

Meeting Minutes of the Chelsea Board of Health  
February 14, 2023

**Attendance: Names of members and participants**

Board members & City of Chelsea staff were introduced.

Board Members:

- Corinna Culler
- Ola Baydoe
- Allen Jackson
- Joshua Merson
- Dr. Dean Xerras

City of Chelsea Staff:

- Flor Amaya, Director of Public Health
- Paula McHatton, Public Health Nurse

**Approval of the October, November, and December 2022 Minutes**

The minutes of the October, November and December 2022 were unanimously approved.

**Board Officer Vote**

Board of Health regulations require a Chair to be elected every January. Corinna Culler agreed to continue to serve as Chair, and Allen Jackson will continue his role as Clerk.

**Tobacco Regulations – Correction of Scrivener’s Error**

Flor Amaya reported that there is a contradiction in sec 10(a) regarding the cap on tobacco sales permits which contradicts later language. It says that new permit applicants applying when the cap has been reached would be placed on a waiting list. Current regulations require tobacco permits that are not renewed to be retired from circulation.

To correct this error, Flor Amaya will remove the conflicting language regarding the waiting list from the regulation.

**793 Broadway – Adult Only Smoke Shop**

Flor Amaya reported receiving a request to open an adult only smoke shop at 793 Broadway. The applicant did receive approval from the Zoning Board for the space. However, there are no tobacco permits available.

Amaya spoke with the Zoning Board regarding the current tobacco regulations, and advised the applicant that the only way a new business could get a license would be by purchasing an existing business in good standing that already holds a tobacco license.

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### ***Body Art Regulations***

Flor Amaya, along with Corinna Culler and Paula McHatton have recently inspected two body art establishments, and have an additional two inspections scheduled. Both establishments that have been inspected have been found to be in compliance with existing regulations. Culler reported that the regulations are old and obsolete in some instances, and recommended they be updated. Amaya is also working on updating the inspection form used when body art establishments are inspected.

The responsibility for monitoring these businesses falls to local cities and towns. Amaya will use existing model body art regulations as a guide, along with regulations from other municipalities, to update the Chelsea regulations. She added that important items for consideration as she works to update the regulations include training hour requirements, the licensing of foreign-trained artists, sanitation, and workspace issues.

Amaya next discussed a training she found on body art regulations, and asked Board members to take the training so more people can provide her input as she works on the regulations. She will resend information on the training to Board members.

She also reported that the city has not received any customer complaints regarding infections from a body art business in Chelsea.

The regulations will likely include a section on micropigmentation and permanent cosmetic makeup. There has been one licensed provider of permanent cosmetic makeup in the last 20 years. In the past, the provider has submitted all required training information to keep their license. However, Amaya plans to ask the board to approve new training requirements by the American Association of Cosmetology, which this person does not meet. Amaya asked the Board's opinion on handling that situation. Dr. Xerras recommended that the provider be grandfathered in and given a timeline to meet the training requirements under the new regulations.

### ***Community Naloxone Purchasing Program***

Flor Amaya reported that there was a drug overdose at the produce center. As a result, discussions arose about having naloxone available in the community so people can be ready to respond to an overdose. The State operates a free community naloxone purchasing program provided that municipalities submit relevant metrics monthly.

Amaya reported that emergency personnel do have naloxone, but current regulations do not allow them to leave naloxone with the public. The State program is designed to address that gap.

Corinna Culler asked about the reporting requirements for the program, and Amaya responded that data is collected in a spreadsheet, and the State recognizes that there will be gaps in reporting.

Naloxone will be distributed to the healthcare navigators, who will distribute them as they work throughout the community.

Amaya added that Chelsea's application for the program has been approved, and she is waiting on receiving additional documents to sign to complete the process.

### ***Childhood Immunization Program***

Amaya reported that the city is contemplating a childhood immunization program. There is a regional public health nurse that serves Chelsea, Revere and Winthrop. Recently, the nurse led a successful childhood immunization program in Revere. The program prioritizes Revere residents but receives referrals for Chelsea residents. Amaya will be coordinating with local schools and other providers to immunize Chelsea students that are behind in their immunizations, as well as students coming into Chelsea area.

The State also operates a program that will vaccinate children under 18 regardless of insurance status. Municipalities must receive certification to access this program, and Paula McHatton will be working on that application. The current plan is to have the regional public health nurse perform vaccinations weekly at the offices of the Chelsea Department of Health but the schedule may change to monthly or quarterly given volume demands. An appointment will be required to receive a vaccination.

### ***Public Health Updates – Paula McHatton, Public Health Nurse***

Communicable diseases:

There were two enteric diseases reported last month:

- One case of norovirus was reported in a patient that had symptoms for two days. They did not recently travel nor did their job entail handling food. The patient has had a kidney transplant and is immunocompromised. McHatton provided hand washing and meal prep/cooking education.
- A case of salmonella infection was reported in a 2-month-old that was bottle fed during the day and breastfed at night. The child is not on solid foods, and there were no pets in the home. Symptoms began after the child began drinking formula, and MA DPH was notified and requested testing for the formula being used, which the child's mother provided. Tests on the formula came back negative for salmonella infection. McHatton provided the mother with education on avoiding cross-contamination and safe food preparation. The mother has switched all the bottles and nipples used in feeding, and the child is doing well.

Other disease reports:

- There were two cases of streptococcus reported last month:
  - One case in a diabetic resident with a toe injury incurred after purchasing a new pair of shoes. A wound culture was positive for group A streptococcus infection.
  - Another case of group A streptococcus infection developed in a diabetic resident after they had teeth removed.

- There are two active cases of tuberculosis being monitored:
  - One case was in a patient recently discharged from Lemuel Shattuck Hospital for tuberculosis management. The patient is at home, tolerating the medicines and doing well.
  - The second case was in a patient previously reported on. This patient was not taking their medication and was not at home when McHatton attempted to follow-up. McHatton contacted DPH, who informed her that the patient was at Lemuel Shattuck Hospital, where they discovered that the patient was multi-drug resistant. Because the staff felt the patient was a flight risk, the patient was detained under relevant statutes, and given a stronger medication regimen. The patient was tolerating the meds, but was refusing to eat the hospital food, so the hospital orders culturally-appropriate foods for the patient. Because the patient is a continued flight risk, they will continue to be detained. The patient will likely be required to remain in the hospital until they complete the 26-week course of treatment. A hearing on his detainment will be held on March 10.
- Flu: There were 60 cases of flu reported in January.

#### COVID-19:

- Chelsea has 24,624 confirmed cases of COVID-19 since the start of the pandemic.
- The current positivity rate is 5.97%.
- The incidence rate is 9.8/100,000.
- Chelsea's transmission level remains medium.
- Seasonal flu, COVID, and RSV transmissions are all trending downward.
- Gift card distribution at the Chelsea Senior Center will stop on March 31.
- The Biden Administration announced that it will end the COVID public health emergency on May 11. As a result, at-home COVID tests and PCR/rapid COVID tests will no longer be free. COVID treatment will be free, based on availability, and telemedicine will end.

#### ***New Business/Discussion***

Flor Amaya reported that during the COVID-19 public health emergency, MassHealth did not require subscribers to re-enroll annually. With the public health emergency being lifted, MassHealth will require members to re-enroll on an annual basis. It's anticipated that there have been more people eligible for MassHealth because of the pandemic.

Enrollment forms will be sent out in late March, and Amaya is in conversation with local hospital systems and advocates on developing a strategy to assist people to re-enroll.

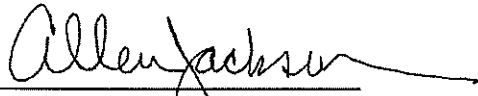
#### ***Next Steps***

- Determine how/where the next Board of Health will be held.
- Tobacco regulations: Flor Amaya will remove the conflicting language regarding the waiting list from the regulation.
- Body art regulations: Amaya will re-send the Board the body art training information and regulations.

**Next Meeting**

The date/time of the next meeting is to be determined.

The meeting adjourned at 6:40pm.

  
Allen Jackson, Clerk

4/11/2023  
Date

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