

CITY OF GLOUCESTER
Board of Health
Minutes of the Meeting
March 20, 2014
CATA Training Room
3 Pond Road
Gloucester, MA 01930

CITY CLERK
GLOUCESTER, MA
14 MAY -5 PM 2:34

Board members present: Chairperson: Dr. Richard Sagall; Frederick Cowan, Joe Rosa, and Claudia Schweitzer. Present from the Health Department: Public Health Director: Noreen Burke; Public Health Nurse: Lianne Cook; and Manager of Environmental Health: Max Schenk. Absent: Vice-Chairperson: Robert Harris

NEW BUSINESS

ASSESSING READINESS FOR STRATEGIC PLANNING --

- Past planning Experiences
- Perceived Barriers
- Direct and Indirect Costs of Strategic Planning
- Expected Benefits of Strategic Planning

Ms. Burke asked board members to share some of their past Board of Health planning experiences. She stated that she thinks it is important for the board to think about planning. She stated that they have started to keep a file of the City's past planning projects. She stated that she would like to have somewhat of a consensus by the end of the meeting for an outline for what type of planning they would like moving forward.

Ms. Cook gave board members a brief history of some of the planning projects she had found in the past such as the Gloucester Community Health Assessment from 1998 and the Community Plan done in 2001,

Mr. Cowan stated that in 1996 the City responded to a federal suit in a response to clean up the Annisquam River and the Ipswich Bay and the City developed the Waste Water Management Plan at that time. He stated that he was not part of the creation of the plan but he was the deciding vote in the approval of the plan. He stated that they developed an efficient process for testing of pollution with the creation of the plan.

Ms. Schweitzer stated that there was an event in 2000 at City Hall and she was approached at that time to be on the board and at that time the board focused on environmental issues. She stated that dredging was a big issue at that time. She stated that it was also the time they started to discuss the Community Health Center and Mr. Vondras became the new Public Health Director and their priorities shifted towards other health issues. She stated that the board's relationship with the hospital has always been an issue they have tried to improve on.

Mr. Rosa stated that he has been working on a strategic plan for the Gloucester Education Foundation and one thing he has noticed is that people have to be aware of tactics as opposed to planning.

Ms. Cook asked about the Gloucester Steering Committee. *Mr. Cowan* gave a description of the goals of the Gloucester Steering Committee.

Ms. Cook asked what the topics the board discussed at the working meetings. *Mr. Cowan* responded that the meetings were a more informal setting for the Board of Health to discuss concerns, and also an opportunity for people to come and educate the board.

Chairperson Sagall stated that there was not a lot of long-term planning discussed at the working meetings.

Mr. Rosa stated that he agrees with Chairperson Sagall and it is worth having a discussion about what they believe the Board of Health encompasses in the City and what do they think it should encompass.

Ms. Cook gave board members a history of what she found on long term planning on the Health Department in Gloucester. She stated that the Health Department has had the same mission statement since 2000 and there is new mission statement in 2013 on the Annual Report. She asked board members to think about one new strategic direction for the Board of Health and think about why they would chose that direction.

Ms. Burke stated that she would like some type of road map for the Health Department.

Ms. Schweitzer stated that they should start be looking at what the Health Department's regulatory functions are. *Chairperson Sagall* agreed with *Ms. Schweitzer*. He stated that they should look at things they are doing, and things they shouldn't be doing, and areas that they want to grow in.

DISCUSSION: OPTIMAL STRATEGIC PLANNING MODEL--

Ms. Burke stated that they are trying to get public health and hospitals to come together as medical coordinating coalitions and to do preparedness together. The board discussed how the mandates of the Health Department have evolved and discussed the 10 essential public health functions. The board agreed that they first need to look at what is mandated and the current State regulations.

The following topics emerged in the ensuing discussion of Issues Based Planning Discussion for the Gloucester Health Department:

What is mandated for local public health department to accomplish vis a vis state laws and regulations?

- The basics include topics like the State Sanitary Code, Communicable Disease Investigation etc

Children's Dental Center

- Is it necessary?
- Is it appropriate for Gloucester to run one?
- Where should this be five years from now?
- What is the best evidence based practices for the operation and success of a Children's Dental Center?
- Tactics and Strategies are needed for the Children's Dental Center

North Shore Community Health Inc.

- What should our relationship with them look like?
- Inconsistencies of service experienced there

Emerging Wellness/Lifestyle Changes

Health promotion, health education, lifestyle health management to manage chronic disease, lifestyle management is a huge emerging Issues

- Workplace wellness with active living
- Connection with Senior Center

Thoughtful Approach needed to the Homelessness Issue in Gloucester- what role for local public health?

Infrastructure Needs Internally for the Health Department

Permitting and Complaints Database demonstrate to Mayor and Council that technology improvements increases ability to increase revenues to the health department

Laserfiche

Increasingly the management of PH Functions at State Level is conducted via Technology_ i.e MAVEN

Importance of Professional Development of Staff

- Learning skills in how to be a manager is critical for Senior Management staff

What does Regionalization mean for Gloucester Public Health?

- How do we leverage what we are already doing regionally such as with PHEP funding ?
- How do we align with Comr. Bartlett's priorities?

Educational Forums Sponsored by the Gloucester Health Department

- Example Healthy Aging Talks at Rose Baker Senior Center

Planning to Plan Process

- Planning Committee Composition
- Meeting Logistics

The board discussed the possibility of having a standing working meeting every month. The board agreed to have a working board meeting in April.

CONCERNS OF BOARD MEMBERS

LUNCHESES AT THE SENIOR CENTER- *Mr. Cowan* stated that the Open Door Food Pantry agreed to provide a meal once a week at the senior center but the kitchen doesn't allow them to do that so they are going to provide a salad bar, soup, fresh baked bread, on as many days as possible in addition to the lunches provided by Senior Care. He stated that they also agreed to move the donation boxes from all the tables and move them to a station by the door. He stated that they now have 90-110 people for lunches every Thursday.

NASAL NARCAN- *Chairperson Sagall* stated that there are a small percentage of people who cannot afford nasal Narcan. The board discussed funding for nasal Narcan.

BOARD OF HEALTH MEETINGS- *Ms. Burke* stated that the next Board of Health Meeting will be on Thursday April 3rd, 2014 and the working meeting will be on April 17, 2014. *Mr. Rosa* stated that he cannot make the next board meeting.

MOTION by Ms. Schweitzer to adjourn.
Seconded by Mr. Rosa. **CARRIED.**
MEETING ADJOURNED – 7:55 p.m.

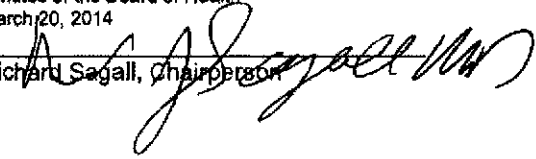
Respectfully submitted,


Bobbi Orlando

Accepted by:

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Richard Sagall, Chairperson

A handwritten signature in black ink, appearing to read "Richard Sagall", is written over the printed name. The signature is fluid and cursive, with a large initial "R" and "S".