MINUTES FOR THE MEETING OF THE BOARD OF THE
BOSTON PUBLIC HEALTH COMMISSION
Wednesday, May 11, 2016

A meeting of the Board of the Boston Public Health Commission ("Commission") was held on Wednesday, May 11, 2016 in the Hayes Conference Room, 2nd floor, 1010 Massachusetts Avenue, Boston, MA 02118.

Board Members Present:
Paula Johnson, MD, MPH, Chair
Monica Valdes Lupi, JD, MPH, Executive Director
Harold Cox
Maney Lopes
Mychel Minter-Jordan, MD, MPH
Kate Walsh

Also Present Were:
Grace Connolly, Rita Nieves, Dr. Huy Nguyen, Tim Harrington, Chuck Gagnon, Kathy Hussey, PJ McCann, Mimi Brown, Anne Heerdegen, Debby Allen, Osagie Ebekozien, Steve Stephanou, David Pia, Ché Knight, Marje Nesin, Devon McCarley, Chief Jimmy Hooley, Gerry Thomas, Jeanne Cannata, Lisa Conley, William Kibaja, Rosa Santos, Brad Cohen, David Susich, Martha Farlow, Mia Brody-Field, Margaret Reid, Alyssa Cabrera, Jen Tracey, Vivien Morris, Debra Paul, Martha Farlow and Devin Larkin.

Proceedings:

Chairwoman’s Comments
Paula Johnson, MD, MPH

- Dr. Johnson welcomed everyone and thanked them for making the time to be here at this unusual hour for us. Dr. Johnson noted this is a special meeting for her and, of course, we're doing the budget. She thought it was a good sendoff because we're looking forward to the next year which is always an important moment. Dr. Johnson turned the meeting over to Ms. Vales Lupi.

Acceptance and Approval of the March 9, 2016 Board Meeting Minute

- Before giving her Executive Office report, Ms. Valdes Lupi asked for a motion for acceptance and approval of the March 9, 2016, minutes. Mr. Cox and Dr. Johnson seconded the motion with no objections. The March 9, 2016 Board Meeting Minutes were unanimously approved by the Board members in attendance.

Report from the Executive Office
Monica Valdes Lupi, JD, MPH
Executive Director, Boston Public Health Commission

- Ms. Valdes Lupi continued noting we tried our best to procrastinate on Dr. Johnson's last meeting so we could spend as much time as possible with her. Just quickly, in terms of the Executive Report, Ms. Valdes Lupi wanted to highlight some exciting things that we've done since our last board meeting and a preview of what's to come.

- On April 26, Mayor Walsh and Dr. Johnson hosted a great luncheon with hospital CEOs and representatives from different hospitals throughout the City. Ms. Valdes Lupi stated it was very well attended - all of the hospitals and then some; organizations she hadn't thought would be included, actually attended the meeting. It was a great introduction to the hospital CEOs for her. Many of them reached out to her after the luncheon. She's already scheduling follow-up one-on-ones with the CEOs so that we can begin looking at building on the collaborations Dr. Johnson and the Commission staff have developed over the years with them. Thank you for hosting such a successful luncheon.

- Dr. Johnson commented that she'd never quite seen a meeting with the hospitals that successful. She thought there was a genuine interest in viewing public health as a partner to improve health in the communities and the populations that they serve in the tradition of public health. It was the first time she really saw language being used around where you could
work together that was much more in line with what we would hope is a vision. Dr. Johnson stated that for Ms. Valdes Lupi and the Mayor together to have this opportunity, along with Dr. Nguyen as the Medical Director, and the rest of the Commission, thinks it's this moment in time that she knows we will seize that opportunity. She also thinks there's a transformative opportunity to address the health of the City of Boston, with our Community Health Center partners and our hospital partners, in a way that we have not been able to in the past.

- Ms. Valdes Lupi said it was definitely exciting. We had a running list of things we were ready to ask for, but they actually presented us two immediate follow-ups that the staff and I are already working on. The first is to convene some sort of advisory group or working group with the hospitals as they work through the new ACL model that Mass Health has presented to them. She has already reached out to Commissioner Monica Bharel at the State Department of Public Health to let her know we're doing that and will be having an internal meeting about it. The second area they flagged for us for immediate follow-up is our opioid and substance use activities and figuring out a way to work with the hospitals on a broad spectrum of issues from prevention and treatment to the recovery services that Jen Tracey has been leading for us as an administration. Ms. Valdes Lupi thinks it will be a great opportunity.

- The other thing Ms. Valdes Lupi wanted to share with the board was that each of them was given a copy of the Living Wage Ordinance Health Impact Assessment report. This was really led by Lisa Conley, who's our Director in our Intergovernmental Relations team, over the last year and a half to two years on a study on the Living Wage Ordinance. This was our first official press conference with Mayor Walsh. Ms. Conley and her team did a fantastic job pulling together all the stakeholders at the event with us. The Board, in all of your respective rolls, knows the important connection that income inequality has on the health of our communities. This was a great opportunity to showcase our analytic capacity partnering with UMass Boston, and the infrastructure and capacity of staff here at the Health Department, to look at this particular policy issue and promote some work and recommendations moving forward.

- Ms. Valdes Lupi again thanked Ms. Conley, Shannon O'Malley from our Research and Evaluation team, Maria Rios who works with Ms. Conley and Makaila Manukyan who works in our Office of Racial Health Equity team. They did a lot of hard work to get this study and report in this beautifully laid out final version. The report was made possible by a grant from the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and the Pew Charitable Trusts, with funding from the deBeaumont Foundation. Ms. Valdes Lupi also worked closely with the deBeaumont Foundation. They have invited her to come back. She'll bring Ms. Conley with her to their October board meeting where they'll present this work and maybe do some brainstorming with the Foundation about other opportunities. She would love to get and gather the Board members guidance on a potential new policy initiative that we can run through a similar analysis.

- Ms. Valdes Lupi also wanted to acknowledge Debbie Allen and Heavenly Mitchell on the Healthy Baby, Healthy Start team. They held a Health Start in Housing graduation last week. Mayor Walsh, Chief Arroyo and Ms. Valdes Lupi were on deck as presenters along with graduates from the program. We had 19 families who graduated from this program which is a partnership we have with the Boston Housing Authority ("BHA"). They prioritize housing vouchers women who have high risk pregnancies and are at risk of becoming homeless. We also had colleagues from the BHA at this event. It was a perfect way for us to end a very busy day and also leading into the Mothers' Day weekend.

- We had staff that joined the Mothers' Day Walk for Peace. Ms. Valdes Lupi thanked Catherine Fine and the Division of Violence Prevention. She believes we had over 50 walkers. One of our colleagues in the Executive Office, Debra Paul, had been leading a lot of the walk efforts before it became formal event for us here at the Commission. She thanked the Moms and the families who walked from Roxbury to City Hall.

- Before the meeting started, Ms. Valdes Lupi tried to quickly introduce our new Director of Administration and Finance, Grace Connolly who has joined us. This is her fourth or fifth week on the job. You'll hear more from Ms. Connolly during the Budget presentation. Also, a reminder that Rita Nieves is in full swing having assumed her role as Deputy Director for the last six weeks. Our new Chief of Staff, Catherine Cairns, begins next Monday, May 16, 2016.

- Ms. Valdes Lupi thanked PJ McCann for serving very skillfully in the Interim Chief of Staff role. PJ will be returning, in a transitional phase as Catherine comes on board, back to Tim and the General Counsel's Office. He has been promoted as our new Deputy General Counsel. Thank you and congratulations, PJ.

- Following our Board meeting and our City Council meeting tomorrow, the team will be going out to multiple sites across the commission to do All Staff meetings. This is something that we’ve traditionally done following the City Council budget presentation and final Board vote on the budget. We'll be going out, meeting with staff, talking about the budget for FY2017, introducing the new Leadership Team, and really having an interactive dialog with the staff about where we're moving ahead.

- We also have some Community Listening Sessions that are scheduled in the next two weeks. We can get the information to all of Board Members. We have four of them scheduled in Dorchester, East Boston, Roxbury, and Mattapan. The goal in these Listening Sessions is to share some updates on the work that we've done on trauma as
a city and gather some ideas for a new re-design of the trauma response. The Mayor has asked the Commission to take a lead on this and in partnership with colleagues from Boston Public Schools, Boston Children, Youth and Family, Office of Neighborhood Services, and others. We'll forward the list of the Listening Sessions. We hope that in the neighborhoods where our Board Members are, we can carve out some time and you're able to join us and share in some welcoming remarks with the community members. That rounds out our Executive Office report to the Board Members. Are there any questions? No questions from the Board.

- Dr. Johnson thanked Ms. Valdes Lupi for her updates and asked her to continue on with Ms. Connolly and the Budget Presentation.

Presentation: BPHC FY 2017 Budget Process and Overview
Monica Valdes Lupi, JD, MPH, Executive Director
Grace Connolly, Director of Administration and Finance

- Ms. Valdes Lupi stated they would do a walk-through of the FY17 budget for the Board, after some discussion and responding to some questions and answers, we'll ask for a motion to vote on the FY17 budget. She noted this should be familiar, but to just to recap, in building the budget for FY17 we actually followed a budget process that the City departments were instructed to do in terms of approaches and framework. First of all, the priorities in terms of spending we were encouraged to align it as well as we could with the Mayoral priorities to create a thriving, healthy, and innovative Boston. Where there were opportunities to look at inefficiencies that that would be the way to present new approaches to delivering up services and creating some capacity for new programming.

- As a reminder in terms of the process overall, there are three parts in building our fiscal year budget. The first is the development of the Maintenance Budget. We also had to submit ideas or proposals for new reforms. Then, finally, in order to get to reforms and new initiatives, we had to present different ideas for reductions and also revenue proposals. It's only through finding efficiencies that we're able to support investments in new activities.

- To recap the timeline, and you're probably sick of seeing this, but I'm grateful to remind everyone that this process actually started last year with the Board and the budget staff. We've worked since January to refine the budget to present to the Board in different stages and to work with our staff and colleagues at City Hall. Ms. Valdes Lupi introduced our colleague Steve Stephanou who's here representing the Office of Budget Management at City Hall. We've been working with Steve, the Mayor's Chief Financial Officer, the Board and the program staff to present the budget at different stages to the Board. Today, we'll seek your approval on the FY17 budget. We have our City Council hearing scheduled for tomorrow from 11:00a.m. to 2:00p.m. where we'll present the budget. And as mentioned earlier we have a number of All Staff meetings scheduled over the next couple of weeks.

- Ms. Valdes Lupi stated she likes to zoom out and present so we see where we fit into the larger context. The Mayor's Budget is, included overall across all the different departments and cabinets, nearly a $3 billion budget and maintains high levels of support for education and public safety and public health. There were also targeted investments made to support different reforms using savings. Those activities that all the departments were asked to engage in with our colleagues at City Hall, really focused on looking at reducing overtime expenses and looking at salary savings that could be achieved by eliminating vacant positions. At the Commission and other departments, there are often positions that have remained vacant for a period of time and that happens for a number of different reasons. That was something that all departments were asked to look at in the budget process this year.

- The Health & Human Services, led by Chief Arroyo, their budget actually increased by over 3.2% compared to FY16 ($3.6m) with investments in EMS, homeless services, addictions, and collective bargaining increases. When you look at that particular budget, this is due in large part because of the increases to the Public Health Commission's budget. Next is a chart depicting where our funding comes from. We are very lucky to have a fairly diverse budget with 46% ($168m) of our targeted budget amount coming from Boston City Appropriation. EMS third party billing accounts for another 29% with the rest coming from State and/or Federal Grant monies.

- The purpose of the Maintenance Budget is to provide sufficient funding for core functions and mission critical activities in the most efficient manner. The amount remains the same as the last time we presented the budget to you at $77,267,200 which is 4.5% total increase over FY16; after pulling out fixed costs, the increase for FY17 is closer to 1.8%. The overall increase to operating the maintenance budget is $1,346,265. When compared to FY2016 adopted budget, there is an increase of 37.3 FTEs overall for FY17. Ms. Connolly will walk us through this next part.

- Ms. Connolly presented a City Appropriation Summary chart. The base operating budget is the same as FY16 at $48,194,131. The recommended FY17 budget with respect to the base operating budget's expenditure increases ($3,221,178), cuts ($1,423,840) and an Emergency Shelter Commission Transfer ($451,073). Also depicted on this chart were the Fixed Cost increases relating to Pension ($1,330,700), Health Insurance ($639,961) and Other Post Employment Benefits ("OPEB") has remained the same as FY16 at $2,250,000. The total COB Appropriation budget is $3,316,926.

- Maintenance Budget Increases and New Initiatives: As noted on the previous chart, net operating costs increased by 3% ($1,346,265). Homeless Bureau increases compared to FY16 include: an additional 19.20 FTEs ($873,329) and their Front Door Triage program ($269,580). EMS Bureau increases: new Ambulance lease ($724,558), an additional 20 FTEs for new EMTs ($685,370), EMS COLA (only collective bargaining agreement signed last year) ($596,518), and
EMS Differential ($102,022). Recovery Services Bureau has an increase for the APT2SS 311 Phone Triage ($143,000). BPHC Security: because of the transfer of the shelter to down here, we added 4 FTEs for Public Safety Officers to provide safety and security for the staff and clients ($226,800). Fixed Costs also increased by 7.65% compared to FY16: Pension costs increased by $1,330,700; Health Insurance went up $639,961. One of the benefits of adding the 20 new EMTs is that EMS will be able to increase their 3rd Party billing revenue which has increased by $531,500.

- Maintenance Budget Decreases. In order to get to our Maintenance Budget, we did have to make decreases and decrease budget lines. The one thing that the staff reminded me of as I presented this budget to senior staff is that this is actually the first year where we won't be doing any layoffs. That is a good thing because doing reductions in force really takes a toll on staff and senior staff who have to layoff valued employees. It also takes a toll on staff morale, so I think this is something that I believe is a good thing in terms of highlighting. Our approach in the implementation of changes ensured there is sufficient funding for our core functions and mission. We must maintain critical activities in the most efficient manner and strive to eliminate ineffective spending. We proposed innovative approaches to delivering services and freeing up capacity for new high impact programming.

- Even though we won't have any layoffs, we still had to make reductions. As I mentioned, all departments had to look at salary savings; for us it was $481,464. As Ms. Connolly mentioned, the Emergency Shelter Commission has 3 FTEs that will be transitioning back to DND as part of a new effort on the part of the Mayor and Chief Dillon to create housing stabilization. As a result, the staff and their resources will return back to Chief Dillon: $451,073. We looked at overtime reductions for FY17: $450,889. We eliminated 3 vacant FTEs: $237,293. We had to reduce Education and Outreach contracts: $160,000. We looked at stipends that we normally provide to students and were included on the decrease list: $152,363. We talked last time we met about the Community Health Centers contracts: $112,495; and that other utilities and other non-personnel expenses: $229,335 round out the decreases we had to make in order to get to our Maintenance target.

- Mr. Lopes questioned the salary savings and how they were achieved. Ms. Valdes Lupi explained they came from vacant positions. This is actually a new practice for us here at the Commission. Typically, program directors, bureau directors manage their budgets well, so if there are salary savings, we have an internal process where they are able to make a request to use those savings to support other priority initiatives. Given that there was an approach across the departments to look critically at vacancies, we asked the bureau directors to do the same here at the Commission. We took a percentage of those salary savings in order to free up resources to reinvest in other areas. So those were truly vacancies.

- The next chart depicts the FY2017 Budget allocations for our bureaus beginning with the highest, EMS at 24.14%, CAFH 14.48%, Admin. 11.77%, PHSC 11.50%; Homeless 8.25%; CIB 7.01%; IDB 5.68%; CHC 4.90%; Property 4.70%; Recovery Services 4.66%, and Other Costs 2.91%. Our total internal funding is that $77,267,200 across all our bureaus and should insure we have a very strong year next year.

- We've already covered the Emergency Shelter Commission transition. The next slide covers the additional 3% reduction in addition to the ones made to get to our Maintenance target. All departments, not just the Commission, were required to submit a series of proposals for an additional 3% reduction. Obviously, no one wants to make additional reductions, but this is Standard Operating Procedure. We did this at the State routinely and we're lucky we only had to do 3%. Some of the criteria we were asked to use was to propose cuts that would cause the least amount of harm, looking at maintaining critical operations, and then not exaggerate things. Sometimes there's a human nature tendency to put things that you know you won't be able to achieve because they're untouchable. They asked us to seriously consider where we would be able to make additional reductions that would be realistic.

- There were a series of proposals that we submitted. There were two that were accepted. One was the 3% reduction to Community Health Centers funding which comes in the form of the Block Grant totaling $112,495. The second was the elimination of a number of outreach and education infectious disease contracts under Dr. Anita Barry's bureau totaling $160,000. I know that this is a painful reduction for our health centers. And on the education and outreach there were also grantees beyond health centers. On the Block Grant, these are grants the health centers have historically received. There are a number of health centers who are also disproportionately impacted by the reductions to the outreach and education grants. To compound this, this isn't in my talking points, but want to share with you because I have been talking with the CHCs, they were also impacted along with several community-based organizations from a recent re-procurement in Federal Funding, the Ryan White Part A grant. There are several examples where several community health centers have been impacted disproportionately by these reductions. I wanted to share that with the Board and be very transparent about that because we have been engaged in discussions with the Mass. League of Community Health Centers and the Boston Conference to do our best to explain our FY17 Budget and explain the rationale for these reductions. I know that these are difficult cuts to take on the health centers.

- Based on the efficiencies we outlined and other reductions that we made, we were then able to make investments and leverage those resources to target spending in other areas of the Commission. Ms. Connolly will walk us through those investments. Before Ms. Connolly continued, Mr. Cox had a question regarding the Maintenance Budget and the additional reductions. He was a little confused because the numbers are the same. Does that mean there was a $112k reduction in the Maintenance Budget and then another $112k as part of the additional 3% reductions. William Kibaja
explained it's shown in both places, but there is only one reduction of $112k. Ms. Valdes Lupi thanked Mr. Kibaja for the clarification.

- Dr. Minter-Jordan wanted to acknowledge the fact, as already stated, that some of the community health centers have been impacted 3-times over. It's important to do the work that you have done, in terms of going to the League and meeting with the individual community health centers, to have a better understanding of how this happens. I know that we will be looking at this in the future about how the Block Grants are distributed to make sure that it is fair and equitable. Dr. Minter-Jordan thinks the transparency and the level of communication that Ms. Valdes Lupi started with at the outset as to how we deal with this has been very helpful in a difficult situation.

- Ms. Connolly reviewed again the new initiatives we were able to put forth as a result of the budget cuts we had to take. The Emergency Shelter Staff will increase by 19 FTEs at a cost of $873,329. The Public Safety Office (under Administration & Finance) will increase staff at a cost of $226,800. Homeless Services Bureau staff will have an FTE increase at a cost of $93,873. EMS will increase have 20 new EMTs at a cost of $1,216,870 and new ambulances at a cost of $197,103. Recovery Services will receive $143,000 for their 311 Phone Triage program. The total for new initiatives and investments for FY2017 is $1,819,475 that the City has allotted for us.

- Ms. Walsh had a question regarding the Phone Triage. She wanted to know with whom people were going to be connected. Ms. Devon Larkin explained that right now calls come in through the City's 311 service. This new program will allow us to direct people to the appropriate services and bed availability. Dr. Minter-Jordan asked if they currently were getting data on the bed availability. Ms. Larkin stated they call every morning to determine bed availability. Dr. Minter-Jordan asked if there was a plan to build a database that will help to assist in that. Ms. Larkin said the State was working on a database so that we could track that information. Dr. Minter-Jordan asked if the plan was to have the office link into that database. Ms. Larkin said it was the plan.

- Ms. Connolly commented that another part of the process for this year involved revenue enhancements, specifically fees and fines. The City agreed to increase some permit fees in community initiatives, including asbestos, tobacco, and tanning. In asbestos, the last increase was in 2004. The last increase for tobacco and tanning was also in 2004. Asbestos fees will go from $75 to $100 in some cases; fees will increase from 1% to 1.2% if it's over $10,000. Tobacco has 2 fees: $100 for tobacco only and $150 for tobacco and nicotine. This will be consolidated to $300 for one permit. In tanning, the fee was $100 per device and will be going up to $200. These funds will also be used to help support the new programs.

- Dr. Minter-Jordan commented that she looked through the sources of funding and wants to know what is the plan in terms of seeking out new grants and how does the Commission go about that? It's certainly an area of potential growth that she could see helping to support partnerships with Community Health Centers and others. Ms. Valdes Lupi noted that was a good question. We actually have 2 FTEs working on grant applications that fall under Ms. Connolly in Administration and Finance. We are looking at reviewing internally now how we identify and then process how to develop different grants. Occasionally, internally multiple programs want to apply for grants. Occasionally, there are instances where it could be external partners like CHCs or other community-based organizations that would be the appropriate leads. How do we all work collaboratively on a joint application? So, these are things we're actually having active discussions on and reviewing internally and would welcome guidance from the Board on that.

- Mr. Cox commented that over the last few years, the Commission has been very aggressive in looking at additional grant activity and been very successful in bringing in many of those grants. It's something you have reported to us in the past and I am glad you'll be doing more of in the future.

- Ms. Valdes Lupi stated that we actually replicated the model at the State Department of Public Health and with just 1-1½ FTEs built it up because they didn't have a central grants development office. The model doesn't exist in a lot of local and state health departments around the country. It pays for itself in terms of coordinating and aligning applications. We're really lucky to have grant writing machines here at the Commission. I will share with you though that in my first three months here, some bureaus have relayed to me that they haven't been able to leverage that internal support that Catherine and that grants writing team have offered up. So, that's the reason why we're taking a look at it.

- Dr. Minter-Jordan stated this is something we should think about as additional revenue enhancement strategy and to come up with a strategic plan around that. And to your point, thinking through who are the correct partners for that as opposed to there's a grant, let's go for it, but to really have a strategy around that. I'm not sure what that strategy should be so it would be helpful to add to that if possible.

- Mr. Lopes had an unrelated question and asked to go back to the first slide. From experience last year, the new initiatives are all great and all great work. However, when you talk about cuts and then talk about spending money, it becomes a difficult message, particularly as we look at our health center colleagues and the message that we're driving. I think the one that needs a little more detail is the Public Safety Operations. I'm trying to understand. Is that in response to this area and the Marketplace really voicing concerns around the facility we have here? Again, I don't want to say it's apples to apples, but when you look at close to a $200k cut to the health centers across the City and then you look at close to $200k for security, it's difficult.

- Ms. Connolly responded that it is related to the shelter and the programs moving down here. In the past, Woods Mullen was just a transition point; some folks would stay there for a bit. Most would go out to Long Island which was very secure and there was only one way on or off. So the security staff did have to be enhanced just to deal with the number
of people here, as well as just the way the shelter is changing operating. Ms. Connolly asked if Mr. Kibaja had anything to add. Mr. Kibaja replied that now we also have program services at Mattapan and the community wanted to be sure we provided security and is one of the reasons we had to increase the security staff.

- Mr. Lopes stated he was trying to get a sense of what's real and what's perception. Responding to the community is important, but again, how much of that is perception at the facility we have versus actual incidents or concerns around that, particularly with this investment? Ms. Valdes Lupi responded that because, as Ms. Connolly said, it's not a single location that's presented some challenges, but being at multiple sites. She wasn't sure if Beth Grand was present, because it was actually something they had talked through, and would provide to the board as well in terms of looking at the increased costs that are resulting from clients at multiple locations. So, these are real, legitimate security issues.

- Ms. Nieves also commented that previously only a few guests would remain at the shelters during the day. Now that the 112 Shelter is open during the day, it means you need to have security there. Two of the programs at Mattapan that were mentioned, had previously been at the Island and now require a security presence. The same holds true for Woods Mullen which used to be transitional and now we need to have someone there. All this accounts for the number of officers we didn't need before.

- Ms. Walsh thinks that the more fundamental question is, if you can go back to the slide please, it's over a million dollars for increased shelter spending. On an operating basis, what would that support in assisted housing? The question is how do we really spend our emergency shelter dollars or how do we spend our housing dollars? She thinks the transition and the work with Chief Dillon's bureau will help. The goal is to shelter people and make it safer, but the ultimate goal is to not need the services at some point. She thinks it's important to look at how we spend these dollars because they increase pretty much every year because the demand increases. How do we spend our money in a way that's a little bit smarter for sheltering people and keeping people safe? Ms. Walsh complimented Ms. Conley on a great piece of work. It inspires you to think a little bit more broadly about housing first. She just wanted to flag that for future discussion. How safe is safe and how many shelter beds are enough versus a million dollars on an operating basis provides a lot of assistance in support of housing if you had the right physical structure.

- Ms. Valdes Lupi responded that these are issues and challenges that we are working on with Chief Dillon. She definitely thinks there is, in terms of the continuity and continuum of care we provide, that there is an appropriate place for the shelter as being that safety net for the clients. She stated that Beth Grand is looking into stays at the shelter and making sure that they're abbreviated and/or shortened. So we actually are doing better enhanced case management once they go through the front doors of the homeless shelter to make sure they're getting the wrap-around services and not staying at the shelters for long periods of time. It is definitely a systems approach that the Mayor and Chief Dillon are taking working with the money people in the room and other departments.

- Mr. Cox had another question noting that if this was "getting into the weeds" it could keep for another time. He wanted to refer back to the Ryan White funding. There have been increases in Ryan White funding overall, but are we seeing the beginning of reductions that are targeted to communities like Boston and others? Or is there a change? What's actually happening here?

- Ms. Valdes Lupi said she'd start then Ms. Connolly and Mr. Kibaja would fill in for Dr. Barry. There is an advisory council, so it's a regional approach that we take in terms of distributing the Ryan White care funds. The regional council plays a fairly large role within the advisory council in how the funds are distributed and for what types of services. We're sort of the convening body and the grants managers for these contracts. Ms. Valdes Lupi didn't know if Mr. Cox wanted to add in terms of national landscape.

- Ms. Conley spoke up stating we hadn't really seen a decrease in our Ryan White funding yet. She thinks that what Ms. Valdes Lupi was highlighting in the budget was that there has been some shifting of those dollars between agencies. Some contract agencies will see increases actually in funding, while some agencies have seen small decreases. Mr. Cox said so we did not actually decrease in the Boston area. Ms. Conley stated that what they've done is put us on a "CR", so they've only given us chunks of funding at a time, which makes it problematic in terms of budgeting. However, we haven't seen a significant decrease as a result of ACA or anything else.

- Mr. Kibaja stepped up to explain the Capital Budget approved for FY2017. The City has allotted funding for six projects for next year, including critical facility repairs for our older buildings. We have funding for three new projects currently under design: an EMS Station in the Seaport District, a new EMS Training Academy at 215 River Street in Mattapan, and repairs to the South End Fitness Center ("SEFC") pool. We have two projects currently under construction: Woods Mullen Shelter and Finland Building for their heating and cooling systems and projected to finish next year. The breakdown in funding for these projects in FY2017 is as follows (dollars in parenthesis is total project cost): Critical Facility Repairs $375,000 ($4,271,484); EMS Station Study Seaport District $50,000 ($100,000); EMS Training Academy Study $30,000 ($50,000); Finland Building $20,000 ($2,337,000); SEFC Pool $100,000 ($1,129,000; and Woods Mullen Shelter $400,000 ($2,450,000).

- Dr. Minter-Jordan noted the SEFC Pool issue pre-dates her joining the Board and asked how far are we into this and when are we out? When will we be off the hook for it and its upkeep? Ms. Valdes Lupi deferred to Gerry Thomas. Ms. Thomas stated what she did know was that last year the Division of Capital Planning did allocate $1 million dollars for an RFP to repair the pool. Basically, the pool goes to 12 feet and that's out of regulation for most pools and to level it to 8 feet and do some basic repairs. That's it in terms of our obligation for running it and keeping it up to code. The issue of
what the future of the SEFC is obviously up to the Board and the Director. There has been some expressed interest from the YMCA and BMC. There was a failed attempt for $4 million dollars in tax credits through Newmarket we didn’t get last year, but hope to get for reapplication this year. Ms. Thomas believes it’s partly about finding the right partner or group of partners in which to pass off the management and operation of the facility.

- Ms. Valdes Lupi believes that reflects the current of affairs on the pool. Everyone here agrees that the Commission shouldn’t be operating the pool. We’ll continue discussions to kind of move it forward in this fiscal year. At least that’s the plan at this point. We’ll come back to the Board with any updates. As the discussion continued between Mr. Cox, Ms. Walsh and Ms. Thomas, Ms. Valdes Lupi interrupted and suggested perhaps we can continue this discussion, and the staff can have time to prepare for it, is add it to a list of follow-up discussions we can present to the Board and our colleagues from the Capital team at City Hall so that we can explain the process. Then we can go into the details about the Capital investments and the actual operating costs for the SEFC and the pool if it hasn’t been done recently. Let’s schedule that for the next Board meeting.

- Dr. Johnson added that as we made this decision, it was a very messy process in terms of having to deal with the community, etc., but believes the decision was made at the very beginning of Mayor Walsh’s term. She believes it is worthwhile now that he’s been in office. There was also political clout that was at stake, so it wasn’t just a straightforward decision; there were a lot of factors involved. She does think that now, a couple of years later, we’re in a very different place just from a political landscape.

- Mr. Lopes commented there is a City agency that runs pools and gyms and is it possible to turn it over to them. Again, this can be answered at a later date. Ms. Valdes Lupi said we could actually design an agenda for the Board and present a number of different Capital projects to you if you’re interested. We might have to do it over a couple of meetings and would add the Northampton Tower project to the list. We’d be happy to come back and give you a briefing on that so we can tell you what we know based on what Dr. Nguyen, John Townsend, and others have been working on and seek your guidance in terms of how best to move forward. We can do a Capital focus discussion at the next board meeting.

VOTE TO APPROVE THE BOSTON PUBLIC HEALTH COMMISSION’S PUBLIC HEALTH SERVICES BUDGET FOR FY 2017

WHEREAS, on March 9, 2016, the Board considered and approved the Boston Public Health Commission’s public health services budget for fiscal year 2017, prepared pursuant to Chapter 147 section 8(c) of the Acts of 1995 and submitted said budget to the Mayor of the City of Boston;

WHEREAS, the submitted budget was approved by the Mayor of the City of Boston and the net cost of said budget was included in the annual budget of expenses for the City of Boston and submitted to the City Council of the City of Boston;

WHEREAS, a copy of said Commission’s Public Health Services Budget for fiscal year 2017 is attached hereto;

THEREFORE, the Board approves and adopts, the attached public health services budget, for the Boston Public Health Commission.

- Dr. Johnson asked if there were any more questions before moving on to the vote. As there were none, Dr. Johnson called for a motion to approve the FY2017 Budget for submission to the Mayor. Ms. Walsh seconded the motion with no objections. Dr. Johnson then asked for a roll call vote. On May 11, 2016, the Board voted by a roll call vote as follows:

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<td>Dr. Paula Johnson</td>
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<td>Manny Lopes</td>
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- Dr. Johnson commented that although it was a tough budget year and we had a number of issues we had to revisit, she wanted to commend the Commission for a much more transparent process, the reasoning was transparent. We delved into the numbers in a very meaningful way and had good dialog. Thank you.

- Next up on the agenda is the signatory authority vote for Grace Connolly and Rita Nieves.

Vote: Approval to Grant Signatory Authority to Grace Connolly, Director of Administration & Finance and to Rita Nieves, Deputy Director

- Mr. Harrington stated this is fairly routine vote to grant signatory authority to Grace Connolly in her capacity as Director of Administration and Finance and to Rita Nieves in her new capacity as Deputy Director. Once we do this, we’ll have 5 people at the Commission - Monica Valdes Lupi, Dr. Huy Nguyen, who’s been carrying the load of signing all of the contracts the last few months, then the three of us. Now we can share the load if we can get a vote on that. Dr. Johnson
asked for a motion to vote. Mr. Lopes seconded the motion. Ms. Walsh asked if there were signing limits that the Board had agreed to as a committee. Mr. Harrington replied that this was for full signatory authority. Ms. Walsh asked if there was any Capital limit, i.e., you can't sign for $5 million without coming back to the Board? Mr. Harrington said no, except for real estate transactions where we have to come to the board. This is basically for signing contracts. Ms. Walsh wanted to know the biggest amount people would be signing. Mr. Harrington responded that the EMS ambulance contracts can run about $1 million. Ms. Walsh asked if there would be anything over $10 million. Mr. Harrington said no, nothing over $10 million.

- Dr. Johnson noted it may be worthwhile in the future, not that we don't trust you, but it might be wise to have some ladder where things would have to come back to the Board. Ms. Walsh commented that we might not have to come back to the Board, but rather to City Hall. She wasn't sure as long as there were two pairs of eyes on large transactions. Dr. Johnson said to even come back to Ms. Valdes Lupi, or however we chose, but to revisit and have some step functions in place. Ms. Valdes Lupi stated we had preliminary conversations about this already in terms of looking at signatory authority as it relates to contracts. Ms. Connolly is looking at the SOPs on this and we'll be happy to report back to the Board so you can see how that works. Right now all the contracts, small and large, go to Dr. Nguyen (and went to Barbara Ferrer) and I think we have about 1500 per year. The standard is that there are different thresholds where it will come for what signature and then there is delegated authority. So we're looking at that now because it is a lot of work to process the 1500 and have it come through the current process. Mr. Harrington commented now that we have Ms. Connolly and Ms. Nieves on board, what he wants to do is divide up the types of contracts that they would be signing. For example, when Mr. Townsend was here, he would review the property contracts and large equipment contracts. Dr. Nguyen would do grant contracts. We do have a threshold in place for $10,000 or smaller contracts for review; there are a lot of those. That's what we're going to do over the next few weeks to divide up these contracts. Ms. Walsh said there should just be a policy to have the Commission approve it and that would be good.

- In the meantime, Ms. Walsh said we'd approve this and asked Mr. Cox for a motion to approve the signatory vote. Mr. Cox so moved and Dr. Johnson seconded the motion with no objections. Signatory authority for both Ms. Grace Connolly in her capacity as Director of Administration and Finance and Ms. Rita Nieves in her capacity as Deputy Director was unanimously approved by the Board members in attendance.

Discussion: Proposed Schedule of Board Meetings for Remainder of 2016 and 2017

Timothy Harrington, General Counsel

- Mr. Harrington stated that Ms. Valdes Lupi had asked him to come up with a new proposal for our board meetings for the remainder of this year and going forward. We want to do this for a couple of reasons. One, we want to be mindful of the busy schedules of our seven Board Members. Also we want to get to a point where we when we convene a Board meeting, it's because the Board needs to take some action or we need some feedback and/or guidance from the Board on significant issues.

- Mr. Harrington explained that under the Bylaws of the Commission, the Board must meet at least six times per year. Over the last 5-7 years, the Board has been meeting ten to eleven times per year. Going back to last year, it was a fairly typical year, although we did have a lot of work regarding the Tobacco Amendments. He gave a brief review of what a year looks like when we do have to do some regulatory work.

- In the beginning of the year, January, February and March is when we go through the Budget, as we have over the last few months. Generally, one of those meetings is devoted entirely to the Budget, usually either January or February. Then there are also times, like today, where you go through the Budget and there is still time for other agenda items; like if we do have to do work on any type of regulations, whether it's nail salons or tobacco. Last year we did Tobacco 21 and associated amendment, those amendments also occupied three different Board meetings. One, I believe the one in July 2015, took up the entire meeting. With the other two, one was a half hour presentation about here is what we want to do and get your feedback. The next one was when Mr. McCann and Ms. Harding came back and gave us a good overview of the actual language. That's the one that took up a lot of time. Then the one in December is when the Board voted to approve those amendments. So, those are the steps whenever you do a budget or amendments to regulations or new regulations. That accounts for six meetings and as previously stated, there were only two meetings where either the budget or amendments took up the entire meeting. With each one of those other meetings, there was time to include at least one, potentially two, other agenda items for those four other meetings.

- Other 2015 agenda items we covered that were more update items we wanted to be sure the Board knew we were working on included: Strategic Planning Process, Boston Child Health Study, Date Collection Regulation, PICH and REACH Grant Updates, Boston Health Equity Goals, One Key Question Initiative, Trauma Notification and Recovery Teams, Accreditation Update, and Injury Prevention Initiatives.

- To simplify, there are different types of agenda items. We always need one for budget review and approval. We always need one for new regulations or amendments. Then there are two other buckets. One is for guidance and feedback regarding future Commission initiatives. And the last bucket, which is here are the things we're working on and want to run by the Board, such as grants and grant work we've been doing. So those are the four buckets. Our sense from the Board, and I say this respectfully, is that you might want to see us decrease that four bucket a little bit going forward.
• This is one proposal and then I'll turn it over to Ms. Valdes Lupi if she has anything to add. If we do this, today is the third meeting we've had this year and means we have to have at least three more this year: July, September, and November. Again, if we go that route, it would set us up nicely to go into 2017 for the Budget process in January and March. Then you would need one in April or May depending on City Hall's FY18 Budget Schedule and then three more in July 2017, September 2017, and November 2017. If we have three more meetings this year, and I believe there's nothing on the docket right now. If something came up, such as regulations or amendments, we'd have more than enough time to add another meeting in the final months of the year. This is our proposal. I'll turn it over now to Ms. Valdes Lupi and the Board for your feedback and to answer any questions you might have.

• Ms. Valdes Lupi thanked Mr. Harrington and said she didn't have anything to add. She stated the intention was to be respectful and mindful of the Board's time with us. To be strategic in our conversations and really be intentional in terms of when we schedule the meetings so that they're built around some of those buckets of work and in collaboration with the Board that Mr. Harrington mentioned in terms of the Budget approval, regulatory work, and guidance. The one thing she did note is where Mr. Harrington has been thinking about building some flexibility when they're on the regulatory front, because as he stated they typically take up three meetings for the info briefing, amendments and then the final vote. There's flexibility in the schedule we're proposing to accommodate for things we haven't planned or anticipated. With that, we'll open it up for questions and discussions.

• Mr. Lopes thanked Ms. Valdes Lupi and Mr. Harrington for thinking about their schedules because we all are busy, as is everyone in the room. However, he's not sure he agrees with the necessity of board action around guidance and feedback regarding updates and Commission staff and things that are going on, particularly with a new Executive Director. He thinks we may be seeing more changes and think it's important for this Board to be informed of those changes.

• Before Mr. Lopes continued, Dr. Johnson asked him to clarify. Did he think it should not be necessary for Board action? He said it should, we should hear about those changes. It was one area that Mr. Harrington thought the Board might be doing less of, unless he didn't hear Mr. Harrington correctly. Mr. Harrington stated he heard correctly and continued saying that the schedule right now, even if we did have to go through a budget process or regulation process, which would leave us with another four hours of presentation time. This would also allow for another 5-7 agenda items and we would continue to give those types of updates. Those updates are important and significant and will continue to be a part of the agenda, just not as much as they have been in the past.

• Mr. Lopes' second concern is that he's not sure that will improve attendance by the Board members by reducing the number of meetings. In some cases, it may make it even more challenging just to stay on top of things, particularly if you miss a meeting. He sees the intent, but isn't sure he necessarily agrees with moving ahead, at least in the short-term. Maybe in the next calendar year, as you're ramping up and getting yourself established here, it's important that the Board hears about some of those changes and hears about new initiatives on a regular basis.

• One thing Dr. Johnson suggested to Ms. Valdes Lupi, was that she also look at revisiting the day and time of the meeting. There's no reason why it has to be on the same exact time on the same exact day. We've had to change it here and there, but is there another time and day of the week, as the Board will have its full complement soon, that will work better for everyone and everyone's schedule?

• Dr. Johnson thought that occasionally, there were some people who could not be here for very specific reasons because of the board day and time. She thinks that as Ms. Valdes Lupi goes forward, it's very clear we've done things they way that we've done things because we've done it that way always. It's not clear that is has to be done that way and moving forward to revisit not only this, but to also think about what is the timing as you have new appointees and to think about what works best for everybody.

• Dr. Minter-Jordan thought it was reasonable to take a look at everything, but also thinks it's important to get feedback directly from the Board without making assumptions, per say, about what we would like to see or not see. If there's a way, and this leads into the public meeting regulations, but to get direct feedback regarding not only time and date, but substance. Another comment Dr. Minter-Jordan had was about the assumptions regarding the role of the Board. She thinks we need to look at that again. The Board should be helping to guide strategy and she didn't see that anywhere even though one of the topics was Strategic Planning. She sees the role of the Board as working in collaboration around what is the strategy for the Commission. She thinks that in Ms. Valdes Lupi's first year, it's important for us to meet on a regular basis to really reinforce that. It should be a standing agenda item at every meeting: What is our strategy? How are we implementing that strategy and revisiting the Strategic Plan so that we're all on the same page. Dr. Minter-Jordan doesn't think the role of the Board as not really just a pass through, sign off Board, but really the Board that is working with you around what is the strategy for the Commission with new leadership and new board members. She wants us to take a step back and really look at that as we do the questioning of the Board members. How do we see our roles? How do we see the Board best supporting the work of the Commission, in addition to the meeting scheduling itself.

• Ms. Valdes Lupi thanked Dr. Minter-Jordan for the feedback. We did this and put it for consideration in trying to balance time and needs, but would definitely love to engage in strategic conversations with each of you.

• One thing Ms. Valdes Lupi noticed, it was actually an observation she noticed following the BMC Board meeting, is the standard inclusion of the Executive Session in your standing board meetings. It's just standard operating procedure and is curious if this is something you have on your respective boards. In some organizations, the only time an Executive Session is called together is when there is an issue. Dr. Johnson interjected that there is actually a regulation around that.
We can't just go into Executive Session, that's why we don't do it. It has to be for a specific set of reasons. We can revisit that, but it is regulated and it's in our Bylaws. Mr. McCann commented that the general topic usually involves real estate transactions. We can be as specific as we can be without violating the purpose for having an Executive Session, why we're going in and put that on the agenda. Ms. Valdes Lupi asked what was the appropriate way to build it in and comply with the regulation. Mr. McCann said within 48hrs generally for what type of issues you plan on talking about. Mr. Harrington stated there are 10 different reasons that you can go into Executive Session. Ms. Valdes Lupi said we can craft out different scenarios to build that in. Dr. Johnson noted that Executive Sessions, for all of us who serve on boards, has been most valuable as an opportunity to reflect on whatever the issues of the day are, not to have a planned Executive Session unless there is something very planned to discuss. That will need to be very well thought out to achieve the goals technically that you want to achieve.

- Ms. Valdes Lupi continued that when working at State, DPH had their meetings in the morning with a breakfast a half-hour before the official meeting. It wasn't to talk about the agenda items per say, but: a chance to get together before the official meeting. She doesn't know if that's something that's been tried here. Mr. Cox said it was a useful way for us to reflect on what's happening even though there are certain things we can't talk about in that room. It's not exactly the same as an Executive Session, but it is an opportunity for us to reflect on some of the processes that we need to think about. Dr. Johnson commented that we visited this so intensely around the search process. If more than 3 Board members are in a room discussing business, it is considered a meeting and you cannot do that. There may be ways of addressing this, but just be aware it's not the easiest thing to do.

- Dr. Minter-Jordan would definitely like to revisit the structure of our meetings, the substance, whether or not we can do some portion of it and how we can manage the regulations around public meetings. And also the idea of getting direct feedback from us as individual board members about our experience and what we would like to see moving forward that would then help to inform any future discussions around proposals around how we meet and schedule meetings. Mr. Harrington stated that nothing prevents us from having one-on-one meetings with the board.

- Ms. Walsh suggested maybe a board survey. She's gotten a lot of good feedback from her board - 'shorten the presentations, you're boring us to death'. She thinks the Commission presentations could be improved. You're very knowledgeable and do a lot of education, but need to be more interactive with the Board by asking questions or we have three options we're considering, what do you, the Board, think we should consider. It creates a little more opportunity for interaction. We're not a shy group, so we have a tendency to jump right in anyway. Ms. Walsh supports the idea of six meetings and feels we should be able to support the great work the Commission does in six meetings a year if they are well structured. We should aim to try this, we can always add them back on.

- Mr. Cox had a comment relating to what Ms. Walsh and Mr. Lopes said about guidance and updates. It really relates to what Ms. Walsh was just talking about is that there are many times in the past when we've received lots, and lots of reports and then at the end, the last slide is "What do you think??" like it was an afterthought as opposed to maybe a more reflective thinking of how to engage the Board. He thinks Ms. Walsh was right as far as how do you better use the time so that we can provide better input and more about how to use us and the time that we have to contribute as opposed to just an informational session. Mr. Lopes agreed. Ms. Walsh noted she has a new board chair who's going to introduce a 6-slide rule for presentations. It's something we might want to think about going forward.

- Mr. Lopes commented that when he was in sales, they had a four-slide rule and each was structured: this is what it is; here's our goal; here's our purpose and here are the decisions we need you to make. So you can get to a more condensed slide deck if you come up with something that's very structured. There is a way to get to that so you get your message across. Speaking for myself and Dr. Minter-Jordan as the newest board members, we appreciate all the work that you do and we're still learning about all that you do, but think that it can be done in a more condensed and efficient way.

- Ms. Valdes Lupi stated she heard very constructive feedback and guidance from the Board members about how to return with ideas about the business of conducting the Board meetings. She definitely liked the idea of doing a survey which is something that would at least give us a quick snap-shot in terms of feedback on length of presentations and how to make the meetings more interactive. She also made a note about the importance of doing one-on-ones with each Board member as we think about how to design the Board meetings and the schedule. The third piece would be as we look at recalibrating the way in which we convene the Board and our work with you and looking at the role of the Board. That's something she believes she heard across the Board in the comments and questions in terms of strategic advisor, real partner in terms of developing different strategic approaches, to different health conditions and working more collaboratively with each of the bureau directors as we're thinking about how to rollout different campaigns or the use of new grant dollars. Ms. Valdes Lupi commented that she's getting a better handle on where they can be part of informed decision making. We'll go back and do some more homework follow up and come back prepared to have some ongoing discussions.
Adjournment

Dr. Johnson thanked everyone for attending and adjourned the meeting at 12:00pm

Respectfully submitted by:

[Signature]
Kathy Hussey, Board Secretary

At this time, Ms. Valdes Lupi stepped in to recognize Dr. Johnson as a very special person who is so well respected and revered, not only by her fellow Board Members, but also from the Staff here at the Commission. She thanked Dr. Johnson for her leadership and having such an impact on this Board and the Commission over the years. Mr. Cox, Ms. Walsh, Dr. Minter-Jordan, and Mr. Lopes echoed Ms. Valdes Lupi’s sentiments, shared memories and had high praise for Dr. Johnson and her work outside the Commission as well. We all will miss her leadership. Finally, Ms. Valdes Lupi read the Proclamation from Mayor Walsh that stated in honor of all the contributions Dr. Johnson has made over the years to the City of Boston and to the Commission, he hereby declared Wednesday, May 11, 2016, to be Dr. Paula A. Johnson Day in the City of Boston.