

North Shore Public Health Collaborative

Meeting Minutes

Thursday, October 19th, 2023 2:00-2:45pm

Attendees

Name	Role	Community
Laura DelleChiaie	Director	Beverly
Teresa Kirsch	Public Health Nurse	Beverly
Frank Giacalone	Director	Danvers
MJ Alexander	Public Health Nurse	Lynn
Lisa Tobin	Director	Lynn
Andrew Petty	Director	Marblehead
Tracy Giarla	Public Health Nurse	Marblehead
Chassea Robinson	Public Health Nurse	Peabody
Suzanne Darmody	Public Health Nurse	Salem
David Greenbaum	Director	Salem
Neia Illingworth	Public Health Nurse	Swampscott
Laura Nash	Epidemiologist	NSPHC
Meg Dlusniewski	Coordinator	NSPHC
Kitzia Diaz	Public Health Nurse	NSPHC

NSPHC Updates

- In the next few weeks, Hayden Fitch will start as the new regional sanitarian, and Terry Kennedy will start as the Regional Field Trainer – Food.
- We are ready to move forward with the Relavent Systems software for the communities that opted in. Relavent can install the software to streamline the process; everyone present agreed to this. Everyone will need to complete the first step, which will involve submitting documents and potentially coordinating with IT departments before the group can proceed to full implementation. Please let Meg know if you have a preference for iPad type.

Clinic Updates

- Laura reviewed the NCOA grant reports, which include data from clinics where surveys were distributed and several Peabody school clinics. There have been over 950 vaccines administered so far. The group asked whether we can add questions to the NCOA survey, such as where the individual heard about the clinic. (Post-meeting update: this is allowed).
- The group discussed logistics for the COVID-19 vaccination clinics. Marblehead, Swampscott, and Danvers do not have funds available for the upfront cost of purchasing vaccines. For regional promotion, it would be best to have them all available on COLOR at the same time and link, but they would all need to be under the same COLOR account. Peabody will purchase the vaccines for all the clinics.
- Peabody is enrolled in the bridge program, which provides the vaccine at no cost for uninsured or under-insured adults. The group discussed which ages to include in the clinics and agreed on 12+. A benefit of this is that there can be a designated vaccination station for both adults eligible

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for the bridge clinic and youth eligible for the state vaccine program. Teresa called the vaccine unit and confirmed that it is sufficient to ask whether someone has insurance, and if someone says they are uninsured, there is no requirement to verify before administering the vaccine, which would be logistically difficult.

- The group discussed whether to accept walk-ins or require an appointment. MJ pointed out that requiring residents to make appointments in advance makes the clinics less accessible. Most people getting vaccinated at Lynn's flu clinics have been walk-ins so far. Everyone present agreed that they would like to accept walk-ins. There are logistical challenges to consider in terms of how to balance having enough vaccine with the high cost of the vaccine, which would make over-ordering costly. The size of the venue is also a factor, especially given the 15-minute waiting period.
- Meg and Laura will continue to offer the NCOA survey incentives to eligible individuals. Individuals who already received a gift card for the flu vaccine are allowed to receive a second one for the COVID-19 vaccine as long as they fill out the survey again. Please let Meg know if you need to order any additional clinic supplies so she can update the budget and order additional Market Basket gift cards.

WeCare Program Updates

- WeCare has made 164 calls so far, lasting an average of 18 minutes, with a range of 3 minutes to over an hour. This has included 17 unique participants, 2 of whom did not want follow-up after the initial call. There was a 50% dropout rate. They have found that there is a profound sense of loneliness among seniors who don't have strong support, and most participants (73.3%) report fair health. There were 6 participants who wanted to continue receiving calls after completing the post-survey; this resulted in them connecting with additional resources such as going to the senior center and joining a book club. The Community Health Workers report being able to make genuine connections with the callers, although common feedback was that the participants wished they could connect with other older adults whom they have more in common with.
- The group will continue and expand program promotion through Meals on Wheels since this population is particularly vulnerable to social isolation. MJ will connect with Katie to promote this more in Lynn. Isabella Wanjiru is the nurse on the team and has been trained on COLOR; please reach out if you would like to request assistance with scribing and registration.

Opioid Settlement Funds

- Swampscott is developing a survey to get community input, in addition to community listening sessions and establishing a working group. They are preparing to present a proposal at their next town meeting. Marblehead hired an outreach coordinator to conduct post-overdose outreach, which will use most of their funding. Their working group is small and includes Andrew as the health director, the police and fire chief, and the town administrator. Lynn is purchasing naloxboxes and naloxone vending machines.

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Community Updates

- Lynn's CALM team is their unarmed alert response team, which was established through conversations with their racial equity focus group. They are partnering with Elliot, which has a behavioral health center in Lynn. There will be no police or law enforcement response included in this program. The CALM director will work for the City of Lynn under the public health director; if you know anyone who may be interested, please share the [job description](#).