safety summit goals were to gain cultural perspective on food borne illness, learn about cultural foods and practices and to determine the risk factors to help reduce the risk.

In 2008 the Commission initiated a food safety campaign. In response to the summit the Commission held a press conference, placed a food safety promotion ad in local newspapers and notified agencies about the availability of educational materials pertaining to salmonella. A food safety video in Mandarin and Cantonese was posted on YouTube along with food safety brochures in multiple languages and cutting boards were distributed to 200 sites to encourage separation of raw, uncooked poultry from ready-to-eat foods.

Since the launch of the Food Safety Campaign, incidence rates of salmonella in the Asian/Pacific Islander community have declined.

**Adjournment**

There being no further business to come before the Board, the meeting was adjourned at 6:18 PM.

Respectfully submitted,

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Julie Webster, Recording Secretary