MINUTES FOR THE MEETING OF THE BOARD OF THE
BOSTON PUBLIC HEALTH COMMISSION
Thursday, October 17, 2013

A meeting of the Board of the Boston Public Health Commission (“Commission”) was held on Thursday, October 17, 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
Kathleen Walsh
Celia Wcislo
Jack Cradock
Harold Cox
Joseph Betancourt, MD, MPH (via conference call)

Board Members Absent:

Also Present Were:
Dr. Barbara Ferrer, John Townsend, Fatema Fazendeiro, Maia BrodyField, Kathy Hussey, Chuck Gagnon, Dr. Huy Nguyen, Dr. Anita Barry, PJ McCann, Lisa Conley, Christina Ratleff, Patricia Scanlon, David Pia, Beth Grand, Snehal Shah, Gerry Thomas, Dan Dooley, Rita Nieves, Chief Jimmy Hooley, Ann McHugh, Tiffany Skogstrom, David Susich, Nick Martin, and Debra Paul.

Proceedings:

Chairwoman’s Comments
Paula Johnson, MD, MPH

- Dr. Johnson called the meeting to order at 4:03pm, announced Dr. Betancourt was participating remotely and immediately turned the meeting over to Dr. Ferrer.

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

- After welcoming everyone, Dr. Ferrer noted that the Board members' packets contained invitations to the Mayoral Prize Awards Ceremony being held on Tuesday, November 19th. She encouraged the Board to pass them on to anyone interested in attending.
- Dr. Ferrer stated the American Public Health Association (APHA) would be holding its annual meeting in Boston beginning Saturday, November 2 through Wednesday, November 6, 2013.
- Dr. Ferrer commented she is most proud of the fact that Dr. Allen will be receiving the Maternal and Child Health award from APHA. Dr. Johnson asked for a list of when people are presenting
and when Dr. Allen is getting her award. Dr. Ferrer said the award would be given out that Monday at a luncheon and anyone wishing to attend could sit at our table.

- Dr. Ferrer wanted to acknowledge that a host of individuals at Boston EMS recently received awards from the Regional EMS Association honoring their work both around the Boston Marathon bombing and other heroic efforts they have made throughout the year. She congratulated Chief Jimmy Hooley on their behalf for the well-deserved recognition.
- Dr. Ferrer noted that Boston University will be conducting a BPHC Appreciation Day and Nicole Daly from the Start Strong Program will be honored at the event for her work on positive youth development.
- Dr. Ferrer stated that work still continues for the Massachusetts Prevention and Wellness Trust Fund Grant application which targets hypertension, asthma, and elder falls. There are eight agencies helping us with the application process.
- Dr. Ferrer explained that we get approximately $60,000 a day from the federal government, so we are very happy the government is up and running again.
- At this time, Dr. Ferrer made a request for the Board go into Executive Session after the last presentation in order to discuss labor contracts.
- Dr. Johnson acknowledged Dr. Ferrer's request and then introduced Dr. Nguyen.

**Update and Presentation: Data Collection Regulation Implementation**

*Dr. Huy Nguyen*

- Dr. Nguyen gave a preliminary overview of hospital demographic data collected under BPHC’s Data Collection Regulation that requires all acute care hospitals in the City of Boston to report the race, ethnicity, preferred language and level of education of each patient to the BPHC for purposes of quality improvement and the reduction of health disparities. Based on the data received, Dr. Nguyen noted that from 2008-2012, over 50% of hospital visits were made by White patients while about 15% were made by Black patients. Dr. Nguyen noted that in 2008, ethnicity was unknown for 35% of visits but by 2012, that number was reduced to 19% of visits. Ms. Wcislo asked if these were clinic visits or inpatient visits. Dr. Nguyen replied they were all hospital visits: inpatient and outpatient.
- Demographic data based on educational attainment and language was also presented by Dr. Nguyen. Unavailable data from 2008-2012 ranged from 14-18%. Over time from 2008-2012, 30% of visits were made by patients with some college or more education; fewer than 15% had less than a High School diploma. According to Dr. Nguyen, over 80% of patients reported English as their primary language; less than 10% of all visits were made by those who reported Spanish as their primary language. Ms. Wcislo asked if the data was relative to the size of the populations. Dr. Nguyen replied it was. Ms. Walsh stated that she wasn't sure if BMC was capturing the educational information.
- Dr. Nguyen described the Boston Health Equity Measure Set (BHEMS) that includes a list of the 19 clinical quality and utilization measures for the identification and elimination of health disparities. BHEMS Reports will be submitted annually. Dr. Nguyen stated hospitals and Community Health Centers (CHCs) will receive an analysis of their submitted data based on the BHEMS. The Commission will work with hospitals and CHCs to identify disparities and implement targeted quality improvement initiatives to promote/ensure health equity.
- Dr. Nguyen explained the strengths of the BHEMS data submission strategy: reducing the burden of reporting, increased data fidelity, and standardized data analysis across health care institutions. Some of the challenges Dr. Nguyen brought up were: the up-front IT work of programming a data submission template; the fact that some hospitals and CHCs may not be on the Massachusetts Health Information Highway (“HIway”) and HIPA/privacy concerns regarding the submission of patient-level data.

2
Lastly, Dr. Nguyen commented on the legal foundation for the 2006 Data Collection Regulation and BHEMS. He then gave an overview of the BHEMS implementation timeline that kicks off with an October 24, 2013 presentation to the Health Equity Commission. There will be a presentation to the hospitals’ leadership teams October 31, 2013 followed by a presentation November 21, 2013 at the Boston Conference of Community Health Center committee meeting. The compliance period is scheduled to begin on January 1, 2014.

Dr. Johnson commented that it is important when collecting data to be able to analyze by sex. Mr. Cox wanted to know how it matches up with the state requirements. Dr. Nguyen said there is some overlap, and some differences, and that we match up well with the State.

Dr. Johnson congratulated Dr. Nguyen stating this was a phenomenal piece of work. She then introduced Dr. Anita Barry.

**Presentation: The Flu and Vaccination Efforts**

*Anita Barry, MD, MPH, Infectious Disease Bureau*

- Dr. Barry provided an update regarding the 2013-2014 influenza season and vaccination efforts for BPHC employees. Vaccination is required for all employees by October 31st with the exception of unions with pending contracts and employees who do not have regular direct contact with the public. In 2012, BPHC employee compliance was 100% and we are striving for the same this year. Dr. Barry presented information on the vaccination rates and compliance to date.
- Dr. Barry stated the Commission is supporting community vaccination efforts by partnering with sites offering public clinics. The IDB provides the vaccine and all supplies. Clinics are posted on the BPHC web site calendar (www.bphc.org). BPHC is also providing various educational materials from the website to social media, flyers and handouts, posters, videos, and magnets.
- Dr. Barry noted the key messages: everyone six months of age and older should get a flu vaccine every year; cover your coughs and sneezes; wash your hands often with soap and water or hand sanitizer, and stay home if you feel sick and contact your physician if symptoms worsen.
- Dr. Barry commented on the early results for the community influenza vaccination with 3,600 doses distributed at the 12 clinics held to date. Dr. Barry noted that Boston to date has had one case of influenza B; syndromic surveillance indicates very low rates of influenza like illness (ili) to date.
- Dr. Barry informed everyone of the "Vaccinate Boston Week" scheduled for December 8th - December 14th. BPHC is coordinating the campaign during National Influenza Vaccination Week. We will also partner with Walgreens, BCBS, and others to vaccinate as many residents as possible.

**Update and Presentation: The NEIDL, Permitting Process and the BBC**

*Anita Barry, MD, MPH, Infectious Disease Bureau*

- Dr. Barry explained that the Biological Research Laboratory Regulation has been in effect since 2006 in order to protect the safety and health of the public, lab workers and the environment. There are a uniform set of biosafety requirements for biological research laboratories in the City of Boston.
- Dr. Barry proceeded with an update on the National Emerging Infectious Disease Laboratory (NEIDL) stating that BPHC has been working with City agencies to prepare for emergency responses to events that may occur at the NEIDL. The Biosafety Working Group includes members of BPHC and City agencies.
- According to Dr. Barry, tabletop exercises and drills, classroom exercises and tours have occurred and are an ongoing obligation of Boston University (BU); online training on Biosafety and the
NEIDL is under development. Currently, a Biosafety Level 2 work is occurring at the NEIDL. Procedures and equipment using BSL2 agents in BSL3 and BSL4 spaces are being tested. ISD provided a Certificate of Occupancy for BSL3 and BSL4 work at the NEIDL.

- Dr. Barry commented on the NEIDL Comprehensive Emergency Management Plan which provides BU plans for managing emergencies at the NEIDL. It was developed by BU representatives and reviewed/revised by City of Boston representatives.

- Dr. Barry stated that BU applied to BPHC to use M. tuberculosis (TB) in NEIDL BSL3 laboratories. This work is ongoing in another building and will eventually move to NEIDL. BPHC has reviewed permit documents and BU has made any necessary changes. BSL3 labs have been inspected by BPHC and we are waiting for the final commissioning report before approval of the permit.

- Dr. Barry also gave an overview of the BSL4 permit review process and permit requirements. There will be a $50,000 permit fee to BPHC. The CDC will also review the registration application for BSL3 and BSL4 select agents. All entities permitted for the operation of a BSL4 lab shall establish and maintain a Community Benefits Program, to support local health and safety needs in a manner prescribed in the BPHC guidelines and must file an annual report with the Commission detailing the operations of the program.

- Dr. Barry gave detailed information regarding the inspection process and the role of the Boston Biosafety Committee, which will have its first meeting in November 2013. The Biosafety Committee is comprised of Boston residents, research scientists, Biosafety officers and occupational health physicians.

- Ms. Fazendeiro then provided a review of the legal status of the Biolab. In 2006, plaintiffs filed parallel suits in state and federal court alleging deficiencies in the respective Environmental Impact Statements under relevant Law (MEPA & NEPA). The State court found in favor of the plaintiffs.

- Ms. Fazendeiro continued, stating in 2012 the Defendants filed a Final Supplement Risk Assessment where additional risk assessments were taken into account. In January 2013, NIH approved the Final Supplemental Risk Assessment (FSRA) and funding for the Biolab in Boston. On September 30, 2013, federal judge Saris dismissed the plaintiff’s lawsuit and decided that the FSRA adequately analyzed the risks associated with the "worst case scenario."

- Dr. Johnson thanked Dr. Barry and Ms. Fazendeiro. She then gave the floor to Ms. Fazendeiro to present the comments from the public hearing held Tuesday, October 15, 2013.

Resolution: Proposed Amendments to the Nail Salon and Wells Regulations

Fatema Fazendeiro, General Counsel

- Ms. Fazendeiro informed the Board that prior to the public hearing, letters with the proposed amendments were sent to all nail salons located in Boston. The letters were in both English and Vietnamese. In-person outreach was conducted at over 90 salons.

- Ms. Fazendeiro noted there were 16 speakers that attended the hearing; 3 spoke in favor and 13 spoke in opposition to the amendments. Per Ms. Fazendeiro, written comments in favor of the proposed amendments came from the Town of Wellesley (Brandies University Professor) and the Cambridge Public Health Department. Oral comments from one owner supported the amendments, stating that they will improve business and create healthier environments for workers and customers.

- Ms. Fazendeiro presented detailed comments in opposition from several salon owners who had concerns about the cost of autoclaves and felt their current sanitation procedures were sufficient. The installation of new ventilation systems was also an issue, especially for owners who had already replaced old systems and in situations where the landlord may not allow for it. The remaining owners expressed concerns unrelated to the proposed amendments.
Ms. Fazendeiro explained the new ventilation recommendations amending section 4.7 which provides any existing salon or salon that has applied for a permit under this regulation before October 18, 2012, will have an extension of the implementation period from the initial 5 year period to 10 years. Staff also recommended adding additional language describing steps that salons must take in the interim period to ensure that progress is made in achieving compliance as soon as possible. Under these changes, new salons or salons applying for permits after October 17, 2013, must comply with the State Building Code.

The amendments to the autoclave requirement in section 4.13, as described by Ms. Fazendeiro, extends the implementation period for existing salons from 1 year to 2, and waives permit fees for salons the purchase autoclaves. Staff recommend adding language making technical assistance available to address the uncertainty expressed by the commentators and allow for further inspections to ensure the safe use of other existing measures in the interim before autoclaves are in universal use.

Ms. Fazendeiro stated in certain circumstances where there may be physical barriers to installing compliant ventilation, the Executive Director may consider a waiver. Section 15 would be amended as follows: "Requests for waivers from this regulation may be made to the Executive Director in the form and manner set forth in the guidelines."

After a discussion amongst the Board members regarding the ventilation amendments, it was determined that 10 years was too long a time period and that the 5 years would be sufficient, but under certain circumstances, either a waiver or an additional 1 year grace period may be allowed.

Ms. Fazendeiro also noted the Water Wells public hearing was held simultaneously as the Nail Salon hearing on Tuesday, October 15. There were no written or oral comments received.

Ms. Fazendeiro then put the amendment resolutions for the Nail Salons and Water Wells to the Board for a vote. Dr. Johnson called for a motion to approve the proposed amendments. Ms. Wcislo and Mr. Cradock seconded the motion without any objections. The amendments were unanimously approved by the Board.

Acceptance and Approval of July 18, and September 19, 2013 Meeting Minutes

Dr. Johnson called for a motion to approve the July 18, and September 19, 2013 Board meeting minutes. Ms. Wcislo and Mr. Cradock seconded the motion. As there were no objections, the minutes were unanimously approved.

Executive Session / Adjournment

Dr. Johnson called for a motion on Dr. Ferrer's request to go into Executive Session. Ms. Walsh and Ms. Wcislo seconded the motion with no objections. Dr. Johnson adjourned the regular Board meeting at 5:50pm.

Submitted by:

Kathy Hussey, Secretary