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>>> MORNING, EVERYONE.

I'M THE CHAIRMAN OF WAYS AND MEANS AND THE AUSTIN-BRIGHTON CITY COUNCILOR.

WE'RE HERE TODAY WITH BOSTON PUBLIC HEALTH COMMISSION AS PART OF OUR FY '20 BUDGET REVIEW PERTAINING TO DOCKETS 0622 THROUGH 0625, ORDERS INCLUDING ANNUAL APPROPRIATIONS FOR DEPARTMENTAL OPERATIONS, ANNUAL APPROPRIATION FOR THE SCHOOL DEPARTMENT, APPROPRIATION FOR OTHER POST-EMPLOYMENT BENEFITS, AND APPROPRIATION FOR CERTAIN TRANSPORTATION AND PUBLIC REALM IMPROVEMENTS AS WELL AS DOCKETS 0626 THROUGH 0628, CAPITAL BUDGET APPROPRIATIONS, INCLUDING LEASE PURCHASE AGREEMENTS.

I WOULD LIKE TO REMIND EVERYONE THIS IS A PUBLIC HEARING BEING BROADCAST LIVE AND RECORDED ON COMCAST CHANNEL 88 AND STREAMED AT BOSTON.GOV/CITYCOUNCILOR/TV. WE WILL TAKE PUBLIC TESTIMONY AT VARIOUS STAGES THROUGHOUT THE HEARING.

THERE'S A SIGN-IN SHEET TO MY LEFT BY THE DOOR.

WE ASK THAT YOU DOCUMENT YOUR NAME, AFFILIATION, RESIDENCE, AND PLEASE CHECK THE BOX YES IF YOU DO WISH TO TESTIFY.

THERE ARE SEVERAL WAYS THE PUBLIC CAN ENGAGE IN THIS BUDGET HEARING PROCESS.

YOU CAN ATTEND A PUBLIC HEARING LIKE TODAY'S AND SIGN UP.

YOU CAN ALSO COME TO A HEARING DEDICATED TO PUBLIC TESTIMONY ON TUESDAY, JUNE 4th FROM 2:00 P.M. TO 6:00 P.M., AND WE WILL STAY AS LONG AS NECESSARY TO HEAR EVERYONE THAT WOULD LIKE TO SPEAK ON THE BUDGET.

YOU CAN ALSO MAIL YOUR COMMENTS TO THE COMMITTEE ON WAYS AND MEANS, BOSTON CITY COUNCIL, FIFTH FLOOR, BOSTON CITY HALL, BOSTON MASS 02201, OR EMAIL THE

COMMITTEE AT CC.WM.BOSTON.GOV.
TO MY IMMEDIATE LEFT, MY FRIEND
FROM DORCHESTER, CITY COUNCILOR
AT-LARGE ANNISSA ESSAIBI-GEORGE,
TO MY FAR RIGHT, KIM JANEY FROM
ROXBURY, TO MY LEFT AGAIN, BACK
BAY COLLEAGUE CITY COUNCILOR
JOSH ZAKIM, AND TO MY IMMEDIATE
RIGHT, MY FRIEND FROM J.P.,
COUNCILOR MATT O'MALLEY AS WELL
AS MY COLLEAGUE CITY COUNCILOR
AT-LARGE MICHELLE WU.

I WOULD LIKE TO HAND IT OVER TO
YOU DR. VALDEZ, AND THANK YOU
FOR ALL THE WORK THAT YOU DO AND
THANKS FOR BEING HERE TODAY TO
PROVIDE TESTIMONY.

>> THANK YOU, COUNCILOR CIOMMO.
GOOD MORNING, EVERYONE,
COUNCILORS.

AGAIN, FOR THE RECORD, MY NAME
IS MONICA VALDEZ, AND I'M THE
EXECUTIVE DIRECTOR OF THE BOSTON
PUBLIC HEALTH COMMISSION.

I'M JOINED THIS MORNING BY OUR
DIRECTOR OF ADMINISTRATION AND
FINANCE, GRACE CONNELLY.

IT'S A PRIVILEGE FOR US TO BE
HERE WITH ALL OF YOU THIS
MORNING TO SHARE THE IMPORTANT
WORK THAT WE'RE DOING ACROSS THE
COMMISSION.

WE'VE BEEN REALLY DILIGENT ABOUT
OUR SPENDING AND HAVE MANAGED
OUR RESOURCES IN ACCORDANCE WITH
MAYORAL AND ORGANIZATION
PRIORITIES.

ACCOMPLISHMENTS IN FOUR OF OUR
BUREAUS.

OUR CHILD, ADOLESCENT AND FAMILY
HEALTH, HOMELESS SERVICE, AND

IDENTIFICATION BUREAU.

THE CHIEF WILL PRESENT ON BOSTON
EMS NEXT THURSDAY ON MAY 23rd.

THE COMMISSION WORKS ALONGSIDE
MAYOR WALSH AND CHIEF MARTINEZ
AND OTHER CITY DEPARTMENTS TO
IMPACT THE COMMUNITIES AROUND US
THROUGH YOUTH ENGAGEMENT,
COMMUNITY ENGAGEMENT, PROMOTING
SAFE AND RESILIENT COMMUNITIES
AND SUPPORTING EFFORTS TO
TRANSITION FROM HOMELESSNESS TO

STABLE HOUSING.

OUR BUREAU ADDRESSES THE PHYSICAL AND BEHAVIORAL HEALTH NEEDS OF BOSTON'S CHILDREN, YOUTH, AND FAMILIES.

I KNOW THAT VIOLENCE HAVE BEEN FRONT OF MIND FOR THE CITY COUNCIL, SO I WANTED TO SPECIFICALLY HIGHLIGHT THE WORK THAT WE'RE DOING AROUND VIOLENCE PREVENTION.

AS YOU KNOW, OUR BOSTON NEIGHBORHOOD TRAUMA TEAM NETWORK OFFERS CRITICAL SERVICES FOR INDIVIDUALS, FAMILIES, AND COMMUNITIES IMPACTED BY VIOLENCE.

THROUGH A NETWORK OF 19 ORGANIZATIONS, INCLUDING COMMUNITY HEALTH CENTERS, COMMUNITY-BASED GROUPS, AND A MOBILE TEAM, WE'RE ABLE TO OFFER ACCESS TO OUR TRAUMA HOTLINE 24 HOURS A DAY, 7 DAYS A WEEK, 365 DAYS A YEAR.

IMMEDIATE CRISIS RESPONSE SERVICES TO ANY INDIVIDUAL IMPACTED BY COMMUNITY VIOLENCE, LINKAGES TO COMMUNITY-BASED SUPPORT, SUPPORT FOR INDIVIDUALS AND FAMILIES DURING COMMUNITY EVENTS, INCLUDING VIGILS, MEMORIALS, AND FUNERAL SERVICES, AND REFERRALS FOR REALLY IMPORTANT ONGOING BEHAVIORAL HEALTH SERVICES FOR INDIVIDUALS AND FAMILIES WHO ARE IN NEED OF CONTINUOUS AND LONG-TERM SUPPORT FOR TRAUMA RECOVERY.

IN 2018, THE NETWORK SUPPORTED 73% OF ALL GUN-RELATED INCIDENTS IN THE CITY AND 100% OF ALL GUN-RELATED HOMICIDES WITH A TOTAL OF 297 DIFFERENT RESPONSE ACTIVITIES BEING COMPLETED OVERALL.

THANKS TO ADDITIONAL INVESTMENTS FROM MAYOR WALSH IN FY '19, WE WENT FROM FIVE TO SIX NEIGHBORHOOD TEAMS BY ADDING A SECOND TEAM TO DORCHESTER IN THE GROVE HALL NEIGHBORHOOD. WE WERE ALSO ABLE TO BUILD OUR CAPACITY AND DATA COLLECTION

ANALYSIS AND MANAGEMENT FOR THE
NTT INITIATIVE.

ALSO HIGHLIGHTED ON THE SLIDE
THE FAMILY JUSTICE CENTER OR THE
FJC, WHO PARTNERS WITH THE
MAYOR'S OFFICE AND THE BOSTON
POLICE DEPARTMENT.

IT IS COLLABORATIVE MULTIPLE
AGENCY SERVICES.

THE TEAM PROVIDES A SAFE AND
WELCOMING ENVIRONMENT WHERE
INDIVIDUALS BENEFIT FROM THE
AVAILABILITY OF SERVICES OFFERED
BY DIVERSE NONPROFITS AND
GOVERNMENTAL PARTNER
ORGANIZATIONS.

IT ACTS AS A HUB OF COOPERATIVE
ACTIVITY AND FACILITATES
CONTINUOUS LEARNING AND SERVES
AS A RESOURCE CENTER FOR
PROFESSIONAL DEVELOPMENT.

AND THROUGH THEIR EFFORTS, WE'RE
COMMITTED TO COORDINATING
VIOLENCE INTERVENTION AND
PREVENTION SERVICES THAT ARE
CULTURALLY RESPONSIBLE AND
ACCESSIBLE TO ALL VICTIMS.

THE COMMUNITY INITIATIVES BUREAU
ADDRESSES HEALTH ISSUES
AFFECTING BOSTON THROUGH
COMMUNITY AND HOME-BASED
SERVICES.

PROGRAM SUPPORT OUR COMMITMENT
TO COMMUNITY ENGAGEMENT,
ENVIRONMENTAL CONCERNS, CHRONIC
DISEASE PREVENTION AND
MANAGEMENT, ACCESS TO HEALTH
CARE AND ENFORCEMENT OF CITYWIDE
HEALTH INITIATIVES.

WE WORK HARD TO DELIVER DIRECT
SERVICES TO RESIDENTS, AND WE'RE
EXCITED TO RELAUNCH THE SUMMER
FITNESS SERIES WITH THE BOSTON
PARKS AND RECREATION DEPARTMENT
AND BLUE CROSS BLUE SHIELD.

IT WILL KICK OFF ON MAY 30th IN
COPLEY SQUARE.

AND WE HOPE TO SEE YOU THERE.

THE HOMELESS SERVICES BUREAU
OVERVIEWS A VARIETY OF PROGRAMS.
THESE SERVICES INCLUDE EMERGENCY
SHELTER, HEALTH AND BEHAVIORAL
HEALTH SERVICES, JOB READINESS
AND TRAINING, SUBSTANCE ABUSE

TREATMENT, RECOVERY SUPPORT, AND RAPID REHOUSING SERVICES.

LAST YEAR, ON AVERAGE WE PROVIDED EMERGENCY SHELTERS TO 710 INDIVIDUALS EVERY NIGHT OF THE YEAR, WHICH TRANSLATES TO 259,150 EMERGENCY SHELTER BEDS, 700,000 MEALS, 4,000 ARTICLES OF CLOTHING, OVER 1,000 CLIENTS WHO RECEIVED INTENSIVE CASE MANAGEMENT SERVICES, AND 10,000 CLIENTS WHO RECEIVED HEALTH CARE AND MEDICAL SERVICES.

WE PARTNERED WITH AREA SHELTERS TO ENSURE EVERY PERSON SEEKING SHELTER HAD A PLACE TO STAY. THIS YEAR, STAFF WERE ABLE TO PLACE OVER 300 INDIVIDUALS IN HOUSING.

THIS INCLUDES ONGOING WORK TO ADDRESS MAYOR WALSH'S PLAN TO ADDRESS HOMELESSNESS.

IT'S A TOP PRIORITY FOR US THAT OUR HOMELESS GUESTS NOT ONLY HAVE ACCESS TO SAFE ACCOMMODATIONS BUT ALSO DIGNIFIED ACCOMMODATIONS AT BOTH OF OUR SHELTERS.

WITH FUNDING FROM THE CITY'S CAPITAL IMPROVEMENT BUDGET, WE'VE BEGUN MAKING IMPROVEMENTS TO THE WOODS MULLEN SHELTER. WE'RE VERY PROUD OF THIS WORK WE'VE BEEN ABLE TO DO SO FAR, ESPECIALLY THE ABILITY TO INCREASE OUR BED CAPACITY.

THE INFECTIOUS DISEASE BUREAU SEEKS TO PREVENT SICKNESS ASSOCIATED WITH DISEASES AND CREATE HEALTHY LIFE FOR EVERYONES.

THE TEAM WORKS TO MAKE SURE PEOPLE HAVE THE NECESSARY INFORMATION.

THEY PROVIDE COMPREHENSIVE CULTURALLY APPROPRIATE INFORMATION.

ADDITIONALLY, THE STAFF PROVIDE FUNDING AND TECHNICAL ASSISTANCE TO PROVIDERS WHO DELIVER COMMUNITY-BASED PREVENTION IN EDUCATION, FEW COMPREHENSIVE EVIDENCE-BASED INTERVENTIONS DESIGNED TO RAISE COMMUNITY

AWARENESS AND LOWER INFECTION RATES.

THE STAFF HAVE BEEN REALLY BUSY WORKING THROUGHOUT THE YEAR ON DIFFERENT OUTBREAK INVESTIGATIONS IN THE CITY.

WE DO NOT HAVE A MEASLES OUTBREAK IN THE CITY, BUT WITH THE NATIONAL FOCUS ON MEASLES, THE STAFF HAVE BEEN EXTREMELY BUSY DEVELOPING ADVISORIES AND PROVIDING TAs TO OTHER CITY DEPARTMENTS.

I KNOW WE'LL HAVE A CHANCE TO GO THROUGH AND HIGHLIGHT SOME OF THAT COLLABORATIVE WORK THAT THE STAFF HAS BEEN DOING.

AS WE LOOK FORWARD TO FY '20 INVESTMENTS, WE WANT TO THANK THE MAYOR FOR HIS CONTINUED SUPPORT AND INVESTMENT AND FUNDING IN IMPORTANT PUBLIC HEALTH INITIATIVES AND WILL HIGHLIGHT SOME PROPOSED FUNDING FOR NEW FY '20 INITIATIVES.

CENTRAL HEALTH IS A PART OF A PERSON'S OVERALL HEALTH AND WELL-BEING, AND IT IS IMPORTANT TO BE KNOWLEDGEABLE AT SEXUALLY TRANSMITTED INFECTIONS.

THE OUTREACH AROUND HIV AND OTHER STIs WILL REDUCE INFECTION.

WE'LL ALSO BE ABLE TO PILOT A SAVINGS ACCOUNT PROGRAM TO IMPROVE ASSET DEVELOPMENT FOR HOMELESS INDIVIDUALS BY CREATING MATCHED HOUSING SAVINGS ACCOUNTS OR HSAs.

THIS IS A MODEL THAT'S BEEN IMPLEMENTED IN OTHER PLACES, AND THESE HSAs WILL BE OFFERED IN THIS PILOT FOR UP TO 50 INDIVIDUALS WHO ARE WORKING WITH ONE OF OUR CASE MANAGERS ON A HOUSING PLAN TO MOVE OUT OF SHELTER.

CLIENTS WILL SET THEIR OWN SAVINGS GOAL FOR ANY HOUSING-RELATED ACTIVITY AND WORK WITH THE CASE MANAGER TO ENSURE THE GOALS ARE ATTAINABLE AND REALISTIC.

A COUNCIL WILL BE MATCHED AT A 3

TO 1 RATE OF UP TO 500% PER CLIENT.

SINCE MARIJUANA HAS BEEN LEGALIZED, IT'S IMPORTANT TO PROVIDE FAMILIES, YOUTH, AND YOUNG ADULTS WITH CLEAR AND EASILY ACCESSIBLE INFORMATION ABOUT THE HEALTH IMPACTS OF USING MARIJUANA.

THANKS TO INVESTMENT, THE COMMISSION WAS ABLE TO WORK WITH JEN TRACY AND THE MAYOR'S OFFICE OF RECOVERY SERVICES TO LAUNCH A NEW COMMUNICATIONS CAMPAIGN AIMED AT PREVENTION MESSAGES FOR YOUTH AND OTHER VULNERABLE POPULATIONS.

AND YOU CAN SEE SOME OF THAT WORK HIGHLIGHTED IN THE SLIDE. ONCE AGAIN, THE MAYOR HAS INCLUDED FUNDING IN THIS BUDGET TO CONTINUE SUPPORT FOR THIS CAMPAIGN.

AS THE WORK CONTINUES, WE'LL BE ABLE TO ANALYZE METRICS FROM THE ROLLOUT AND TRAIN STAFF INTERNALLY AND PROVIDE ADDITIONAL INFORMATION TO MAKE HEALTH-INFORMED DECISIONS.

AS YOU KNOW, AS THE HEALTH DEPARTMENT, WE COLLECT AND HOLD IMPORTANT DATA AND PATIENT INFORMATION.

IT'S IMPORTANT TO ADVANCE ESSENTIAL MEASURES FOR SAFEGUARDING THIS INFORMATION ACROSS OUR ORGANIZATION.

TO THIS END, THERE ARE TWO NEW POSITIONS THAT WILL BE CREATED IN FY '20.

FIRST, A NEW PRIVACY OFFICER, WHICH IS NECESSARY FOR ENSURING THAT WE COMPLY WITH OUR ORGANIZATION'S PRIVACY POLICIES AND PROCEDURES.

THE SECOND POSITION IS INFORMATION SECURITY OFFICER TO MONITOR OUR COMPUTER NETWORKS AND TO ENSURE THAT OUR I.T. SYSTEMS ARE SECURE FROM CYBER THREATS.

WE'LL ALSO JOIN THE CITY OF BOSTON IN MOVING OUR REMAINING SERVER OUT OF CITY HALL AND THE

FLOOD ZONE TO THE BUILDING AT 1
SUMMER STREET TO ENSURE
PROTECTION OF OUR DATA CENTER.
I WANT TO SHARE AS AN
ORGANIZATION WE'VE LAUNCHED OUR
NEW THREE-YEAR STRATEGIC PLAN,
WHICH OUTLINES HOW WE GET AT THE
ROOT CAUSES OF HEALTH INEQUITIES
FOR OUR RESIDENTS.

IT WILL ALLOW US TO BE MORE
EFFECTIVE PARTNERS WITH THE
MAYOR AND ALL OUR COMMUNITY
STAKEHOLDERS AND THE CITY
COUNCIL.

WE'VE JOINED CHIEF MARTINEZ AND
OTHER DEPARTMENTS IN A
COLLECTIVE IMPACT PLANNING
PROCESS TO BETTER ALIGN OUR WORK
AND TO BE MORE INTENTIONAL ABOUT
THE IMPACT FOR WHICH WE'RE
STRIVING.

WE HAVE DEVELOPED A PLAN THAT
CAN CONTRIBUTE TO HOUSING
STABILITY BY WORKING THROUGH
MOVED BARRIERS THAT PREVENT OUR
RESIDENTS FROM GETTING HOUSING
STABILITY.

IN CLOSING, WE WANT TO THANK THE
MAYOR, THE TEAM AT THE OFFICE OF
BUDGET MANAGEMENT, AND CHIEF
MARTINEZ FOR THEIR SUPPORT.

I ALSO WANT TO THANK OUR BOARD
OF HEALTH FOR THEIR CONTINUED
GUIDANCE AND LEADERSHIP DURING
THIS BUDGET PROCESS.

WE'VE WORKED REALLY CLOSELY WITH
OUR MEMBERS AND ARE GRATEFUL TO
THEIR COMMITMENT IN ENSURING
THAT AS AN ORGANIZATION WE'RE
CONTINUE TO BUILD ON AND IMPROVE
ON OUR PUBLIC HEALTH SERVICES.

I WANT TO THANK OUR STAFF FOR
THE SERVICES THEY PROVIDE TO ALL
BOSTONIANS.

AND WE LOOK FORWARD TO WORKING
WITH ALL CITY COUNCIL MEMBERS.

I'LL NOW TURN IT OVER TO GRACE
CONNELLY TO CONTINUE OUR
REMARKS.

>> GOOD MORNING.

>> GOOD MORNING.

>> OUR PROPOSED TOTAL BUDGET FOR
FY '20 IS \$179 MILLION,
ANTICIPATED REVENUE FUNDS

TOTALING 45.5 MILLION, FUNDING AT 18 MILLION, STATE FUNDING APPROXIMATELY 16.4, AND THEN MISCELLANEOUS OF 9.4 MILLION. THE TOTAL BOSTON APPROPRIATION HAS INCREASED BY \$3.8 MILLION OR 4.4% OVER FY '19.

THE FY '20 BUDGET DOES INCLUDE COLLECTIVE BARGAINING INCREASES FOR ALL BUT TWO UNITS AT THIS POINT.

AN INCREASE OF 17 WHEN COMPARED TO FY '19.

THE FTE SUPPORTED THROUGH THE APPROPRIATION ARE APPROXIMATELY 941 AND INCREASE IS RELATED TO INFECTIOUS DISEASE, RECOVERY SERVICES, AND EMS.

SUPPORTING SERVICES THROUGH THE OPERATING BUDGET, THE CITY'S CAPITAL PLAN HAS INCLUDED NEW FUNDING FOR SEVERAL CRITICAL PROJECTS INCLUDING A NEW ROOF, ELECTRICAL HVAC WORK, AND A FITNESS CENTER BUILDING, WOODS MULLEN BATHROOM RENOVATIONS, PROJECTS FOR THE OPIOID EPIDEMIC, AND UPS INSTALLATION AND REPLACEMENTS THAT OUR I.T. DEPARTMENT WILL WORK ON WITH THE DEPARTMENT OF INTEGRATION TECHNOLOGY.

OPERATING AND CAPITAL FUNDS WILL BE USED TO CONTINUE TO SUPPORT CORE PUBLIC HEALTH FUNCTIONS THAT PROMOTE THE HEALTH AND SAFETY OF RESIDENTS, WORKERS, AND VISITORS IN THE CITY OF BOSTON.

THEY'RE OPERATING PRINCIPLES WHERE WE ENGAGE THE COMMUNITY AND BUILD PARTNERSHIPS WITHIN THE CITY.

THANK YOU.

>> THANK YOU.

SHORTLY AFTER YOU STARTED YOUR PRESENTATION, WE WERE JOINED BY COUNCILORS ED FLYNN AND ANDREA CAMPBELL.

THANKS FOR YOUR PRESENTATION. LET ME START OFF THE QUESTIONS. CAN YOU BE SPECIFIC, MORE SPECIFIC MAYBE, ON THE 17 NEW POSITIONS?

I THINK YOU MENTIONED EMS, BUT IF YOU COULD HIGHLIGHT WHAT DIVISIONS THEY'RE IN AND WHAT THEIR DUTIES MAY BE.

>> INFECTIOUS DISEASE WE'LL BE ADDING AN EPIDEMIOLOGIST TO WORK ON HIV, HCV AND THEY'LL BE IN THE FIELD.

ITS WILL ADD THE INFORMATION SECURITY OFFICER.

THE GENERAL COUNSEL WILL ADD THE PRIVACY OFFICER POSITION.

RECOVERY SERVICES WILL HAVE ADDITIONAL NINE FTEs.

>> AND LET ME REMIND FOLKS THAT WE ARE HAVING A SEPARATE EMS HEARING NEXT THURSDAY AT 10:30, SO MOST OF THE QUESTIONS SHOULD REFLECT ALL THE OTHER PROGRAMS, I GUESS, TO BE MORE SPECIFIC.

I WAS LOOKING AT THE CAPITAL, AND IT LOOKS LIKE YOU STARTED THE LONG ISLAND STUDY.

DO YOU HAVE ANY UPDATES ON ANY FINDINGS IN, I GUESS, PHASE 1 THAT IS UNDER WAY OF THE STUDY, OF THE FACILITIES AND SUCH?

>> IN TERMS OF THE LONG ISLAND STUDY, WE'LL DEFER TO JEN TRACY, WHO WILL BE RIGHT AFTER OUR QUESTIONS.

CHIEF MARTINEZ IS LEADING ON LONG ISLAND WORK FOR US.

>> OKAY, GREAT.

AGAIN, I KNOW WE'RE GOING TO TALK ABOUT EMS ON THURSDAY, BUT AS I GO DOWN THE ALLOCATIONS, JUST WONDERING IF THE UNDER 2% INCREASE IN EMS, DOES THAT REFLECT THE CONTRACT WE JUST ACTUALLY APPROVED YESTERDAY?

>> IT DOES NOT YET.

>> OKAY.

SO, THAT WILL COME UP OR ARE YOU PROJECTING WITH THAT IN IT?

DO YOU KNOW?

>> I THINK WE PROJECTED IT IN IT, BUT IT IS JUST A PROJECTION AT THIS POINT.

>> THAT KIND OF TROUBLES ME AGAIN BECAUSE I KNOW RESPONSE TIMES -- I HEAR ARE GETTING BETTER, BUT STILL I DON'T THINK THAT THEY'RE WHERE THEY NEED TO

BE, SO I JUST WANT TO MAKE NOTE OF THAT.

LET ME RECOGNIZE COUNCILOR ESSAIBI-GEORGE.

>> THANK YOU, CHAIR.

THANK YOU BOTH FOR BEING HERE.

I WANT TO THANK YOU FOR THE HEALTH COMMISSION'S PARTNERSHIP IN WHAT I ORGANIZED A FEW WEEKS

AGO, THE FIRST CITYWIDE NEEDLE

TAKE BACK DAY, CERTAINLY A

PARTNERSHIP WITH THE HEALTH

COMMISSION AND OUR COMMUNITY

HEALTH CENTERS ACROSS THE CITY.

THANK YOU FOR THAT, AND I LOOK

FORWARD TO SORT OF DIGESTING THE

RESULTS OF THE DAY AND LOOK

FORWARD TO CELEBRATING THAT AND

HOPEFULLY PLANNING A REPEAT

NEEDLE TAKE BACK DAY.

YOU STARTED WITH IT IN YOUR

PRESENTATION.

YOU MENTIONED THE MEASLES

CONCERNS ACROSS THE COUNTRY AND

THAT WE HAVE NONE IN THE CITY OF

BOSTON.

CAN YOU TALK A LITTLE BIT ABOUT

THE INFECTIOUS DISEASES THAT

HAVE BEEN TALKED ABOUT

DIFFERENTLY?

AS A PARENT, I THINK ABOUT

MEASLES AND MUMPS AND RUBELLA.

BUT WE HAD A CASE OF

TUBERCULOSIS.

CAN YOU TALK ABOUT THE RESPONSE

THAT THE PUBLIC HAS AND THE

COMMISSION?

>> THANK YOU FOR THAT QUESTION.

WE'RE REALLY HAPPY WE WERE ABLE

TO PARTNER WITH YOU ON THE

NEEDLE TAKE BACK DAY.

AS A MOM, I CAN RELATE TO WHAT

YOU'RE RAISING.

GIVEN IT'S BEEN FRONT AND CENTER

NATIONALLY, WE CAN'T GET THROUGH

A DAY WITHOUT HEARING ABOUT

MEASLES AND THE OUTBREAKS THAT

ARE GOING ON THROUGHOUT THE

COUNTRY.

BEFORE WE CAME THIS MORNING, I

WANTED TO DOUBLE CHECK THE

NUMBERS SO YOU HAD A CONTEXT AND

FRAME OF REFERENCE.

THE CDC DOES A WEEKLY REPORT OUT

ON THE CASES OF MEASLES.
AS OF THIS WEEK, WHICH COVERS
JANUARY 1st TO MAY 10th, THERE
ARE 839 INDIVIDUAL CASES, WHICH
IS UP FROM THE PREVIOUS WEEK
THAT THEY REPORTED.
THE MAJORITY OF THOSE NUMBERS
WILL I SHARE WITH YOU -- YOU'VE
PROBABLY HEARD IN THE NEWS --
HAVE BEEN ISOLATED IN CERTAIN
GEOGRAPHIC AREAS.
OUR COLLEAGUES IN NEW YORK CITY
HAD AN ACTIVE OUTBREAK IN
BROOKLYN AMONG AN ULTRA ORTHODOX
JEWISH COMMUNITY THERE.
THERE ARE VERY LARGE OUTBREAKS
HAPPENING IN WASHINGTON STATE.
WE ARE VERY LUCKY TO BE IN A
STATE AND A CITY WHERE WE HAVE
NEARLY UNIVERSAL VACCINE RATES.
IN MASSACHUSETTS ALONE, WE HAVE
A 98% VACCINATION RATE.
I WAS ON A CALL LAST WEEK WITH
COLLEAGUES, AND SAN DIEGO WAS
THE SECOND CITY ON THAT CALL.
SHE SAID THEY'RE AT 93%
VACCINATION RATES FOR MMR, WHICH
YOU REFERENCED COUNCILOR.
THE QUESTION ABOUT THE DIFFERENT
DISEASES, I CAN START IF YOU'D
LIKE ABOUT HOW WE KEEP TRACK OF
THE DATA BECAUSE I KNOW THAT WAS
ONE OF THE FIRST QUESTIONS THAT
YOU HAD INQUIRED ABOUT.
AND THIS IS ACTUALLY LED BY OUR
STATE COLLEAGUES, SO THE STATE
DEPARTMENT OF PUBLIC HEALTH IS
THE AGENCY THAT OPERATES AN
IMMUNIZATION REGISTRY.
THIS IS THE MASSACHUSETTS
IMMUNIZATION INFORMATION SYSTEM.
ALL STUDENTS ENTERING SCHOOL IN
THE COMMONWEALTH ARE REQUIRED TO
BE VACCINATED UNDER STATE LAW.
SO, THE FIRST THING THAT I
WANTED TO RAISE IS THAT IT IS
UNDER THE STATE'S PURVIEW TO
TRACK THIS DATA.
THERE ARE LIMITATIONS, SO I
WANTED TO RAISE TWO LIMITATIONS
IN THE STATE THE SYSTEM AND
REALLY THIS APPLIES TO MUCH OF
THE DATA THAT WE COLLECT IN
PUBLIC HEALTH.

THE DATA IS ONLY AS GOOD AS WHAT COMES INTO THE SYSTEM, AND ONE OF THE LIMITATIONS IN IMMUNIZATION RECORDS AND THE REGISTRY IS THAT IT IS RECEIVED FROM HEALTH CARE PROVIDERS DIRECTLY.

THE HEALTH CARE PROVIDERS INPUT IT DIRECTLY INTO THIS SYSTEM, AND THEY DON'T OFTEN HAVE THE HISTORICAL RECORDS WHEN PARTICULARLY NEW STUDENTS ARE COMING ON BOARD INTO THE SYSTEM.

THE SECOND LIMITATION IS THAT -- AND IT'S A GOOD THING IN THE STATE THAT WE, AS OF JUNE 2017, A QUALIFIED PHARMACIST AND PHARMACY INTERNS ARE ALSO AUTHORIZED TO ADMINISTER CDC RECOMMENDED VACCINES, WHICH INCLUDES MMR, TO INDIVIDUALS WHO ARE 9 YEARS AND OLDER, BUT NOT ALL PHARMACIES IN THE COMMONWEALTH ARE CONNECTED TO THE REGISTRY I DESCRIBED.

IF THEY'RE NOT CONNECTED BUT THEY'RE GET VACCINATED BY A PHARMACIST OR A PHARMACIST INTERN, THAT DATA ISN'T NECESSARILY GOING INTO THE SYSTEM, SO THERE ARE LIMITATIONS TO THE STATEWIDE SYSTEM.

>> ARE SCHOOL NURSES LINKED INTO THE STATEWIDE SYSTEM AS WELL?

>> YES.

SCHOOLS, LOCAL PUBLIC HEALTH, AND PROVIDERS ARE LINKED INTO THE SYSTEM.

>> AND ARE ALL OF OUR COMMUNITY HEALTH CENTERS IN THE CITY OF BOSTON CONNECTED TO THAT SYSTEM?

>> I CAN CONFIRM THAT FOR YOU, BUT I IMAGINE THAT THEY ARE. BUT BEFORE I SAY THAT, WE CAN DOUBLE CHECK THAT FOR YOU.

>> GO AHEAD.

CONTINUE.

SORRY.

>> THE OTHER DATABASE OR THE OTHER WAY WE TRACK IMMUNIZATIONS IN THE COMMONWEALTH IS THROUGH AN ANNUAL IMMUNIZATION SURVEY THAT IS ADMINISTERED FOR KINDERGARTNERS, SEVENTH GRADERS,

CHILD CARE PROVIDERS, AND COLLEGE STUDENTS.

CDC IS THE ONE ORGANIZATION THAT ALSO TRACKS IMMUNIZATIONS, AND THAT HAPPENS THROUGH THE NATIONAL CENTER FOR IMMUNIZATIONS.

YOU ASKED ABOUT DATA REGARDING MEASLES, MUMPS, AND RUBELLA, AND SO WE DON'T HAVE DATA AVAILABLE AT THE TIME OF THIS HEARING ON 2019, AND OUR STAFF WILL BE LOOKING AT THAT DATA TO MAKE SURE THERE AREN'T ANY PRIVACY CONCERNS BEFORE WE SHARE THAT WITH CITY COUNCIL, SO WE CAN PROVIDE THAT.

WE'RE GOING TO CONFIRM THAT WE'RE ABLE TO DO THAT, BUT I HAVE DATA FOR 2018 FOR YOU. AGAIN, MEASLES, WE HAD ZERO CASES OF MEASLES IN THE CITY. WE HAD 11 CASES OF MUMPS AND THEN 40 CASES OF TUBERCULOSIS, AND THAT'S DOWN FROM 82.

>> THAT'S ACTIVE TB?

>> THAT IS ACTIVE TB.

>> GREAT.

WE DO FIVE-MINUTE ROUNDS OF QUESTIONS.

THE TIMER WENT OFF, ALTHOUGH IT WAS ON SILENT MODE.

I'LL SEVERAL THE REST OF MY QUESTIONS FOR THE NEXT ROUND.

THANK YOU VERY MUCH.

>> COUNCILOR ZAKIM?

>> THANK YOU, MR. CHAIRMAN.

I WAS ENCOURAGED TO HEAR ABOUT OUR VACCINATION RATES IN THE CITY AND THE STATE.

THAT WAS ONE OF THE QUESTIONS I HAD.

JUST TO FOLLOW UP ON THAT, IS THERE ANY INDICATION THAT THAT'S TRENDING IN THE WRONG DIRECTION? ARE WE HOLDING STEADY?

WE THINK WE'RE IN GOOD SHAPE THERE?

>> I THINK THAT 98%, NEARLY UNIVERSAL VACCINATION RATE IS ONE OF THE STEPS OR ONE OF THE FACTORS WE HAVE IN THE CITY AND THE STATE THAT MAKE US VERY DIFFERENT AND SET US APART FROM

THOSE OTHER JURISDICTIONS AND OTHER CITIES THAT YOU'RE HEARING ABOUT IN THE NEWS.

BECAUSE WE HAVE SO MANY PEOPLE AND INDIVIDUALS WHO ARE VACCINATED, WE HAVE WHAT'S DESCRIBED AS HERD IMMUNITY. EVEN IF THERE WAS A CASE OF MEASLES IN THE CITY, THE MAJORITY OF THE POPULATION HAS BEEN IMMUNIZED, SO WE WOULD BE PROTECTED.

WE SHOULD ALWAYS BE STRIVING FOR VACCINATING EVERYONE, BUT YOU'RE RIGHT.

I THINK THAT REALLY SETS US APART.

>> EXCELLENT.

BRIEFLY ON THE LONG ISLAND BRIDGE -- I DON'T KNOW THAT'S GOING TO BE COVERED MORE EXTENSIVELY IN ANOTHER HEARING, BUT FROM AN A&F STANDPOINT, THE HEALTH COMMISSION, OUR SHELTERS, OUR SERVICES, DO WE KEEP TRACK OF WHERE FOLKS COME FROM WHEN THEY'RE RECEIVING SERVICES FROM THE CITY OF BOSTON?

ARE THEY COMING FROM QUINCY OR MILTON OR WORCESTER OR WHEREVER THEY'RE COMING FROM?

>> WE DO AT FRONT DOOR TRIAGE AS SOMEONE IS ENTERING THE SHELTER FIGURE THAT OUT AND TRY TO DIVERT THEM FROM THE SHELTER. WE WANT THEIR STAY AT THE SHELTER TO BE BRIEF, BUT, YES, WE DO HAVE THAT INFORMATION. WE'VE TALKED ABOUT IT IN PREVIOUS YEARS THAT MANY OF THEM, MORE THAN HALF ARE COMING FROM OTHER CITIES AND TOWNS.

>> AND I THINK THAT'S OBVIOUSLY A TESTAMENT TO, I THINK, THE SERVICES THAT YOUR DEPARTMENT, THE CITY OF BOSTON PROVIDES TO PEOPLE, BUT IT ALSO IS AN INTERESTING DATA POINT IN THE CURRENT DISCUSSION WITH THE CITY OF QUINCY THAT WE'RE BUILDING LONG ISLAND BRIDGE.

THIS IS A SHARED REGIONAL PROBLEM THAT EVERY CITY HAS A ROLE IN, SO THAT COULD BE USEFUL

TO HAVE THAT DATA TO SHARE WITH THEM.

PERHAPS SEND THEM AN INVOICE AT SOME POINT IF THEY CONTINUE TO BE OBSTRUCTIONIST ABOUT REBUILDING THIS BRIDGE.

THANK YOU FOR THAT.

THAT'S ALL.

>> WE'VE BEEN JOINED BY CITY COUNCILOR AT-LARGE MICHAEL FLAHERTY.

LET ME NOW RECOGNIZE COUNCILOR MATT O'MALLEY.

>> THANK YOU, MR. CHAIRMAN. IT IS UNSURPRISING THAT SOME SORT OF LEAD LINE OF QUESTIONING FROM MY COLLEAGUES AND ME IS ABOUT VACCINATION RATES, SO THANK YOU FOR GOING INTO IT SO THOROUGHLY WITH COUNCILOR ESSAIBI-GEORGE.

A HIGH POINT PROFESSIONALLY IS WHEN THE SIMPSONS CAME TO BOSTON.

MARGE SIMPSON DISCOVERED ONE OF OUR FREE SUNSCREEN DISPENSERS. ANOTHER WOMAN WAS WALKING BY. EXCUSE ME, DO YOU VACCINATE YOUR CHILDREN?

OF COURSE.

MARGE SIMPSON SAID BUT NOT STUPID PROGRESSIVE.

I HOPE OTHER MUNICIPALITIES TAKE BOSTON'S LEAD AS IT RELATES TO THE IMPORTANCE OF IMMUNIZATION, THE SCIENCE BEHIND IT, THE LIFE-SAVING EFFORTS THAT WE NEED TO DO FOR OUR CHILDREN AND FOR OUR SOCIETY.

GOOD WORK THERE.

AND I KNOW WE ALL STAND COMMITTED TO WORKING TO CONTINUE THOSE TRENDS.

THANK YOU, EXECUTIVE DIRECTOR AND CONNELLY FOR YOUR WORK.

I KNOW WE'RE HAVING A SEPARATE MEETING ON EMS, AND I'LL GET INTO MY LINE OF QUESTIONING AROUND EMS THEN, BUT ONE THING I NEED TO SEE IS A COMMITMENT FOR PERMANENT FACILITIES FOR PARAMEDICS AND EMTs.

THE NINE BUDGETS I'VE BEEN HERE FOR STUDIES AND REPORTS, I NEED

TO SEE SOME MORE FOLLOW-THROUGH.
WE NEED TO MAKE SURE THESE
INCREDIBLY HARDWORKING DEDICATED
PROFESSIONALS THAT I KNOW WE ALL
VALUE HAVE A PLACE WHERE THEY
CAN PARK THEIR AMBULANCE, WHERE
THEY CAN SIT AND TAKE A
FIVE-MINUTE BREAK, WHICH IS RARE
ON ANY GIVEN SHIFT, SO WE REALLY
NEED TO MAKE SURE THAT HAPPENS
THROUGH THE CAPITAL PROCESS, BUT
WE'RE GETTING TO THAT ON
THURSDAY OF NEXT WEEK.

YESTERDAY, ALL MY COLLEAGUES
HERE COSPONSORED AN INITIATIVE
LOOKING AT TEEN E-CIGARETTE USE,
JUULING, VAPING.

NEARLY 1 IN 5 HIGH SCHOOL
STUDENTS USE ELECTRIC
CIGARETTES.

WE'RE SEEING THE NUMBER OF
MIDDLE SCHOOL STUDENTS
INCREASING DRAMATICALLY.
CAN YOU TALK ABOUT SOME EFFORTS
YOU'RE CURRENTLY DOING,
RECOGNIZING THE FACT WE'LL BE
HAVING A HEARING SO WE CAN
SUPPORT YOU IN OTHER STRATEGIES
WE CAN EMPLOY?

>> THANK YOU FOR THAT QUESTION
AND THANK YOU FOR THE LEADERSHIP
ON THE SUNSCREEN AND THIS ISSUE
AS WELL.

THIS IS ACTUALLY AN INTERESTING
TOPIC THAT WE TALK A LOT ABOUT
INTERNALLY BECAUSE IT IS -- OUR
COLLEAGUES AT THE STATE
DEPARTMENT OF PUBLIC HEALTH HAVE
A FULL-ON CAMPAIGN.

THEY'RE SEEING DRAMATIC
INCREASES IN E-CIGARETTES AND
JUULING.

WHAT WE HAVE SEEN IN BOSTON IS A
DECREASE IN THE BOSTON PUBLIC
HIGH SCHOOL STUDENTS THAT
REPORTED USING E-CIGARETTES, AND
IT WENT FROM 15% IN 2015 TO 6%
IN 2017.

I HAVE THE STAFF THAT WILL CHECK
TO MAKE SURE THAT IS THE MOST
CURRENT, AND IT IS.

THAT'S A DRAMATIC DECREASE.
WE ATTRIBUTE THAT TO THE WORK
THE COMMISSION HAS BEEN DOING

OVER DECADES IN TERMS OF VERY ROBUST AND STRONG TOBACCO CONTROL POLICIES AND REGULATIONS.

IN 2015, OUR BOARD OF HEALTH AMENDED OUR TOBACCO REGULATIONS. WE WERE ONE OF THE FIRST CITIES IN THE STATE TO RAISE THE AGE FOR PURCHASING TOBACCO PRODUCTS TO 21.

WE TOOK THAT ADDITIONAL STEP AND RESTRICTED THE SALE OF FLAVORED TOBACCO PRODUCTS.

THE STATE FOLLOWED IN TERMS OF TOBACCO 21, BUT WE STILL REMAIN ON THE LIST OF CITIES IN THE COUNTRY THAT HAS VERY PROGRESSIVE AND VERY ROBUST TOBACCO CONTROL REGULATIONS. THE ONE PIECE THAT I KNOW YOU PUT FRONT AND CENTER IS THE MENTHOL.

FOR US AT THE HEALTH DEPARTMENT, THIS IS AN ISSUE OF HEALTH INEQUITY BECAUSE WE KNOW THAT BIG TOBACCO HAS BEEN TARGETING OUR COMMUNITIES OF COLOR, AND THAT'S HOW THEY'VE BEEN ABLE TO HOOK MOST RECENTLY THAT NEXT GENERATION OF SMOKERS IN TERMS OF HAVING MENTHOLS AND OTHER FLAVORS.

THAT'S WHY WE'VE SEEN THAT IMPROVEMENT ON THE HIGH SCHOOL USE.

I CAN SHARE WITH YOU THAT WE'RE ACTIVELY NOW IN PLANNING DISCUSSIONS WITH CHIEF MARTINEZ AND THE MAYOR AND OUR BOARD TO LOOK AT HOW WE CAN MAKE OUR REGULATIONS EVEN MORE ROBUST, AND WE LOOK FORWARD TO WORKING WITH YOU.

>> THAT'S VERY HEARTENING TO HEAR, AND I CERTAINLY TAKE YOU AT YOUR WORD.

IT SEEMS COMPLETELY COUNTERINTUITIVE TO STATISTICS HAPPENING THROUGHOUT THE REST OF THE COMMONWEALTH WHERE IT IS 1 OUT OF EVERY 5 HIGH SCHOOL STUDENTS.

IS THAT 6% NUMBER SELF-REPORTED?

>> IT IS SELF-REPORTED.

>> AND AS I UNDERSTAND IT, THE WAY THE QUESTION WAS PHRASED WAS A LITTLE DIFFERENT.

IF I HAVE THIS RIGHT, THE QUESTION WAS POSED TO MIDDLE SCHOOL STUDENTS, HAVE YOU USED ELECTRONIC CIGARETTES?

THAT ACTUALLY WAS A HIGHER NUMBER THAN HIGH SCHOOL STUDENTS.

>> WE CAN DOUBLE CHECK ON THE WAY THAT THE QUESTION --

>> THAT'S THE WAY I READ IT. SUFFICE IT TO SAY, IT SOUNDS LIKE THERE'S SOME GOOD WORK HAPPENING THERE.

I ALWAYS THINK THAT THERE'S MORE WE CAN BE DOING, AND I WANT TO MAKE SURE THE FIGURES WE'RE RELYING ON ARE INDEED ACCURATE.

>> AND I DEFINITELY THINK THERE IS -- REGARDLESS OF THAT IMPROVEMENT AND THE PROGRESS THAT WE HAVE SEEN, WE HAVE TO REMAIN VIGILANT WHEN IT COMES TO E-CIGARETTES BECAUSE WE HAVE HEARD ANECDOTALLY THERE ARE SOME SCHOOLS WHERE IT IS QUITE PERVASIVE.

HAPPY TO WORK WITH YOU ON THAT. REALLY LOOKING FORWARD TO IT.

>> ME TOO.

>> COUNCILOR WU?

>> THANK YOU.

GOOD MORNING.

THANK YOU FOR EVERYTHING YOU'RE DOING ACROSS THE CITY AND ALL THE DATA.

VERY HELPFUL.

I WANTED TO USE MY TIME ON LEAD POISONING.

JUST AS A CONSTITUENT, MASSACHUSETTS HAS VERY LOW -- WELL, HIGH THRESHOLD FOR INTERVENTION AND TRIGGERING CITY GOVERNMENT AND OTHERS TO GO IN.

WHEN I WAS SPEAKING WITH COMMISSIONER CHRISTOPHER, HE ALERTED ME THAT ISD AND THE HEALTH COMMISSION HAVE A PARTNERSHIP WHEN IT COMES TO ISSUES OF LEAD AND THAT YOU ALL TAKE PRIMARY RESPONSIBILITY WHEN IT IS YOUNG CHILDREN.

CAN YOU JUST TELL ME A LITTLE BIT ABOUT HOW THE INSPECTION PROGRAM WORKS AND WHAT THE RESOURCES ARE AVAILABLE FOR THAT?

>> SURE.

I CAN TELL YOU WHAT WE'VE BEEN DOING IN PARTNERSHIP ACTUALLY WITH SCHOOLS AND ISD.

IN 2016, BOSTON PUBLIC SCHOOLS WATER ACCESS POLICY WAS VOTED ON BY THE SCHOOL COMMITTEE WHICH ENSURED ALL STUDENTS HAD TO HAVE ACCESS TO WATER THROUGHOUT THE SCHOOL DAY AT NO COST.

THERE'S ALSO A COMPONENT AROUND ANNUAL TESTING OF SCHOOLS THAT HAVE SUPPLIES FOR WATER FOR CONSUMPTIVE USE.

BPS FOLLOWS THE EPA'S REVISED GUIDELINES AROUND TESTING FOR REDUCTIONS IN LEAD IN THEIR DRINKING WATER IN SCHOOLS AND CHILD CARE FACILITIES, SO WHEN THERE IS AN EVENT OF A DRINKING WATER FOUNTAIN THAT IS ABOVE THE ALLOWABLE RANGE OR RATES, THAT WATER FOUNTAIN, WE WORK WITH THE SCHOOLS.

THAT WATER FOUNTAIN IS TAKEN OFFLINE AND REPLACED WITH WATER DISPENSERS.

WE WORK WITH BPS IN TERMS OF COMMUNICATION PROTOCOLS IN HOW WE NOTIFY FAMILIES AND STAFF. ANY SCHOOL, ONCE THE REPAIRS THAT ARE DONE THAT ARE SCHEDULED TO COME BACK ONLINE, THEY HAVE TO HAVE THREE CONSECUTIVE TESTS THAT ARE DONE ON THE WATER SAMPLES, AND THE RESULTS HAVE TO BE BELOW THE EPA COPPER ACTION LEVELS.

THEY FOLLOW THE STATE RULES AROUND SAMPLING PROTOCOLS. APPROXIMATELY 8 TO 16 HOURS AFTER THEY'VE USED IT.

THEY'VE BEEN COMMITTED TO PARTNERING WITH US, AND WE HAVE SUPPORTED THEM IN TESTING THE WATER FOUNTAINS IN ALL SCHOOL BUILDINGS AT LEAST ONCE ANNUALLY, AND THE TOPIC OF LEAD AND THEIR WATER POLICIES IS

ROUTINELY DISCUSSED AT THEIR DISTRICT WELLNESS COUNCIL MEETINGS.

>> I HAVE LIMITED TIME.

I HAVE CONVERSATIONS WITH BPS ON THE WATER AND LEAD ISSUE.

I'M INTERESTED IN ALSO LEARNING ABOUT THE PAINT IN TERMS OF HOUSING INSPECTIONS.

WHAT I'M TOLD IS THERE'S ACTUALLY MUCH HIGHER INCIDENTS OF LEAD POISONING FROM KIDS LIVING IN HOMES THAT MIGHT HAVE LEAD PAINT EXPOSURE, ET CETERA.

>> AND WE CAN GIVE YOU THAT DATA AND THE PROCEDURES OFFLINE.

YES, BECAUSE THERE'S A HIGHER HOUSING STOCK IN THE CITY --

>> WHAT HAPPENS NOW WHEN -- BECAUSE ISD TOLD ME BPHC GOES IN AND DOES THE LEAD INSPECTIONS.

>> WE DO THE LEAD INSPECTIONS, AND WE HAVE FUNDING FOR THE REMEDIATION.

WE WORK WITH THE FAMILIES IN TERMS OF LEAD TESTING IF IT COMES UP POSITIVE IN THE RESULTS.

>> HOW MANY INSPECTORS DO YOU HAVE?

>> DON'T KNOW THE OFF THE TOP OF MY HEAD, SO WE CAN COME BACK TO YOU WITH THAT.

>> I'M CONCERNED ABOUT WHAT THE EXACT TRIGGER POINTS ARE.

>> IT IS BASED ON THE BLOOD LEAD LEVELS AND THE RESULTS THAT COME BACK TO US.

>> FROM THE PEDIATRICIAN SIDE OR WHEN DOES IT COME IN FROM THE HOUSING ISD SIDE AND WHEN DOES IT COME THROUGH SOME SORT OF PUBLIC HEALTH --

>> I'D HAVE TO FOLLOW UP ON THAT BECAUSE I WANT TO MAKE SURE WE'RE GIVING YOU THE CORRECT ANSWER IN TERMS OF HOW THAT PROCESS FLOWS, SO WE CAN GET THAT TO YOU.

>> OKAY.

IT WOULD BE GREAT TO UNDERSTAND THE SCOPE OF RESOURCES THAT ARE AVAILABLE FOR RESPONDING TO LEAD IN HOMES, THAT ISSUE, AND WHAT

IT WOULD MEAN FOR THE STANDARDS WERE I WANT TO SAY HEIGHTENED -- THE LEVEL OF EXPOSURE THAT TRIGGERS AN INSPECTOR TO GO IN WERE LOWERED TO THE NATIONAL RECOMMENDATIONS, WHICH IS MUCH LOWER THAN WHAT MASSACHUSETTS CURRENTLY HAS.

JUST WANTED TO UNDERSTAND KIND OF WHAT ADDITIONAL -- WHAT THAT WOULD MEAN IN TERMS OF THE DAY-TO-DAY OF THE HEALTH COMMISSION NEEDING TO GO OUT AND THEN FOLLOW UP AND WHAT HAPPENS WHEN YOU DO GO INTO THE HOME AND YOU FIND A CONDITION THAT MAY BE THREATENING TO A CHILD, WHAT KIND OF FOLLOW-UP AND WHAT RESOURCES YOU PUT INTO THAT.

>> I JUST DOUBLE CHECKED, AND IT IS MORE WATER TESTING.

WE'LL GET IT TO YOU THOUGH.

>> THANK YOU.

>> THANK YOU, COUNCILOR CIOMMO. THANK YOU FOR YOUR LEADERSHIP ON SO MANY PUBLIC HEALTH ISSUES FACING OUR CITY.

I HAD TWO THINGS I WANTED TO FOCUS ON.

YOU REFERENCED EARLIER THE SEAPORT STATION FOR EMS. THAT'S SOMETHING THAT I'M INTERESTED IN.

I DO GET A LOT OF RESIDENTS ASKING ME ABOUT IT.

IT'S A BOOMING, GROWING NEIGHBORHOOD.

THERE ISN'T AN EMS PRESENCE THERE.

I AM AFRAID IF THERE'S A MAJOR INCIDENT THERE, IT'S DIFFICULT GETTING EMS INTO THE SEAPORT WITH THE ONGOING TRAFFIC.

I KNOW THERE WAS SOME MONEY ALLOCATED FOR DRY DOCK AVENUE, BUT CAN YOU GIVE US A GENERAL IDEA OF WHAT THE PROCESS -- WHAT PROCESS HAS TAKEN PLACE, WHERE ARE WE, AND WHERE ARE WE GOING?

>> THE CHIEF IS ACTUALLY HERE.

PERHAPS HE CAN COME DOWN AND ANSWER THAT SPECIFIC QUESTION ABOUT THE SEAPORT STATION BECAUSE I DON'T HAVE THE DETAILS

RIGHT HERE.

>> I KNOW THAT WAS MORE FOR THE CAPITAL BUDGET PROCESS, BUT I KNOW YOU REFERENCED IT EARLIER, SO I JUST WANTED TO FOLLOW UP ON IT.

THANK YOU, CHIEF.

>> GOOD MORNING, COUNCIL.

>> GOOD MORNING, CHIEF.

>> THANKS.

I'M HAPPY TO BE HERE.

SPECIFIC TO THE REQUEST OF THE SEAPORT, HISTORICALLY, WE'VE HAD A REQUEST IN TO PRIORITIZE GETTING SOME SORT OF STATION, FACILITY, SATELLITE, WHATEVER YOU WANT TO CALL IT, DOWN IN THE SEAPORT FOR MANY YEARS NOW, GOING BACK TO PRIOR TO PRECEDING MAYOR'S LAST TERM.

THE CITY DID INVEST IN A STUDY. THEY DID CONDUCT THAT STUDY. THEY DID A NEEDS ASSESSMENT. THEY WEREN'T ABLE TO COME UP WITH ANY CITING.

THEY MADE A COUPLE OF RECOMMENDATIONS LOOKING AT OTHER CITIES HOW THEY WOULD DO THINGS IN AREAS LIKE THAT THAT WERE RAPIDLY DEVELOPING.

ONE WAS TO BUILD SOMETHING ON CITY OR WHATEVER-OWNED LAND. TWO, MAYBE TRY TO PARTNER WITH OTHER AGENCIES LIKE THE STATE-OWNED STUFF DOWN THERE, CONVENTION CENTERS DOWN THERE. AND ANOTHER ONE WAS TO DO SOME SORT OF LINKAGE PROGRAM, AND THEY SHOWED EXAMPLES OF DIFFERENT ONES WHERE IN A CITY SOMEBODY IS PUTTING UP A NEW BUILDING, AND YOU CARVE OUT AND PUT A STATION FOR A GARAGE OR A FIRE TRUCK FOR EMS.

THEY SORT OF JUST SHOWED UP WITH DIFFERENT RECOMMENDATIONS ON THAT.

THIS PAST YEAR, BPDA HAS BEEN TRYING TO KEEP AN EYE OUT ON CITY-OWNED PARCELS DOWN THERE THAT WEREN'T NECESSARILY SLATED FOR DEVELOPMENT OR POTENTIAL DEVELOPMENT.

YOU WOULDN'T WANT TO PUT

SOMETHING IN ONLY TO FIND OUT
THREE YEARS LATER THE AREA WAS
SLATED FOR ANOTHER PLAN.
THIS PAST WINTER, WE WERE
CONTACTED BY BPDA THAT THEY DID
HAVE A SMALL PARCEL WITH AN
EXISTING SMALL GARAGE ON IT DOWN
AT NUMBER 30 DRY DOCK AV.

>> YEAH, NUMBER 30 DRY DOCK AV.

>> WOULD WE CONSIDER IT.

OF COURSE, YES.

THAT WAS THE FIRST WE'VE HEARD
IN TEN YEARS THE CITY HAS BEEN
LOOKING FOR THAT.

RIGHT NOW, THIS SEEMS TO BE THE
FIRST TANGIBLE -- AS YOU KNOW,
ON THE CAPITAL THING, GETTING
SITING IS IMPORTANT TO THE PLAN
BECAUSE THAT MEANS YOU CAN MOVE
ON WITH DESIGN TO A DEGREE.

THAT'S WHAT I BELIEVE THE
325,000 CHANGE WAS IN THE BUDGET
THIS YEAR WAS TO START ON AN
IDEA OF SOME DESIGN.

I KNOW I WAS TOLD -- CAPITAL
CONSTRUCTION, THEY WENT DOWN TO
DO SOME ASSESSMENT ON THE SITE
AND SAID THAT IT WAS -- THEY
WERE LOOKING AT IT TO SEE IF IT
COULD BE SOMETHING THAT COULD BE
REMODELLED OR JUST LEVELLED.

THOSE ARE SOME OF OPTIONS.

I BELIEVE THAT'S WHY THERE WAS
MONEY PUT IN THE BUDGET THIS
YEAR I WAS TOLD WOULD BE
AVAILABLE AS OF JULY 1 FOR THEM
TO START DOING PRELIMINARY
PLANNING FOR CONSTRUCTION.

>> THAT'S VERY HELPFUL, CHIEF.

THANK YOU FOR THAT INPUT.

I HAVE GREAT RESPECT FOR THE
WORK YOU GUYS DO.

MY ONLY CONCERN IS IT SEEMS THAT
THE CLOSEST STATION MIGHT BE
OLIVER PURCHASE STREET AND THEN
CERTAINLY SEA 6 AND SOUTH
BOSTON.

I'M CONCERNED ABOUT TRAFFIC AND
NOT HAVING A PHYSICAL PRESENCE
DOWN THERE WITH THE GROWING
POPULATION IN THE SEAPORT AND
THE FOUR-POINT AREA.

I WOULD REALLY LOVE TO SEE A
STATION DOWN THERE FOR EMS.

I THINK IT'S NEEDED, AND I THINK IT WOULD BENEFIT THE RESIDENTS OF THAT COMMUNITY DOWN THERE.

>> WE AGREE.

AND WE IDENTIFY THAT AREA AS THE FASTEST GROWING.

>> THANK YOU, CHIEF.

AND I APPRECIATE EVERYTHING THAT YOU'RE DOING FOR THE CITY.

THANK YOU.

>> THANK YOU.

>> THANK YOU.

COUNCILOR CAMPBELL?

>> THANK YOU, COUNCILOR CIOMMO AND MONICA AND GRACE, THANK YOU.

CHIEF, YOU AS WELL.

JUST WANTED TO ECHO COUNCILOR

O'MALLEY'S COMMENTS WITH RESPECT TO STATIONS FOR EMS, PARAMEDICS, AND TECHNICIANS.

I AGREE WITH HIM.

WE HAVE -- AND IT WAS ACTUALLY A PROJECT THAT STARTED BEFORE I EVEN JOINED THE COUNCIL ON RIVER STREET, THE EMS LOCATION.

IS THAT A LOCATION WHERE TECHNICIANS AND PARAMEDICS CAN COME BACK TO AND TAKE THAT FIVE-MINUTE BREAK OR IS IT JUST USED FOR STORAGE OF THE TRUCKS AND STUFF LIKE THAT?

>> I'VE BEEN THERE WITH CHIEF HOOLEY, BUT I'M NOT SURE IF IT SERVES THAT PURPOSE AS WELL.

>> I SHOULD HAVE ASKED PERMISSION TO BE EXCUSED.

SORRY.

SO SPECIFIC TO THE RIVER STREET FACILITY, THE GARAGE THAT WAS BUILT A FEW YEARS AGO THROUGH THE CAPITAL CONSTRUCTION PROJECT, IT'S GOT 11 BAYS.

WE STORE SOME OF OUR LARGER STUFF THERE, LIKE OUR DISASTER BUS, SPARE AMBULANCES.

WE HAVE A LARGE COMMUNICATIONS TRAILER THAT WE STORED THERE THAT WE HAD TO USE THIS WINTER.

WE ALSO HAVE BASICALLY THE SUPPORT FOR THE CITY'S USAR TEAM.

WE DO CURRENTLY STAFF AND OPERATE A FEW AMBULANCES OUT OF

THERE.
ONE IS AMBULANCE 19 FROM

MATTAPAN.
AMBULANCE 12 WHICH IS A ZONE
IMPACT TRUCK FOR DORCHESTER
WHICH GENERALLY POSTS UP AROUND
FRANKLIN PARK.

AMBULANCE 17 WHICH BELIEVE IT OR
NOT IS A ROSENDALE TRUCK.

THE CREWS REPORT THERE, PICK UP
THE AMBULANCE.

THEY PARK THEIR CARS.

THEY HAVE THEIR EQUIPMENT
SECURED THERE.

PUT THEM IN THE TRUCK AND HEAD
BACK TO ROSEDALE.

AMBULANCE 12, SAME STORY.

THEY GO UP TO DORCHESTER, AND
THEY HELP FILL IN AREAS OF
DORCHESTER.

DORCHESTER IS PRETTY BIG AND
PRETTY POPULAR, SO THEY FILL IN
WHEN SOME OF THE PRIMARY TRUCKS
ARE BUSY.

THEY ALSO BACK UP ROXBURY AS
WELL.

AMBULANCE 9, 17 AND 12, NO, THEY
WOULD NOT BE ABLE TO ROUTINELY
GO BACK THERE.

AMBULANCE 19, WHICH DOES COVER
MATTAPAN, THAT'S CLOSE ENOUGH
THAT THEY CAN GO BACK AND USE --

>> I WANTED TO JUST GO ON THE
RECORD.

WE CAN TALK ABOUT THIS MORE AT
THE EMS HEARING.

THIS WAS SUPPORTING COUNCILOR
O'MALLEY'S COMMENTS FOR MORE
FACILITIES FOR PARAMEDICS AND
TECHNICIANS TO HAVE THE SPACE.

OUT OF MANY OF THE PROJECTS I
FOLLOW IN MY DISTRICT IN TERMS
OF CONSTRUCTION AND DESIGN, THAT
GARAGE WAS, I THINK, A REALLY
GREAT EXAMPLE OF COMMUNITY
PROCESS.

FOLKS HAD RESPONSES ON COLOR AND
CHANGE, AND EMS AND THE HEALTH
COMMISSION RESPONDED
ACCORDINGLY.

NOW YOU HAVE A GARAGE THAT
PEOPLE HAVE WELCOMED OBVIOUSLY,
RECEIVED WELL, AND DOES REALLY

GREAT WORK.

NOT THE GARAGE ITSELF OBVIOUSLY
BUT THE INDIVIDUALS GOING THERE
DO REALLY GREAT WORK OUT OF THAT
FACILITY, SO JUST WANTED TO
ACKNOWLEDGE THAT.

I HAVE JUST A COUPLE OF
QUESTIONS BEFORE PROBABLY THIS
ROUND ENDS.

MENTAL HEALTH, I KNOW COUNCILOR
ESSAIBI-GEORGE -- OF COURSE, I
WANT TO GIVE HER CREDIT -- HAS
DONE A LOT OF WORK IN THIS
SPACE.

IT'S BEEN COMING UP QUITE A BIT
WITH RESPECT TO SOME MEETINGS
WE'VE BEEN HOLDING IN DISTRICT 4
IN MY DISTRICT CALLED
"CONSTRUCTING PEACEFUL
COMMUNITIES."

I HAVE TO THANK YOU, MONICA, AS
WELL AS YOUR TEAM MEMBERS AT THE
HEALTH COMMISSION AS WELL AS
CHIEF HOOLEY AND OTHERS WHO SHOW
UP TO THOSE MEETINGS.

THEY OFFER INCREDIBLE INSIGHT,
VERY RESPONSIVE.

AND THERE WAS A MEETING THAT WAS
SET UP IN RESPONSE TO INCIDENTS
OF VIOLENCE IN DISTRICT 4, BUT
WE WANTED A CONSISTENT SPACE
THAT ANYBODY CAN COME TO AND
BRAINSTORM COLLECTIVELY ON WHAT
WE CAN DO TO RESPOND TO
INCIDENTS OF VIOLENCE.

WE HAVE TO DO IT AS A COMMUNITY.
YOUR TEAM MEMBERS SHOW UP, THEY
PARTICIPATE, AND IT IS EXTREMELY
HELPFUL.

INCLUDING IN OUR FIRST LISTENING
SESSION, THEY SHOWED UP AS WELL.
THE SECOND MEETING, THEY SHOWED
UP IN FULL FORCE, SO WANTED TO
ACKNOWLEDGE THAT.

BUT ONE OF THE THINGS THAT HAS
BEEN COMING UP QUITE A BIT IN
TERMS OF FOCUSING ON MENTAL
HEALTH, THE TRAUMA THAT FOLKS IN
CERTAIN COMMUNITIES ARE EXPOSED
TO AND DON'T SEEK THE SUPPORT
AND HELP THEY NEED IN THAT
EXPOSURE.

SOMETHING CAME UP AROUND THE
MONTH OF JULY, JULY BEING MENTAL

HEALTH AWARENESS MONTH FOR
MINORITIES.
AND I CALLED HEALTH CENTERS.
I SPOKE TO VARIOUS FOLKS AT
DIFFERENT HOSPITALS, AND I WAS
SHOCKED BECAUSE NO ONE KNEW WHAT
WE WERE TALKING ABOUT.
I KNOW IT EXISTS BECAUSE WE'VE
DONE A LITTLE RESEARCH, AND THE
U.S. DEPARTMENT OF HHS, IT'S ON
THEIR WEBSITE.
THEY DO SOME WORK.
I'M NOT SURE HOW DEEP OR FAR
THEY GO IN THE WORK, BUT CURIOUS
IF THE HEALTH COMMISSION DOES
ANYTHING IN JULY TO RECOGNIZE
THIS MONTH AS MENTAL HEALTH
AWARENESS MONTH FOR THE MINORITY
COMMUNITY, AND IF NOT, WOULD
LOVE TO CONTINUE A CONVERSATION
WITH YOU AND YOUR TEAM, PROBABLY
PULLING IN COUNCILOR
ESSAIBI-GEORGE AS WELL, ON WHAT
WE CAN DO TO RAISE AWARENESS
PARTICULARLY AROUND THE NUMBERS
OF FOLKS DEALING WITH MENTAL
HEALTH ISSUES AND THE STIGMA
THAT STILL EXISTS PARTICULARLY
IN COMMUNITIES OF COLOR AND
IMMIGRANT COMMUNITIES AS WELL.
>> I CAN DOUBLE CHECK TO SEE IF
WE HAVE ANYTHING SCHEDULED IN
THE MONTH OF JULY.
WE'D REALLY BE DELIGHTED IF WE
DON'T TO WORK WITH YOU ON THAT.
>> AND ALSO COUNCILOR
ESSAIBI-GEORGE.
I'M BRINGING THIS UP NOW BECAUSE
THAT WAS JUST A SURPRISE THAT NO
ONE REALLY KNEW ANYTHING ABOUT
IT.
WE CAN FOLLOW UP.
>> THE OTHER THING I WOULD SAY
IS I APPRECIATE YOUR WILLINGNESS
TO PARTNER WITH US THROUGHOUT
THE YEAR AND NOT JUST IN THE
MONTH OF JULY WHEN THINGS ARE
REALLY SPIKING IN THE SUMMER.
I'M NOT SURE IF YOU RECALL, BUT
LAST SUMMER, OVER THE SUMMER
MONTHS, THE COMMISSION WORKED
WITH OUR YOUTH ADVISORY BOARD
AND OUR CHILD, ADOLESCENT, AND
FAMILY HEALTH.

WE HAVE OUR BUREAU DIRECTOR WHO IS SITTING BACK THERE AND OUR VIOLENCE PREVENTION WORK WITHIN THE BUREAU.

LAST SUMMER, OUR SUMMER COMMUNITY DIALOGUES WERE TOTALLY DESIGNED.

YOU CAME TO ONE IN MATTAPAN, AND THAT WAS COMPLETELY DESIGNED AND LED BY OUR YOUTH AND OUR YOUNG PEOPLE.

AND THE FOCUS WAS ON THE IMPACTS OF COMMUNITY VIOLENCE ON ADOLESCENT MENTAL HEALTH.

WE HAD NEARLY 500 YOUNG PEOPLE WHO CAME OUT TO ALMOST A DOZEN DIFFERENT COMMUNITY-BASED HEARINGS.

I AGREE.

I THINK THAT THERE IS STILL A LOT OF STIGMA IN THE COMMUNITY DESPITE THE SERVICES THAT ARE PROVIDED NOT ONLY THROUGH THE COMMISSION AND OUR EXTENSIVE NETWORK OF COMMUNITY HEALTH CENTER, BUT WOULD LOVE TO FOLLOW UP WITH BOTH YOU AND COUNCILOR ESSAIBI-GEORGE OFFLINE TO SEE IF THERE ARE SPECIFIC THINGS WE CAN DO AS A FOLLOW-UP AND CONNECT IT BACK TO THE CONTINUING WORK WE ALL HAVE TO DO IN TERMS OF STRENGTHENING THE RESILIENCY OF OUR COMMUNITIES OF COLOR WHO ARE SUFFERING FROM A LOT OF THE CHRONIC EXPOSURE TO VIOLENCE AND TOXIC STRESS.

THAT IMPACTS EVERYTHING.

>> AWESOME.E

THANK YOU.

>> COUNCILOR FLAHERTY?

>> CHAIRMAN, GOOD MORNING. EXECUTIVE DIRECTOR, DIRECTOR, AND CHIEF.

I DO HAVE A QUESTION, SO DON'T GO ANYWHERE.

HAVE A SEAT.

GOOD MORNING.

GOOD TO SEE EVERYBODY.

ANY TIME I GET A CHANCE TO TALK ABOUT PUBLIC HEALTH ISSUES, I LIKE TO BRAG ABOUT OUR COMMUNITY HEALTH CENTERS.

THE NETWORK OF COMMUNITY HEALTH

CENTERS ARE SECOND TO NONE IN HOW THEY INTERACT WITH THIS CITY COUNCIL AS WELL AS ALL OF OUR RESPECTIVE NEIGHBORHOODS ACROSS THE CITY.

IT'S A CITY TREASURE FOR US.

THEY ARE ALSO SERVICING SOME OF OUR MOST VULNERABLE COMMUNITY.

ARE WE PROVIDING RESOURCES?

IF SO, WHICH ONES?

IF NOT, HOW COULD WE GET PLUGGED IN WITH THEM?

>> I'LL START, AND GRACE CAN FIND SOME OF THE FIGURES ON THE LINE ITEM.

I DON'T KNOW IF YOU KNOW THIS ABOUT ME, BUT STARTED WORKING HERE SEVERAL YEARS AGO.

THE RELATIONSHIP BETWEEN THE BOSTON PUBLIC HEALTH COMMISSION AND THE COMMUNITY HEALTH CENTERS, I STAFFED THEM.

IT'S GROWN OVER TIME.

I CAN'T THINK OF ANY PUBLIC HEALTH WORK WE DO, EVEN THINGS LIKE EMS, CAPITAL IMPROVEMENTS THAT OUR EXECUTIVE DIRECTORS HAVEN'T PARTNERED WITH US ON. THEY REALLY ARE, AS YOU SAID, A TREASURE AND SOMETHING -- I HATE TO SOUND LIKE A BROKEN RECORD, BUT IT MAKES US UNIQUE IN TERMS OF THE EXTENSIVE NETWORK OF PUBLIC HEALTH CENTERS WE HAVE. THEY RECEIVE, AS YOU KNOW, GRANTS.

THEIR PARTNERS ARE ON THE NEIGHBORHOOD TRAUMA TEAM INITIATIVE.

THEY ALSO RECEIVE FUNDING FROM US THROUGH DIFFERENT COMPETITIVE RFPs.

WITH OUR RYAN WHITE PARTY GRANT, WHICH A FEDERAL GRANT WE RECEIVED AROUND HIV TREATMENT AND CARE, OUR HEALTH CENTERS RECEIVE GRANTS THROUGH THAT PROCESS.

THEY'VE RESPONDED TO A NEW ROUND OF FUNDING AROUND SEXUALLY TRANSMITTED INFECTIONS, HEPATITIS C, AND OTHER STIs. THAT'S CITY FUNDING AND EDUCATION OUTREACH.

I THINK I FLAGGED THAT IN OUR REMARKS.

THERE'S FEDERAL AND CITY FUNDING THAT WE PROCURE, AND THEN THERE'S A LINE ITEM THAT WE HAVE DEDICATED TO COMMUNITY HEALTH CENTERS PARTICULARLY FOCUSED ON MATERNAL CHILD HEALTH, BUT ALLOW I'LL GRACE TO GIVE YOU THE EXACT NUMBERS ON THAT.

>> WE DEDICATE \$3.6 MILLION TO THE COMMUNITY HEALTH CENTERS FOR GRANTS.

AS MONICA MENTIONED, THIS WAS PREVIOUSLY DEVOTED TO PRIMARY CARE AND INFANT MORTALITY. DURING FY '17, WE STARTED A DISCUSS WITH THE MASS LEAGUE ABOUT HOW TO TRANSFORM THESE GRANTS SO THAT THEY COULD BETTER REFLECT WHAT THE INDIVIDUAL COMMUNITY HEALTH CENTER NEEDED.

BEGINNING IN FY '18, THEY WERE ALLOWED TO TAKE WHAT THEY HAD AND DIRECT IT TOWARDS THEIR PARTICULARLY NEEDS FOR THEIR COMMUNITY HEALTH CENTER. WE ALSO CHANGED HOW WE WOULD DO THE BILLING TO MAKE IT LESS BURDENSOME ON THEM.

THEY RECEIVE QUARTERLY PAYMENTS. WE GET AN ANNUAL REPORT. SOME ARE CONTINUING FOR PRIMARY CARE AND INFANT MORTALITY. SOME HAVE BRANCHED OUT INTO MENTAL HEALTH WORK.

THEY'RE REFORMING THEM TO HOW THEY FEEL THEY CAN BEST SERVE THEIR COMMUNITIES.

>> AND THEY'RE A JEWEL FOR THE CITY.

THAT OVERSIGHT AND MAKING SURE THEY REMAIN SUSTAINABLE IS HUGE FOR US.

THE OTHER AREA I WOULD LIKE TO TALK ABOUT IS OUR EMS.

THEY DO PHENOMENAL WORK. THINK ABOUT SENSELESS VIOLENCE IN OUR CITY.

I THINK THE DEATH TOLL WOULD BE SIGNIFICANTLY HIGHER, POSSIBLY EVEN DOUBLE FOR NOT FOR OUR EMS AND IF NOT FOR ONE OF THE BEST TRAUMA UNITS MINUTES AWAY FROM

WHERE A LOT OF THIS VIOLENCE IS HAPPENING.

IT'S AT BOSTON MEDICAL CENTER.

THEY DO PHENOMENAL WORK.

OUR POPULATION IS GROWING.

TRAFFIC CONGESTION AND

CONSTRUCTION CONTINUES TO

INCREASE.

THAT'S SLOWING DOWN OUR RESPONSE

TIMES, SO JUST WANT TO MAKE SURE

OUR EMS ARE RESPECTED.

THEY ALWAYS SEEM TO BE THE

FORGOTTEN ONE SORT OF IN OUR

PUBLIC SAFETY TREE, IF YOU WILL,

MAKING SURE WE'RE PUTTING ENOUGH

ON TO SUSTAIN THE DEPARTMENT,

MAKING SURE WE'RE ADJUSTING TO

OUR POPULATION GROWTH, BUT ALSO

MAKING SURE THEY'RE PROPERLY

STATIONED ACROSS THE CITY IS

HUGE.

BRIGHTON STREET, IT'S CENTRALLY

LOCATED.

WE CONSISTENTLY HAVE A LEASE I

LOOK AT, BUT ALL EMERGENCY

PERSONNEL USE IT.

EMS, BOSTON FIRE AND POLICE.

IT'S LEASED.

IT IS SOMEWHAT ANTIQUATED.

IT WOULD BE GREAT IF WE CONSIDER

PURCHASING THAT SITE BECAUSE OF

ITS LOCATION AND THEN PUT A

PUBLIC SAFETY CAMPUS THERE IF

YOU WILL IN THE EVENT WE HAVE TO

EVER ACTUALLY ACTIVATE FOR IT A

SERIOUS SITUATION.

WE HAVE ACTIVATED IT IN THE

PAST.

WE'RE GOING TO CONTINUE TO DO A

LEASE OR SHOULD WE APPROACH THE

OWNER AND SECURE IT AND PUT IT

IN OUR PORTFOLIO AS A REAL

ESTATE ASSET FOR US AND A PUBLIC

SAFETY ASSET FOR THE CITY.

>> THANK YOU.

I BELIEVE WE HAVE ANOTHER THREE

YEARS TO GO ON THE EXISTING

LEASE.

I KNOW WE RENEWED IT LAST YEAR.

WE'VE BEEN THERE PROBABLY AT

LEAST 13 YEARS NOW.

SIMILAR TO BRIGHTON, SIMILAR TO

WHERE WE LEASE PROPERTY FROM,

HARVARD, CONNOLLY.

WE'RE NOT NECESSARILY FACING RESPONSIBILITY FOR A TRIPLE NET LEASE AND THEN ALL THE REPAIRS ON TOP OF IT AND THE MAINTENANCE AND THE PROSPECT OF EVERY THREE YEARS WHEN THE LEASE IS UP TO HAVE THE RATES JACKED UP ON YOU AGAIN.

I DO KNOW WITH THE OFFICE OF EMERGENCY MANAGEMENT COLOCATED WITH US AT BRIGHTON STREET THAT HAS HELPED DEFRAY OUR COSTS ON THAT.

FOR THE LAST PROBABLY ABOUT FIVE YEARS NOW, THERE'S BEEN MONEY IN THE BUDGET FROM THEM TO HELP PAY FOR SHARING THAT FACILITY WITH THEM, SO THAT HAS HELPED US OPERATIONALLY AT BOSTON EMS.

I DO BELIEVE -- AND I WOULD HAVE TO GO BACK AND CHECK THE FACTS. I KNOW THERE WAS SOME INTEREST BY THE CITY TO EXPLORE THAT, AND I BELIEVE THERE WAS SOME TALKS BACK WITH THE COMPANY OR THE OWNER.

I'M NOT SURE WHERE THAT LANDED WITH THE WILLINGNESS TO SELL TO THE POINT WHERE THE MONEY -- WELL, WHATEVER WAS BEING NEGOTIATED OR EXPLORED AT THE TIME, THAT WAS BEING DONE THROUGH THE OFFICE.

MY UNDERSTANDING IS AT THE TIME THE CITY AND THE OWNER COULDN'T COME TO TERMS.

THEY'RE PRETTY FAR APART ON WHAT EACH VALUED THE LAND AT, ESPECIALLY WITH KNOWING THAT THEY HAVE TO DO EXTENSIVE WORK ON THE BUILDING ONCE THEY DO PROCURE IT.

I'M NOT SURE WHO WOULD BE -- IF IT WOULD BE PROPERTY MANAGEMENT OR CAPITAL CONSTRUCTION OR SOMEBODY ELSE THAT COULD EXPLORE SOMETHING THAT WAY THE CITY AND THE COUNCIL HAS OPTIONS.

>> SINCE THAT TIME, I THINK THE OWNER HAS PASSED.

I THINK IT'S THE TIME TO KNOCK ON THE DOOR AND SEE IF WE CAN DO SOMETHING THAT MAKES SENSE FOR THE CITY.

I WOULD LOVE TO SECURE THAT FOR THE CITY AND OUR PUBLIC SAFETY TEAM.

IT IS IN THE EPICENTER OF THE CITY, AND IT'S BETWEEN THE NETWORKS AND ALSO WITH THE COMMUNICATION PIECES.

SIGNIFICANT COMMUNICATION INFRASTRUCTURE WAS UNDERTAKEN THERE A FEW YEARS AGO AT GREAT COST TO THE TAXPAYER.

I WANT TO MAKE SURE WE'RE HOLDING ON TO MONEY THAT WAS SPENT IN THAT FACILITY, BUT IT JUST MAKES SENSE FROM MY PERSPECTIVE AND WOULD LOVE TO SEE SOMEONE FROM THE PUBLIC HEALTH SIDE CONTINUE TO PUSH THAT IDEA OR THAT ISSUE INSTEAD OF JUST CONTINUING TO PAY A SIGNIFICANT AMOUNT OF FUNDS EVERY YEAR ON A LEASE INSTEAD OF PURCHASING IT.

I APPRECIATE IT.

THANK YOU, MR. CHAIRMAN.

>> THANK YOU.

I'M GOING TO GO TO A COUPLE OF FOLKS FOR PUBLIC TESTIMONY.

ANNA LESLIE AND EMILY BAKER.

>> THANK YOU, COUNCILOR CIOMMO.

I CHECKED THE BOX, SO YOU'RE READING MY MIND.

THANK YOU, EVERYONE.

I JUST HAVE A QUESTION.

SORRY, I'M ANNA LESLIE.

I'M THE DIRECTOR OF THE BOSTON HEALTH COLLABORATIVE.

AND I KNOW THERE'S QUITE A BIT OF FUNDING THAT'S BEEN AVAILABLE, IS COMING AVAILABLE.

WE HAVE A NEW PROCESS IN MEETING WITH HOSPITALS AROUND THEIR DETERMINATION OF COMMUNITY BENEFITS, SO I WOULD LOVE TO HEAR MORE FROM THE COMMISSION ON WHAT THAT RELATIONSHIP IS LIKE, HOW WE CAN GAIN ACCESS TO MORE OF THAT FUNDING IN THOSE RELATIONSHIPS.

WE'D JUST LOVE TO HEAR MORE FROM YOU AND WHAT THE COUNCILORS ARE THINKING ON THAT.

>> YOU'RE RIGHT.

THE HOSPITALS AND THE HEALTH

CENTERS, THE COMMISSION, AND THE
EXTENSIVE NETWORK OF OVER I
THINK 100 DIFFERENT
ORGANIZATIONS ARE NETWORKING ON
THE BOSTON COMMUNITY NEEDS
HEALTH ASSESSMENT AND THE
COMMUNITY PLANNING
COLLABORATIVE.

I WOULD POINT YOU TO THE BOARD
OF HEALTH WEBSITE.

IT IS ON THE BPHC WEBSITE.

THERE'S A LINK FOR THE LAST TWO
MONTHS.

JUST LAST NIGHT, WE WENT THROUGH
WITH OUR COLLEAGUES, NANCY AND
MARCO, ON A PRIORITIZATION
PROJECT PROCESS IN DISCUSSION
WITH OUR BOARD MEMBERS TO GO
THROUGH THE DIFFERENT HEALTH
ISSUES THAT HAVE EMERGED AS TOP
CONCERNS FOR RESIDENTS THAT HAVE
COMPLETED A SURVEY.

SO, THE BACKGROUND ON THAT WORK
THAT WE'VE BEEN DOING AS THE
HEALTH DEPARTMENT WITH THE
HOSPITALS IS AVAILABLE ON OUR
WEBSITE.

WE'VE BEEN WORKING WITH THEM
EXTENSIVELY.

THEY LAUNCHED THIS WORK, THE
COLLABORATIVE, LAST FALL.

YOU MIGHT HAVE BEEN AT THAT
EVENT, AND I KNOW YOU
PARTICIPATED IN THE FIRST
PROCESS.

I WAS NOT HERE DURING THE FIRST
PROCESS, BUT I CAN TELL YOU
WE'VE BEEN WORKING CLOSELY WITH
THE COLLABORATIVE IN THINKING
THROUGH WHAT WILL HAPPEN ONCE
THEY LAND ON THOSE HEALTH
PRIORITIES.

WE HAVE A SERIES OF
CONVERSATIONS THAT WE
FACILITATED AND WE'D BE LEADING
HERE AT CITY HALL.

CHIEF MARTINEZ IS HOSTING US
NEXT WEEK TO MEET WITH AND TALK
ABOUT THE PRIORITIES AT THE HHS
CABINET MEETINGS.

THERE ARE MANY DIFFERENT
OPPORTUNITIES THAT COMMUNITY
MEMBERS WILL BE ABLE TO
WEIGH-IN.

I'M SORRY.

I DON'T REMEMBER OFF THE TOP OF MY HEAD, BUT YOU CAN CHECK THE COMMISSION'S WEBSITE.

IF WE CAN GET YOUR CONTACT INFORMATION, HAPPY TO SHARE TWO LARGE COMMUNITY EVENTS.

ONE AT THE END OF MAY AND ONE AT THE END OF JUNE WHERE THEY'LL BE DOING THIS PRIORITING EXERCISE WITH COMMUNITY RESIDENTS.

I CAN STOP THERE OR CONTINUE, BUT THAT'S A GOOD START, I THINK.

>> AND JUST FOR SAKE OF THE WAY WE PROCEED, PUBLIC TESTIMONY IS GENERALLY FOR COMMENTS, NOT QUESTIONS AND ANSWERED, BUT THAT WAS A GOOD QUESTION.

GLAD IT WAS ANSWERED AND WE CAN MOVE ON.

THANKS.

>> HI.

MY NAME IS EMILY BAKER.

I'M A MOM TO TWO CHILDREN, AGED 4 AND 6.

I'M A 16 YEAR RESIDENT OF CHARLESTOWN.

MY OLDEST IS SOPHIE, AND SHE HAS LIFE-THREATENING ALLERGIES.

IT'S BEEN A TOUGH ROAD FOR US GROWING UP IN A CITY WHERE EVERYTHING IS SHARED AND SOCIAL. SHE HAS SUFFERED ANAPHYLAXIS AT TIMES AND OTHER RESULTS THAT WERE DIFFICULT TO MANAGE.

PUBLIC PLAYGROUNDS HAVE BEEN A BIG CHALLENGE FOR US TO MANAGE. I'M SPEAKING HERE TO ASK YOU IF YOU WOULD PLEASE SUPPORT PLAYGROUND SIGNS THAT WOULD HELP TO IMPROVE THE LIVES OF FAMILIES, ESPECIALLY THE CHILDREN OF BOSTON.

THE PLAYGROUND SIGNS ARE GOING UP AROUND THE COUNTRY, INCLUDING CAMBRIDGE, THAT ASKS FOLKS TO EAT OFF THE PLAY EQUIPMENT AND USED A WATER-BASED CLEANER AFTER EATING.

NOWADAYS, 1 IN 13 CHILDREN HAVE A FOOD ALLERGY. WHEN I SPOKE TO OTHER MOMS, THIS

IS A REALLY COMMON PROBLEM.
I'VE HAD TO LEAVE BECAUSE A
CHILD HAS BEEN HOLDING PEANUT
BUTTER AND YOGURT WHILE TOUCHING
PLAYGROUND EQUIPMENT.

MY DAUGHTER HAS HAD ABOUT ONE
REACTION A MONTH WHEN SHE IS ON
THE PLAYGROUND EQUIPMENT.

LUCKILY, IT HASN'T PROGRESSED TO
BEING ANAPHYLACTIC SO FAR, BUT
IT'S BEEN REALLY AWFUL AND
REALLY TRAUMATIC FOR US.

BUT I KNOW I'M NOT ALONE.
I THINK THIS SIMPLE HEALTH
MEASURE WOULD MAKE A BIG
DIFFERENCE.

WE SPOKE WITH PARKS ABOUT THIS
RECENTLY AS WELL.

>> EMILY, DURING OUR PARKS
DEPARTMENT HEARING, SEVERAL
MOTHERS CAME WITH EXAMPLES OF
SIGNAGE.

CHIEF COOK, WHO IS THE HEAD OF
THE PARKS DEPARTMENT AT THIS
TIME, AS WELL IS CERTAINLY
LOOKING INTO IT AND FAVORABLE TO
REPLICATING THOSE SIGNS.

AS A MATTER OF FACT, I WAS TOLD
RECENTLY THEY'RE FABRICATING
CARDBOARD SO THEY CAN GET UP IN
A MORE IMMEDIATE FASHION, BUT
THEN MORE LONG-TERM SIGNS WILL
BE GOING UP.

>> THAT'S GREAT.

THANK YOU.

I WAS THERE AT THAT AS WELL.
ALSO, JUST WANTED TO BRING IT
INTO THE ATTENTION OF THE HEALTH
COMMISSION.

THANK YOU VERY MUCH.

>> YOU'RE WELCOME.

I HAVE ONE MORE.

ANNA WHITE.

>> I DON'T NEED TO BECAUSE I'M
AN ALLERGY MOM TOO.

>> OKAY, GREAT.

>> [OFF MIC].

>> THANK YOU FOR THAT.

NOW WE'LL MOVE BACK.

COUNCILOR ESSAIBI-GEORGE?

>> THANK YOU, CHAIR.

THANK YOU FOR THOSE WHO GAVE
PUBLIC TESTIMONY.

THANK YOU, CHAIR, FOR DOING IT

IN THE MIDDLE.
I THINK IT INFORMS THE
CONVERSATIONS AND PRESENTATIONS.
I JUST WANT TO CONTINUE ON SOME
OF OUR QUESTIONS AROUND MEASLES,
MUMPS, AND TUBERCULOSIS.
WHAT IS OUR PROTOCOL?
WHAT IS OUR RESPONSE WHEN THERE
IS A CASE OF AN -- AN ACTIVE
CASE THAT WE KNOW ABOUT IN THE
CITY OF BOSTON?
EARLIER THIS WEEK, THERE WAS A
CASE AT UMASS BOSTON OF ACTIVE
TB.
HOW DO YOU RESPOND AS A HEALTH
COMMISSION?
>> IN THAT PARTICULAR EXAMPLE,
OUR ROLE, BECAUSE IT IS CITY OF
BOSTON, IS WE FOLLOW UP WITH THE
INDIVIDUAL.
WE HAVE PUBLIC HEALTH NURSES WHO
SIT WITHIN OUR INFECTIOUS
DISEASE BUREAU.
THEY MEET WITH THE PATIENT.
THEY TALK WITH THE PROVIDERS,
AND THEY DO WHAT'S CALLED
CONTACT TRACING.
AND I'M HAPPY TO SHARE THIS WITH
YOU BECAUSE WE ACTUALLY DO HAVE
STANDARD OPERATING PROCEDURES ON
THIS.
THEY DO THE FOLLOW-UP INTERVIEWS
AND WORK WITH THE INDIVIDUAL WHO
HAS TB TO UNDERSTAND WHO ELSE
THEY'VE BEEN IN CONTACT WITH,
AND THAT IS OUR ROLE.
WE MAKE SURE THAT THEY ACTUALLY
ARE LINKED TO CARE, AND WE
OPERATE IN PARTNERSHIP WITH
BOSTON MEDICAL CENTER, A
LONG-STANDING TB CLINIC.
THEY'RE THE LARGEST PROVIDER OF
TB SERVICES IN NEW ENGLAND, AND
OUR PUBLIC HEALTH NURSES AND A
VERY DIVERSE GROUP OF
ADMINISTRATIVE STAFF HELP
SUPPORT THE CLINICIANS WHO ARE
THERE IN TERMS OF ENSURING
PATIENTS HAVE ACCESS TO THEIR
MEDICATION AND THAT THEY'RE
COMPLYING WITH THE TREATMENT
THAT'S REQUIRED WHEN YOU HAVE
ACTIVE TB.
WE ACTUALLY WORK VERY CLOSELY

WITH THE COMMUNITY HEALTH CENTERS ON THAT FRONT TOO. IF THEY DON'T WANT TO GO TO THE TB CLINIC AND THEY HAVE CARE AT A COMMUNITY HEALTH CENTER, WE WORK VERY CLOSELY TO MAKE SURE THAT THE MEDICATIONS ARE AVAILABLE IN THE PLACE THAT'S EASIEST FOR THEM TO ACCESS IT. AND HAPPY TO FOLLOW UP AND HAVE A DEEPER DISCUSSION WITH YOU IN OUR INFECTIOUS TEAM TO WALK YOU THROUGH THAT.

>> I APPRECIATE THAT, AND I'LL TAKE YOU UP ON THAT OFFER. WHEN WE WERE DOING SOME RESEARCH JUST IN MY OFFICE EARLIER THIS WEEK AND THE END OF LAST WEEK, ONE OF THE THINGS WE REALIZED IS THROUGH THE SCHOOLS' REPORTING SYSTEM IT APPEARED SOME OF THE REPORTING NUMBERS OF IMMUNIZATION LEVELS ARE VERY LOW IN OUR SCHOOLS.

I THINK PART OF THAT, ESPECIALLY 98% VACCINATE RATE, IS PROBLEM WITH THE DATA ENTRY EFFORT. CAN WE TALK A LITTLE BIT ABOUT WHERE DO WE SEE POCKETS OF INDIVIDUALS WHO ARE NOT IMMUNIZED AND HOW DO WE -- HOW DO YOU RESPOND TO THAT? HOW DO WE ACT AND RESPOND TO THAT INFORMATION?

>> I CAN TELL YOU THERE IS -- BECAUSE ONE OF YOUR QUESTIONS WAS TO SEE IF WE HAD HEAT MAPS OR KIND OF HIGH-RISK EXPOSURES IN THE CITY, AND THERE IS NO SPECIFIC HIGH-RISK GEOGRAPHIC AREA OR NEIGHBORHOOD IN THE CITY.

OUR FOCUS HAS BEEN WORKING TO GET TO THAT 100% TO MAXIMIZE THE NUMBER OF INDIVIDUALS WHO ARE GETTING VACCINATED.

WE HAVE BEEN WORKING CLOSELY WITH BOSTON PUBLIC SCHOOLS AND JILL CLARK IN PARTICULAR ON -- I THINK YOU KNOW THIS, BUT OUR MEDICAL DIRECTOR HAS A SEAT ON THE DISTRICT WELLNESS COUNCIL, SO WE'VE BEEN WORKING WITH JILL THROUGH DR. LOWE TO GET A BETTER

HAND ON THE CHALLENGES THAT THEY'RE FACING. SOMETIMES THE DOCUMENTATION FROM WHAT I UNDERSTAND IS INCOMPLETE. THEY'RE NOT ABLE TO GET A FULL VACCINE RECORD, BUT THAT DOESN'T NECESSARILY MEAN THAT THE STUDENT HASN'T BEEN VACCINATED.

>> RIGHT, RIGHT.

>> SO, WE'RE GOING TO CONTINUE TO WORK WITH THEM AND PROVIDE TECHNICAL ASSISTANCE TO HELP THEM GET THE DATA THAT THEY NEED AND VACCINATIONS, IF NEEDED.

>> GREAT.

I KNOW THE HEALTH COMMISSION PROVIDES THE FLU VOUCHERS OR FLU VACCINE VOUCHERS.

IS THERE A WAY TO DO SOMETHING SIMILAR WITHIN MMR IN PARTICULAR AND THEN TB AS WELL.

>> WITH THE VACCINES, WE ACTUALLY DON'T PROVIDE FLU VAX. WE MIGHT HOST THE CLINIC, BUT THAT IS OSCO PHARMACY THAT WE PARTNER WITH THAT ACTUALLY DOES THE VACCINE CLINICS.

THEY OFFER THE VOUCHERS, AND THEN THEY DO THE THIRD-PARTY BILLING.

THE VOUCHERS ON MMR IS AN INTERESTING IDEA.

OUR FOCUS HAS BEEN LINKING TO ALL INDIVIDUALS TO PRIMARY CARE PROVIDERS SO THEY HAVE A ROUTINE SOURCE OF CARE THAT CAN TAKE CARE OF THE WHOLE SELF.

THAT'S BEEN OUR FOCUS IS PARTNERING WITH OUR COMMUNITY HEALTH CENTERS.

>> GREAT.

THANK YOU FOR THAT.

JUST SHIFTING TO A RESPONSE TO ONE OF MY COLLEAGUE'S QUESTIONS EARLIER.

WE'RE SEEING AN ADDITIONAL INVESTMENT IN HIV AND AIDS EDUCATION ON YOUR END.

ARE WE SEEING AN UPTICK?

I KNOW SOME COMMUNITIES ARE SEEING AN INCREASE AFTER A LONG DECREASE IN THE RATE OF HIV INFECTIONS OR HIV OCCURRENCE WITHIN OUR CITY LIMITS.

>> SO, THE ADDITIONAL FUNDING THAT WE HAVE IS TO SUPPORT -- TO SUPPORT THE EDUCATION AND OUTREACH SERVICES THAT WE PROVIDES.

WE'RE ACTUALLY REALLY LUCKY IN THE CITY OF BOSTON THAT WE HAVE BOTH -- WE HAVE BOTH FEDERAL AND CITY RESOURCES.

FEDERAL AND CITY RESOURCES TO PROVIDE THAT CONTINUUM OF CARE FROM PREVENTION AND EDUCATION AND OUTREACH EFFORTS, WHICH IS WHAT WE'RE ABLE TO DO WITH THE CITY RESOURCES THAT WE RECEIVE. WITH THIS ADDITIONAL FUNDING, WE HAVE PROCURED \$1.3 MILLION. THE ADDITIONAL 300,000 WILL ALLOW US TO HAVE FUNDING AVAILABLE IN FY '20 OF 1.1 MILLION 450,000.

>> DO WE NEED THAT BECAUSE WE'RE SEEING AN INCREASE?

>> I'M TRYING TO FIND -- DO WE HAVE THE HIV DATA HERE HANDY? I CAN FIND IT.

I CAN GET YOU THE EXACT TREND DATA.

THERE HAVE BEEN OUTBREAKS ACROSS THE STATE, HIV OUTBREAKS. AND IN PARTICULAR THERE'S TWO ON THE LARGER END.

WE HAD SIX IN THE CITY OF BOSTON, AND THAT'S AMONG INDIVIDUALS WHO INJECT DRUGS, SO WE WORK IN PARTNERSHIP WITH THE STATE DEPARTMENT OF PUBLIC HEALTH DURING TIMES OF OUTBREAK. THE EDUCATION AND OUTREACH FUNDS AND THOSE ADDITIONAL DOLLARS WILL HELP US WITH THAT PARTICULAR POPULATION.

THE MAJORITY OF HIV CASES THAT WE CONTINUE TO SEE IN THE CITY OR ATTRIBUTABLE TO MEN WHO HAVE SEX WITH MEN, BUT WE ARE PAYING ATTENTION TO TRENDS RELATED TO INDIVIDUALS WHO INJECT DRUGS.

SO, THE OTHER PIECE THAT I WANTED TO MAKE SURE THAT WAS ON YOUR RADAR IS THAT THE PRESIDENT HAS ROLLED OUT THIS PRIORITY OF ENDING THE HIV EPIDEMIC, AND WE CAN SHARE THAT WITH YOU OFFLINE.

THE PLAN IS AVAILABLE.
THEY LAUNCHED IT IN FEBRUARY OF
THIS YEAR, AND SUFFOLK COUNTY
WAS ONE OF THE COMMUNITIES THAT
WAS LISTED AS ONE OF THE 48
COMMUNITIES THAT THEY'RE GOING
TO BE DISTRIBUTING PRIORITIZED
ADDITIONAL RESOURCES TO.
THAT'S BECAUSE THESE 48 CITIES
ACTUALLY MAKE UP MORE THAN HALF
THE NEW INFECTIONS THAT THEY'RE
SEEING.

MANY OF THE CITIES ON THAT LIST
AND COUNTIES ARE IN THE
SOUTHEAST AND RURAL COMMUNITIES.
THERE ARE SOME LARGE CITIES LIKE
BOSTON, WHICH IS IN SUFFOLK
COUNTY.

I'VE BEEN TALKING WITH THE
STATE.

THIS IS ON THE CHIEF'S RADAR AS
WELL.

I KNOW OUR BOARD CHAIR, MANNY
LOPES CONTINUES TO TALK ABOUT
THIS EFFORT.

THIS IS AN EFFORT WHERE MANY
PEOPLE ACROSS THE COUNTRY ARE
LOOKING AT TRENDS IN TERMS OF
THE POPULATIONS AND INCREASING
ACCESS TO TREATMENT THERAPIES
LIKE PREP, WHICH IS PREEXPOSURE
PROPHYLAXIS.

SO WE HOPE TO DO MORE OF THAT
WITH THESE ADDITIONAL RESOURCES
AT THE CITY LEVEL AND THEN
OBVIOUSLY WITH THE FEDS.

>> THANK YOU, CHAIR.

>> COUNCILLOR FLY%F

>> THANK YOU, COUNCILLOR CIOMMO.

THANK YOU, DIRECTOR, FOR TAKING
OUR QUESTIONS.

DIRECTOR, I KNOW I HAVE SPOKEN
TO YOU IN THE PAST AND WITH
CHIEF MARTINEZ AND WORKING
CLOSELY WITH HEATHER GASPER AS
WELL.

ASIAN AMERICANS REPRESENT THE
LARGEST ASIAN COMMUNITY IN
BOSTON.

THEY HAVE A HIGH RATE OF
DIABETES, TUBERCULOSIS AS WE ARE
DISCUSSING, REPRESENTING 36% OF
ALL PEOPLE WITH TB CASES.

BREAST CANCER DIAGNOSE OF ASIAN

WOMEN IS HIGH.
SCREENING FOR BREAST EXAMINATION
FOR ASIAN WOMEN IS VERY LOW.
I HAD AN OPPORTUNITY TO TALK TO
THE PRESIDENT OF THE TUFTS
MEDICAL CENTER ABOUT THAT.
I SAY YOU HAVE ONE OF THE BEST
HOSPITALS IN THE WORLD BUT OUR
WOMEN ARE NOT GETTING THE CARE
OR THE SCREENING ACROSS THE
STREET.
THAT IS FRUSTRATING FOR ME.
I'M WORKING WITH HEATHER.
WE HOPE TO HAVE A PUBLIC HEALTH
CONFERENCE SOMETIME THIS SUMMER
CHINATOWN SPECIFICALLY ON ASIAN
WOMEN HEALTH AND ASIAN HEALTH AS
WELL.
THE OTHER ISSUE THAT IS ALSO A
CONCERN, I JUST WANTED TO
HIGHLIGHT, RESIDENTS HAVE SPOKEN
TO ME, ABOUT DIFFICULTY OF
GETTING BILINGUAL SERVICES FOR
CHILDREN WHO NEED SPEECH
THERAPISTS, CHILD PSYCHOLOGISTS.
THIS IS IN THE ASIAN COMMUNITY.
AND DEVELOPMENT SPECIALISTS.
HOSPITALS DON'T HAVE BILINGUAL
PROVIDERS THAT SERVE THE NEEDS
OF THESE FAMILIES.
I WAS JUST WONDERING GENERALLY
IF THERE'S SOMETHING YOUR STAFF
CAN DO AS IT IMPACTS THE ASIAN
COMMUNITY ON SERVICES FOR
COMMUNICATION, LANGUAGE ACCESS,
ALL THOSE ARE CRITICAL.
I MET WITH THE ASIAN TASK FORCE
ON DOMESTIC VIOLENCE.
THEY SAID THEIR BIGGEST IS
LANGUAGE ACCESS.
MAKING SURE THAT WE CAN SPEAK TO
PEOPLE IN A LANGUAGE THAT THEY
CAN UNDERSTAND IS CRITICAL.
BUT JUST WANTED TO GET YOUR
THOUGHTS ON WHAT WE CAN DO OR
ARE WE DOING ENOUGH FOR OUR
ASIAN COMMUNITY.
>> SO THANK YOU, COUNCILLOR
FLYNN, FOR GOING THROUGH ALL THE
WONDERFUL PROGRESS THAT WE MADE
WITH PARTNERSHIP WITH YOU OVER
THE LAST YEAR SINCE WE WERE HERE
IN FRONT OF THE CITY COUNSELORS.
I ALSO WANT TO THANK YOU FOR THE

LEADERSHIP THAT YOU'VE TAKEN
ADVOCATING FOR AND BRINGING TO
LIGHT ALL OF THE CHALLENGES THAT
OUR ASIAN AMERICAN COMMUNITY AND
THE CITY OF BOSTON ARE FACING.

AS AN ASIAN AMERICAN WOMAN, I
FIND IT PARTICULARLY REFRESHING
THAT YOU REALLY HAVE TAKEN THIS
ON IN A VERY SERIOUS WAY AND
PUSHED US TO BE MORE
ACCOUNTABLE.

BECAUSE HAVING SMALL NUMBERS IN
THE DATA AND NOT BEING REFLECTED
AND JUST HAVING AN ASTERISKS IS
NOT ACCEPTABLE.

I WANT TO THANK YOU FOR THAT.
WE MADE SOME AMAZING
IMPROVEMENTS ON THE DATA SIDE.
I WANT TO THANK YOU
PROFESSIONALLY AND PERSONALLY
FOR THAT.

ON THE ISSUE AND CHALLENGES OF
CULTURAL COMPETENCIVE AND
CULTURAL COMPETENCY AND CARE.

WHAT I CAN SHARE WITH YOU --
WE'RE LUCKY -- GOING BACK TO THE
HEALTH CENTERS, SOUTH COVE.
SHOULDN'T BE JUST SOUTH COVE.

IN CHINATOWN, MANY OF THE HEALTH
CENTERS HAVE THAT KIND OF
LINGUISTIC AND CULTURAL CAPACITY
AMONG THEIR WORK FORCE.

IN TERMS OF THE HEALTH
COMMISSION, WE DO PROVIDE AND
PREPARE MANY MATERIALS AS WE CAN
IN OUR TOP LANGUAGES.

SO WITH THE ASIAN LANGUAGES,
DEFINITELY IN CANTONESE,
MANDARIN, THESE ARE THE TOP
ASIAN LANGUAGES SPOKEN IN THE
CITY OF BOSTON.

SO IN TERMS OF THE HEALTH
EDUCATION MATERIALS, PREVENTION
MATERIALS, ENSURING THAT THEY
ARE IN THE LANGUAGES THAT OUR
RESIDENTS NEED AND SPEAK, THAT'S
A PRIORITY FOR US.

I THINK WHAT WE CAN DO OFF LINE
IS FOLLOW UP AND SEE THROUGH OUR
COMMUNITY HEALTH EDUCATION
CENTER, WE PROVIDE COMMUNITY
HEALTH WORKER TRAINING, THE
CHECK PROGRAM.

WE'RE PART OF THE CERTIFICATION

PROCESS THAT THE STATE DEPARTMENT OF PUBLIC HEALTH HAS IN PLACE FOR COMMUNITY HEALTH WORKERS THAT OFTENTIMES WORK AS PATIENT NAVIGATORS AND OUTREACH WORKERS FOR COMMUNITIES, VERY DIVERSE COMMUNITIES.

SO WE CAN FIND OUT AND SEE IF THEY'RE DOING ANYTHING SPECIFIC AROUND PATIENT NAVIGATION AND BUILDING THAT WORK FORCE THROUGHOUT OUR DIFFERENT HEALTHCARE PROVIDERS, HOSPITALS AND HEALTH CENTERS.

BUT I CERTAINLY THINK THAT THERE'S STILL A LOT OF WORK TO BE DONE, PARTICULARLY WHEN SO MANY OF OUR RESIDENTS ARE IMMIGRANTS AND WE'RE MAJORITY MINORITY CITIES.

THANKS FOR YOUR LEADERSHIP FOR THE ASIAN COMMUNITY.

>> THANK YOU.

I WANT TO SAY THAT HEATHER HAS BEEN EXCELLENT WORKING WITH ME AND MY STAFF AND PROVIDING GREAT RESOURCES.

SO I DO ENJOY WORKING WITH HER.

SO I JUST WANT TO PASS THAT ALONG TO YOU.

>> HEATHER IS WONDERFUL.

>> COUNCILLOR CAMPBELL?

>> THANK YOU, COUNSELOR.

COUNCILLOR FLYNN AND I HOSTED -- CONVENING A ROUNDTABLE WITH THOSE DOING WORK IN THE DOMESTIC VIOLENCE SEXUAL ASSAULT SPACE.

BASED ON A HEARING ORDER WE FILED LAST YEAR AND WE FILED THIS YEAR AND BEFORE WE HAVE A HEAR, WHICH WILL PROBABLY HAPPEN IN THE FALL, WE WANTED TO PULL TOGETHER THE PROVIDERS TO LISTEN AND WE HAD NORTHEASTERN LAW SCHOOL, WHICH HOSTS THE CONVERSATION, IT WAS POWERFUL, ABOUT TWO HOURS LONG.

PROBABLY COULD HAVE STAYED ANOTHER TWO HOURS.

JUST LISTENING TO THE BARRIERS, THE PROBLEMS WITHIN THE VARIOUS SYSTEMS THAT SURVIVORS HAVE TO ENGAGE WITH AND HOW CHALLENGING IT CAN BE.

THE SHELTER SYSTEM, YOU NAME IT.
SOME UNFORTUNATE INCIDENTS THAT
HAPPENED WITH BPD AND MOST OF
THEM.

OCCASIONALLY THE COMPLAINTS THAT
COME UP, HOW A RESPONSE COULD BE
BETTER.

SO WE TAKE A LOT OF NOTES.

GIVEN THE WORKS OF THE HEALTH
COMMISSION, HOSPITALS, YOU NAME
IT, OTHER CITY AGENCIES, CURIOUS
WHAT THE HEALTH COMMISSION IS
DOING IN THE SPACE OF DOMESTIC
VIOLENCE, SEXUAL ASSAULT AND ONE
ADDITIONAL LAYER THAT DOESN'T
GET THE ATTENTION THAT IS DUE,
THAT WE WANT TO MAKE SURE WE
TALK ABOUT, ABUSE WITH CHILDREN,
SEXUAL ABUSE AND HOW IT VERY
MUCH IS CONNECTED TO THOSE WHO
AT SOME POINT BECOME WHAT WE
LABEL ASçó PERPETRATORS.

SO CAN USE WHAT YOU'RE DOING IN
THAT SPACE AS WELL.

>> THANK YOU FOR THAT QUESTION.
THANK YOU FOR HOSTING THE
DISCUSSIONS.

>> WE SHOULD HOST YOU AN INVITE
COUNCILLOR FLYNN TO COME BACK.
IT IS REALLY A GREAT WAY FOR YOU
TO SEE THE DIFFERENT RESOURCES
THAT ARE AVAILABLE.

NOT JUST FROM THE COMMISSION.
REALLY IS MULTIPLE -- IT'S
MULTI-JURISDICTION AND CITIES
AND STATES THAT ARE UNDER ONE
ROOF AND THE COMPASSION AND CARE
THAT THEY PROVIDE.

EVEN TO THE MOST -- TO THE
YOUNGEST.

SO ONE OF THE PROGRAMS THAT IS
HOUSED THERE, THE SPECIAL
ASSAULT NURSE EXAMINER'S
PROGRAM, WHICH IS A PROGRAM
UNDER THE DEPARTMENT OF PUBLIC
HEALTH.

A PEDIATRIC PROGRAM.

EVEN THE PHYSICAL LAYOUT OF THE
SPACE, THE INTERVIEW ROOM FOR
ADULTS AND CHILDREN THAT ARE
VICTIMS OF DOMESTIC VIOLENCE OR
SEXUAL ASSAULT ARE DETAILS THAT
THEY UNFORTUNATELY HAVE TO PAY
ATTENTION TO.

SO THE PROGRAMS THAT ARE RELATED TO THE SEXUAL ASSAULT ARE HOUSED WITHIN THE FAMILY JUSTICE CENTER.

HAPPY TO HOST YOU, A COUPLE OF DIFFERENT PROGRAMS THAT -- AND NUMBERS THAT THE STAFF WANTED ME TO FLAG FOR YOU.

SO IN ADDITION TO COUNSELLING AND THE LEGAL SERVICES THAT THEY OFFER, I MENTIONED THE FORENSIC MEDICAL SERVICE THAT CONNECTS TO SHELTER, REFERS TO DIFFERENT TREATMENT, THE SAFETY PLANNING. THIS ISN'T JUST ONE ORGANIZATION BUT MULTIPLE ORGANIZATIONS WORKING TOGETHER UNDER ONE ROOF. UNFORTUNATELY THE NUMBER THAT THEY SERVED IN 2018 WAS OVER 5,000 NEW CLIENTS.

IN ADDITION TO THE ON GOING CLIENTS, THEY DO A HOST OF TRAINING SO EVERYTHING FROM DOMESTIC VIOLENCE, SEXUAL ASSAULT, HUMAN AND SEX TRAFFICKING, ECONOMIC EMPOWERMENT.

OVER NEARLY 1,200 PROFESSIONALS THAT HAVE ATTENDED THOSE TRAININGS LAST YEAR ALONE. THEY HAVE DONE VARIOUS TRAININGS AND CURRICULUM.

THERE'S CONFERENCES THAT THEY HOSTED.

SO IN FY-19, THEY WANTED ME TO MAKE SURE THAT YOU WERE -- THAT I RAISED AWARENESS ABOUT THE BEYOND EXPLOITATION GROWTH CONFERENCE THAT THEY HELD. THIS WAS HOSTED BY MY LIFE, MY CHOICE.

THE CHILD ADVOCACY CENTERS PROGRAM.

THEY ALSO HAVE HELD A CAREER PREPARED FOR YOUTH AND ADULTS. SO I FORGOT TO MENTION THE FAMILY JUSTICE CENTER BUILDING, THEY HAVE DRESS FOR SUCCESS BOSTON.

I CAN GO ON AND ON.

WE WOULD LOVE TO HOST YOU AND COUNCILLOR FLYNN FOR A VISIT.

>> LASTLY, I WOULD LOVE -- THIS CAN BE VIA E-MAIL -- ANY DATA

THAT YOU HAVE WITH RESPECT TO INCIDENTS OF NOT ONLY THE NUMBER OF CLIENTS THAT THE CENTER IS SEEING, BUT ANY DATA THAT YOU HAVE WITH RESPECT TO INCIDENTS, SEXUAL ASSAULT, CRIMES AGAINST CHILDREN WOULD BE EXTREMELY HELPFUL.

>> IF YOU WANT TO INCLUDE ME SINCE IT'S IN MY DISTRICT, I'LL TAKE YOU TO LUNCH.
COUNCILLOR ESSAIBI-GEORGE.

>> THANK YOU.

THANK YOU AGAIN TOO FOR BEING SO THOUGHTFUL WITH YOUR RESPONSES TO ALL THE QUESTIONS OF MY COLLEAGUES.

I'VE TAKEN SOME WILD NOTES HERE. MY ONE QUESTION AND THIS FOLLOWS UP ON COUNSELOR FLAHERTY'S QUESTION, FOR OUR GUESTS AT THE SHELTER, LAST YEAR'S BUDGET HEARINGS DURING THE PRESENTATION BY CHIEF DILLON, SHE NOTED THE NUMBER IS 60% OF THOSE THAT PRESENT THEMSELVES AT OUR SHELTERS ARE NOT FROM THE CITY OF BOSTON.

DO WE HAVE AN UPDATED NUMBER?

>> I'M NOT SURE IF I HAVE AN UPDATED NUMBER.

I KNOW LOOKING AT THE NOTES IT WAS HIGH.

>> I WORRY BECAUSE MY FIRST BUDGET, FY-17 AND THIS TIME IN 2016, WE WERE AT 40%.

MY SECOND BUDGET, WE WERE 50%, LAST YEAR WE WERE 60.

SO I WORRY ABOUT THAT TREND. AND I WONDER IF IT'S SOMETHING REAL THAT WE'RE SEEING.

WE KNOW HOMELESSNESS IS A REAL PROBLEM IN THE CITY OF BOSTON. SOMETHING THAT WE NEED TO RESPOND TO IT'S NOT ABOUT NOT TAKING CARE OF PEOPLE FROM OTHER CITIES AND TOWNS.

I THINK WE NEED TO HAVE A BETTER UNDERSTANDING -- ACTUALLY, COUNSELOR ZAKIM THAT ADVOCATED NOR THE INVOICES OF THE OTHER CITIES AND TOWNS.

I WISH WE COULD DO IT.

I THINK THERE'S A WAY THAT WE

MIGHT BE ABLE TO DO THAT,
ESPECIALLY THROUGH THE STATE.
LOOKS LIKE WE MAY HAVE FOUND
SOME OF THAT DATA.

>> I'M LOOKING HERE.

ACTUALLY, THE NEW NUMBER, IT'S
NOT ON HERE BUT I KNOW 60% IS
THE NUMBER THAT THE STAFF
MENTIONED.

WE CAN CONFIRM THAT FOR YOU, SO
YOU HAVE UP TO DATE.

>> GREAT.

IF YOU WOULD SHARE THE UPDATED
COMMUNITY OF OURS.

I HAVE A BREAKDOWN.

PROBABLY ALMOST TWO YEARS OLD
NOW OF WHERE INDIVIDUALS ARE
COMING FROM AND WHAT THEIR
COMMUNITY OF ORIGIN IS
CONSIDERED.

SOME OF THE STATES, SOME OF THE
CITIES.

>> SURPRISING HOW MANY COME FROM
NEW HAMPSHIRE.

>> I KNOW THAT THAT IS ANOTHER
OUT OF STATE -- THAT'S A STATE
THAT FREQUENTLY POPS UP.
STATES WILL SEND THEM.

JERRY THOMAS HAS SHARED STORIES
WHERE VERY COMPLEX MEDICAL
NEEDS, WHERE THEY'RE SENT ON A
BUS TO A SHELTER.

THAT'S NOT UNCOMMON.

WE CAN GET YOU THE COUNTY OR
COMMUNITY OF ORIGIN, STATE OF
ORIGIN.

>> THANKS FOR THAT.

I KNOW THAT IN YOUR
PRESENTATION, YOU DISCUSS SOME
OF THE IMPROVEMENTS TO THE
SHELTERS.

IN PARTICULAR, WE'RE INCREASING
THE BED CAPACITY FROM 200 TO
222.

HAD THAT BEEN DONE OR IS THAT IN
THE PLANNING FOR FY-20?

>> THAT'S BEEN DONE WITH
RENOVATIONS ON THE SECOND FLOOR.
THAT'S BEEN EXPANDED.

>> I'VE SEEN THOSE RENOVATIONS.
IT IS AN IMPRESSIVE JOB.

THE WORK THAT WAS DONE THERE.

I KNOW THAT -- WE'RE ALSO
FINDING -- WE HAVE THE BED

CAPACITY ISSUE.

WHEN WE HIT THAT 222 IN THE COLD MONTHS THAT MANY OF OUR GUESTS ARE EITHER PLACED IN A CHAIR OR ON A MAT.

WE TALK ABOUT THE OVERAGE NUMBERS.

>> NO WOMEN IS TURNED AWAY. SO IF SOMEONE COMES IN AND WE HAVE A CHAIR, WE WILL MAKE ROOM FOR THEM.

SO -- BUT YOU'RE RIGHT.

IT'S COMPLICATED WHEN WE RUN OUT OF BEDS.

BECAUSE WE CONFIGURE THE SECOND FLOOR TO MAKE MORE BEDS.

OVERALL, IT'S BENEFICIAL TO THE LADIES SO THEY'RE NOT ON MATS SO MUCH.

WE'RE STILL TRYING TO FIGURE OUT WHAT TO DO WITH THE WINTER OVERFLOW.

NOW WE'RE GOING TO A SPECIAL CLIMATE CHANGE, THE SUMMER MONTHS, HOW TO MAKE SURE THAT THE LADIES ARE COOL AND NOT GETTING ILL FROM THE HEAT OR COLD.

SO WE'RE STILL STRUGGLING WITH THIS.

WE'RE NOT QUITE SURE WHAT THE SOLUTION IS.

WHERE THE LADIES GO DURING THE DAY, IT'S THE PRIMARY STAGING GROUND.

IT'S LIKE THEIR LIVING ROOM.

WE HAVE THE TELEVISIONS THERE, WE HAVE TABLES.

WE'VE GOT SOME CASE MANAGERS. SO WE'RE LIMITED WITH SPACE, BUT WE'RE CONTINUING TO LOOK FOR ADDITIONAL OPTIONS FOR THEM.

>> THIS IS SOMETHING THAT WE WORK ON IN PARTNERSHIP WITH THE ENTIRE SHELTER.

AS GRACE POINTED OUT, IT'S A CHALLENGE.

>> AND LAST YEAR, SOME CONVERSATION AND AN ADVISORY COMMITTEE.

A WOMEN'S ADVISORY COMMITTEE. I KNOW THAT THEY GIVE FEEDBACK ON IMPROVEMENT, IDEAS FOR PROGRAMMING AND RESOURCES AND

SERVICES THAT THEY NEED.

SO THAT HAS BEEN A BIG
IMPROVEMENT.

>> AND IT HAPPENS AT SOUTHAMPTON
STREET AND WORKED ON FOR THE
WOMEN?

>> YES.

SOUTHAMPTON.

>> THEY HAVE ONE AT BOTH
SHELTERS.

THERE'S AN ART PROGRAM THAT IS
ROTATED THROUGH THE SHELTER.
THE WOMEN WILL BE SMART AND TRY
TO PICK SOME NEW ART TO GO UP
AND ADJUST MORE.

>> GREAT.

>> WHAT IS THE AVERAGE NIGHT'S
STAY AT SOUTHAMPTON?

>> OKAY.

AVERAGE NIGHT'S STAY.

WE HAVE HERE -- WE HAVE THE
DAILY CENSUS.

>> WHAT IS THE DAILY CENSUS?

>> THE DAILY CENSUS FOR -- LET
ME SEE.

THERE WAS A SLIGHT INCREASE IN
2018.

1.5%.

THE AVERAGE DAILY CENSUS IS 229
IN 2018.

FOR 112 SOUTHAMPTON STREET, IT
WAS 481.

THE CENSUS DATA FOR INDIVIDUAL
GUESTS THAT STAY IN THE SHELTER
IS NOT HERE IN THE DATA.

CAN PROVIDE THAT TO YOU
AFTERWARDS.

>> THE SHELTERS?

>> OKAY.

>> I'D ALSO LIKE TO HAVE -- IF
YOU CAN ADD TO IT BECAUSE I
DON'T KNOW IF YOU HAVE IT HANDY
THERE, WHAT THE AVERAGE COST PER
NIGHT IS TO SHELTER AN
INDIVIDUAL.

>> WE CAN GET THAT TO YOU.

>> THANK YOU.

MY TIME IS UP.

I APPRECIATE THAT.

>> COUNCILLOR FLYNN.

>> THANK YOU, COUNCILLOR CIOMMO.

I JUST HAD ONE QUESTION,
DIRECTOR.

CAN YOU TALK ABOUT YOUR

OUTREACH, PUBLIC HEALTH OUTREACH
TO RESIDENTS IN PUBLIC HOUSING
ON FOOD NUTRITIONAL PROGRAMS,
ANY TYPE OF PUBLIC HEALTH
ASSISTANCE, SERVICES THAT WE ARE
PROVIDING TO OUR BHA RESIDENTS?
I REPRESENT A LARGE NUMBER OF
RESIDENTS THAT LIVE IN PUBLIC
HOUSING.

I KNOW YOU DO GREAT WORK IN
PUBLIC HOUSING.

CAN YOU HIGHLIGHT SOME OF THE
PROGRAMS THAT YOU DO HAVE?

>> WE HAVE DONE SOME GREAT WORK
ON CHRONIC DISEASES.

THROUGH ISD EVERY YEAR -- AND
IT'S COMING UP THE MONTH OF
JUNE.

ISD AND BPHC DO JOINT ANNUAL
TRAINING DAY FOR OUR INSPECTORS.

WE TALKED A LITTLE BIT ABOUT
THAT RELATIONSHIP WITH ISD WHEN
IT CAME TO LEAD IN SCHOOLS.

AND BHA IS THERE, TOO.

WE WORK HAND AND HAND WITH THE
DIRECTOR ON A WHOLE HOST OF
DIFFERENT ACTIVITIES.

A COUPLE OF YEARS AGO, THEY
REALLY WERE -- WE PARTNERED WITH
THE DIRECTOR'S TEAM FOR HOUSING
ACROSS ALL SITES.

THE PREVIOUS ADMINISTRATION AND
NOW HE'S RUNNING IN THAT BIG
PACK OF DEMOCRATIC CANDIDATES,
SECRETARY CASTRO CAME TO
ANNOUNCE THAT THE BHA AND BHSC
HOUSING POLICY IS ONE THAT WOULD
BE INSTITUTED ACROSS HUD.

IT WAS EXCITING TO HAVE HIM HERE
AND DO THAT ANNOUNCEMENT IN
ROSMAN DALE.

SO WE WORKED WITH THEM ON THE
SMOKE-FREE HOUSING.

WE ALSO HAVE WORKED WITH HIM IN
DIFFERENT WAYS ON FOOD
INSECURITIES.

SO I KNOW THEY HOSTED US WHEN WE
WERE WRAPPING UP A FEDERAL GRANT
CALLED -- IT WAS THE PARTNERS IN
COMMUNITY HEALTH.

IT'S LET'S GET HEALTHY, BOSTON!

AND WE HAD THEIR HELP IN
ENSURING ACCESS TO WATER AT
THEIR DIFFERENT MEETINGS AT THE

BOSTON HOUSING AUTHORITY AND NOT
HAVING DIET SODAS.

THAT IS SOMETHING THAT BILL
GIVES ME A HARD TIME ABOUT.
THE RESIDENTS COME TO THE
MEETING WITH WATER INSTEAD OF
HIS DIET COKE.

A WHOLE HOST OF THINGS THAT WE
DO IN PARTNERSHIP WITH THEM.
WE'RE HAPPY TO PACKAGE IT FOR
YOU.

IF YOU HAVE SUGGESTIONS, WE'RE
HAPPY TO MEET WITH YOU AND TALK
THROUGH HOW WE CAN CONTINUE TO
STRENGTHEN THAT PARTNERSHIP
BETWEEN US AND BHA AND
INCREASING ACCESS TO HEALTHY
FOOD.

>> THANK YOU.

THAT'S EXCELLENT.

I THINK ALMOST EVERY DEVELOPMENT
DOES HAVE A BHA UNITY DAY FOR
THE SUMMERTIME.

SO MIGHT BE AN OPPORTUNITY TO
PARTNER UP WITH BHA ON BEING
PRESENT AND PROVIDING SOME
SERVICES.

I DO KNOW YOU DO PROVIDE THAT
TYPE OF OUTREACH.

I KNOW IT IS HELPFUL TO THE
RESIDENTS.

SO JUST WANT TO SAY THANK YOU,
DIRECTOR.

>> THANK YOU.

>> THANK YOU.

COUNCILLOR ESSAIBI-GEORGE.

>> ONE MORE QUESTION.

THIS IS MY LAST ONE FOR TODAY.
BECAUSE WE COULD GO ON FOREVER.
THE ENGAGEMENT CENTER LOCATED
BEHIND SOUTHAMPTON STREET, CAN
YOU GIVE US A LITTLE UPDATE ON
THE STATUS OF THE ENGAGEMENT
CENTER SO THAT THE SUCCESS OR
SHOULD I SAVE THAT --

>> YOU CAN SAVE IT.

>> I'LL SAVE IT.

>> THEY'LL BE HERE SHORTLY.

>> I'LL SAVE IT.

OTHERWISE, I'M DONE.

THANK YOU, CHAIR.

>> THANK YOU.

>> THANK YOU.

DIRECTOR, THANK YOU VERY MUCH

FOR TODAY'S TESTIMONY.
JUST IN ADVANCE OF NEXT WEEK'S
EMS, JUST TO BE PREPARED TO SEND
US IN ADVANCE THE RESPONSE TIMES
AND -- THANKS.

JIM HAS IT.

AND FTEs.

MAYBE A THREE OR FOUR-YEAR
HISTORICAL DOCUMENTATION.

THANK YOU.

AGAIN, THANK YOU FOR ALL THE
GREAT WORK THAT YOU DO
RESPONDING TO CRISIS AND ALSO
PREVENTATIVE PROGRAMS THAT I
THINK ARE MODEL FOR OUR COUNTRY.

I THANK YOU FOR THAT AND YOUR
ENTIRE TIME HERE AND IN THE
FIELD.

I WANT TO THANK YOU AGAIN.

BEFORE I DO CLOSE, ANYBODY ELSE
THAT WISHES TO TESTIFY BEFORE I
CLOSE OUT TODAY'S HEARING?

SEEING AND HEARING NONE, I WANT
TO THANK YOU AGAIN, THIS HEARING
IS ADJOURNED.