

MINUTES OF THE PUBLIC HEALTH COUNCIL

Meeting of May 14, 2014

MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

**PUBLIC HEALTH COUNCIL
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH
Henry I. Bowditch Public Health Council Room, 2nd Floor
250 Washington Street, Boston MA**

Docket: Wednesday, May 14, 2014, 9:00 AM

1. ROUTINE ITEMS:

- a. Introductions
- b. Record of the Public Health Council Meeting April 9, 2014 **(VOTE)**

2. DETERMINATION OF NEED

a. Project #4-3C33 Lahey Clinic Hospital, Inc.: New Construction to replace emergency department
Lahey seeks to replace its emergency department with expanded, state of the art facilities including a helipad. The hospital seeks to address overcrowding. No ten-taxpayer group has signed on to this application.

b. Lahey Health System report to PHC on the health needs of Cape Ann and on plans for Addison Gilbert Hospital

Pursuant to a condition to the approval of DoN Project #6-3C04, regarding the transfer of ownership of Northeast Hospital Corporation and its affiliation with Lahey Health System, Lahey will report on the results of a community health needs assessment of Gloucester and Rockport and plans for the future of Addison Gilbert Hospital of Gloucester. The original DoN application had a ten taxpayer group with concern about the future of AGH. No action by PHC required.

3. FINAL REGULATION

Proposed amendments to 105 CMR 445.000: *Minimum Standards for Bathing Beaches* (State Sanitary Code, Chapter VII) **(VOTE)**

4. FINAL REGULATION

Proposed Emergency Amendments to 105 CMR 700.000 and 105 CMR 171.000 Related to the Use of Naloxone and Other Opioid Antagonists by First Responders **(VOTE)**

5. DRAFT REGULATION

Proposed New Regulation 105 CMR 271.000: *Postpartum Depression Screening and Reporting* **(Informational Briefing)**

6. DRAFT REGULATION

Proposed amendments to Regulation 105 CMR 201.000: *Head Injuries and Concussions in Extracurricular Athletic Activities* **(Informational Briefing)**

7. INFORMATIONAL PRESENTATION:

- a. Limited Service Clinics Performance Presentation
- b. Commissioner's Update on Opiate Emergency and actions since last meeting

8. EXECUTIVE SESSION

Public Health Council

Presented below is a summary of the meeting, including time-keeping, attendance and votes cast.

Date of Meeting: Wednesday, May 14, 2014

Beginning Time: 9:06 am

Ending Time: 11:02am

Attendance and Summary of votes

Board Member	Attended	Item 1b	Item 2a	Item 3	Item 4
		Records of the Public Health Council Meeting of April 9, 2014	Project #4-3C33 Lahey Clinic Hospital, Inc. New Construction to replace emergency department	Proposed amendments to 105 CMR 445.000: <i>Minimum Standards for Bathing Beaches</i>	Proposed emergency amendments to 105 CMR 700.000 and 105 CMR 171.000
Cheryl Bartlett	Yes	Yes	Yes	Yes	Yes
Edward Bernstein	Yes	Yes	Yes	Yes	Yes
Derek Brindisi	Yes	Yes	Yes	Yes	Yes
Harold Cox	Yes	Yes	Yes	Yes	Yes
John Cunningham	Yes	Yes	Yes	Yes	Yes
Michele David	No	-	-	-	-
Meg Doherty	Yes	Yes	Yes	Yes	Yes
Michael Kneeland	Yes	Yes	Yes	Yes	Yes
Paul Lanzikos	No	-	-	-	-
Denis Leary	No	-	-	-	-
Lucilia Prates-Ramos	No	-	-	-	-
Jose Rafael Rivera	Yes	Yes	Yes	Yes	Yes
Meredith Rosenthal	Yes	Yes	Yes	Yes	Yes
Alan Woodward	Yes	Yes	Yes	Yes	Yes
Michael Wong	No	-	-	-	-

Board Member	Attended	Item 1b	Item 2a	Item 3	Item 4
		Records of the Public Health Council Meeting of April 9, 2014	Project #4-3C33 Lahey Clinic Hospital, Inc. New Construction to replace emergency department	Proposed amendments to 105 CMR 445.000: <i>Minimum Standards for Bathing Beaches</i>	Proposed emergency amendments to 105 CMR 700.000 and 105 CMR 171.000
Summary	11 members attended	11 Approved with votes	11 Approved with votes	11 Approved with votes	11 Approved with votes

(M): Made motion (2nd): Seconded motion

PROCEEDINGS

A regular meeting of the Massachusetts Department of Public Health's Public Health Council (M.G.L. C17, §§ 1, 3) was held on Wednesday, May 14, 2014 at the Massachusetts Department of Public Health, 250 Washington Street, Henry I. Bowditch Public Health Council Room, 2nd Floor, Boston, Massachusetts 02108.

Members present were: Department of Public Health Commissioner Cheryl Bartlett (chair), Dr. Edward Bernstein Mr. Derek Brindisi, Mr. Harold Cox, Dr. John Cunningham, Dr. Michele David, Ms. Meg Doherty, Dr. Michael Kneeland, Mr. Jose Rafael Rivera, Mr. Denis Leary, Dr. Meredith Rosenthal, and Dr. Alan Woodward

Absent member(s) were: Mr. Paul Lanzikos, Dr. Michael Wong, and Ms. Lucilia Prates-Ramos

Also in attendance was Attorney Elizabeth ScurriaMorgan, Acting General Counsel, and Massachusetts Department of Public Health.

Commissioner Bartlett called the meeting to order at **9:06 AM** and reviewed the agenda, and made some changes to the order.

ITEM 1: Minutes

b. Record of the Public Health Council Meetings of April 9, 2014

Dr. Woodward asked that clarifying language be added to the minutes on page 5 regarding conditions on the Determination of Need for Boston Medical Center.

Mr. Rivera made a motion to approve the minutes with changes, Dr. Bernstein seconded the motion.

All approved with the edits.

ITEM 2: Determination of Need

a. Project #4-3C33 Lahey Clinic Hospital, Inc.: New Construction to replace emergency department – VOTE
Lahey seeks to replace its emergency department with expanded, state of the art facilities including a helipad. The hospital seeks to address overcrowding. No ten-taxpayer group has signed on to this application.

Lahey Clinic Hospital was asked a variety of questions regarding the current state of the Emergency Department (ED) and what their strategies were for reducing the length of stay and boarding relative to the high occupancy rates of medical/surgical beds.

Lahey commented that they are committed to delivering as much care as possible as close to home as possible in the most cost effective fashion. Lahey has significant acuity in the ED and operates the highest acuity in the Commonwealth. The hospital is utilizing other facilities, i.e. Beverly Hospital and Addison Gilbert, for patients requiring less complex care.

Lahey was asked whether they had a Continuous Quality Improvement process to reduce the boarding burden. The hospital expects that as other community hospitals become part of the Lahey system, of these facilities will drive down utilization of the beds in Burlington.

Dr. Creighton remarked that challenges with boarding are often a front door issue as well. The hospital has been creative in managing ED utilization across its network, as well as in trying to get individuals discharged. The ED took over the observation unit which should help take away some of the backup. Also, within the last month, Lahey has added four medical surgical beds in semi-private rooms to help with overflow and to manage the inpatient bed utilization.

Dr. Bernstein asked if Lahey had seen a rise in the amount of behavioral health and substance abuse services.

Dr. Creighton stated that there has been some increase, although the system has a commitment to behavioral health systems. The system has three inpatient psych facilities, 35 community sites, and 1500 employees working in behavioral health services. They are in process of integrating and expanding behavioral health services across the system.

Dr. Woodward made a motion to vote on the DoN for Lahey Clinic, Mr. Rivera seconded.

All approved, no recusals

b. Lahey Health System report to PHC on the health needs of Cape Ann and on plans for Addison Gilbert Hospital

Pursuant to a condition to the approval of DoN Project #6-3C04, regarding the transfer of ownership of Northeast Hospital Corporation and its affiliation with Lahey Health System, Lahey will report on the results of a community health needs assessment of Gloucester and Rockport and plans for the future of Addison Gilbert Hospital of Gloucester. The original DoN application had a ten taxpayer group with concern about the future of AGH. No action by PHC required.

Addison Gilbert Hospital (AGH) was commended for their successful work in the community. They currently have 58 licensed beds with an average occupancy at 68%.

When questioned about the increases in action of relocating for stay and specialties, AGH explained that they use system wide rates and that there is not a spike of patients, they are just able to keep patients at AGH because they have the services.

Mr. Rivera asked in which languages are the community forums that AGH puts on throughout the community conducted. AGH explained that they have information available in Italian, Spanish, and Portuguese. The forums are in English, and there have been no requests for other languages, but would look into.

Mr. Brindisi asked about developing local health partnerships with community stake holders. AGH currently participates on task forces and works closely with other providers in the community.

ITEM 3: FINAL REGULATION: Proposed amendments to 105 CMR 445.000: Minimum Standards for Bathing Beaches (State Sanitary Code, Chapter VIII) (VOTE)

Mr. Brindisi asked whether it would be possible to share the bad beach list, an explanation of weather related events that would be used to close beaches, and if there were discussions educating local public health about beach closures.

Ms. Condon stated that with the robust amount of data that the bureau has, they plan on doing more education and outreach with local health partners in this area. The bureau will also know which beaches will need to be tested.

Dr. Cunningham asked about the correlation between the amount of rainfall and sewer overflow, and the effect on closing of the beaches.

Ms. Condon used the Charles River as an example, that the bureau inspects local conditions in the area to determine the amount of rainfall from the area, and being able to predict from other water locations.

Dr. Woodward made a motion to approve the regulations for Beaches, Dr. Bernstein seconded the motion.

All approved, no recusals

ITEM 4: FINAL REGULATION: Proposed Amendments to 105 CMR 700.000 and 105 CMR 171.000 Related to the Use of Naloxone and Other Opioid Antagonists by First Responders (VOTE)

Commissioner Bartlett mentioned that Dr. Alexander Walley will operate as medical director for municipalities that do not have one in terms of the standing order for first responders.

Dr. Woodward offered that if there is a problem with coverage of a medical director, the Mass ACEP may be willing to help.

Dr. Bernstein asked whether the regulations had any impact or restrictions on injectable naloxone. Ms. Allwes stated that the regulations do not prohibit injectable naloxone as we don't want to place restrictions on the manner of administrations.

Dr. Woodward moved to approve the first responder regulations, Dr. Cunningham approved.

All approved no recusals.

Commissioner Bartlett took a moment to recognize Mr. Jamie Pianka, outgoing Director of OEMS for his work and dedication to the Department of Public Health

ITEM 5: DRAFT REGULATION: Proposed New Regulation 105 CMR 271.000: *Postpartum Depression Screening and Reporting (Informational Briefing)*

Ron Benham Director for the Bureau of Family Health & Nutrition and Beth Buxton Carter, LCSW [insert title] presented the draft regulation to the Council.

Following the presentation, Commissioner Bartlett opened up the floor for discussion.

Dr. Bernstein commented on the importance of screening for postpartum depression at psychiatric emergency departments and said this special tracking code for postpartum depression, which may be different than ICD-10 codes, could have implications for other public health initiatives. Dr. Bernstein asked about the impact of postpartum depression screening for several other populations: (1) women with substance abuse problems and (2) women whose children may be taken away by DCF. Specifically he asked if the standardized postpartum depression screening tools include questions about substance use/abuse. Ms. Buxton responded that the Edinburgh screening tool for postpartum depression does screen for suicidality.

Dr. David asked about connection to services for women who screen positive, such as the welcome family pilot in Springfield, home visiting and expanded services for mental health conditions under the ACA.

Ms. Doherty commented on the utilization of standardized tools for postpartum depression screening. Programmatically, utilization of standardized tools for postpartum depression screening could facilitate discharge planning from hospitals and birthing centers, especially if coordinated with home visiting nurses or social workers. The Commissioner noted this suggestion for future programmatic work.

Mr. Rivera asked if “douglas” were included as mandated reporters under the draft proposed regulation. The proposed regulation defines “health professionals” but the definition does not include douglas.

ITEM 6: DRAFT REGULATION: Proposed amendments to Regulation 105 CMR 201.000: *Head Injuries and Concussions in Extracurricular Athletic Activities (Informational Briefing)*

Dr. Kneeland asked if these guidelines are different from those pertaining to multi-concussions.

Ms. Pavlos stated that they are not. There are two required forms that give the school the info of the history of concussions and can be manage differently.

Mr. Rivera questioned whether there were best practices and whether these pertain to schools that aren’t part of MIAA or clubs.

Ms. Pavlos responded that there are organizations that are working for statutory changes to add town sports for these regulations to cover, although several town clubs and town recreation programs that are looking to come into compliance with this, as the bureau is getting inquires. All public schools and schools that fall under the MIAA will fall under these regulations.

ITEM 7: INFORMATIONAL PRESENTATION

a. Limited Service Clinics

b. Commissioner’s Update on Opiate Emergency and actions since last meeting

ITEM 8: EXECUTIVE SESSION

Dr. Woodward left before the start of the executive session.

Dr. Cunningham voted to go into executive session, Dr. Kneeland seconded the motion, and the vote was unanimous. Members still present in the room included Dr. David, Ms. Doherty, Mr. Rivera, Mr. Brindisi, Dr. Kneeland, Dr. Cunningham, Dr. Bernstein and Commissioner Bartlett.

At the conclusion of the executive session, Dr. Bernstein moved to adjourn the meeting, Ms. Doherty seconded the motion. All approved.

The meeting adjourned at 11:16 AM on a motion by and passed unanimously without discussion.

LIST OF DOCUMENTS PRESENTED TO THE PHC FOR THIS MEETING:

1. Docket of the meeting
2. DoN Pending List
3. Minutes of the Public Health Council meeting of April 9, 2014
4. Determination of need project memos
5. Proposed amendments to 105 CMR 445.000: *Minimum Standards for Bathing Beaches* (State Sanitary Code, Chapter VII)

6. Proposed Emergency Amendments to 105 CMR 700.000 and 105 CMR 171.000 Related to the Use of Naloxone and Other Opioid Antagonists by First Responders
7. Proposed New Regulation 105 CMR 271.000: *Postpartum Depression Screening and Reporting* **(Informational)**
8. Proposed amendments to Regulation 105 CMR 201.000: *Head Injuries and Concussions in Extracurricular Athletic Activities*
7. Memo to PHC and draft regulation
8. Copies of all power point presentations (emailed upon conclusion of the meeting)

Commissioner Cheryl Bartlett, Chair