

**HEARING SCHEDULE
CITY COUNCIL MEETINGS BEGINNING JUNE 3, 2002**

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| Monday, June 3, 2002 | 5:30 P.M. | Roundtable Meeting Public Health infrastructure and infant mortality rate. Informal meeting with no public comment, at which time no votes will be taken. Meeting will not be televised. (Sullivan Chamber) MEETING HELD. |
| Tuesday, June 4, 2002 | 11:00 A.M. | The Human Services Committee will conduct a public meeting to discuss after school and out-of-school programs. (Ackermann Room) MEETING HELD. |
| Tuesday, June 4, 2002 | 3:00 P.M. | The Neighborhood and Long Term Planning Committee will conduct a public meeting for discussion of meeting with the Planning Board, tour of additional sites presenting planning issues, neighborhood study updates, planning that emphasizes green space and forest-like areas near dense development, a planning study of the Alewife triangle. (Ackermann Room) MEETING HELD. |
| Monday, June 10, 2002 | 5:00 P.M. | <i>Special Presentation to announce the winner of the Golden Shoes contest.</i> (Sullivan Chamber) |

City of Cambridge does not discriminate on the basis of disability. The City Council will provide auxiliary aids and services, written materials in alternative formats, and reasonable modifications in policies and procedures to person with disabilities upon request. Contact the Office of the City Clerk 349-4260, tty/TDD 349-4242.

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| Monday, June 10, 2002 | 5:30 P.M. | Regular City Council Meeting (Sullivan Chamber) |
| Monday, June 17, 2002 | 5:00 P.M. | <i>Special Presentation to a retired Police Captain.</i> (Sullivan Chamber) |
| Monday, June 17, 2002 | 5:30 P.M. | Regular City Council Meeting (Sullivan Chamber) |
| Tuesday, June 18, 2002 | 3:00 P.M. | The Neighborhood and Long Term Planning Committee will conduct a public meeting for discussion of meeting with the Planning Board, tour of additional sites presenting planning issues, neighborhood study updates, planning that emphasizes green space and forest-like areas near dense development, a planning study of the Alewife triangle. (Ackermann Room) |
| Tuesday, June 18, 2002 | 5:00 P.M. | The Health and Environment Committee will conduct a public meeting to discuss public toilets. (Sullivan Chamber) |
| Tuesday, June 18, 2002 | 6:00 P.M. | The Public Safety Committee will conduct a public meeting to discuss the regulations of motorized scooters. (Sullivan Chamber) |
| Tuesday, June 18, 2002 | 6:30 P.M. | The Health and Environment and the Public Safety Committees will conduct a joint public meeting to discuss noise related to boom-cars, leaf blowers, mechanical devices on buildings and any other nuisance noise. (Sullivan Chamber) |

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| Thursday, June 20, 2002 | 11:00 A.M. | The Economic Development, Training and Employment Committee will conduct a public meeting to discuss the youth summit, the business directories, the Buy Cambridge Initiative and any other general business that comes before the committee. (Ackermann Room) |
| Friday, June 21, 2002 | 12 noon | The Health and Environment and the Public Safety Committees will conduct a joint public meeting to discuss the following -municipal lighting company, -NSTAR maintenance, -local NSTAR conservation programs; and -use of renewable energy. (Ackermann Room) |
| Monday, June 24, 2002 | 5:30 P.M. | Regular City Council Meeting (Sullivan Chamber) |
| Wednesday, June 26, 2002 | 2:00 P.M. | The Health and Environment and the Public Safety Committees will conduct a joint public meeting to discuss the issue of domestic violence. (Ackermann Room) |
| Wednesday, June 26, 2002 | 4:00 P.M. | The Ordinance Committee will conduct a public hearing to consider proposed amendments to the Responsible Employer Ordinance. (Sullivan Chamber) |
| Monday, July 29, 2002 | 5:30 P.M. | Special City Council Meeting (Sullivan Chamber) |

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| Monday, September 9, 2002 | 5:30 P.M. | Regular City Council Meeting (Sullivan Chamber) |
| Monday, September 23, 2002 | 5:30 P.M. | Regular City Council Meeting (Sullivan Chamber) |
| Monday, September 30, 2002 | 5:30 P.M. | Roundtable Meeting Informal meeting with no public comment, at which time no votes will be taken. Meeting will not be televised. (Sullivan Chamber) |

MEETING

**ROUNDTABLE MEETING
Public Health Infrastructure and Infant
Mortality**

DATE

June 3, 2002
5:53 P.M.

PRESIDING
OFFICER

Mayor Sullivan

PRESENT

Mayor Sullivan, Vice Mayor Davis, Councillors
Davis, Decker, Maher, Murphy, Reeves, Simmons
and Toomey

Also present were City Clerk D. Margaret Drury,
Deputy City Clerk Donna P. Lopez, and Sandra
Albano, City Council Assistant

John O'Brien, Chief Executive Officer, Cambridge
Health Alliance, Harold Cox, Cambridge Chief
Public Health Officer, Karen Hacker, Director of the
Institute for Community Health, Ricki Lacy, Director
of Public Health Nursing, Ellen Kramer, Director of
Health Information Unit, Cambridge Health
Alliance, Maria Roloff, Director of Human
Resources, Cambridge Health Alliance, Donna
Bonaparte, Human Resources, Cambridge Health
Alliance, Rick Boehle, Cambridge Health Alliance,
Sam Lipson, director, Environmental Health Unit,
Department of Public Health (DPH), Jill Herold,
Assistant City Manager for Human Services, Ellen
Semonoff, Deputy Director, Department of Human
Services (DHS), Robert Bersani, Commissioner of
Inspection Services, and several other members of
the staff of DPH, DHS, members of the Cambridge
Public Health Subcommittee of the Cambridge
Health Alliance, the Human Services Commission
and staff of various nonprofit agencies working in
public health areas.

See attached summary of discussion points

7:30 P.M., on motion of Councillor Maher

ADJOURNMENT

8:10 P.M.

Summary of Discussion and Issues Raised

Mayor Sullivan called the meeting to order and invited John O'Brien, Chief Executive Officer of the Cambridge Health Alliance, to begin the discussion. Mr. O'Brien began with an overview of the continuing problems in the area of financing health care. The Cambridge Health Alliance has an annual budget of more than \$400 million, which is being impacted by federal and state budget deficits and growing inflation of medical costs. Cuts in the state budget will mean big losses for public health funding across the board. Further cuts in Medicaid are expected. On the federal level, the Medicare program will continue to reduce payments for hospital services.

Harold Cox, Cambridge Chief Public Health Officer, distributed summaries of the material that the PHD staff would be discussing. (ATTACHMENT A) He opened the discussion of the work of the Cambridge Public Health Department with a brief description of some of the highlights of PHD work in Cambridge over the past year, including school health (58,000 student visits to school nurses), domestic violence (assessment of prevention and intervention services for city residences), the Healthy Homes project (183 total home visits) and the addition of body art practitioner and establishment licensing responsibilities.

Mr. Cox then made a short presentation on the emergency preparedness work of the PHD. Cambridge is participating in a statewide plan to improve emergency preparedness and is working with other localities to develop strategies for regionalization and standardization of public health emergency responses. Mr. Cox then moved to the topic of West Nile virus. He informed the Council that 4 infected birds have been found to date and described the PHD response. He distributed copies of the 2001 Cambridge West Nile virus Response Plan (ATTACHMENT B), which will be slightly revised and sent to all Cambridge households.

Dr. Karen Hacker, Executive Director of the Institute for Community Health (ICH), a new collaborative organization founded by the Cambridge Health Alliance, the Mount Auburn Hospital of CareGroup and the Massachusetts General Hospital of Partners Health Care, described the purpose and work of this new initiative. The institute is dedicated to health status improvement through facilitation and collaborative sponsorship of community-based participatory research that links academic institutions to community partners. This type of research is a participatory process in which the community assists in formulating the research questions, interpreting the results and ultimately using the information to effect change and lead to measurable decreases in morbidity and mortality. Current focuses include child mental health, survey of behavior risk and resiliency, and child physical activity enhancement.

Ricki Lacey, Director of Public Health Nursing, then reported on the ongoing work in the Asthma Initiative and its goals of standardization of care for asthma throughout the community. She described the work of the Pediatric Asthma program, and the goals of improving the quality of life by prevention and good management of the condition. Expected outcomes are decreases

in emergency room visits and school absences. The asthma registry will be an important tool in this regard. Cambridge and Somerville pediatric sites are targeted for the pilot of the registry. The registry offers computerized, web-based access to parents, primary care physicians, school nurses and emergency rooms for all pediatric asthma patients. Each child will have a standardized asthma control plan which will facilitate early intervention and treatment of asthma attacks. The program will link very well with the Healthy Homes program, which provides free home visits from nurses and trained technicians who can provide advice on identifying and eliminating asthma triggers in the home. In addition, the program can provide, free of charge, items such as mattress covers that reduces asthma triggers.

Mayor Sullivan raised several questions regarding the increase in childhood asthma, including the rate of increase, whether the increase is due to environmental factors, whether there are new allergy medications that can prevent the development of asthma and are not covered by insurance.

A question from Councillor Decker on how to respond to tenants living with conditions constituting asthma triggers but were frightened of calling their landlords resulted in a discussion of the coordination of the commissioner of Inspectional Services (IDS) and the director of environmental health, PHD. Mr. Lipson said that he has had success in dealing with the Cambridge Housing Authority and the management of Rindge Towers regarding the elimination of conditions that are asthma triggers. Federal subsidies in publicly assisted housing subject the owners to HUD regulations, which are more comprehensive in this area than the state sanitary code. Private landlords are required to comply with the state sanitary code and the building code, and Inspectional Services has been very cooperative in working to cite and eliminate asthma triggers that are also violations of these codes. Mr. Lipson does not start with discussing filing code violation complaints with ISD, because tenants are often intimidated. He has been able to solve some situations through education and negotiation with the landlords. However, tenants need to know that when the basis is code violation, if the landlord does not comply voluntarily, enforcement is through filing a complaint, which will name the tenant.

Councillor Decker requested some of the flyers with the sanitary code and federal regulations to give to tenants who have questions about these issues.

Vice Mayor Davis raised the issue of asthma triggers in public school buildings, where asthmatic students spend six hours a day five days a week. Mr. Lipson described a new initiative of the EPA – “Tools for Schools,” which includes looking at integrated pest management, janitorial issues and heavy input from parents. While the data is not so strong as to connect particular conditions in schools with particular asthma cases, there is lots of data that certain conditions should not exist.

Vice Mayor Davis requested that the DPH analyze data with respect to which schools kids being treated for asthma attacks are coming from, when that data is available from the new asthma registry.

Councillor Galluccio suggested working with youth sports coaches and youth center staff in the asthma education efforts.

Councillor Reeves wanted more specifics on where to send citizens who come to him with a particular problem, particularly men of color. When he has a citizen with a problem, he is not looking for a network, he is looking for a “go to.”

Maria Roloff, director, and Donna Bonaparte, Human Resources Department, Cambridge Health Alliance, presented information on Alliance workforce diversity and staffing levels. The nationwide shortage of nurses and other health care professionals is very serious. Although there are only 50 vacancies out of 800 nurse positions, the amount of time, energy and expense that goes into recruitment is enormous.

Ellen Kramer, Director of Health Information, reviewed her report on infant mortality. Cambridge’s infant mortality rate for 1998-2000 is 3.1 out of 1000, lower than the Massachusetts rate and the national rate. An important reason is the high percentage of mothers receiving adequate prenatal care. Cambridge offers extensive free prenatal care.

Councillor Murphy noted that the chart shows that the percentage of mothers receiving adequate prenatal care in Cambridge is 80.3 %. He said that he understands why more affluent communities such as Brookline and Newton have higher percentages, but he questioned why the percentage in Framingham (89.3) is so much higher. Mr. O’Brien said that Councillor Murphy has raised an interesting question and that his staff will look more closely at what Framingham is doing.

Members of the City Council expressed their appreciation to the Public Health Department and the Cambridge Alliance for their excellent work on behalf of the health of the citizens of Cambridge. The meeting ended at 8:10 p.m.