



**CITY OF WORCESTER, MASSACHUSETTS**  
Department of Health & Human Services  
Division of Public Health



**Public Health**  
Prevent. Promote. Protect.

Matilde Castiel, MD  
Health & Human Services  
Commissioner

Karyn E. Clark  
Public Health  
Director

**DATE:** April 1, 2019  
**RE:** WORCESTER BOARD OF HEALTH MEETING MINUTES  
**START TIME:** 6:30 PM  
**LOCATION:** WORCESTER DIVISION OF PUBLIC HEALTH  
25 MEADE STREET, CONFERENCE ROOM 109  
WORCESTER, MA 01610

**Welcome & Introductions:**

Meeting was called to order at 6:30pm.

Members present: David Fort, Chair, Edith Claros, PhD, Vice Chair, Jerry Gurwitz, MD and Chareese Allen WDPH Staff: Karyn Clark, Director of DPH, Michael Hirsh, MD, Medical Director of DPH

**Approval of the March 4, 2019 Minutes:**

Motion to approve the WBOH meeting minutes of March 4, 2019 made by Jerry Gurwitz, MD Second - Edith Claros, PhD, Vice Chair - Approved

**Review and act on presentation regarding diversity on City Boards and Commissions:**

Agenda item has been moved to the May BOH meeting.

**Review and act on continued discussion of unclaimed bodies:**

Karyn Clark, Director of DPH: Reviewed with the Board their discussion at the last BOH meeting on March 4, 2019 regarding unclaimed bodies at the UMass Memorial morgue. There are a couple of different issues; what's happening at UMass and wanting to help this health care institution deal with this issue. But also of interest to us, is working with funeral home directors on a long term sustainable solution. There's one particular funeral home in Worcester that assists with this situation when loved ones are not claiming these bodies. Unfortunately costs are not always covered. We want to work with the state delegation and funeral homes to look at how we can address this issue long term.

David Fort, Chair: If a body is unclaimed, what is the process?

Ann Connolly, Coordinator of Decedent Affairs - UMass Memorial: We conduct a weekly report to inventory bodies to see who has been claimed and who hasn't been claimed. If a body has not been claimed in 7 days, we start a search for kin. The Social Work Department handles the search (look into the medical documentation or agency where the decedent was living for next of kin and makes a phone call or sends out a certified letter or put a notice in the newspaper). When a thorough

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search has been conducted and we are still not able to locate next of kin, we then would look to manage disposition ourselves. Sometimes we are able to find next of kin but they do not want to deal with the burial or cremation, so the body is left unclaimed.

Edith Claros, PhD, Vice Chair: What is the average number of bodies?

Ann Connolly, Coordinator of Decedent Affairs - UMass Memorial: 20 – 30 per year.

David Fort, Chair: What happens if a family wants to do a DNA ancestry look up in the future?

Ann Connolly, Coordinator of Decedent Affairs - UMass Memorial: We have a name and more information on the decedent.

Susan Mills, Director of Operations, UMass Memorial: In the case of these decedents, they have come to our hospital for care and treatment so we have identification and medical records. We try to have a proper and respectful way to handle the remains unclaimed bodies.

Karyn Clark, Director of DPH: The new state law that went into effect last year will certainly help with this public health and safety issue. There are a large number of unclaimed bodies. These bodies are not embalmed and can be there for some time. We definitely need to help the hospital with this issue and I think this is financially more advantageous. Perhaps some of the other funeral homes can assist with the issue as well.

**Review and act on presentation of CDC REACH grant:**

Casey Burns, Director, Coalition for Healthy Greater Worcester: We are a community based coalition which is responsible for doing community engagement and improving overall participation and public health strategies to improve health. The City of Worcester received funding through the Center for Disease and Control and Racial and Ethnic Approach to Community Health (REACH) and has partnered with the Coalition for a Healthy Greater Worcester, UMass Memorial Healthcare, Family Health Center of Worcester and Edward M. Kennedy Health Center. The CDC's priority areas are nutrition, physical activity and clinical community linkages. This is five year project and the priority population is Latino Americans. We want to increase engagement participation as well as giving feedback to public health strategies on how we can improve the responsiveness, needs and opportunity for leadership development.

**Review and act on draft position statement for Access to Care and Diversity (CHIP):**

Casey Burns, Director, Coalition for Healthy Greater Worcester: In the Access to Care priority area, there are specific strategies around the elevation and utilization of Community Health Workers. We would like to address barriers that have historically prevented the full integration of Community Health Workers into public and private healthcare systems. (draft position statement was distributed).

**Review and act on update relative to syringe services:**

Martha Akstin, AIDS Project Worcester: (presentation distributed) The syringe services program started on March 1, 2016. As of December 31, 2018 we have enrolled 1,658 individuals in the program. We see between 400 – 450 individuals per month for sterile syringes, bleach kits, Narcan, wound care kits and other harm reduction materials. On January 9, 2018, we started a weekly

medical clinic at AIDS Project Worcester in partnership with UMass Memorial. It's an opportunity to have a conversation with individuals who inject drugs and to talk with them about their housing situation and any medical issues. We also talk about detox and treatment when they are ready. Our average user is a single white English speaking male between the ages of 25 – 44. We have a health navigator, who will help individuals enroll in Mass Health. The majority have Hepatitis C. Individuals have returned more syringes than distributed. We have 2 teams that go out and collect syringes and talk about the importance of using clean syringes and if they are sharing to use the bleach kit. We are part of the pilot program for the State for Narcan, beginning in 2007. In 2018, we did 1418 enrollments, 1029 refills and used 217 Narcan during an overdose.

David Fort, Chair: The needle exchange program is working and successful.

Karyn Clark, Director of DPH: This is a difficult population to gain their trust. AIDS Project Worcester has great relationships with these individuals. We have been working to vaccinate and educate IV drug users and homeless, especially during the Hepatitis A outbreak – working with APW has really helped WDPH to identify this population and work to gain their trust to receive a vaccination.

Motion to adjourn; Edith Claros, PhD, Vice Chair, second by Chareese Allen  
**Adjourn:** 7:38pm

**Next Meeting -- May 6, 2019 at 6:30pm**

**Future Meeting Topics:**

Invite Peter Stefan and Medical Examiner to come in and speak on unclaimed bodies

Presentation regarding diversity on City Boards and Commissions

Vote on access to care position statement

Vote on cremation of unclaimed bodies

Update relative to communicable diseases

Discussion for Central MA Mosquito Control Project