

BOARD MEETING MINUTES

By Remote Participation Pursuant to *An Act Extending Certain COVID-19 Measures*Adopted During the State of Emergency.

Wednesday, March 12th, 2025

4:00 p.m.

Board Members Present

Dr. Taveras, Ms. Laptiste, Mr. Valdez, Mr. Wilmot

Chairperson's Remarks

Good Afternoon, fellow Board of Health members, Boston Public Health Commission staff, and members of the public. Welcome to the March meeting of the Boston Board of Health.

I would like to start by thanking Mayor Wu for entrusting me with the role of Board Chair. I have deep appreciation for BPHC's mission, its focus on working with community to achieve equity goals, and its dedicated staff. I am excited to work closely with this incredible team and my fellow Board members in this capacity.

This meeting is being conducted by remote participation as authorized by state law and any votes will be taken by a roll call of the members. In keeping with the Board's usual practice, members of the public are welcomed to observe the proceedings and Board staff will use the moderating features on the Zoom application to keep all on mute other than Board members and BPHC presenters.

This afternoon, we will have a presentation on BPHC's Fiscal Year '26 budget, and programmatic highlights from the Recovery Services Bureau. Now I will turn it to Dr. Ojikutu for the Executive Office report.

1. Executive Office Report

Dr. Ojikutu: Offered a note of gratitude to Dr. Taveras, for taking on the role of Chair of the Board. Shared that Mayor Wu appointed Stan McLaren to fill the open seat on the Board of Health; this appointment will require a vote from City Council. While the Federal Executive Orders have caused widespread concern, our mission values and work remains the same, and I want to assure the Board that's what I've been communicating staff, and that we are a financially fiscally sound organization and hat all of our federally funded programs are proceeding as normal. However, we are thinking about preparedness. We are certainly staying on top of all of these developments as they come in extremely quickly. Last week, she was with counterparts from across the country participating in Hill Day with NACCHO, the trade association for city and county health officials. Much of that conversation was around preparedness related to what's happening in public health and what's happening federally. Boston Public Health Commission is co-leading the Dorchester Working group process to make recommendations to Mayor Wu and Governor Healy, along with Mass League in regard to the former Carney hospital. I want to thank those of you who are on the Board of Health who have served in the 33 Member Working group and have provided your expertise and guidance. The Live Long and Well report was finalized and is available online. The first community-based investment is through Atrius Health Equity Foundation.

As you all know, we saw a significant surge of respiratory viral illness cases across our city, and a particularly difficult flu season. It has been an unusually late-peaking season. Our flu dashboard is available to the public at boston.gov/bphc. We are also closely tracking Avian Influenza. While risk of human infection remains low, we continue to advise residents to avoid contact with sick, injured, or dead birds and report them to 311 or mass.gov/reportbirds.

I also want to address headlines surrounding measles outbreaks in several states. While there are currently no active measles cases in Boston, I can assure everyone we are monitoring this situation very closely in conjunction with our state and local partners. As a reminder, the best way to protect yourselves and your families from measles is by getting the measles-mumps-rubella (MMR) vaccine.

On Monday, BPHC announced the launch of a new campaign, called Let's Talk HIV Boston, aimed at increasing awareness and reducing HIV-related stigma with a focus on educating the public about the fact that for people living with HIV.

We have continued to be busy in our emergency shelters and have continued to use the Engagement Center building as overflow for our 112 Southampton Street shelter. Envision Hotel has been acquired by Victory Programs.

Dr. Taveras: Thank you for that. Are there any questions from the Board?

Dr. Taveras: I was wondering if there are any kind of targeted efforts to try to specifically increase pediatric vaccination rates and completion?

Dr. Ojikutu: Community engagement and communication are important. Our Communications team has been producing and thinking through is focused on how to talk to parents and really engage communities that may be outside of the system. IDB has been working with BPS for the best way to get children vaccinated and we're following the data.

Mr. Valdez: Has the Commission done a risk assessment on currents grants, for example, on potential decrease in funding or elimination of funding, and if so, has the Commission also worked on contingency plans for those possible outcomes?

Dr. Ojikutu: Our first step was risk assessment. We do have contingency plan. We are fiscally sound, and I think that we are able to meet the needs of those grants and don't anticipate that anything materially will change in the services that were provided. If something does happen, we are prepared, and preparedness has been a big part of our approach and process.

Mr. Harrington: We have met with all of our bureaus and departments, and we've gone through our entire portfolio of federal grants across the entire commission. We've also gone through all of them to make sure that we know the current end dates for all our grants. We're going to follow up with different bureaus and departments that we flagged over the next several months. A lot of our federal grants end June 30, 2025.

Mr. Valdez: Thank you to Dr. Ojikutu and the entire Boston Public Health Commission team, for your caution, your diligence, your attention to the environment, and thank you for the assurance.

2. Acceptance and Approval of Minutes from the January 22nd, 2025 Meeting

Dr. Taveras: If there are no questions, I will accept a motion to approve the minutes from the January 22nd Board of Health meeting.

Motion was made by Mr. Valdez, Seconded by Mr. Wilmot, and approved unanimously by roll call vote,

Thank you, now I will turn it to BPHC Budget Director Chris Valdez to go over the FY26 budget.

3. FY26 Budget Presentation and Vote

Mr. Chris Valdez: This will be an overview of the FY26 maintenance budget, review of our proposed new budget requests, an update on our capital improvement requests, and review of current projects. One change to note is that office of Violence Prevention has been elevated from the child adolescent and Family Health Bureau into its own office and is now showing under the Public Health Services Center's line. EMS will also be making a request for additional FTEs.

Chief Hooley: We're making a request to increase to 24 new FTEs.

Mr. Chris Valdez: Regarding capital improvement projects that have been submitted to the city for review and consideration. This year we are asking for a second phase for the IT Data Center Project, which is focused on establishing a redundant offsite data center environment in New Jersey. Our first phase has been completed setting up the initial data center. Northampton

Square garage project is still in the design phase, aiming for completion of design by the fall with construction likely to commence in summer of 2026.

Mr. Valdez: There's an IT services line that has a \$365,000 increase that represents about 40% of the total administration and program support increase. Is that a result of the IT Infrastructure expenditure?

Mr. Chris Valdez: That's the result of that software increase and our annual software cost expenses that were given to us as additional budget from the City. So that's just an additional add the city gave us for annual software costs.

Mr. Valdez: On the line item for public health science and innovation that increased by \$334,000 correct?

Mr. Chris Valdez: That's a salary infringe related to the director position that was repurposed from another vacancy. So, we could create a director of public health science innovation within that budget line item.

Dr. Taveras: If there is no further discussion, I will accept a motion to submit the Boston Public Health Commission's Fiscal Year 2026 budget to Mayor Wu and the Boston City Council.

Motion was made by Mr. Wilmot, Seconded by Ms. Laptiste and approved unanimously by roll call vote,

Thank you, now I am happy to introduce Yailka Cardenas, BPHC's Recovery Services Bureau Director.

4. Spotlight: Recovery Services Bureau

Ms. Cardenas: I wanted to take some time just quickly to provide an overview of all the different programs that we have at recovery services. I'm proud to say that we are the first in the country opioid overdose family fund support program. We have four public health vending machines in

the community. We have eight Naloxone kiosks. We've launched the overdose support fund. One of the jobs that we were able to create in the last year was a harm reduction housing manager who is in charge of all the referrals and triage and supports that are needed in all the low threshold sites to make sure that individuals not only are entering the sites, but also there's case management available.

Ms. Laptiste: I had a question about the kiosks that you have. So, they're placed throughout the city in different venues. How do you know when it's empty? Or do you have a process where you go around and check it? And is it the City's or BPHC responsibility to fill those kiosks?

Ms. Cardenas: It's a partnership. Part of it is training the staff at the different locations to make sure that they work with us. If there is a need, we'll come out, but it's their responsibility.

Mr. Wilmot: What's the process on gathering feedback from community on how the kiosks are working in their respective neighborhoods; are there opportunities to add additional resources in those different boxes around the city?

Ms. Cardenas: We primarily meet with different agencies and collect feedback. We're using a lot of the data that we collected back in the summer 2023. Right now, we're working really closely internally with our evaluation team, our epidemiologists to have dashboards and collect some of that data.

Dr. Taveras: I'm really trying to think of why older black men in Boston are dying of drug overdoses at such alarming rates and have not seen the decrease that were was observed in other groups. What specifically is being done to maximize the outreach to different groups?

Ms. Cardenas: We started talking a little bit more to not only outreach departments within health centers, but also reaching out to like case management, behavioral health services. We have a

small working group right now also, part of the Strategic Partnership division. They meet with different health centers and the Mass League.

Dr. Taveras: Thank you for the wonderful presentation and all the work you and your team do. Are there any questions from members of the Board?

5. Adjourn

Dr. Taveras: Hearing no additional discussion, we can stand adjourned.

Attest:

/s/ PJ McCann