

Worcester Board of Health Meeting Meeting Minutes Meeting Held at 25 Meade St. Room 109 Monday, January 22, 2024 6:30 pm Minutes by Aidan Giasson

Welcome and Introductions

Board Members Present: Interim Chair Frances Anthes, Vice Chair Chareese Allen, Gary Rosen, Leopoldo Negrón Cruz

Staff Present: Dr. Mike Hirsh, Medical Director; Soloe Dennis, Director of DPH and CMRPHA; Ian Wong, Deputy Director of DPH; Alissa Errede, Chief of Emergency Preparedness; Irene Nyanuba, REACH Vaccine Program Manager; Sandy Amoakohene, Built Environment and Resiliency & REACH Program Coordinator; Engle Torres, REACH Program Coordinator; Ydalia Heimann, REACH Program Manager

Guests Present: Henry Schwan, Worcester Telegram & Gazette;

Review and Approve December Meeting Minutes

Leopoldo Negrón Cruz moved to approve the minutes from December 4th, 2023. Gary Rosen seconded the motion. Negrón Cruz, Rosen, and Anthes all voted in favor of approving the minutes as written.

Chareese Allen arrived to meeting after minutes were approved.

Bill H.166 and H.173 Letter of Support

Frances Anthes confirms the plans to send the letter of support to the Worcester Delegation, which includes 3 senators and 5 representatives. Gary Rosen proposes that the letter is sent to all Massachusetts State Senators and Representatives.

Gary Rosen moves that the Letter of Support for Bill H.166 and H.173 be mailed to Worcester Delegation by US Mail and that it also be provided to all members of Massachusetts House and Senate either by US Mail or Email. Mr. Rosen would also like all members of the BOH sign the letter. Chareese Allen seconded the motion, and all voted in favor.

COVID and Communicable Disease Update

Dr. Hirsh provided an update on COVID infections. There has been a recent spike in COVID cases in Central Massachusetts. While it has taken occupancy in our hospitals, neither Saint Vincents nor UMass Memorial have had to alter their daily routine other than reestablishing a mask mandate in clinical areas. A large problem is many hospital workers contracting COVID, but the severity has been the equivalent of a bad cold. The UMass Memorial emergency rooms (ER) has been on emergency alert on and off for the last three weeks because of the high occupancy in inpatient beds and in the ER. The ER respiratory cases are a combination of RSV, pneumonias, flu, and COVID.

The incidence of people who have gotten sick who got the booster this fall is much lower than those that did not get the booster. Dr. Hirsh said that we need to get the message out that, like the flu, every fall we will need to get a COVID booster. Only 10% of the population of central MA got the booster this fall.



Dr. Hirsh stated that medical providers have been expanding the use of Paxlovid. It was first reserved for the high-risk group, but now physicians are giving it to 20- and 30-year-old people because long COVID cases are almost always cases that were very severe and not treated at all or with anything stronger than Tylenol.

Dr. Hirsh said that covid test kits within two years of the expiration they are usually still good. The original tests that came out in the Fall of 2020 are probably not good. You can apply to get 4 kits through USPS on the CDC website.

Scientists are working on combining the flu, COVID and RSV vaccine to make it more efficient for the public for next fall.

Division COVID-19 After Action Report

Alissa Errede the Chief of Emergency Preparedness presented the COVID After Action Report. The purpose of this report is to identify DPHs strengths, challenges, and opportunities for growth for future events.

Strengths

Prior to COVID in March 2020 the Division and Region 2 Health and Medical Coordinating Coalitions (HMCC) had previously written plans in place, relationships with community partners, internal, and external state agencies. The Division had completed Incident Command System trainings that allowed for easy integration into the city's Emergency Operations Center (EOC). The Division had previous experience responding to novel viruses and diseases including Ebola and H1N1, which made it easy for staff to assume roles outside of their normal job descriptions with minimal training.

Challenges

All division staff were considered essential personnel, but when they found out how transmissible the virus was, they started working remotely even during the active response. About half of the staff were reporting to the EOC and going into the office. While there was a process in place to for volunteers to assist, things got disjointed because so many people wanted to assist. The Division's Emergency Operation Plan needed updating related to epidemiology and environmental health. Given the length of the response there was an increase in staff turnover.

For the future, they will be working with other City department to update plans and policies as appropriate. To address staff changes, staff will develop training and exercise plans to fill knowledge gaps as many have not had experience responding to large scale events.

In response to Mr. Rosen's question on stockpiling PPE Ms. Errede responded that there are many challenges they are trying to address including finding a proper storage space and the expiration of the products.

REACH Grant Program Accomplishment Presentation

REACH: Racial and Ethnic Approached to Community Health

Ydalia Heimann, Program Manager reflected on the 5 year REACH grant which was completed in September 2023. The overarching goal of the grant was to support health equity for the Latino/Latinx



community in Worcester which is the city population with the highest burden of chronic diseases. The 5 focus areas of the grant were food systems, nutrition standards, built environment, breastfeeding, and clinical linkages.

Sandy Amoakohene who worked on the food systems strategy stated that they focused specifically on food security in Worcester, with interest on particular access to food for families in need as well as access to public benefits. Five commercial fridges were donated to Worcester food pantries to increase their capacity to provide fresh produce. They also worked with the Regional Environmental Council to promote and educate people on the SNAP and HIP food voucher programs. If you are eligible for SNAP, you are automatically eligible for HIP which can be used to purchase fresh produce at farmers markets and farm stands. COVID created an increase in food insecurity which has not decreased. The food pantries have been overwhelmed by the number of families and will need continued resources to support families in need.

Engle Torres worked on the nutritional standards which was supported in two ways the Client Choice Model and the SWAP Tool. Both were implemented at two local food pantries. The Client Choice Model is a strategy of organizing and arranging a food pantry in such a way that it feels like a grocery store. This approach provides the patrons of the pantry with dignity and respect so that they are able to choose their own foods and eliminate food waste. In a diverse city like Worcester, not everyone knows how to use all the food ingredients provided in a prebagged system. The SWAP pilot program encouraged healthy choices by using a color-coded system of green, yellow, and red that signify the nutritional value of the foods.

Ms. Amoakohene discussed the built environment work which focused on multimodal transportation, access to parks, walkability, and access to public transport. A big focus of this work was on the walk audits using a walkability assessment tool, stakeholder gathered and walked through certain neighborhoods to see how walkable the space is. They completed five community walk audits in Worcester neighborhoods and also conducted the Chandler Street Redesign project survey with residents face-to-face (Main Street and Park Avenue). There were challenges on the tensions between what needed to be reported to the grant and what really needed to be done from the municipal perspective.

Ms. Torres discussed the breastfeeding strategy work which she mentioned had more accomplishments than could be listed. Listed accomplishments included the training of 26 doulas, the breastfeeding suite at Polar Park, the purchase of the Lactation tent for public use, and funding the Baby Café, a bilingual breastfeeding education support group.

Ms. Heimann reviewed how they focused on improving connection between the clinical and non-clinical sectors. This included the development of a Community Help platform and connecting emergency department with human services agencies to help address social determinants of health (i.e. food pantries).

REACH's communication partner was the Latino Education Institute and they represented WDPH at community events, collected data through surveys and focus groups, and supported promotional efforts through all forms of media.

There was additional money given to address Covid-19 and Influenza after the pandemic started and lasted 3 years. Irene Nyanuba the Vaccine Program Manager stated that this money was given in response



to the decrease in vaccination rates the country has been experiencing. The strategies used to increase vaccination rates included data informed educational campaigning, active community engagement and partnership for promotion of vaccines, and coordinating vaccination providers with community stakeholders.

Division Director Soloe Dennis announced that they are working with the city to continue the REACH work by leveraging city and other grant funds. The staff working on this grant are being given new job descriptions that correlate with the work REACH was doing.

Next Meeting Dates and Topics

January 29 at 6:30 Tobacco Violation Hearing

February 5 at 6:30Communicable Disease and COVID Update Climate Change Impact on Health

Adjournment

<u>Leopoldo Negrón Cruz moved to adjourn the meeting at 8:35 PM. Chareese Allen seconded the motion.</u> All voted in favor.

Worcester Board of Health

January 22, 2024





• Sustained pandemic event lasting 3+ years

• New virus that didn't have a vaccine

• Multiple strains and waves

Purpose

- Review DPH response to COVID-19
- Identify strengths and innovations
- Identify challenges and opportunities for growth
- Identify ways to prepare for other large-scale events

Strengths Identified

Division/Region 2 HMCC had previously written plans in place, including an Emergency Operations Plan, Continuity of Operations Plan, and a Response Plan Division serves as the Regional ESF-8 through its role as the HMCC Sponsoring Organization, which provided the division with a real-time regional picture and access to a regional cache (when appropriate)

Previously established relationships with community partners, internal departments, and external state agencies

Strengths Identified

Division leadership had completed Incident Command System trainings that allowed for seamless integration into the City's Emergency Operations Center

Division had prior experience responding to novel viruses/diseases including Ebola and H1N1

Staff assumed roles outside of their normal job description with minimal training

Lessons Learned/Challenges

- While all Division staff were considered essential personnel, many staff weren't part of the active response.
- While there was an established process in place for volunteers to assist with the response, this process was only followed within the first few weeks of the response
- The Division's EOP required updating, specifically as it related to Epi and EH

Lessons Learned/Challenges

- Not all staffhad completed Incident Command System (ICS) training
- Given the length of the response, burnout and turnover increased

Next Steps

Work with other City departments to update plans and policies, as appropriate.

Develop a training and exercise plan to address knowledge gaps

Questions?

REACH

Racial and Ethnic Approaches to Community Health

WORCESTER

Worcester Board Of Health Meeting January 22nd, 2024

What is REACH?

The City of Worcester Division of Public Health was awarded the REACH grant funded by the Centers for Disease Control and Prevention in 2018.

REACH: Racial and Ethnic Approaches to Community Health

Purpose: REACH has an overarching goal of health equity for the Latino/Latinx community in Worcester. The 5-year grant aimed to support policies, programs and local resources focused on 5 main areas. An additional supplement was added in 2020 to address COVID-19 and the flu.

Focus Areas













Food Systems Nutrition Standards Built Environment

Breastfeeding

Clinical-Community Linkages

Covid-19/Flu

The approach was to work to understand and address the challenges that our Latino/Latinx communities face. We partnered with our community members to increase access to existing programs. We also supported organizations and programs that promote the health of Latinos/Latinxs in Worcester.

Food Systems

This strategy addresses food insecurity in Worcester and aims to increase access to SNAP and HIP program benefits.

Accomplishments

► Five commercial refrigerators were donated to Worcester food pantries to increase capacity to provide fresh produce.

- Fridge Recipients:
 - Catholic Charities of Worcester
 - Yes We Care, Inc.
 - El Buen Samaritano Food Program
 - Green Island Neighborhood Center
 - Pernet Family Health Services.
- Promotion of SNAP and HIP programs through the Regional Environmental Council



Food Systems

Challenges

The number of families in need of food is increasing significantly and surpassing the capacity of food pantries.

Lessons learned

Food pantries in need of operational capacity support as food insecurity increase.



Nutrition Standards

This strategy was supported in two ways, implementing the Client Choice Model and SWAP Tool.

Accomplishments: The SWAP tool and Client Choice Model were successfully implemented in two local pantries, El Buen Samaritano and Pernet Family Health Services.











Challenges of Nutrition Standards strategies

SWAP Tool Feedback:

- Issues with food procurement
- Unintended consequences

Client Choice Model Feedback:

Lack of space makes it challenging

Built Environment

Accomplishments

- Conducted five community walk audits to assess walkability in Worcester neighborhoods including Green Hill, Indian Lake, Chandler Street, Webster Square, and Woodland/Claremont Academy.
- Assisted in coordinating the Green Hill Demonstration Project which involved an art mural installation at the Lincoln/Harlow/McKinley Street intersection in 2021.
- ► Conducted the Chandler Street Redesign project survey with residents face-to-face in English and Spanish around the Chandler street area through Latino Education Institute staff and Holy Cross student interns.
- Partnered with UMass Prevention Research Center and WalkMassachusetts (previously known as WalkBoston) to train a pilot cohort of five community organizations on how to organize and conduct community walk audits.



Built Environment

Challenges

Alignment between grant requirements and city processes.

Lessons

Importance of cross-sector and interdepartmental collaboration.



Breastfeeding



Accomplishments:

- Funded the Baby Café
- Trained 26 Doulas
- Breastfeeding suite at Polar Park
- ► Lactation tent for public use

Challenges:

Certified Lactation Consultant Training

Lessons learned:

The Certified Lactation Consultant training could be a different format, or a different online program can be used for higher rates of success.

Clinical-Community Linkages

Focuses on improving connections between clinical and non-clinical sectors.

> Development of Community Help platform and supported community health worker to track bi-lateral referrals.

Connect Emergency Departments with human service agencies addressing social determinants of health (i.e food pantries).



Community Engagement & Outreach

REACH communications partner

- Latino Education Institute
 - Represented WDPH at community events by connecting with individuals and agencies to provide education and promotion on the five REACH strategy areas
 - Collected data through surveys and focus groups to support REACH implementation
 - > Supported promotional efforts through social media, radio ads, etc.

REACH Partners

- UMass Medical School Preventive Research Center
- UMass Memorial Medical Center
- UMass Memorial Health Office
- UMass Memorial Prenatal and Fetal
- Family Health Center
- ► WIC
- Baby Cafe
- ► El Buen Samaritano Food Pantry
- Pernet Family Service Food Pantry
- Worcester Healthy Baby Collaborative (WHBC)

- > Latino Education Institute
- Regional Environmental Council (REC)
- Accompany Doula Care
- Martinez Consultant
- Mass Audubon Society
- Walk Massachusetts
- Green Hill Neighborhood Association
- > Central MA Regional Planning Commission

Thank you!

Worcester Division of Public Health Vaccine Program REACH COVID-19/Influenza

Presented by:
Irene Nyanuba,
Vaccine Program Manager

Board of Health Meeting January 8, 2024





Vaccine education event at Good Shepherd Ghana Methodist Church January 2022



Vaccine education event at Ilglesia Ministerios La Trinidad, January 2022

Presentation Outline

- Introduction
- REACH COVID-19/Flu Program
- Identified Problems
- Identified Opportunity
- The Church (Faith-Based) Initiative
- Program Achievements
- Lessons and recommendation



Introduction

Profile of the City of Worcester, Worcester County, Massachusetts

The second largest city in MA and in New England

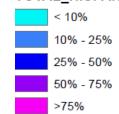


Worcester City County Subdivision, Worcester County, MA

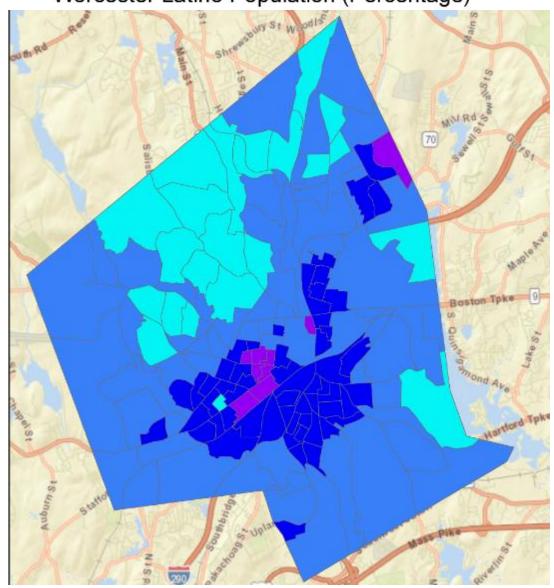
49% of total population Males

51% of total population Females

Legend 2020 US Census Block Groups TOTAL_HISPANIC_LATINO_PCT



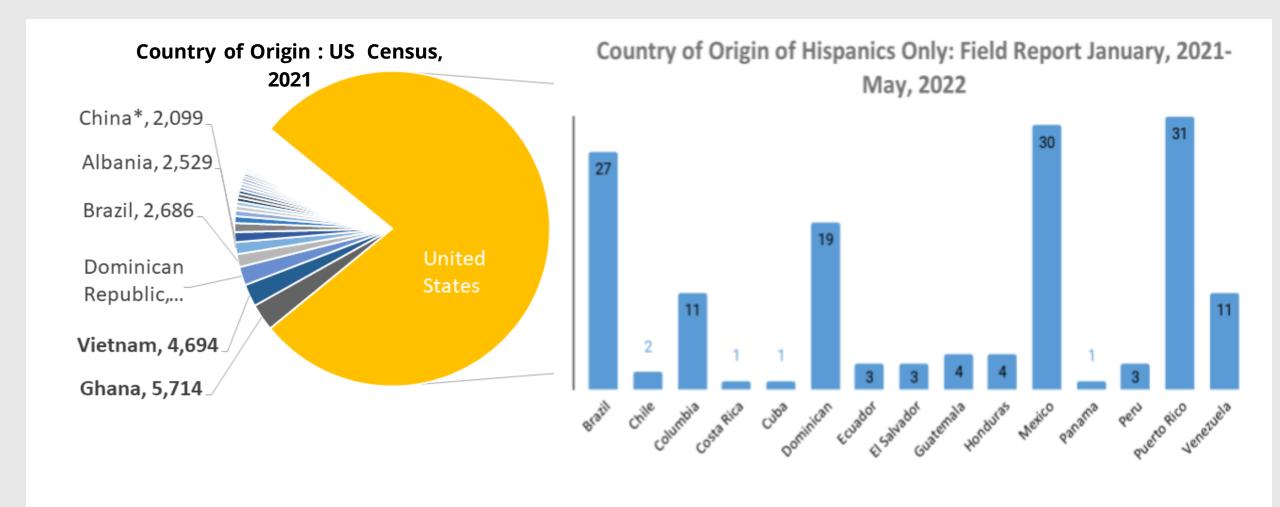








Introduction





REACH COVID-19/Flu Program

• The Racial and Ethnic Approaches to Community Health (REACH) COVID/Flu program was established to increase vaccination rates for Hispanic/Latino communities and other minority populations, through the improvement of COVID-19/Flu and vaccine knowledge and increased vaccine accessibility.

Strategy included;

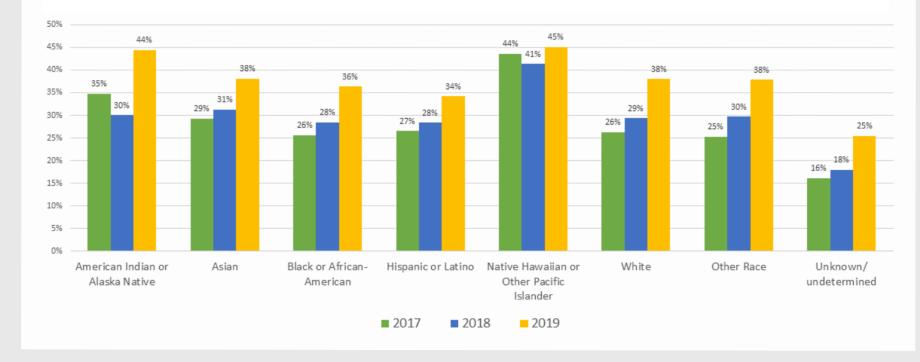
- Data informed educational campaigning.
- Active community engagement and partnership for Covid-19 and flu vaccine promotion.
- Coordinating vaccination providers with community stakeholders for the establishment of vaccination sites.



Identified Challenges

- Low vaccine clinic attendance (especially for Black
 - and Brown people)
- Inadequate health and vaccine knowledge
 - Information access
 - Language barrier
- Vaccine misconceptions
- Vaccine hesitancies and refusal
- Competing health needs
- Data collection

Influenza Immunization Rates for Worcester by Race and Ethnicity: MIIS 2017 -2019

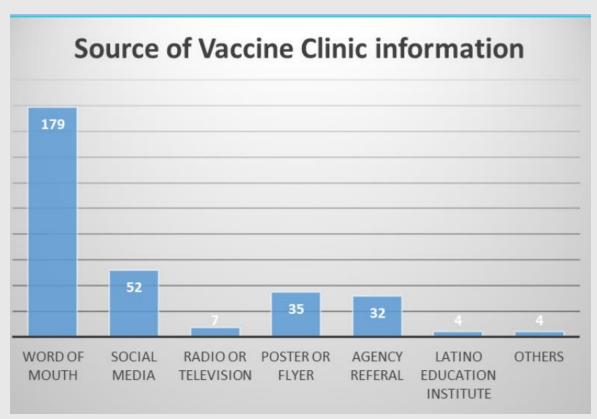


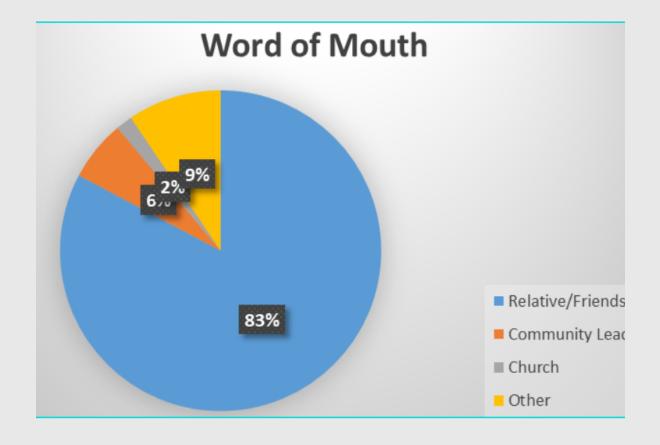




Identified Opportunities

- Supportive leadership
- Resource availability
- Active community organization
- Active community members asking questions, commenting, providing feedback, and responding to surveys









Key pillars of implementation



Effective communication

- Languages
- Mode of communication
- Cultural contextual





Data monitoring

- WDPH Epidemiology Data
- American immunization managers (AIMs) Data
- City of Worcester Dashboard
- REACH COVID-19 program survey.
- REACH COVID-19 program Field Report
- Other research finding of relevence

Key pillars of implementation



Active community partnerships

- Community Leader
- Local Business owners
- Faith based Leaders
- Outreach Partners
- Trusted Mesenger
- Improving Representation



Increasing Vaccination Sites

- Statice points
- Mobile Sites at School,
- Faith institution
- Local business sites
- Housing units



Key pillars of implementation



Christain Community Church Event: Discussing Diabetes and Vaccination, September 2023

- Faith Based approach discussion forums to provide accurate vaccine information in culturally-tailored and appropriate languages
- Building the capacity of church members to continue with educating their community
- The initiative integrates vaccination education with communities' health needs to increase engagement
- Vaccinations are also provided during the event

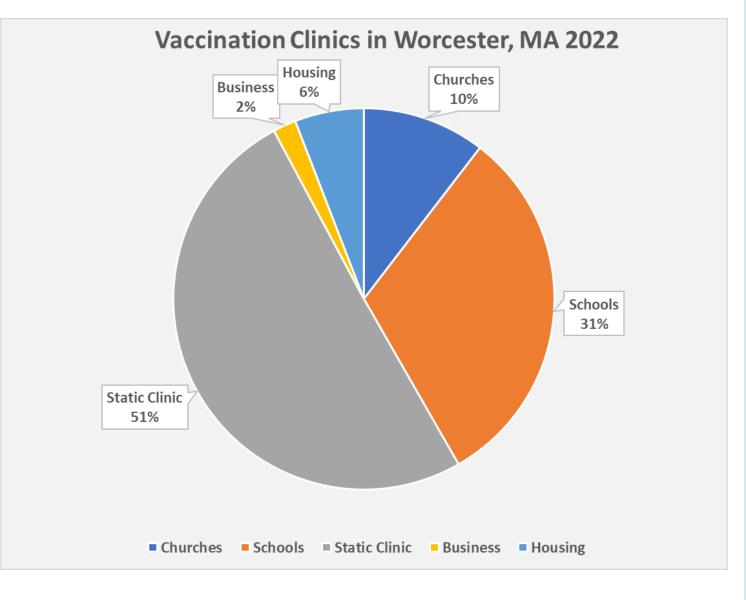


Achievements

- 1. Communication
- Amplifying the Voices of Trusted Messenger, Radio Segment, Public Service Announcement (PSAs) of short videos on COVID-19 and flu, and Faith-Based partnership Documentary.
- 2. Successful survey and data utilization.
- 3. Increased community partnership.
- Expanded the number of Trusted Messengers by 55% (the churches contributed 26%) .

Achievements

- 4. Created 767 number of mobile vaccination sites (Churches contributed to 10%)
- 5. Two successful abstract and presentation on national stages
- American Public Health Association Annual Meeting and Expo- Community Engagement and Vaccination: The Church Initiative
- American Immunization Managers Leadership Conference- *The Church Initiative and Trusted Messenger Expansion: A Combined Effort to Increase Vaccine Uptake for a Successful Immunization Program*



Worcester Vaccinations Administered at Faith-Based Venue

As of December 2022, 78% of Worcester

population had received at least one dose of the

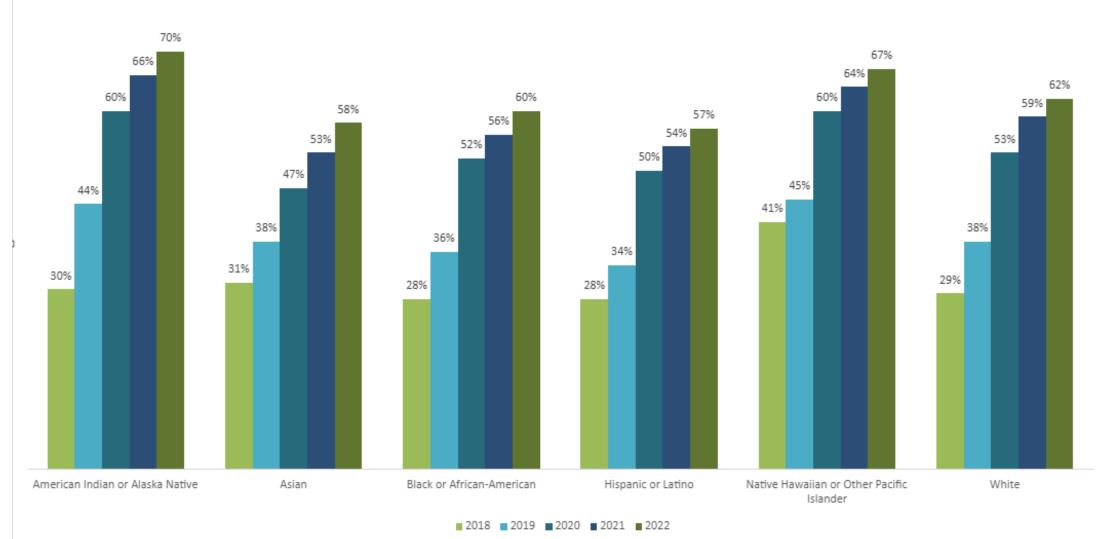
COVID-19 vaccine. 80 faith-based institutions

contributed to 10 % of all mobile clinics. These

clinics resulted in 1,770 (4.33%) vaccinations.



Influenza Immunization Rates for Worcester by Race and Ethnicity: MIIS 2018 -2022







COVID-19 Cases and Immunization Rates for Worcester by Race and Ethnicity: MIIS 2018 -2022

WORCESTER (Population = 206,518)						
		COVID Cases		COVID Vaccinations		
Race/ Ethnicity	Proportion of Town Population			-	•	Booster per Capita
White or Caucasian	50%	19753	30%	73%	66%	23%
Hispanic	25%	17434	26%	72%	61%	12%
Black or African American	14%	6460	10%	71%	62%	14%
Asian	7%	2184	3%	88%	74%	19%
Multiple Races/ Ethnicities	4%	Data unavailable	Data unavailable	66%	63%	23%
American Indian or Alaskan Native	0.17%	118	0.18%	64%	45%	8%
Native Hawaiian or Pacific Islander	0.02%	48	0.07%	>95%	>95%	28%

Lessons and Recommendations

- Mistrust exists; however, the right community entry approach provides opportunity to build relations for community health intervention
- Social influence within faith groups is a resource for health intervention acceptance. Faith-based systems provides this influence and reaching them help address health misinformation
- Establishing vaccine clinics in easily accessible locations for hesitant communities increases acceptance of immunization
- Public health practitioners can utilize this approach to increase community groups' participation in health interventions. This model will enhance community involvement from intervention planning through evaluation



Vaccine Education on a Sunday service at Pentecost International Church, December 2022





The Faith Based Initiation Documentary - Trailer







Division's Priorities After REACH

REACH Supported the City of Worcester to build structures in the community to promote health equity. These structures could support some aspect of our public health priorities. Such as:

- New Maternal and Child Health Office, will continue our breastfeeding portion of REACH work.
- Expand built environment work to include climate change resiliency.
- Prioritize Health Equity and coalition building across the Division.
- Ensure alignment between the Division and the Community Health Improvement Plan and Community Health Assessments.
- Continued efforts to address food insecurity in Worcester and the alliance towns.
- Expand trusted messenger and community organizing efforts to enhance the work of the Division.

