

GLOUCESTER CITY COUNCIL MEETING

Tuesday, September 13, 2011 – 7:00 p.m.

Kyrouz Auditorium – City Hall

-MINUTES-

Present: Chair, Councilor Jacqueline Hardy; Vice Chair, Councilor Sefatia Theken; Councilor Bruce Tobey; Councilor Paul McGeary; Councilor Joseph Ciolino; Councilor Anne Mulcahey; Councilor Steven Curcuro; Councilor Greg Verga; Councilor Robert Whynott

Absent: None.

Also Present: Mayor Carolyn Kirk; Representative Ann-Margaret Ferrante; Senator Bruce Tarr; Kenneth Hanover; Dr. Howard Grant; Linda T. Lowe; Jim Duggan; Kenny Costa; Jeff Towne; Fire Chief Dench; Val Gilman; Melissa Teixeira; Cathy Clancy; Michelle Sweet

The meeting was called to order at 7:00 p.m.

Flag Salute & Moment of Silence.

Oral Communications: None.

Presentations:

1 of 2: Dr. Howard R. Grant, President and CEO of Lahey Clinic by invitation of City Council

Council President Hardy introduced **Mr. Kenneth Hanover**, President of Northeast Health System who expressed the pleasure of Northeast Health Systems to be entering, after an extensive review process, into an affiliation with Lahey Clinic which they believe the system of care can only benefit northeastern Massachusetts and will be called “The Lahey Health System”. Mr. Hanover also expressed his deep understanding of how much the Addison Gilbert Hospital means to the Cape Ann community. He pointed to the adding of primary care physicians at AGH; adding to the viability of the institution. An extensive community needs assessment will be made, a comprehensive review, by John Snow, Inc., taking up to 12 months using a variety of methods to hear from key community stakeholders; review regional and state data; in order to have a complete picture of the needs of the community by region and demographic information as well. This will build off the most recently completed assessment conducted in 2007. They will also hold two community forums as an opportunity to hear directly from concerned citizens of Cape Ann to discuss the affiliation. This is also an opportunity for them to hear questions and concerns of the public and to provide answers about the future of the AGH. He spoke of the three-year agreement between NEHS and Lahey Clinic to maintain the eight essential services for a minimum of three (3) years. During that time period they’ll be reviewing the programs and services at all the hospitals and facilities throughout the NEHS and Lahey Clinic health systems, evaluating community needs and working to develop a network of care that aligns services with the needs of the community. As to what will happen to AGH after three years, there is a strong likelihood they will continue to provide such services; however, they can’t predict how patterns of care, service delivery and utilization trends might change, for those reasons alone, unambiguous guarantees are difficult, if not impossible to make. There are no plans to diminish or close services at AGH. In fact, their goal will be to develop additional services, consistent with the healthcare needs of the community and their ability to address such needs in a safe and cost-effective manner. The future belongs to the healthcare providers who can change and respond to the challenges and changes facing their industry and to stay current in the fast changing technology for providing optimal healthcare. They are looking forward to the future of their affiliation with Lahey. He then introduced Dr. Howard R. Grant, President and CEO of Lahey Clinic and the future President of The Lahey Health System, to the Council. **Dr. Howard Grant** thanked the Council for inviting him to discuss the upcoming three year commitment that Lahey Clinic will partner with Northeast Health System. He joined Lahey three years ago after serving as Executive VP and Chief Medical Officer at the Geisinger Health Center, in Danville, PA, a small rural community. He explained he felt that the affiliation between Northeast Health Systems and Lahey would be the best step for both institutions; and most importantly he believed this would be the best step for the communities and patients that they serve. He expressed his firm belief that Lahey Clinic and Northeast Health Systems affiliation is the ideal partnership for people who live on Cape Ann and the North Shore. Combined these two institutions have been serving the communities of the North Shore for over a century and have a history of successful collaboration, for instance between Lahey and Beverly Hospital’s cardio-vascular collaboration started in 2004 when Beverly Hospital opened their cardiac catheterization

lab. He pointed to the shared values of Lahey and NEHS: both organizations are committed to improving the health of individuals and families on Cape Ann and all the North Shore communities. They believe in treating those that work and in their care with dignity and respect at all times and are committed to insuring superior quality, safety and patient satisfaction as their highest priorities. Lahey Clinic was founded in 1923 by Dr. Frank Lahey who believed patients would receive the best possible care in a group practice with different specialists working together under one roof. While today that approach is still the hallmark of Lahey, they have “more than one roof”. Aside from the main medical facility in Burlington, there is Lahey Clinic North Shore in Peabody, Lahey in Lexington; 12 community group practices, several of which are located on the North Shore. They are a Level II Trauma Center and a Tufts University teaching affiliate. Lahey is also an active research center engaged in 280 multi-center research trials in such areas as oncology, cardiology, urology infectious disease and coli-rectal surgery. He reported that Lahey this year was ranked in the top four hospitals in the Boston area by U.S. News and World Report. The magazine also honored Lahey as the best hospital in the US for urology care, gastroenterology, diabetes and endocrinology.

Dr. Grant stated that they [Lahey] are prepared and fully committed to creating a system of high quality care that meets the needs of every community that they serve. This does not and cannot mean that every community will have access to every single service right there in their town. It does mean that they will have a better way to combine and utilize services and provide what people need safely and conveniently within the structure they have. They do not view this affiliation as just a venture between two organizations. Rather, it is a growing partnership between a health system and the communities it serves. They are counting on the Gloucester citizens on helping the AGH to be successful by taking advantage of medical services right here “at home”. All of this is still to be determined as far as specifics go. But, **Dr. Grant** asked that they trust him that it will be an extremely thoughtful and transparent process. They welcome the kind of feedback and input of the type that is being offered there today; community involvement is “absolutely critical” to their success. He spoke of how decisions would be made within the new affiliation. A parent organization will be created by Northeast and Lahey Foundation to govern both organizations; this new organization will be called Lahey Health System, and he will serve as President and CEO. A new board will also be created and consist of equal number of representatives selected from the Northeast Board and the Lahey Foundation Board. Additional Board members unaffiliated with either organization will be selected from the community and will have the responsibility of representing the entire Lahey Health System. He expressed his “firm” belief that affiliations between like-minded institutions are the only way they can continue to deliver exemplary care into the future.

Councilor Tobey welcomed Dr. Grant to the City. The Councilor expressed that this is a community with an unsurpassed zeal for its hospital, its services, for its heritage and with a deep-seated belief that the hospital needs to be here in the future. He questioned the availability of full access to health care services. He asked about access to specialty care consults, neurology or orthopedics for example and the practice of “that can’t get done here” and that more often than not it involves a trip to Beverly. That, the Councilor felt, was generally viewed as not optimal, nor satisfactory. **Dr. Grant** responded concurred that it is less than optimal, although noting he is just beginning to get the ‘lay of the land’ as to how Mr. Hanover and the medical staff at Beverly have historically related to the AGH. He toured the hospital last week; met many of the staff; and worked with Cynthia Donaldson VP of AGH and made a point to ask the staff what services do they not currently have that would be advantageous for purposes of being able to keep more patients in the community and for purposes of being more convenient for the patients and their families. They would be prepared to do and have already started that conversation is to try to understand what the demand is for different types of services; and if there are not physicians not on staff currently at Beverly Hospital who are interested or are who are able to provide those services in this community, for them to explore what it would take in order to provide services from Lahey in this community or in the alternative to engage in the recruitment of specialists. Referring to an earlier comment by Mr. Hanover, **Dr. Grant** noted the rate limiting step in any changes in services will be dependent on the demand, the desire by the people in the community to use those resources. He contended it was an unsustainable model to send a specialist to the community if he or she is unable to see a number of patients as opposed to one or two patients in isolation. Their goal is to find out what the community is interested in having provided and look for strategies to expand the services in the community as expeditiously. If the community is interested in supporting those services, then they would welcome the opportunity to expand the services that would be available here both for in-patient consultation and for ambulatory service as well. **Councilor Tobey** thought the health needs survey they contemplate doing wouldn’t be the first in recent times; believing it was the third since the 1990’s. He posed the challenge to Dr. Grant would be to much more aggressively engage the opportunities that are presented in that assessment than has been the case in the past. He admitted they have a tough job ahead of them. Since he ‘sat’ in City Hall, there have been six CEO’s of the hospital, having only gone through five mayors in that same time period. **Dr. Grant** commented that one of the unique advantages of this partnership is

that historically most community hospitals have been staffed primarily by private practice physicians. Lahey has been a model where a large number of physicians have been employed by the Clinic. Their ability, at least in theory, to be more “nimble” and responsive to the needs of the community should be an advantage for them in terms of identifying the needs; offering the opportunity for locally based private physicians to provide the service; and in those cases where they aren’t interested in doing so, in those cases, find a way strategically for Lahey to be able as a partner with AGH to provide services that have historically they haven’t been able to provide here. **Councilor Tobey** brought forward a concern from personal experience and also came from the March 22nd City Council resolution which was on the record of having endorsed with Mayor Kirk for the critical need that for any affiliation to happen it had to capture the eight minimum essential services required for the maintenance of an Emergency Room; which is a fundamental concern paramount to the community. One of those criteria is surgical services, including adequate operating room facilities which are immediately available for life-threatening situations. He related an incident that happened with his family in the AGH Emergency Room when bringing a family member who had a possible acute problem. Surgical service was not available because the operating room was not immediately available for a life-threatening situation. As a Councilor, as a father and grandfather, he wanted to know going forward is that, among others, consideration of immediate access for an adequate operating room capacity going to be met, as it had not on his visit in July. The City needs the ER here. Will Lahey meet the burden? **Dr. Grant** stated they will explore every type of service that can be safely provided in a fiscally responsible manner in a community setting. He understood that is what those gathered did not want to hear at this time. The ability to attract the type of physicians and support services to make that happen is not as they might think. In each of the four organizations where he previously worked, he has been a champion of doing everything possible to keep patients close to their home in as safe an environment as possible. He did that in the inner city of North Philadelphia for ten years; in semi-rural western Pennsylvania, in rural north-central Pennsylvania where physicians who worked for him actively provided the services just described at 15 rural institutions in order to keep patients close to home as safely as possible. However it was a tremendous challenge for them to maintain the quality and scope of those services. They will never commit in the new organization to providing a service that they can’t deliver on safely and consistently. He expressed on a personal level that he would look for every opportunity to expand the scope of services that can be provided in that fashion to this community; but he would not commit to deliver on a service that he didn’t know today that he may not be able to deliver on. He pointed out that he was new to the community and area and that he hears them “loud and clear”; from the discussions with the Board of NEHS during their discussions. They will explore both in the needs assessment they do and in communications discussions with local physicians and with residents everywhere they can to make services available in a safe and prompt fashion for everybody who lives here. **Councilor Tobey** expressed his respect for Dr. Grant’s candor, but the success of this affiliation, he believed, will begin to be measured by the capacity of the affiliation to continue the emergency room in the City of Gloucester for this community and the several that surround it. **Ms. Donaldson** provided further specifics about their preparation for emergency surgery by explaining they operate as a system so if a patient comes into ER, the ER physician makes the call with the on-call surgeon as to which site is the appropriate site for the patient to have surgery. They have capacity at AGH and are prepared for emergency surgery; and have done so twice in the past year and twice the year before. If the physicians determine that the best site for the surgery would be to transfer the patient to Beverly or to Boston or to Lahey Clinic that is the decision that drives the patient care site. They do have capacity: they have on-call R.N. 24/7 for which they pay \$90,000 to staff that position; their OR is ready to go. During the recent hurricane, Anesthesia came down on an emergency basis promptly and intubated a patient in the AGH ER. They are also readily available. It isn’t that they don’t have the capacity to do emergency surgery. It is a medical and clinical decision between the physicians as to where that surgery occurs. **Councilor Tobey** pointed out this wasn’t a hearsay account – it was his personal experience. There was no operating room capacity that day. It was made clear to him and found it concerning. The last thing they need is someone from the State Dept. of Public Health, overhear that same kind of conversation and think that this hospital is not meeting the eight criteria and shut down the AGH’s ER. **Ms. Donaldson**, noting her deep rooted support of the hospital, she reiterated they do have [surgical] capacity; if it was miscommunicated at some point, she apologized. She urged anyone to please call her if anything like that ever happens, even at home. **Councilor Theken** disclosed her employment with the NEHS locally at the AGH. Hired as an advocate, she noted they would hear from her as it is very difficult being a City Councilor and an advocate. She said she is tired of hearing and seeing fear in the City’s seniors that AGH is having services removed or moved to other locations which will ultimately lead AGH closing and wondered what she should say to the community’s seniors when they ask will the AGH close. **Dr. Grant** stated there are no plans to reduce any AGH services or facilities. He and Mr. Hanover and Ms. Donaldson are the three individuals who are currently and future will bear the responsibility for the services provided. There have been no discussions of any kind by anybody about closure of AGH or the reduction of any services. The only discussions he has had with

anyone about AGH is about coming up with strategies to increase services at AGH. He stated they could speak to employees who are in attendance there whom he met for the first time the previous week at the AGH, to understand where there would be immediate opportunities for them to expand services. He reiterated there are no plans to reduce services. They would want to have a situation where they could expand services to this community and to support the types of challenges about being able to provide expanded emergency services. **Councilor Whynott** expressed concerns from what he has seen. He felt a lot more people are sent to Beverly than need to be; and sometimes they get there only to find they receive services that could have been done at the AGH. He understood the business model that they couldn't have all the services that are possible at the AGH. But he didn't want to see it turn into a "first-aid stop or a transfer station" either. He believed Councilor Tobey's situation he had was because a doctor didn't want to come down to Gloucester. He felt to ask 45,000 people to drive to Beverly as opposed to have a doctor come here to treat some people, he believed there had to be a happy median somewhere; and it can't all be on the side of the medical profession or the insurance companies. Some of it has to be at the behest of the people. **Councilor Ciolino** asked what State and Federal entities approve this affiliation. **Mr. Hanover** responded the Public Health Council of Massachusetts has to approve it; and the Federal Trade Commission will have to approve it, and they will consult with the Attorney General prior to them giving their approval. He added that the Attorney General does not have to issue a formal approval on the affiliation. **Councilor Ciolino** felt it was coming to the point where there has been so much change going on at the AGH, that he believed they need an agreement that the hospital and the eight essential services will be there in perpetuity because as they are here today, the hospital might get "flipped" again. They don't have any guarantees whatsoever. At this point they need a guarantee in writing, he reiterated, in perpetuity, that the hospital will stay open for the eight basic services. **Mr. Hanover** appreciated the passion and sincerity with which the Councilor's comments were made, but "it's not going to happen". They cannot give them an ambiguous, unconditional written guarantee. They'd like to but they have no ability or power to control or determine how healthcare delivery is going to change in the future. If it does, their inability to make those changes would not be in the best interest of this community. **Councilor Ciolino** commented where there is a will there is a way, and would make a motion at a point in time that they contact the approving entities, including the Attorney General and the legislative bodies of Manchester, Essex, and Rockport and band together and say unless they get this in perpetuity, in writing, they will not "bless" this "merger". It is not in their best interest. **Mr. Hanover** responded he could assure the Councilor that it would not be in their best interest if they didn't "bless this merger" because that would create more vulnerability to the community for healthcare services. He directed his comments to Councilor Tobey that his family member who was treated at the AGH in July was doing well due to the exceptional care she received at the AGH. That care was delivered safely and, in fact, outcomes were excellent. **Councilor Ciolino** felt they had drawn a line, feeling they know how to combat them. How can they guarantee the AGH will have those eight services? If they can't live up to it, or don't want to do it, they has a Council, he felt, needed to act as he described earlier. **Dr. Grant** stated there is currently no commitment he is aware of between NEHS, or any hospital that he is aware of anywhere in the country, where a commitment has been made by any organization, to keep any service or any facility open in perpetuity. He works for a non-profit organization and his fiduciary responsibility is to make decisions in the best interest of that organization in the communities that they serve. There isn't anybody he's aware of in the hospital industry that would make a commitment of that type. In the absence of any commitment by any period of time by NEHS, which he wouldn't have expected them to make historically, the Lahey Board, as a gesture to AGH, to the Gloucester community, to the NEH Board and the medical staff, made a commitment that for the foreseeable future for a three year period there was a full-fledged commitment to preserve those services irrespective of what else happened in the industry or to their institutions. They are facing a potential situation, like the community is facing, with deficit reductions in both the State and national level. Their institutions could be facing \$40 to \$60 million of unanticipated reductions in revenue within two or three months from now. If they make a commitment in their final contractual relationship between the two institutions to keep services in this community for a three year period in the face of extraordinary uncertainty financially, that every healthcare provider organization is facing today, he felt they were making an unusually large commitment to the community while they sort out what the opportunity is. That would give them the amount of time that they need to try to understand what the demands are; how willing the physicians in this community are to support additional services and how able to Lahey/NEHS are to recruit additional physicians to provide the specialty services they're looking for. He looks at this as a much stronger position for the AGH today than it might have been with any of the other partners they might have selected or had existed prior to NEHS choosing a partner. They've made a commitment. In the face of what is going on in healthcare today, a three year commitment is a substantial commitment by any other organization with all the uncertainty facing healthcare providers today. So he felt they've made that commitment. **Councilor Ciolino** noted one unique thing about Gloucester, they are an island. There are only two bridges; one is always breaking, the other had a recent fire. They are dependent on that hospital. They're

not over the other side of the bridge where if something happens they can easily access Beverly. These are the things they worry about. If those bridges go out, how do they get people across for their care medically; and he reiterated they need to have a hospital that is staffed. He expressed his feeling that it was time for a guarantee and asked them how they can move forward towards that guarantee in writing that the AGH will stay open and that the services will be there. Dr. Grant in listening to Mr. Handover and in speaking with Ms. Donaldson about their preparations and follow through during the recent storm, that had an emergency occurred, they were prepared to handle it to care for those patients. He reiterated he was new to the community, and they didn't know him well. If they have a relationship with an institution, the primary and sacred responsibility they have is to provide safe, high quality care for the patients that come to them for care. They will do everything they can to make sure that happens in this institution. But he couldn't promise to them that which he can't promise feeling it would be irresponsible to promise under the circumstances. **Councilor Ciolino** asked that they work on it, come back to the Council; and if they feel they can't do it, they'll need to draw that line in the sand. **Councilor Mulcahey** asked when they go to negotiate and start talking about numbers and now many people use the doctors that need their specialists here, she felt everyone in attendance that evening has been sent out of Gloucester for medical services. She had personal experience with that also. People in Gloucester are not using the doctors that come to the AGH because they're not told that they are available. That information is not being conveyed because if it were, no doubt more people would use the AGH services, she felt, and that those numbers are not on their paperwork which skews the actual picture of the AGH's use as an institution. **Ms. Donaldson** responded they do have a schedule of visiting specialists and will make a point of getting that back out to physicians for their offices so that they are reminded of the specialists who are here; and as Councilor Tobey had brought up, she was very proud to say they have four orthopedic now in the specialty clinic at AGH: Dr. Mark Gilligan, Dr. Gunn, Dr. Hollis and Dr. Zimmer. **Councilor McGeary** noted at the moment there is one single cardiologist/intensivist on staff at AGH, which he felt was a lot of work to ask of one person. There have been occasions where there was backup they were told to go to North Shore Center in Salem because no one was available in Beverly. Is that true, and if it is, how do they plan to address that issue. **Ms. Donaldson** responded they are now fortunate to have another cardiologist at Beverly Hospital, Dr. Lockree, who does cover for Dr. Arsinian who puts 110% into supporting the AGH and the Cape Ann community. On inquiry by **Councilor McGeary**, **Ms. Donaldson** stated neither physician was a cardiac surgeon. **Councilor McGeary** asked as the CEO of Lahey Clinic, his board had set financial goals, he assumed, for the institution. **Dr. Grant** responded for Lahey specifically, there is a budget that is established each year and all the departments within the organization make their best efforts to manage their expenses and realize revenue in order to meet their budget. **Councilor McGeary** asked they have specific revenue growth goals and revenue retaining goals. **Dr. Grant** commented that they are in the non-profit arena. They budget for excess revenues over expenses so they will have the ability to withstand unforeseen delays in billing or collections; to be able to maintain their benefits and pensions for their employees; to be able to make investments in electronic health records; and other infrastructure for the organization to be able to support the refurbishing of the facilities. They would like to have a larger margin than they've historically had so they can make the investments in their employees and services for their patients. **Councilor McGeary** asked what they've been averaging over the past four to five years. **Dr. Grant** stated they're budgeted for a 1.5% operating margin, and currently are a little bit stronger than that during this fiscal year. MA hospitals have historically run between 0 and 2-3%; razor-thin margins for larger organizations. NEHS is a half billion dollar a year business; a 1% margin. Lahey is approximately a \$1 billion dollar business; 1% margin. It is not a lot of room for error. **Councilor McGeary** continued that bearing in mind when AGH was taken over they brought with them a portfolio at that time of around \$25 million which became assets of the NEHS. When the time comes, when they have to make a decision about keeping this institution open, and that there would be a financial component to that decision, how much of what AGH has contributed to the financial stability of the overall corporation will be weighed in that decision; and how much of that will be offset by the needs assessment. Supposing they determine that the need is here for the eight essential services, maintaining an emergency room because of the specifics of this community and the population that this community serves even if it eats into their goal of retained earnings. How would they weigh that; what would be the thought process. **Dr. Grant** noted as a not-for-profit institution the retained earnings all get reinvested into services for the communities that they serve. Unlike for-profit systems that have shareholders, and people who run those systems have a fiduciary responsibility to those shareholders in addition to the communities they serve, in a not-for-profit system, everything gets reinvested in the services they deliver/ One of the reasons they made a commitment at the beginning of the formation of the Lahey Health System, to have equal representation from the two systems, typically the larger of the two entities when two organizations come together, governance and leadership falls to the larger partner; their Board of Governors made a commitment they would have equal representation by the two boards and there would be outside unaffiliated board members that would participate in the governance as well as he mentioned earlier. They would have a better chance as they

started this new organization to make decisions that were in the best interest of the communities they serve and not focus exclusively on the site of the larger organization. It may appear to be a symbolic gesture, but the reality is it was a commitment by the governing body of Lahey that they were committed to the communities served by the NEHS. Structurally they've set the new organization up so that they'll be able to be as open minded and responsive to the needs of their community partners as much as they might typically reinvest at the larger facility in Burlington. That won't be the way decisions are made, he emphasized. They will be made based on what is best for the organization as a whole and the communities. **Mr. Hanover** added what the Councilor was asking was the question they face every year. They support many services that don't generate a profit or surplus. Every year the board looks at total revenue and makes tough decisions in order to ensure the long-term viability of the organization. They evaluate competing needs across all the communities they serve. To make a decision to close an institution, if that decision is ever made, is the most difficult one any organization considers. They don't do it lightly and they don't do it without lots of discussion and input from the constituents affected before they can reach their decision. If the Councilor is asking them for a standardized process that they go through, there isn't one because that is not a standardized event and would be a momentous type of decision that would only be done under the most extreme circumstances after lots of dialog and discussion. **Councilor McGeary** noted the numbers he had before him were from the Study of Reserves dollars and surpluses in Hospitals in Massachusetts by the MA DPH, division of Health Care Finance, May 2010 and a second source form the Hospital Financial Reports from the Division of Health Care Finance Policy as a part of the DPH of FY2010. One of the statistics he saw was that total patient days in 2010 for the two institutions; for NEHS was 98,500 and 105,000 for Lahey which he pointed out was not that big of a discrepancy. However, the total patient service revenues for NEHS were \$318 million and \$861,000 for Lahey. He wondered about that large discrepancy when the patient census seems to be approximately equal. **Dr. Grant** responded they employ about 600 physicians; and the revenue that's associated with all of the professional services are included within the Lahey Corporation with **Mr. Hanover** adding they aren't at NEHS. **Dr. Grant** continued that there is a significant amount of revenue that gets included. However, they lose money on all of their physician practices. So revenue gets included but they don't see the net losses associated with the employment and management of all those practices, but it is a model they've had for 80 years. The other discrepancy between the Lahey type of environment and the typical community hospital is that the revenue associated with the care of higher complexity patients, patients who receive transplants, complicated urologic or complicated colo-rectal surgery, high end neurological services, generate considerably more revenue but the costs associated providing that care is considerably greater. Even though their revenue stream is several times greater than NEHS, the net margins for the two organizations over the last few years have been approximately the same. So they've incurred expense equal to the revenue that's been generated. **Councilor McGeary** noted Dr. Grant's alluding several times to a three year commitment to maintain the eight essential services in the emergency room at AGH. He understood they don't want to put anything in writing for in perpetuity; but are they willing to put the three year commitment in writing as part of the affiliation agreement. **Dr. Grant** responded the process Mr. Hanover and his board are in right now and the Lahey team and his board, they are consuming a huge amount of time and energy going through an extensive due diligence process. Both teams are looking at legal issues, financial issues, clinical services, physicians between the organizations are meeting on a regular basis. Ultimately, he and Mr. Hanover will have the responsibility to put on paper with the assistance of their teams the proposed final terms of the deal which they would then have to bring back to their respective boards for their approval and subsequently be subjected to the regulatory approval that they're discussion. What they've heard about, the three year commitment was reflected in the letter of intent, the terms of the relationship proposed by Lahey and accepted by the Board of NEHS. He wouldn't envision that changing at any time during this process. That's never been discussed as something that either party would want to consider changing at this point. He stated he had every reason to expect that would end up being a part of the definitive deal that would subsequently be completed between the hospitals and hopefully be approved by the regulatory agencies. **Councilor Curcuro** mentioned the attracting of patients and primary care physicians and specialists and how they were having difficulties with that. How are they addressing that issue as far as Lahey is concerned? **Dr. Grant** expressed that things are changing for physicians who are coming out of training these days considerably. It was common many years ago for physicians coming out of training to be eager to go into private practice in a community; to run their own business; to grow the practice and recruit associates to join them. That has been reduced considerably. Most young doctors are shouldering several hundred thousand dollars of debt and are looking for the security of working for larger organizations that has greater financial security than if they went into private practice by themselves. They're looking for organizations that've made major investments in electronic health records; and for the opportunity to work in larger groups as opposed to practices of one or two physicians because of quality of life they're looking for an opportunity to not have to be on call every night or every other night which is what generations of physicians did. That is not happening any longer. The Lahey model in theory offers

them in partnership with AGH and NEHS an opportunity in those situations where they've not been able to recruit physicians to deliver the type of services they are interested in having in the community, they might enjoy greater success because people like to be part of a larger group. They've recruited physicians who have been stationed or practiced in hospital settings and have physicians working at NEHS at Beverly now; they have physicians at three or four community hospitals in southern NH. They are part of a group, although they may be practicing by themselves or with one other person in the community setting; and most of the time they're able to deliver that care in the community hospital setting but they may have 5-10% of their patients that need to be in a larger center for some reason. They're able to send that patient to their partner or come back to Lahey and deliver that care. They have cardiologists at Beverly Hospital today; patients that cannot be safely cared for at Beverly, those physicians are able to stay with their patients; they're on staff at Lahey in Burlington and are able to continue to deliver that care for their patients. He thought they would have the opportunity to recruit physicians to the AGH community and having choices in terms of practice models. **Councilor Curcuru** asked about how the doctors of Lahey and NEHS would co-exist and would that be an issue. **Mr. Hanover** expressed that a 'hallmark' of this relationship is a system which supports different types of physician models. They recognize that neither a fully employed model nor a fully independent practice model is going to work. Different physicians are at different points in their lives and careers have different needs. They've spent a lot of time with their respective doctors on staff and both sides feel a pluralistic type of approach to healthcare delivery can work and be effective. It will be difficult but both sides are very interested in seeing it work and work hard to make it work. **Councilor Curcuru** brought up the Cape Ann Medical Center is a different affiliation than Lahey and NEHS and they have quite a few Cape Ann patients. Is there something they can do to move forward with this situation? **Dr. Grant** stated their ability to maintain and to continue and expand services in this community is going to be dependent on how eager the residents in the community are to support those services. He will be visiting the Cape Ann Medical Center in the near future to try and understand why that group feels that they need to send patients out of the community, and can't support the services that are in the community. There may be perfectly logical explanations that he doesn't understand; but he has been invited to meet with them to try and understand it; because if all of the primary care physicians who live and work in this community were able to support specialists who came here, that would make it "infinitely easier" for them to recruit specialists who would want to live and work full time in the community. That would be critical in order for them to be successful. He expressed he was looking forward to that conversation to try and learn what the historical reasons are for the changes in utilization. **The Councilor** asked what Dr. Grant's position in Danville, PA was. Which **Dr. Grant** reminded he was the Chief Medical Officer and Executive Vice President responsible for running three hospitals covering a territory of about 300 miles across north-central Pennsylvania with approximately 1,300 physicians, nurse practitioners and P.A.'s that worked with them and he was responsible for managing. **Councilor Curcuru** asked if he was responsible for the diminishing of services or closure of facilities while he was in that position. **Dr. Grant** stated it was to the contrary. While he was there and since he left, that health system has taken on responsibility for three community hospitals that were in danger of closing and as a result of their involvement, physician services were exported to those communities; and those communities were able to preserve jobs and services in those facilities. During his 12 years at Temple Health System in North Philadelphia, PA, they did everything they could to preserve services in the community hospitals that were a part of their organization and keep as many jobs in those communities as well. When he says that is what they're going to attempt to do it is because that's what they've done and what he's done personally for the 25 years he's been in hospital management. Patients should be kept as close to their homes as possible as long as it is safe and prudent to do so. **Councilor Curcuru** directed Mr. Hanover, Dr. Grant and Ms. Donaldson's attention to the placards being held up by people throughout the audience in attendance. He noted this is the first time in four years he has seen this many signs in the auditorium and was impressed and appreciated it. **Councilor Whynott** observed they talked about the model that doctors coming out of medical school they don't want to go into private practice but rather go under the umbrella of an organization such as theirs. He assumed they provide these physicians with malpractice insurance and that was a lot of money. He felt that if a doctor doesn't feel like coming to Gloucester, they should be able to put a little pressure on a doctor by saying they're being paid a lot of money, paying for your malpractice insurance, and can't refuse every patient who wants to be treated in their own hospital. He would appreciate if they would work on that. **Councilor Tobey** commented they need to recognize that having a hospital in the community is a key as component of economic development engine that keeps a place strong and vibrant. In a less immediate way it is a magnet for others to come or to stay here and to build their businesses. In the most immediate way it is also a provider of jobs, a purchaser of material and services in the community. It is very important that they are here and stay here. They are being tossed around by the financial storms emanating from Washington, DC that neither they nor this City can control. They all need to simultaneously let their congressional delegation, their two senators that the Medicaid and Medicare cuts that could be on the horizon will devastate the healthcare profession and will further diminish job

counts and further harm industries, communities and the embattled middle class in this country. Their legislative team in Boston has a role also because state policies play a part. He encouraged the public to make calls, send emails, and write letters to Senators Brown and Kerry, and to Congressman Tierney, to State Sen. Tarr and State Rep. Ferrante, our Governor and the President to be heard. **Councilor Hardy** asked Senator Tarr to briefly comment on the presentation. **Senator Tarr** expressed how pleased he was to see such a large turnout by the community, and that this same community has always placed and continues to place the utmost priority above all else having a community hospital which maintains the eight essential services. He appreciated their candor and high level of dialog they're willing to engage in is a prerequisite with the kind of participation they're seeing from the officials at NEHS and from Lahey Clinic is refreshing to achieve for this community hospital but also for medicine and the provision of healthcare in the Commonwealth. He was also "deeply" appreciative of the many hours Mr. Hanover, Dr. Grant and Ms. Donaldson have spent collectively with the legislative delegation on what the right approach should be. They're also equally appreciative of the dialog the community continues to engage in because they all need to be equal partners. As Councilor Tobey and others have suggested, health care in the Commonwealth and this country is in a state of transition and uncertainty. One of the advantages that's been proposed by these two institutions is to reverse the model that is "all too common" of tertiary care hospitals, teaching institutions dominating community hospitals for the purpose of feeding patients to settings that are too costly and not necessary. If this affiliation is structured appropriately, and he believed it can be, they could be the first region that reverses that trend and ensures that community hospitals provide primary care; and the affiliated tertiary care. He suggested that the legislative delegation shares in the opinions shared by the Council and community this evening that they need to do whatever is necessary to secure the eight essential services that are required in the Commonwealth for the licensure of a hospital. Initially when he received correspondence from Mr. Hanover about the three-year time period that's been proposed and much discussed this evening, he viewed that as "extremely disappointing" which he shared with Mr. Hanover directly. He viewed it now as a transitional mechanism so that at the end of the three years and this affiliation agreement is concluded, if it is concluded, that they have something firmer and more permanent than that agreement. The eight services, some of which are access to a blood bank, radiological services, anesthesia coverage, emergency surgery, those aren't things from a wish list. Those are the conditions of licensure. The things that they're asking are not radical or peripheral, they are essential. The reason they give hospitals and medical centers non-profit status is because they're there to give a public purpose that in many cases is not always profitable. They do it because it is public policy to provide healthcare in the best way they can. Every time the AGH has called upon this community to support the provision of high quality health care, it has responded. If it were said that additional resources were needed from the community to maintain those services, it would respond again. They ought to be making sure that the mission that's been AGH's since the beginning is its mission into perpetuity to provide care to the people of Cape Ann. Some things come and go; they probably will. They should engage in a discussion to make the hospital more sustainable as well. Those are ancillary items to the eight essential services that are required for licensure. Any guarantee in perpetuity is difficult to make; even harder to keep. But there are mutual covenants they can reach and devise to give them the comfort level that they deserve that this community hospital will be part of a system right here at the right time, the right place at the right cost. "If the proposed experiment with incredible potential" is to be realized, AGH has to play its appropriate role as a primary care provider and a community hospital. He assured that this conversation needs and will continue and need to have at the end of it the community hospital that they started with which needs to be an example of how healthcare should work in this State and in this country. **Council President Hardy** put aside her questions and will submit them, instead in writing, in order to allow the opportunity Representative Ann-Margaret Ferrante to speak. **Rep. Ferrante** commented on where they are locally, on a state and national level that the single biggest issue is healthcare and urged that the public be engaged; to call her at any time. She pointed to Councilor Theken's commitment as a healthcare advocate and her work locally and at the state level. The Councilor was invited to give her observations the previous week to the head of MassHealth as to what was and was not working. She pointed out the eight essential services are needed. She knew first hand from her family's challenges; to be at the AGH and have minutes to save a life, not 25 minutes to travel down Rte. 128. They need the hospital. She pledged to work closely with the Council, the community and hospital administrators. She heard they want a guarantee and heard from the other side of the table that they need to know there is a demand for services. She urged they work together as a community to make sure they're showing and utilizing the hospital, keeping it as an asset by their participation how important the hospital to the community. She asked Mr. Hanover and Dr. Grant to tell her what areas they'd like to see more participation from the community and to disclose what as elected officials they can do to demonstrate and work to meet that demand so that it is easier for them to guarantee that the eight essential services will be there. Council President Hardy welcomed and thanked Dr. Grant for his presentation.

The City Council recessed at 8:42 p.m. and reconvened at 8:53 p.m.

2 of 2: Update on Home Rule Petition re: S1059; City Water System Ownership by Senator Bruce Tarr, Representative Ann-Margaret Ferrante with comments by “Who Decides”

Senator Tarr stated that bill S1059 on the City Water System Ownership has been signed by the Governor and that Gloucester’s water is now protected by this Special Act. The group “Who Decides” did a wonderful job of community outreach to reach this goal. **Representative Ferrante** stated this bill started with “Who Decides” and worked cooperatively by helping to pass an important ordinance that went all the way to the Governor. **Russell Hobbs** of “Who Decides” stated he was pleased that the Council was convinced the passage of an ordinance that controlled the City’s water supply was appropriate and helped to draft a home rule petition. They listened to the people that no Mayor or City Council present or future can “take away” the City’s water. He also thanked the citizens of Gloucester. **Roslyn Frontiero** of “Who Decides” also added her thanks to the City Council, the Mayor, members of the School Committee, Chief Dench; commenting that civic pride is alive in the City. Water is far more valuable than oil. Gloucester has preempted part of that process although there is more to do to keep the City’s water supply protected. She also thanked Helen Garland for her assistance. She invited the public to Ravenswood Park at the Cape Ann Discovery Center where the Trustees of the Reservation has given them space to meet Monday evenings at 7 p.m. They have a partnership between the public and the public servants. They’ve had an unprecedented unanimous votes by the City Council and unanimous votes by the State legislature. Bruce and Linda Maki and Ann Rhineland have been working with the Water Infrastructure Finance Commission; and the Chair, Jamie Eldridge has asked “Who Decides” to write the legislation for a state-wide effort for the strongest anti-privatization legislation laws “on the books”. She felt this was a great opportunity for Massachusetts to model; and it happened here in Gloucester. They should all be proud for forwarding this process but cautioned it would take of them to do that. She recalled Carolyn O’Connor who has been an advocate for the City’s water supply for over 50 years. She also named the efforts of Joe Orange who protects the reservoirs on a daily basis. She urged support for their efforts. She likened these ordinances as “mini-victories”. Stating that corporations find ways around them, she urged they keep vigilant in order to pre-empt those efforts; and to continue the process. She had a visit from a cousin, Major Stephen Hall who has returned from overseas who returned with over 300 of his troops intact and thanked him for protecting our rights for democracy being celebrated there this evening; and she would stand up for those rights. She urged vigilance over privatization whether it is fishing, education, water or healthcare. **Council President Hardy** asked the other members of “Who Decides” present in the audience to stand and receive recognition from the Council and thanked all, including Sen. Tarr and Rep. Ferrante for their efforts in working together. She recognized Councilor Tobey, her co-author of the Council Order that brought the matter before the City Council. **Councilor Tobey** stated the work that “Who Decides has been doing as “gone over the bridge” to Boston. They have been regular in their attendance at the Water Infrastructure Finance Commission; they have been heard; it has made a difference. They were viewed with skepticism at first by the Commission’s chair, but the substance “carried” the day. He noted this was real. He pointed out there is a major “flip side” to drinking water which is sewer. There is a major sewer system in New York State that has an RFP out now engineered by Morgan Stanley, for the monetization of that system. What that has to do with public health, the best interest of the economic vitality of the community served by it he didn’t know. He urged “Who Decides” to press on and thanked them. **Councilor Ciolino** thought “Who Decides” was a wonderful organization, the kind they needed 20 years ago to save the hospital. They need to keep the City’s destiny in the hands of the citizens of Gloucester, and encouraged them to keep up the good work. **Councilor Theken** noted it was a process. It took a lot of humility because it was untested ‘waters’. It came in front of the O&A Committee. But they also brought the issue to the community. They brought a documentary to the local cinema that showed that other countries started with this issue well before Gloucester did. Someone did come forward and try to buy Gloucester’s water supply. They had a say because of “Who Decides.” She knew that it was a difficult process. Most of the working out of the issues takes place at the City Council subcommittee level. They wanted the ordinance; and they wanted the assurance of the Home Rule Petition. They didn’t give up; and they can work together regardless of differences. **Councilor Mulcahey** didn’t believe there is a first-term Councilor that has had the privilege of working on this project. When it came to O&A, she was impressed at how well organized it was. It was worked on for a while to get it all correct. She was moved by the enormity of the passage of the ordinance at Council by what they had completed; and that it was moving forward to even bigger things on the State level. She thanked “Who Decides” and her colleagues on the Council that worked on it also. **Councilor Curcuru** thanked Sen. Tarr and Rep. Ferrante for pushing the Home Rule Petition through the legislature so quickly. He thanked “Who Decides” for a terrific job and was glad to have been a part of it. He thanked Ms. Frontiero, the driving force behind this and expressed his appreciation for her efforts. **Council**

President Hardy pointed out this legislation passed in record time and thanked Sen. Tarr and Rep. Ferrante. The ordinance is in place: The City Charter has since been amended and they no longer need to move forward with a local ballot question. The City has the most stringent by-law possible because of their combined efforts ushering it through the legislature. She also recognized Linda T. Lowe, City Clerk for her administrative vigilance and thanked her for her efforts.

Consent Agenda:

• **MAYOR'S REPORT**

1. Memo from Mayor re: Summit-Building the New Maritime Port Economy: Focus on Gloucester (Info Only)
2. Memo from Mayor re: Updates regarding City's Emergency Management Dept. & Special Budgetary Transfer (#2012-SBT-3) In the amount of \$4,800 (Refer B&F)
3. Memo from CFO requesting acceptance of grant in the amount of \$5,000 from MIIA (Refer B&F)
4. Memo from CFO requesting permission for payment of invoice w/FY12 funds for work performed in FY11 (Refer B&F)
5. Memo from Comm. Dev. Dir. & recommendations from Community Preservation Committee (Refer B&F)
6. Memo, Grant Application & Checklist from Stephen Winslow, Sr. Project Mgr. re: Strategic Alliance for Health Mentoring Project grant in the amount of \$25,000 (Refer B&F)
7. Memo, Grant Application & Checklist from Police Chief re: U.S. Drug Enforcement Agency grant in the amount of \$16,000 (Refer B&F)
8. Memo, Grant Application & Checklist from Police Chief re: award of a Livescan Fingerprint Machine from MA Bureau of Identification valued at approximately \$32,000 (Refer B&F)
9. Memo, Grant Application & Checklist from Fire Chief re: Assistance to Firefighters Grant in the amount of \$512,500 (Refer B&F)
10. Memo, Grant Application & Checklist from Interim Health Director re: Public Health Emergency Preparedness Grant in the Amount of \$184,066 (Refer B&F)
11. Memo, Grant Application & Checklist from Interim Health Director re: Medical Reserve Grant Corps Grant in the amount of \$14,285 (Refer B&F)
12. Memo, Grant Application & Checklist from Interim Health Director re: MassCall 2 Grant (Refer B&F)
13. Memo & Request from Legal Department requesting permission for payment of FY11 invoice with FY12 funds (Refer B&F)
14. Memo & Request from Police Chief re: acceptance of a donation/grant of Preliminary Breath Test machine valued at \$300.00 (Refer B&F)
15. Memo & Request from Police Chief re: acceptance of E911 Support Grant award in the amount of \$61,795 (Refer B&F)
16. New Appointment: Archives Committee Marion Goodwin TTE 02/14/14 (Refer O&A)

• **COMMUNICATIONS/INVITATIONS**

1. Request from North Shore Habitat for Humanity re: October 30, 2011 5K Road Race at Good Harbor Beach (Refer P&D)

• **APPLICATIONS/PETITIONS**

1. SCP2011-006: Washington Street #298, GZO §5.13.7.2 (PWSF Modifications) (Refer P&D)
2. SCP2011-007: Blackburn Drive #30, GZO §5.13.7.2 (PWSF Modifications) (Refer P&D)
3. SCP2011-008: Kondelin Road #16, GZO §5.13.7.2 (PWSF Modifications) (Refer P&D)
4. SCP2011-009: Main Street #186, GZO §5.13.7.2 (PWSF Modifications) (Refer P&D)
5. SCP2011-010: Prospect Street #27, GZO§2.3.1.6, conversion to or new multi-family or apartment dwelling, three dwelling Units, §1.10.1 and 3.1.6 increase in building height over 35', §1.10.1 and 3.2.2(a) decrease in the minimum lot area open space Dwelling unit (Refer P&D)

• **COUNCILORS ORDERS**

1. CC2011-039 (Mulcahey) Amend GCO Sec. 22-270 "Parking prohibited at all Times" re: Green St. & Perkins St. (Refer TC & O&A)
2. CC2011-040 (Mulcahey) Amend GCO Sec. 22-291 "Tow Away Zone" re: Green St. & Perkins Street (Refer TC & O&A)
3. CC2011-041 (Verga) Speed Limit for the Woodward Avenue area (Refer TC & O&A)
4. CC2011-042 (Verga) Revisit of 4-way stop signs at intersection of Magnolia Avenue, Shore Rd. & Raymond St. (Refer TC & O&A)
5. CC2011-043 (Tobey) Generate Request for Proposals seeking non-profit cultural partner re: City Hall (Refer O&A)

• **APPROVAL OF MINUTES FROM PREVIOUS COUNCIL AND STANDING COMMITTEE MEETINGS**

1. City Council Meeting: 08/23/11 (Approve/File)
2. Joint Special City Council & School Committee Meeting 08/24/11 (Approve/File)
3. Standing Committee Meetings: B&F 09/08/11 (under separate cover), O&A (No Meeting), P&D 09/07/11 (Approve/File)

Items to be added/deleted from the Consent Agenda:

Councilor Ciolino wished to add something under Applications/Petitions.

Councilor Tobey asked to remove under the Mayor's Report Item #2.

Councilor Ciolino stated a while back P&D made a motion on the Magnolia School House (Blynman School). The language motion was concerning a lease. Now the talk is of a sale of the School House. He requested that it be referred back to P&D so that they can make the correct motion. **By unanimous consent the matter was referred back to the P&D Committee.**

Councilor Tobey stated this is a communication from the Mayor to the Council giving them an update on her point of view on the Council's consideration of the for the funding requests for the Emergency Management Department. He thought it appeared that this has the beneficial effect of "slamming the breaks" on that process while a number of other initiatives go forward but that simultaneously an administrative assistant support function be built in which

used to exist when Chief McKay was Fire Chief and headed up this service as well. He thought it a good idea, but that it also had structural considerations as it relates to the department; and asked it not only be referred to the B&F Committee but to the O&A Committee as well. **By unanimous consent, the matter of the Memo from Mayor re: Updates regarding City's Emergency Management Dept. & Special Budgetary Transfer (#2012-SBT-3) in the amount of \$4,800 was referred to the O&A and B&F Committees.**

By unanimous consent the Council agenda was accepted as amended.

Committee Reports:

Budget & Finance: September 8, 2011

MOTION: On motion by Councilor Hardy, seconded by Councilor McGeary, the Budget & Finance Committee voted 3 in favor, 0 opposed to recommend to the City Council to transfer (2012-SBT-4) \$290.29 from Mayor, Contingency/Emergency, Unifund Account #101000.10.121.57800.0000.00.000.00.057 to Fire Department, Sal/Wage-Overtime, Unifund Account #101000.10.220.51300.00000.00.000.00.051.

MOTION: On motion by Councilor Curcuru, seconded by Councilor McGeary, the City Council voted B V Y ROLL CALL 9 in favor, 0 opposed to transfer (2012-SBT-4) \$290.29 from Mayor, Contingency/Emergency, Unifund Account #101000.10.121.57800.0000.00.000.00.057 to Fire Department, Sal/Wage-Overtime, Unifund Account #101000.10.220.51300.00000.00.000.00.051.

MOTION: On motion by Councilor Hardy, seconded by Councilor McGeary, the Budget & Finance Committee voted 3 in favor, 0 opposed to recommend to the City Council the establishment of an Agency Fund to be used to account and report the resources where the government is acting as an agent for the funds to Account #890000.

DISCUSSION:

Kenny Costa, City Auditor at the request of Councilor Curcuru explained that the Agency Fund is new to the City although it is common in other communities. At B&F he had used the example of the City of Newton and Wellesley. It is monies they are collecting, like the meals tax that they are holding and have to pay back to the State. The Agency Fund acts as one fund that all the monies such as the meals tax go into and pay it back out from there.

MOTION: On motion by Councilor Curcuru seconded by Councilor Whynott, City Council voted BY ROLL CALL 9 in favor, 0 opposed the establishment of an Agency Fund to be used to account and report the resources where the government is acting as an agent for the funds to Account #890000.

Council President Hardy noted that in the minutes of the B&F Committee meeting there is a statement as to what the Fund will be used for according to the law.

MOTION: On motion by Councilor Hardy, seconded by Councilor McGeary, the Budget & Finance Committee voted 3 in favor, 0 opposed to strike from the B&F agenda #2012-SBT-1 and retire this budgetary transfer number as "unused".

MOTION: On motion by Councilor Curcuru, seconded by Councilor McGeary, the City Council voted 9 in favor, 0 opposed to strike from the B&F agenda #2012-SBT-1 and retire this budgetary transfer number as "unused".

MOTION: On motion by Councilor Hardy, seconded by Councilor McGeary, the Budget & Finance Committee voted 3 in favor, 0 opposed to recommend to the City Council to transfer (2012-SBT-2) \$360.00 from Contractual Services, Unifund Account #101000.10.151.52000.0000.00.000.00.052 to Sal/Wage-P/T Pos Unifund Account #101000.10.151.51250.00000.00.000.00.051.

DISCUSSION:

Councilor Curcuru explained this was for a part-time position that was taken out of an account that didn't have any funds in it, and this transfer rectifies the matter.

MOTION: On motion by Councilor Curcuru, seconded by Councilor McGeary, the City Council voted BY ROLL CALL 9 in favor, 0 opposed to transfer (2012-SBT-2) \$360.00 from Contractual Services, Unifund Account #101000.10.151.52000.0000.00.000.00.052 to Sal/Wage-P/T Pos Unifund Account #101000.10.151.51250.00000.00.000.00.051.

MOTION: On motion by Councilor McGeary, seconded by Councilor Hardy, the Budget & Finance Committee voted 3 in favor, 0 opposed to recommend to the City Council to appropriate \$1,130,781.00 (One Million One Hundred & Thirty Thousand & Seven Hundred & Eighty-One Dollars) for FY2012 operating costs of the Gloucester School Food Service Program and \$1,130,781.00 (One Million One Hundred & Thirty Thousand & Seven Hundred & Eighty-One Dollars) for estimated receipts from fees charged to users of the services provided by the Gloucester School Food Service Program in accordance with MGL c. 44, §53E.

DISCUSSION:

Councilor Curcuru stated that this is for the food service program which is starting off in the black for the first time in quite a few years. The Committee was encouraged by this, and the Councilor was hopeful moving forward to see the account stay in the black for the remainder of the school year. **Councilor Tobey** asked in the past how this has been handled. **Councilor Curcuru** responded this was a business plan that came forward from Superintendent Connolly last year. They set up a plan to gradually increase the fees for the lunches plus the Point of Service program to track the finances a bit better. The Councilor confirmed that it is a revolving fund. They ended up approximately \$22,000 in the black at the end of the last fiscal year. He believed it was the first time (surplus) in five years.

MOTION: On motion of Councilor Curcuru, seconded by Councilor McGeary, the City Council voted by Roll Call 9 in favor, 0 opposed to appropriate \$1,130,781.00 (One Million One Hundred & Thirty Thousand & Seven Hundred & Eighty-One Dollars) for FY2012 operating costs of the Gloucester School Food Service Program and \$1,130,781.00 (One Million One Hundred & Thirty Thousand & Seven Hundred & Eighty-One Dollars) for estimated receipts from fees charged to users of the services provided by the Gloucester School Food Service Program in accordance with MGL c. 44, §53E.

Ordinances & Administration: No meeting held due to the Labor Day holiday.

Planning & Development: September 7, 2011

MOTION: On motion by Councilor Verga, seconded by Councilor Whynott, the Planning & Development Committee voted 2 in favor, 1 (Ciolino) opposed to recommend to the City Council the following Non-binding Ballot Question for the November 8, 2011 elections:

“Summary: Currently City offices are located at City Hall, Pond Road, miscellaneous other locations, as well as the school administration at the Fuller School site. The Fuller site is currently under the control of the Gloucester School Department.

Discussions have begun about possibly consolidating these functions to one general area in downtown Gloucester or onto one location at the Fuller School site.

Cost estimates for both scenarios are similar and in the \$6 million to \$8 million range.

Question: If the Gloucester School Committee is to declare the Fuller School site surplus, which option should the Administration and the City Council focus its energy on? Please select one:

1. A downtown campus which may include renovation and expansion of City Hall, renovation of Central Fire Station into office space and potential leasing of additional space downtown?

2. An “under one roof” approach centered at the Fuller School site, and find an alternative public-related use for City Hall?”

The motion was made by Councilor Ciolino, seconded by Councilor Verga.

Councilor Ciolino stated that he voted against this feeling this is such an important issue that there is just not enough information in the summary of the ballot question, and as he had said before at P&D, felt that some of the language was misleading and would urge his fellow Councilors not to support this tonight. **Councilor Verga** stated this goes back to early 2008 when the Mayor appointed a committee to look at all the City’s facilities and come up with some recommendations. In January 2010, the committee submitted a report, The Facilities Capital Management Report which was presented to this Council shortly after that. He noted he emailed it to the Council the previous evening to remind them. The options that are laid out in this ballot question are a direct result of that report. He expressed he would offer an amendment to the motion on the table covering the cost estimates because the actual estimates in the Report are \$3 to \$10 million, not \$6 to \$8 million. He found some of the criticisms ironic about this question. Comments have been, “It’s the cart before the horse; it’s premature to ask the question.” After the report was given they had two “so called” listening posts that in the Councilor’s view were poorly attended and suggested that if one pulled the minutes they’ll see that fact; with input given by a total of about 24 people in favor of the downtown campus. He was not convinced, nor was he still, that meant they had a decision, a consensus on where this facility should be. This was all in limbo until July when the Mayor submitted a memo to the City Council, as well as the RFP that went to MassDevelopment which said in essence what are some of the uses for Fuller; some lease opportunities and presumably to create a downtown campus. The only interpretation the Councilor could make, with due respect to the Mayor, was that a decision had been made that the downtown campus was the way to go. Again, the Councilor disagreed. The purpose of this is to say, “Where do we go from here.” They just heard two presentations where people were applauding democracy, people’s voices being heard, and to quote Mr. Hobbs, “You listened to the people”. Here is an opportunity to listen to the people. Let them give their input. **Councilor Verga** reminded them that this was a non-binding advisory question. The summary is preceded by saying “If the School Committee declares this site surplus”. They’re giving the opportunity for the public to weigh in on their choice on where they should be spending their time coming up with a plan. Again, with due respect to the Mayor, she’s taken, he contended, that choice away from the Council and from the public and moving forward with MassDevelopment which the Councilor thought of itself pushes the School Committee into a corner. This one reaches out to more people, gives them more input. In his opinion, what was the fear that anybody has, unless their opinion is that they keep the downtown campus; and are afraid of what the results might be. What, he asked, was letting the people give their feedback as to where they should spend their time? In the end, it could come to nothing because they have no money. They’re going to have a presentation from MassDevelopment in October or November; before they spend any more time and energy, on either option, they should find out which one the people want. He urged his fellow Councilors keep an open mind; live up to what they just spoke of hearing the voices of the people and support this motion. **Councilor Whynott** agreed with Councilor Verga. He’d like to see the people weigh in on the matter because there has been silence on it since the School was emptied out. People want to know what they are doing with that building and asking if anything will ever go there. He felt putting this on the ballot as an advisory question gives the people a chance to be heard; sets nothing in concrete but at least they’ll move forward. Councilor Verga worked 18 months as a part of the Facilities Committee’s Report and hardly anyone has read it. He felt the ballot question will make more people read the report. They can make their case before the election no matter which ‘side’ they’re on and let the people tell them what they think. He did not think City Hall is a healthy office building and would like to see the people who work there move someplace else. However, he didn’t wish to see anything ‘bad’ happen to City Hall. He suggested folks look at what Ipswich has done, as an example, with their City Hall or Andover. The trend is to move into schools because the population has gone down and they’re more suited for office space than these beautiful old historic buildings and urged that the ballot question go forward. **Councilor McGeary** stated he would oppose the motion as he believed it was premature; even rash for the School Committee to declare the Fuller School surplus at this point. If there were a referendum, however advisory it was, it would create a momentum one way or the other. He felt it was premature to set that momentum in motion. He thought they should wait until and unless the School Committee declares it surplus property then they could deal with the issue. Then they should get public input; and a referendum is a fine way to do it. Until that happens, he saw no reason to move forward now. **Councilor Mulcahey** expressed her agreement with Councilor McGeary that it was premature to go forward; that it was up to the School Committee to make a decision on what to do with the building; whether it will be surplus or not. People to whom she’s spoken have told her they were under the impression that the Police and Fire Departments were going into the Fuller School. No, it’s a separate issue; and

can't seem to keep it separated in folks' minds. **Councilor Curcuro** would also vote against the motion for the ballot question. At this point the School Department is waiting on several matters to come forward and until they do, nothing will happen. They could get into the economic engine of the downtown, get into the costs of where would the money come from; liquid assets of selling the school. He felt there were too many "ifs". He didn't think it was the time for it, perhaps at some time there may; but during this election it is not the right time. **Councilor Tobey** noting that there was a quorum of the School Committee present, their Chair is seeking leave to speak, he asked through the Chair that leave be granted.

Council President Hardy asked the City the Council if they wished to suspend their Rules of Procedure which made moved by **Councilor Tobey** and seconded by **Councilor Ciolino**.

DISCUSSION:

Council President Hardy stated there was an amendment to the motion to allow speakers to speak after the Council has had their opportunity to speak first. By unanimous consent the motion to suspend the Rules of Procedure was amended. **Councilor Verga** asked the Council to entertain another vote involving MassDevelopment. The Councilor speaking off mike asked to amend the main motion to change \$6 million to \$8 million to read \$8 million to \$10 million which was accepted by the Council. **Councilor Ciolino** felt they have too many studies and MassDevelopment is a study. He thought nothing would happen even with MassDevelopment. He felt the motion that Councilor Verga would propose regarding MassDevelopment was superfluous. The Mayor can do what she wishes, but "a report is a report" which shouldn't drive them in any one direction other than supporting the School Department. Until the School Department declares the Fuller School surplus, they shouldn't be having this conversation. He heard that the public had not had an opportunity to speak. He pointed to numerous meetings they've had and people that have an interest do express themselves. He knew Councilor Verga to say it is the same 20 people; but everyone else has the opportunity also. He believed they were pleased with the status quo and don't come out. He reiterated it is a School Department issue, and that the Council's job is to support them and it is premature, again urging the Council to vote against the ballot question. **Council President Hardy** stated she didn't believe anyone present didn't believe the highest and best use of that building was a school. No one is saying it shouldn't be used for a school. But if it is not going to be used at all, they need to start making decisions on what they could use it for, even if it is hypothetical. Otherwise, they have to wait another two years to get it on a ballot to get it before the Council. It has to be on a municipal ballot and can't be on a presidential ballot. The only other way to get it on a ballot before that would be to call for a special election, and she didn't feel there was anyone there who wished to spend the money for that. She would support the motion to go forward because she thought it was time they at least speak, even if it is in hypothetical's, about getting the ball rolling on a discussion. She didn't wish to wait two years to find out the School Department can't use it because they invested the money in the roofs and then have to pay the roof money back to the MSBA. She reiterated this is a non-binding referendum; "what if the School Department doesn't use it". She believed it should be used as a school; the highest and best use. She also believed the Cape Ann Symphony should stay there and had no problem with that. She was in favor of the referendum. **Councilor Whynott** noted his colleague made the same statement the other day that studies don't mean anything, and it is premature to put this on the ballot. One, he felt, was the same as the other. They'd be gathering information; finding out what there is to do with it; and it's not binding. Maybe, he conjectured, they'd put a second question on the ballot because they'll decide that neither one of those options was the right thing to do and need to use a third option. He also didn't believe the Police and Fire Departments don't come into the discussion. Both of their buildings are obsolete; one is not handicap accessible; there are other buildings that are not handicap accessible. They still have people going from the City Clerk's office to the City Hall Annex at Pond Road only to come back to the City Clerk's office becoming frustrated. He saw no harm as putting this on as a non-binding question. He asked they get the ball rolling, get people talking "before this becomes another I4-C2 north". **Councilor Tobey** reserved the right to speak upon the conclusion of remarks by the School Committee.

MOTION: On motion by Councilor Tobey, seconded by Councilor Ciolino, the City Council voted 9 in favor, 0 opposed to suspend the City Council Rules of Procedure for the purposes of discussion on the motion before them after the City Council had spoken first.

Val Gilman, Chair of the School Committee introduced fellow School Committee members Melissa Teixeira, Kathleen Clancy and Michelle Sweet. Speaking for the School Committee she expressed their feeling that this evening was not it the right time to vote on this matter. At the Joint City Council and School Committee meeting the

deliberation and discussion didn't come to any consensus. Wide-ranging and differing opinions were expressed; some wanted something sent out with property tax bills; others wanted a referendum. The School Committee discussed sending out a survey to parents which they further discussed at their Program Subcommittee meeting that past Friday and will be reporting in the immediate future to the full committee. They don't believe that those minutes show the recent vote at the P&D meeting as of last Friday of which she viewed for the first time just that mid-day and in turn sent it immediately to the full committee to read. It is not on the agenda for their meeting the following evening. They didn't comply with the 48 hour Open Meeting Law requirement; but it is out as an enclosure for them to review. Minimally she asked they defer this until the vote that is coming up in several weeks transpires. This is a decision they aren't ready to make at this immediate time. There are many reasons behind that, the most prominent of which is they were all at the Charter School that evening and speaking of the City Resolution on school funding. Mark Keenan was there to speak; and they reviewed once again some of their concerns for FY13. It was the document that Dr. Safier and Tom Markham passed out to the Council at their joint meeting which talked about in FY13 with the population of the Charter School between 130 to 165, the School District could find itself between \$2.2 million and \$3.0 million under level service. That will create a lot of planning for the School Committee who support the Council's decision to put new roofs on their school buildings, the elementary schools. However, it will come with a cost. She believed if they make a decision right now, or at least gets the community excited about a decision; get the data coming back to them; it created concern there would be momentum which would start pitting the School Committee against members of the community. She felt this would be unfair to the School Committee. The School Committee has not had a chance have a full discussion on what should happen to the Fuller School. They are working hard to come up with a plan to make a good, validated decision based on evidence, participation from parents, from the community, but at this point it felt hurried. **Kathleen Clancy**, School Committee member stated they need budget information and what funding will be available. She asked the Council to listen to their fellow City Council members in terms of what they just said give the School Committee the thorough job they feel they need to do as a public body that represents 3,200 children. **Council President Hardy** asked how much time the School Committee need to review this information. **Ms. Gilman** responded it was dependent on what the Council's decision needs to be. Minimally, they need to be able to talk about it at the end of this month which would be by their September 27th meeting offering that they could hold a special School Committee meeting to read the exact language. In ideal terms, she felt they need to see what the budget conversations are all about this fall and then make determinations at that point and so she couldn't provide an exact answer. **Council President Hardy** expressed she was informed by the City Clerk the Council must make a decision by September 27th in order to place a question on the November 8th election ballot. **Ms. Gilman** related Vice Chair, Melissa Teixeira commented that it seems reasonable if they needed to make a decision on the question and now it is noted as a referendum they could be prepared to give the Council their recommendation before the City Council meeting of September 27th; the preference would be to hold off. **Kathleen Clancy** thought the Council was asking does the School Committee like the question they wish to put on the ballot or not. She didn't have an answer whether that question would give them back good information. She was not sure any conversation or deliberation they would have would be supporting or not supporting that particular question. She did know that without budget information and knowing what funding will become available to help the schools to keep things in place, they will not have any answer on Fuller. If that is the question, she believed that was some time away. **Councilor Tobey** was feeling "wishy-washy" on the matter. On one hand he saw the matter of this question going on the ballot as probably not having a down side, although he was concerned that it could give rise to a community expectation no matter how vigorously they seek to highlight the word "advisory" that the result will become an expectation. He had the same concern for the Mayor's and Administration's effort through the MDFA study that it, too, may give rise to some expectations. He didn't believe there should be any expectations now because there were too many things that needed to play out. He felt it would be good to see what the MDFA study says for data. He was looking forward to the discussion on the Council Order he had submitted on the possibility of some sort of cultural partnership between the City and some entity probably from "over the bridge" that would have an interest in the Kyrouz Auditorium and the office space that surrounds it on the second and third floors. It used to be a vibrant cultural space. He didn't want to see that thrown away particularly if that could be the means for the additional financial resources to keep City Hall in part the seat of government which he felt would be good for the downtown; particularly when the Post Office might again be in play. Additionally, and he would ask the City Clerk to forward to them all an email from Maggie Rosa. On one hand the City Hall Restoration Committee has reviewed his order and feels that the Committee's mandate is the outside of the building. But on the other hand they have a real interest in this space to explore ways that might create more resources for the building in total. Ms. Rosa referenced the possibility of the City pursuing a downtown cultural district designation. Quoting from Ms. Rosa's memo, the Councilor read, "This may lead to opportunities to fund further restoration of the building. Lynn's Memorial

Auditorium is a lovely example of what can be achieved to restore cultural facilities. He believed there was a lot in play and didn't want them to "throw it away" too fast by one approach or another being made pre-eminent. Nor did he want them to, by default; allow nothing to occur and decisions getting made by default. He'd like to see what the School Committee comes up with when they come back to the Council in two weeks. He asked Councilor Verga to sit down with the Mayor and the City Clerk and General Counsel to see if they can find a way that this question can be advanced perhaps not this fall, but at some other election or through some other form, not two years out. His expectation was the Fuller School issue would get resolved due to raw, hard numbers when FY13 happens. He thought the school would be needed again, and this will become a moot point. He further believed they could have a good data building process with opportunities for public input at the right time. He hoped they could have a collaborative discussion in the next two weeks within the City side and the school side; come back together and find some middle ground.

Councilor Tobey moved the matter of the ballot question for the November 8, 2011 election be continued to the September 27, 2011 City Council Meeting for further discussion which was seconded by Councilor Whynott.

DISCUSSION:

Councilor Ciolino felt they should move the main motion of the ballot question. He expressed his agreement with Councilor Tobey but felt the information is in hand and would not change in two weeks no matter how many meetings they have with the City Clerk or anyone else. **Council President Hardy** believed the main motion with the \$8 million to \$10 million was still on the table. That would have to be withdrawn before they entertain Councilor Tobey's motion to continue the matter. **Councilor Tobey** thought the continuance motion would take precedence, which Council President Hardy did agree with that a postponement would take precedence. She then announced that a motion was on the table is to postpone to the September 27, 2011 City Council meeting

MOTION: On motion by Councilor Tobey, seconded by Councilor Whynott, the City Council voted BY ROLL CALL 4 in favor, 5 (Mulcahey, Theken, Ciolino, Curcuru, McGeary) that the matter of the ballot question for the November 8, 2011 election be continued to the September 27, 2011 City Council Meeting for further discussion.

MOTION FAILS.

Councilor Tobey then invoked City Charter, Sec. 2-11(c). **Council President Hardy** read that Sec. 2-11(c), upon adoption of the measure put before the City Council that it accept an emergency measure under 2-11 (b) if a single member objects to the vote, the vote should be postponed until the next meeting, regular or special. If, when the matter is next brought before the City Council for a vote, four or more members object to taking the vote, the matter shall be further postponed for not less than an additional five days. This procedure shall not be used more than once for any measure notwithstanding the original measure." **Council President Hardy** stated, "No". **Councilor Theken** thought that Councilor Tobey had invoked to continue and the Council said no. He didn't invoke 2-11 (c) on the main motion. The main motion still stands. **Council President Hardy** stated that Councilor Tobey has invoked City Charter Sec. 2-11 (c) and that the matter shall be continued to September 27, 2011 at which time it will be heard on as agenda item on the regular City Council agenda. However, before fully continuing the matter, as Councilor Theken did not have an opportunity to ask questions of the School Committee, **Council President Hardy** recalled the School Committee for that purpose. **Councilor Theken** noted that Ms. Gilman mentioned that the School Committee wanted to do a survey. Had a survey with the parents ever been done? **Ms. Gilman** stated it had but the participation rate wasn't "huge"; and the data did reflect consistent opinions that neighborhood schools were preferred. **Councilor Theken** clarified they sent out a survey to parents of children who go to all the City schools and didn't get much participation. **Ms. Gilman** repeated they didn't get a 'huge' participation rate. She believed they had 320 responses, less than 10%. There was consensus that the preference was for neighborhood schools but there was not enough to truly reflect the body they would have liked to have received. Part of that, she felt, was because they haven't had a good amount of email addresses for the parent community and is something they're working on right now with their new web system; social networks online. Their new superintendent has been has been generating a better way to make sure that parents participate in this information when they send it home. **Councilor Theken** asked since they're not getting the participation from the parents, what do they do to get information out to the parent community. **Ms. Gilman** responded they do backpack stuffers for the elementary

schools. Plum Cove has a parent's Google website. The middle school has a fairly good email "repertoire" of communicating although it is mixed as to how many parents read it. They're trying for a rate of 98% readership for email communication and connecting to parents and guardians proactively which is one of the superintendent's goals for this year. They value the input from the parents and guardians. **Councilor Theken** noted she had done a survey on her online social network and got a good response. While she felt technology had changed, they only had two weeks. She wondered if there was any way the School Committee through their PTO's and all other lines of communication, to inform the parent/guardian community of what is coming up before them on September 27th. She asked them to at least try to make this communication. The Councilor advised she would be voting against the ballot question as it was written.

This matter of the ballot question is continued to the City Council meeting of September 27, 2011.

MOTION: On motion by Councilor Whynott, seconded by Councilor Verga, the Planning & Development Committee voted 3 in favor, 0 opposed to recommend to the City Council to permit the Fish Box Derby, Inc., to conduct their annual Fish Box Derby on Sunday, September 18, 2011 from 8:30 a.m. 4:00 p.m. in an area from Flanagan Square on Rogers Street to Manual Lewis Street. At 8:30 a.m. Rogers Street will be made one way with appropriate signage in that immediate area and at 10:45 a.m. Rogers Street from Flanagan Square to Manual Lewis Street will be blocked completely to vehicular traffic according to the procedures put in place by the Gloucester Police Department. At that time Main Street will be made two-way from Manual Lewis Street to Flanagan Square. The roadways will re-open to vehicular traffic cleared of all lane markers and other race signage and trash at the expense of the Fish Box Derby Committee by 5:00 p.m. that same day. Police and Fire Department approvals for all plans are on file with the P&D Committee as is a copy of the Derby Race Route and a Certificate of Insurance naming the City of Gloucester as the Certificate holder.

DISCUSSION:

Councilor Ciolino expressed this was a well run annual event which raises funds for scholarships. Gorton's of Gloucester is a major sponsor and allows the Fish Box Derby to use their property as well. **Council President Hardy** extended thanks to Gorton's, Inc. for their community spirit and generosity.

MOTION: On motion by Councilor Ciolino, seconded by Councilor Verga, the City Council voted 9 in favor, 0 opposed to recommend to the City Council to permit the Fish Box Derby, Inc., to conduct their annual Fish Box Derby on Sunday, September 18, 2011 from 8:30 a.m. 4:00 p.m. in an area from Flanagan Square on Rogers Street to Manual Lewis Street. At 8:30 a.m. Rogers Street will be made one way with appropriate signage in that immediate area and at 10:45 a.m. Rogers Street from Flanagan Square to Manual Lewis Street will be blocked completely to vehicular traffic according to the procedures put in place by the Gloucester Police Department. At that time Main Street will be made two-way from Manual Lewis Street to Flanagan Square. The roadways will re-open to vehicular traffic cleared of all lane markers and other race signage and trash at the expense of the Fish Box Derby Committee by 5:00 p.m. that same day. Police and Fire Department approvals for all plans are on file with the P&D Committee as is a copy of the Derby Race Route and a Certificate of Insurance naming the City of Gloucester as the Certificate holder.

Scheduled Public Hearings:

1. PH2011-054: Amend GCO Sec. 22-287 "Disabled Veteran, handicapped parking" by adding Oak Street #6

This public hearing is opened.

Those speaking in favor:

Those speaking in opposition: None

Communications: None.

Questions: None.

This public hearing is closed.

MOTION: On motion by Councilor Mulcahey, seconded by Councilor Tobey, the Ordinances & Administration Committee voted 3 in favor, 0 opposed to recommend to the City Council to AMEND GCO Sec. 22-287 (Disabled Veteran, handicapped parking) by ADDING one (1) handicapped parking space at #6 Oak Street.

MOTION: On motion by Councilor Theken, seconded by Councilor Ciolino, the City Council voted BY ROLL CALL 9 in favor, 0 opposed to AMEND GCO Sec. 22-287 (Disabled Veteran, handicapped parking) by ADDING one (1) handicapped parking space at #6 Oak Street.

2. PH2011-055: Amend GCO Sec. 22-270.1 "Resident Sticker Parking Only" by adding #17-21 Commercial Street Westerly side, in a southerly direction to its intersection with Beach Court, both sides for its entire length

This public hearing is opened.

Those speaking in favor: Tom Parisi, 19 Commercial Street.

Those speaking in opposition: Robert McGillivray, 49 Lincoln Park.

Communications: None.

Questions:

Councilor Curcuru asked that the Administration review resident parking in this area by next summer, possibly in the spring. **Mr. Duggan** confirmed they could do that.

This public hearing is closed.

MOTION: On motion by Councilor Tobey, seconded by Councilor Mulcahey, the Ordinances & Administration Committee voted 3 in favor, 0 opposed to recommend to the City Council to AMEND GCO Sec. 22-270.1 (Resident Sticker Parking Only) by ADDING "#17-#21 Commercial Street westerly side, in a southerly direction to its intersection with Beach Court, AND Beach Court both sides for its entire length."

MOTION: On motion by Councilor Theken, seconded by Councilor Tobey, the City Council voted BY ROLL CALL 9 in favor, 0 opposed to AMEND GCO Sec. 22-270.1 (Resident Sticker Parking Only) by ADDING "#17-#21 Commercial Street westerly side, in a southerly direction to its intersection with Beach Court, AND Beach Court both sides for its entire length."

3. PH2011-056: Amend GCO Sec. 22-291 "Tow Away Zone" by adding #17-21 Commercial Street westerly Side, in a southerly direction to its intersection with Beach Court, both sides for its entire length

This public hearing is opened.

Those speaking in favor: Tom Parisi, 19 Commercial Street.

Those speaking in opposition: Robert McGillivray, 49 Lincoln Park.

Communications: None.

Questions: None.

This public hearing is closed.

MOTION: On motion by Councilor Tobey, seconded by Councilor Mulcahey, the Ordinances & Administration Committee voted 3 in favor, 0 opposed to recommend to the City Council to AMEND GCO Sec. 22-291 (Tow Away Zone) by ADDING "#17-#21 Commercial Street westerly side, in a southerly direction to its intersection with Beach Court, AND Beach Court both sides for its entire length."

DISCUSSION:

Councilor Ciolino expressed his support stating although this is not a perfect solution, he recognized there is an on-going parking problem in this area. **Councilor Verga** would support this and look forward to any solutions the Administration may have on the matter. **Councilor Whynott** expressed concern of using resident sticker parking to solve parking issues, but he would support this tonight. **Councilor Curcuru** expressed his support, and would submit a Council Order for further review by the Traffic Commission and the O&A Committee.

MOTION: On motion by Councilor Theken, seconded by Councilor Mulcahey, the City Council voted BY ROLL CALL 9 in favor, 0 opposed to recommend to the City Council to AMEND GCO Sec. 22-291 (Tow Away Zone) by ADDING "#17-#21 Commercial Street westerly side, in a southerly direction to its intersection with Beach Court, AND Beach Court both sides for its entire length."

4. PH2011-057: Proposed Fire Department's Annual Radio Box Monitoring Fee

This public hearing is opened.

Those speaking in favor:

Fire Chief Phil Dench explained now that the system is finished with the wiring for master boxes throughout the City, and an annual monitoring fee of \$250 for 50 billable master boxes will help the Fire Department maintain the system going forward.

Those speaking in opposition: None.

Communications: None.

Questions: None.

This public hearing is closed.

MOTION: On motion by Councilor McGeary, seconded by Councilor Hardy, the Budget & Finance Committee voted 3 in favor, 0 opposed to recommend to the City Council to institute an annual Radio Box Monitoring Fee as proposed in a memorandum by the Fire Chief dated July 28, 2011 (on file) of \$250.00 (Two Hundred and Fifty Dollars).

MOTION: On motion by Councilor McGeary, seconded by Councilor Hardy, the City Council voted **BY ROLL CALL 9** in favor, 0 opposed to institute an annual Radio Box Monitoring Fee as proposed in a memorandum by the Fire Chief dated July 28, 2011 (on file) of \$250.00 (Two Hundred and Fifty Dollars).

FOR COUNCIL VOTE:

**1. Motion to Rescind City Council Vote taken on January 11, 2011 re: City Charter Section 9-5
"Submissions of Proposed Measure to Voters"**

MOTION: On motion of Councilor Hardy, seconded by Councilor Whynott the City Council voted by **ROLL CALL 9** in favor, 0 opposed, to **RESCIND** the vote taken on January 11, 2011 in reference to City Charter Section 9.5 "Submission of Proposed Measure to Voters."

2. Decision to Adopt: SCP 2011-003: Dolliver's Neck #9, GZO Sec. 5.5.2. Sect. 5.5.3 and Sec. 1.8.3

MOTION: On motion of Councilor Ciolino, seconded by Councilor Theken, the City Council voted by **Roll Call 9** in favor, 0 opposed, to **ADOPT** Special Council Permit 2011-003 "Dolliver's Neck #9, GZO Sec. 5.5.3. and Sec.1.8.3.

**3. Decision to Adopt: SCP2011-004: Gloucester Crossing #1 and #341, GZO Sec. 2.3.2(9) Animal Hospital
And Sec. 2.3.2(6) Animal Grooming**

MOTION: On motion by Councilor Ciolino, seconded by Councilor Theken, the City Council voted **BY ROLL CALL 9** in favor, 0 opposed, to **ADOPT** the decision for SCP2011-004 Gloucester Crossing #1 and #341, GZO Sec. 2.3.2(9) Animal Hospital

MOTION: On motion of Councilor Whynott, seconded by Councilor Theken, the City Council voted **BY ROLL CALL 9** in favor, 0 opposed to **ADOPT** the decision for SCP2011-004 Gloucester Crossing #1 and #341, GZO Sec. 2.3.4(6) Animal Grooming.

Unfinished Business: None.

Individual Councilors' Discussion including Reports by Appointed Councilors to Committees: None.

Councilors' Requests to the Mayor:

Councilor Tobey congratulated the Fire Department for a "superb" program on September 11th. **Councilor McGeary** reminded the public there are two forums the following day at Cruiseport on the subject of the AGH/Lahey Clinic affiliation; one from 7:30 a.m. to 9:00 a.m. and one from 6:00 p.m. to 7:30 p.m. **Councilor Ciolino** noted that the last downtown "Block Party" takes place on Saturday, September 17th with a lot of

entertainment and the restaurants open with sidewalk seating as well. He encouraged the public to come and celebrate. On Sunday morning, September 18th, is the Fish Box Derby taking place on Rogers Street which is a fun event. **Councilor Mulcahey** thanked the citizens of Gloucester for their hard work in supporting the Councilors with their sharing of information and their participating in the decisions they have to make which makes it easier for them as Councilors when they do. **Councilor Theken** reminded the public to call the Rose Baker Senior Center with all Cape Ann residents welcome, 978-281-9765, to let them know if they will be attending the informational seminar on October 18th which will allow them to see if they need a larger venue, such as Kyrouz Auditorium. Open enrollment has now changed to an earlier date, October 15th to December 7th. She stated medications change, co-pays change as do deductibles. As she will be in a two week training program she will not be at the Rose Baker Senior Center the first two weeks in October. She urged seniors to be careful and not to view all mail as junk mail because it may contain important information regarding their medical insurance. But if they get a letter or postcard that this looks like social security telling them they will lose their social security if they don't give a donation of \$10 or \$15 dollars, she warned seniors that the government does not ask them for money that way. It is a scam and immediately throw it away and cautioned there are other scams as well constantly being sent through the mail and to be vigilant. During open enrollment is the height of the scams to seniors. She reiterated her call for caution. She also urged that no one give their personal information over the telephone to anyone. Anyone who indicates they know them should already have their information. **Councilor Hardy** noted the Lane's Cove Fish Shack Committee will meet on Tuesday, September 20th at 7:00 p.m. at the Lanesville Community Center, 8 Vulcan Street. The agenda includes an open public forum including a summary of activity by the Committee to date and a presentation of possible approaches. The Committee is looking for maximum public participation and feedback. All are welcome.

A motion was made, seconded and voted unanimously to adjourn the meeting at 11:00 p.m.

**Respectfully submitted,
Sharon George
Substitute Recorder**

**And Revisions By:
Dana C. Jorgensson
Clerk of Committees**

DOCUMENTS/ITEMS SUBMITTED AT MEETING:

- **Presentations by Mr. Hanover and Dr. Grant**