



BOSTON PUBLIC HEALTH COMMISSION

BOARD MEETING

APRIL 2, 2009

1010 MASSACHUSETTS AVENUE

HAYES CONFERENCE ROOM

MINUTES

Board Members Present:

Paula Johnson, MD, MPH
Ruth Ellen Fitch, JD
Jack Cradock,

Board Members Absent:

Hortensia Amaro, Ph.D., Vice Chair
Celia Wcislo, Elaine Ullian, Harold Cox

Administration & Staff Present:

Barbara Ferrer, Ph.D., MPH, M.Ed,
Nancy Norman, MD, MPH
John Townsend, Maia BrodyField,
Nakisha Skinner, Brad Cohen, Eileen Brigandi,
David Pia, Gerry Thomas, Isabelle Mathurin,
Rich Serino, Joyce Payne,
Peter Holtgrave, Linda Comfort, Ellen
Coletti, Cindy Engler, Mark Campbell, Nicole
Charon-Schmitt, Roy Martin, Latasha Cooper,
Deborah Allen, Jeanne Cannata, Tim Harrington
Rafael Genao, Jr., Sharyn Imonti, Bernadette
Moitt, Stephanie Doyle, Pam Jones, Peggy
Hogarty, Daisy DeLaRosa, Anita Barry, Betty
Holt, Jan Quiram, Rita Nieves, Michelle
Urbano, Julie Webster, Chuck
Gagnon, Ronnie Zuniga

Guests:

Scott Mason

Dr. Johnson, MD, MPH, Chair, called the meeting to order at 4:07 PM on Thursday, April 2, 2009.

Update: Reorganization of Adolescent Services – Deborah Allen

Deborah Allen, Director, Child/Adolescent Family Health, gave a presentation of the reorganization of adolescent services. Ms. Allen said that the Bureau's mission is to provide a life course framework for varied programs. Programs will place strong emphasis on the mind-body connection through life course theory. The mission of the Child, Adolescent and Family Health Bureau is to address the public health needs of children, youth and family whose health is most affected by social inequities.

Ms. Allen stated that the Bureau will strive to reflect principles in their approach to meet the health needs of groups that they serve through their programs and policy efforts. The Bureau's priority is the development of new programs and the reconfiguration of existing programs and an enhanced quality of those existing programs.

Update: Reorganization of Adolescent Services – Michelle Urbano

Michelle Urbano, Director, Division of Child/Adolescent Health, also spoke regarding the reorganization of adolescent services. Ms. Urbano started by introducing the CAFH team and thanked them for all of their hard work. Ms. Urbano said that the child/adolescent division was created in FY08 with a cluster of 65 FTE's and a budget of 5.5 million dollars. Ms. Urbano stated that the division is a work in progress and the division is refining and hoping to implement comprehensive programs by the summertime.

Ms. Urbano reported that a high percentage of the division's funding is from city dollars. There are 6-7 programs within the division:

- Adolescent Wellness
- Health Crew
- BAHEC
- School Health
- Youth Development Network
- Connecting Families to School
- Child/Adolescent Mental Health

Ms. Urbano spoke regarding the coalition of the division, the child/adolescent mental health program, which has been in existence for 7 years. The division's core principles are developmental and strength-based and the goal of the division is to map what is out there in the community. The division will be implementing a comprehensive summer program in July and a full service school model in September.

Objectives across the division are:

- Improved health knowledge of children and adolescents;
- Improved quality and access of health services;
- Increased standardization of messaging and practice; and
- Improved health status of children and adolescents.

Board member Fitch asked how the division's curriculum gets implemented into the schools. Ms. Urbano replied that the division's curriculum is not yet implemented in schools but has been piloted.

Dr. Johnson asked whether the division is moving care from the adolescent centers to the health centers. Ms. Urbano answered, no. Dr. Ferrer stated that the hope is to use the model of clinic based centers in the schools.

Dr. Johnson inquired about STI's and asked how the Division was actually able to increase the STI screening process. Cindy Engler, Director, School Health Program, replied, "by consistently presenting data."

Professional Development Consortium – David Pia

David Pia, Director, Human Resources, gave a presentation on the Consortium for Professional Development which is a new program within the BPHC. Mr. Pia reported that through the all-staff meetings, staff have identified a need and desire for enhanced staff development. A committee was established to explore ways to increase skills and competencies. The committee is taking a look at creating structure and being able to offer significant development services to staff.

Mr. Pia stated that the Consortium's mission is to educate, train and inspire Boston's public, private and non-profit public health workforce.

Professional Development Consortium – Brad Cohen

Brad Cohen, Director, Consortium for Professional Development, spoke regarding the goals of the consortium. Mr. Cohen stated the goals as the following:

- Increase competencies of the public health workforce to develop, deliver and sustain public health programming for the residents of Boston;
- Create a climate of continuous learning and professional advancement within the BPHC;
- Provide consistently outstanding public health training and education services for Boston residents and those who serve them.

The Consortium will offer professional development opportunities for academic partnerships, internships, new staff orientation, training skills and training functions. Continued training and professional development services will be provided through CHEC and the DelValle Institute for Emergency Preparedness.

Mr. Cohen reported that the program is due to start up in July and that the Consortium has already partnered with BU School of Public Health. Boston University School of Public Health will be working with the committee on a comprehensive assessment of staff development needs at no cost to the Commission.

Update: Strategic Planning Process and Results – Rita Nieves

Rita Nieves, Director, Bureau of Addictions Prevention, Treatment and Recovery Support Services, gave an update on the strategic planning process and results. Ms. Nieves stated that the Bureau was formed 6 years ago and that both the bureau itself and the field of addiction services have grown and developed enormously over the last 6 years. The Bureau currently provides addiction prevention, harm reduction, and treatment services, as well as other addiction resources and referrals.

Ms. Nieves said that the Bureau has undergone a new name (Bureau of Addictions Prevention, Treatment and Recovery Support Services) to better reflect the broad scope of work happening within the bureau. The goal of the strategic planning process is to ensure the ability to respond effectively and efficiently to the growing field of knowledge, as well as the current and emerging needs of City of Boston residents and communities as they relate to substance use and addiction.

Ms. Nieves stated that Boston continues to be one of the areas most heavily affected by substance abuse and barriers to access persist. Ms. Nieves also stated that the Bureau is in the process of revamping its website to better reflect its role as a centralized resource for residents, providers and elected officials.

Update: Strategic Planning Process and Results – Jan Quiram

Jan Quiram, Associate, Bureau Director, also presented on the strategic planning process and results. Ms. Quiram spoke regarding the priorities and goals of the Bureau. The Bureau has three major priorities:

Priority 1: to build internal capacity, including neighborhood capacity, to advocate for prevention and harm reduction efforts around the following identified areas of concern: fatal and nonfatal overdose, underage drinking and infectious disease harm reduction.

Priority 2: to identify and carve out a unique role as a city agency, based on identified strengths and resources, to fill gaps and unmet needs as identified by consumers, providers and other key stakeholders.

Priority 3: to build internal capacity to provide professional, high quality, comprehensive, and culturally appropriate services.

It is the mission and vision of the Addictions Prevention, Treatment and Recovery Support Services Bureau to set the direction and priorities for the City's comprehensive system of addiction and recovery services in order to make progress toward restored health and sustained recovery, and support the reintegration and active participation from the residents of Boston, their families, and neighborhoods ravaged by substance abuse.

Executive Director's Report – Barbara Ferrer

Barbara Ferrer, Executive Director, began by thanking Nakisha Skinner, General Counsel, and staff on the success of the blunt wrap lawsuit. Dr. Ferrer stated that it was an important victory for the Commission in that it supports the regulatory authority of the Board. Dr. Ferrer said the Mayor has approved the Board's submission of the FY10 Budget and the Commission is continuing to move forward with no lay-offs but that all state grants are at risk.

Dr. Ferrer announced that the REACH conference center for excellence summit will be held on April 3, 2009 at the Seaport Conference Center. Also the first autism summit for the City of Boston will also be held on April 3, 2009 at Blue Cross Blue Shield Foundation. The Mayor is in support of the bill to mandate health benefits for children with autism.

Lastly, Dr. Ferrer informed the Board that the Mayor has asked that monthly meetings be held after 5:00 PM in order for the meetings to be more easily accessible to the public.

Update: Primary Care Task Force – Maia BrodyField

Maia BrodyField, Chief of Staff, gave a brief update on the primary care task force. Ms. BrodyField stated that the summit was convened in 2008 and consisted of three working groups. The task force is looking at ways to improve primary care in Boston.

Ms. BrodyField said the current task force is meeting quarterly and coordinating with the state's efforts. Ms. BrodyField reported that there are now 4 working groups:

Payment and Performance: advance uniformity and alignment of performance measures, payment methodologies and payment incentives.

Focus:

- Review of payers, purchasers and provider efforts to promote and support primary care and the medical home model;
- Analysis of state level payment reform to align working group proposals and avoid duplication; and

- Consideration of medical home pilot or other delivery models for the City of Boston or other covered employees, families and retirees.

Workforce Capacity Working Group: support expanding the roles of non-physician health professionals.

Focus:

- Expansion of pipeline programs for high school students;
- Promotion of team care models which expand the scope of practice for non-physicians.

Workforce Recruitment & Retention: promote financial incentives to recruit and retain a robust and diverse primary care workforce in Boston.

Focus:

- Identification of practice redesign models that improve work conditions through increased efficiency;
- Development of website and other social marketing opportunities to promote Boston as primary care practice site;
- Inventory of residency training programs to identify best practice models for cultivating, nurturing and stewarding physicians into primary care;
- Study of housing incentives as recruitment/retention strategy.

Chronic Disease Prevention and Wellness Promotion: reduce the burden of chronic disease in Boston residents by improving access to nutritious food, increasing opportunities for physical activity and reducing exposure to environmental hazards, particularly in communities of color and low-income neighborhoods.

Focus:

- Promotion of prevention including healthy eating, physical activity and the creation of safe spaces essential to promoting healthy behaviors;
- Linkage between Community Centers and CHC's to capitalize on and enhance existing resources that promote physical activity;
- Expansion of workplace wellness activities through Task Force.

Board member Fitch stated that the most important factor is the safety factor, being able to walk safely in neighborhoods.

Ms. BrodyField said the next step is to review and solidify framework for an accessible, affordable, effective primary care system in Boston.

Dr. Johnson thanked everyone for all of their hard work and adjourned the meeting at 5:55 PM.