DATE: March 1, 2021
RE: WORCESTER BOARD OF HEALTH MEETING
START TIME: 6:30 PM
LOCATION: WEBEX MEETING

Welcome & Introductions:
Meeting was called to order at 6:39pm.

Members on WebEx: Jerry Gurwitz, MD, Vice Chair, Frances Anthes, Chareese Allen and David Fort
WPDH Staff: Karyn Clark, Director of DPH and Michael Hirsh, MD, Medical Director of DPH
Guest: Yael Dvir, MD, Vice Chair and Director, Child and Adolescent Psychiatry, UMass Memorial Medical Center/UMMHC and Dodi Swope, Together for Kids Coalition

Approval of the February 1, 2021 Meeting Minutes:
Motion to approve the WBOH meeting minutes of February 1, 2021 made by David Fort Seconded by Chareese Allen – Approved

COVID-19 Updates:
Yael Dvir, MD, Vice Chair and Director, Child and Adolescent Psychiatry, UMass Memorial Medical Center/UMMHC: This is a worldwide challenge. The pandemic is fueling mental health crisis in youth all over the world. For some teens, it has been a year of anxiety and trips to the emergency room with increases to suicidal thinking and difficulties finding placement. This acute issue is coming on top of a chronic problem. Pre-pandemic, there had already been a real burden of mental health illness in children. 11% of children, (ages 8 to 11) and 22% of teens, (ages 13 to 18), have mental health issues. Only 50% of youth receive any behavioral health treatment. Suicide is the second leading cause of death in teens (first are accidents and third is homicides). 50% of all mental illness starts by the age of 14 and 75% start by the age of 24. There has been a significant increase of youth suicides since 2007 (40% increase ages 15 to 19 and 140% increase ages 10 to 14). All of the public health measures that we put in place to protect our communities are really threatening children’s lives, family dynamics and their social environment. School closures have been devastating to kids, in terms of peer relationships and in-person connections with adults. One way to provide access to mental health kids is through MA Child Psychiatry Access Program (MCPAP). Community Health Link clinics has doubled their referrals. Mobile Crisis Intervention / Emergency Mental Health has seen numbers tread down but increase in youth requiring inpatient. EPIA is a system that Department of Mental Health has in place for kids who have not found a placement. We can assist with providing information about available resources. Our Emergency Mental Health Services are available 24-hours a day for all ages. Please call 1-508-856-3562 to access services at UMass Memorial Medical Center.
Chareese Allen: Has a 12 year old at home working remote. Needs interaction. Getting our children back in school is going to be beneficial to most of our youth.

Frances Anthes: Helping 8-year-old grandchild during remote learning. Husband is helping 6 year old, who has autism (very difficult and impossible). They were in the middle of the IEP process when everything went remote. Feels he got lost in the cracks. They are in hybrid program. There is weekly COVID-19 pool testing. It is time to think about how we bring the children back. We need to give the children credit for what they experienced. Move from their strengths.

David Fort: Asked Dr. Dvir if she has seen an increase in inter-family conflicts between children and their parents? What can the BOH do to try to help?

Yael Dvir, MD, Vice Chair and Director, Child and Adolescent Psychiatry, UMass Memorial Medical Center/UMMHC: We need to take into consideration the effects on the child's mental health not just their physical health. At the beginning of the pandemic, we saw families struggle with young and preschool age children. However, as time progressed, this became a tragedy for teenagers. It is clear that it has to do with the lack of interacting with other teenagers. We are using principle of disaster psychiatry when we are thinking about how to help and treat. We need to think about the future and what's going to happen when children go back to school. There has been a significant increase in inter-family conflicts. Making sure people have resources, places to go, what numbers to call and prepare packets of coping skills to give to parents should help.

Dodi Swope, Together for Kids Coalition: We are a large group of over 60 different partners that work with early education and care, early childhood mental health providers, pediatricians and all different kind of folks across the spectrum. We started as a behavioral health program out of Community Health Link. We work with the earliest ages and stages of a child’s life and important developmental things are happening during those early years. There are a lot of families struggling and are flying under the radar because they are children are not in public schools yet. We collaborated with Recreation Worcester, Youth Opportunities, and now run three babysitting courses for middle school aged kids to learn how to be good caregivers to their younger siblings at home. It has been successful. Please don’t forget that the “littles” are building the neurology for a lifetime and when we’re not paying attention to what’s going on with them we’re setting up a whole new wave of generations that are going to have issues later. Would like to work with the BOH and the city to figure out solutions on what is going on with children prenatal through age 5. We struggle with the fact that there is not a lot of data for children under 5 years old. Many of the data gets picked up when the children enter formal systems.

Frances Anthes: Feels that external resources should be called in to help as schools reopen.

Michael Hirsh, MD, Medical Director of DPH: Maureen Binienda, Superintendent of Worcester Public Schools, has put together an Advisory Council that consisted of six physicians. At these meetings, discussions are about how we could protect both the children’s mental and physical health. Dr. Skehan has helped initiate a buddy program, where medical students are paired with students that are identified by the School’s Adjustment Councilor, in the Worcester Public Schools, that are struggling in school. The Pediatrics’ Psychiatric Fellows at UMass train the medical students so they can identify if the student is showing any evidence of a more serious psychologic problem. The Shine Foundation is providing medical students with Youth Mental Health First Aid training. Worcester is spending $15 million on HVAC systems in schools to improve air filtration during COVID-19 pandemic. Starting in April 2021, the school committee has decided to resume
school activities in hybrid model. 53% of families have opted into hybrid model. 47% will stay remote. Parents and teachers will feel more confident once the teachers are vaccinated.

Chareese Allen: Would like to see school personnel get vaccinated.

Jerry Gurwitz, MD, Vice Chair: Read a statement from the Worcester BOH regarding “Success in Reopening of K-12 Schools in Worcester Depends on All of Us”

A Statement from the Worcester Board of Health: Success in Reopening of K-12 Schools in Worcester Depends on All of Us
The abrupt closure of K-12 Worcester public schools in mid-March 2020 has led to extraordinary challenges for the children and parents of our city. The loss of nearly a year of in-class learning has depressed expected academic gains, especially for those who were already at educational or social risk. But this is just the tip of the iceberg for what students, families, teachers, and our entire community have been facing.
Many students depend on meals provided in schools, and efforts to address food insecurity and hunger have confronted challenges since the onset of the pandemic. Alternative strategies including delivering meals to homes, arranging meal pickups, and expanding meal services to weekends have filled some of the void, but not all of it.
The lack of school routines and socialization has adversely impacted students with mental health needs, and the pandemic has limited access to school-based services. Very little is known about the mental health effects of pandemics on children, and there is growing concern over long-term consequences of prolonged distance learning. In addition, reports about child abuse and neglect often come from teachers, school-based counselors, and other school officials, who may be less able to identify such situations when students are not on site.
Finally, there have been inequities for Worcester public school students and families, when their situation is compared with children residing in communities that have provided in-person learning since the fall of 2020.
We, the members of the Worcester Board of Health, welcome the decision to allow Worcester public school students to return to in-person learning later this month. Our support of this decision is reinforced by plans to follow CDC recommendations on preventing transmission in school settings including: requiring universal face mask use, enforcing physical distancing requirements in classrooms, addressing air quality and ventilation issues, using hybrid models to prevent crowding, and implementing screening procedures.
Vaccinating teachers and school staff isn’t a prerequisite to reopening schools, but vaccinating these individuals as soon as possible will reduce risk not only for them directly, but for our entire community.
Even with strong in-school mitigation measures, it remains imperative for our city to maintain low levels of COVID-19. That will require all of us to continue doing everything we have been doing, including masking, social distancing, and getting vaccinated when it is our turn. If we fail to do these things, all of the efforts made to reopen Worcester public schools will be for naught.

BOH members: Support this statement after having a brief discussion.

Jerry Gurwitz, MD, Vice Chair, made a motion for the BOH members to endorse and approve the statement. 4-yes, 0-no. Motion passed unanimously

Michael Hirsh, MD, Medical Director of DPH: Seeing COVID-19 numbers diminish. The level of COVID-19 activity in both hospitals systems are down about 60%. The number of hospital personnel that are getting ill is down to less than 1 per day from a high of 20 per day in early January. The London and South African variant strains have been found in Massachusetts. British variant strain is susceptible to both Moderna and Pfizer versions of the vaccine. Johnson & Johnson vaccine (72% effective) has lower efficacy in illuminating the possibility of the disease because it
was tested during the time that the London, Brazilian and South African strains was out in the community where it was being tested. It still provides 86% protection against serious COVID-19 and almost 99% protection against hospitalization. It is a single vaccination. Working on the hesitance of individuals on getting the vaccine via text messaging. Please continue to wear a mask, wash your hands and watch your distance. Some of the recent temporary occupancy restrictions were lifted.

BOH members appreciate all the work done by Worcester Department of Public Health and volunteers.

Motion to adjourn; Frances Anthes - seconded by Chareese Allen
Adjourn 8:13pm

Next Meeting -- April 5, 2021 at 6:30pm

Potential Future Meeting Topics:
Public Forum on Institutional Racism, Police Reform and Public Health