

BLACKSTONE/FRANKLIN SQUARE NEIGHBORHOOD ASSOCIATION

GENERAL MEETING MINUTES

Tuesday, September 20, 2016, 7:00 p.m.
D4 Police Station, 2nd Floor Community Room
650 Harrison Avenue

Present for the Board:

Eric Huang	President
Matthew Mues	Treasurer
Michael Broderick	Secretary
Andrew Parthum	At Large
Nancy Farrington	At Large
Lisa Jenks	At Large

Meeting starts at approx. 7:03

Eric Huang begins with introduction of Board Members elected at last meeting. Eric makes a call for volunteers to join committees; and that those who express interest in the committees should indicate so on the sign in sheet.

Eric introduces Bill Walczak, CEO of the South End Community Health Center (SECHC), for presentation and Q&A about suboxone treatment program; also with Bill is Dr. Liz Davis, psychologist working with patients at SECHC.

Bill provides his personal background and experiences as CEO and founder of health centers and schools. Describes how SECHC needed someone with experience and reached out to him; Bill has been there for about a year; health center now generating income; 7 new doctors, 4 new NPs, available now and very qualified; with additional new docs starting soon. Good services available; should be a demand for good primary care services in the neighborhood. As of Jan 1: SECHC will be open 5 nights a week in the winter, and we would love to be able to host our group. Will have walk in services. Largest behavioral health unit in the state. About 200 employees serving 200,000 people a year, 80,000 visits a year. \$6 million capital improvement plan underway. Bill hands out card with cellphone and urges residents to contact him with questions and concerns.

Overview of Suboxone presented by Dr. Davis: A drug that prevents craving for opioids. Not methadone, an alternative to heroine. Plan is to do 30 patients because SECHC has patients walking in the door with heroine problems. This is a crisis: 2,400 heroine deaths last year in MA. If we can perfect the program, we would go up to 200 patients. The program will not result in the loitering, etc. Residents won't know who is on suboxone and who isn't.

Q: What would you consider a failure?

A: People hanging out outside; complaints to the police; doctors not following through.

Q: What about a waitlist? A lot more people than available spots

A: This is a national crisis. SECHC program does not promote drug use or violence; this would be for existing clients and would allow them to return to their working lives. This is the most comprehensive program out there. This treatment does not get them high. They get a suite of specialists; have to participate in groups; these people are not going to be coming in, they are already here. They are not hanging out in the street. These are already our patients.

Q: Duration of treatment?

A: Could be indefinite. Someone may need to be on treatment for life. Some may come off, but not one size fits all. As people graduate, they may be able to reduce the frequency of their treatments.

Q: What about people using/abusing/and selling suboxone?

A: We can't control everyone. We want to capture those who want to get better, but we can't control everyone.

Q: Where do they obtain the drug? Is there a way of rejecting people who are not complying? How do you discourage that clientele? Can you usher that kind of abuser out?

A: Patients will obtain suboxone at the pharmacy; between a three day and seven day script. We are pretty savvy from years of experience. You learn soon those patients who are not compliant. If someone is not the right fit, we will offer them a higher level of service elsewhere; more intensive treatment; or they can leave. They would still be our patient, but they will not be in the program anymore. Suboxone is only part of the treatment; if the pill allows them to engage in treatment once they are on...It becomes pretty obvious after a few weeks. Includes drug analysis to monitor whether they are using the suboxone, and other drugs. Counseling will be mandatory.

Q: How is the clinic different from the methadone clinic and methadone mile?

A: Methadone is an opiate, but it is abused. One dose a day; line up everyday. There are no lines here. Our plan is more private. Our clientele have more dignity and do not appear as disheveled as the people at the methadone clinic. To get into the clinic, someone has to have a PCP with our facility, and that PCP will put them through a more rigorous screening process, including multiple visits, which filter out those committed to getting serious about treatment. The groups will be 10 people max. If they aren't enrolled in the

program, there will be no reason to hang out in front of the building. If you have high standards and treat people with dignity, they will rise to those standards.

Q: Will you have ancillary services for addicts who will not be involved in the program? Coordinating with other facilities?

A: We have relationships with local social services that can help facilitate transfers. We won't be a direct conduit. We have a case manager handling that who is bursting at the seams.

Q: What's the feedback process if it is not working for us in the neighborhood. I think you need to make a commitment to the neighborhood.

A: (Bill) Let me know, take my card, let me know. I need to know about it. We want to start in October, first 30 patients. We will prescribe film only, not pills, to be fulfilled out of Walgreens.

Eric Huang proposes a review session in a few months to check in on whether there is any kind of effect in the community. Bill comments that if this is a problem, he will shut it down. He does not think it is going to be a problem. Let's help the people who want to be helped.

Andrew Parthum comments that we already have a set of problems, these are an existing set of conditions. If this can help, then let's try it out. We have the problems. This program will not add to them; people who are chronically sleeping on our steps are not seeking treatment. This is a structured program who want treatment.

Comment from member: the South End has done enough.

Comment from member: Our city councilors do not seem to care about the issues here when these issues pop up. Our anger is misplaced at these two poor doctors. We have a legitimate reason to be angry, but it should be misdirected to political action. We need an open dialogue with our representatives.

Treasurers Report – Matthew Mues passes around (see report attached hereto).

Public Safety Update. Officer Bill Sline, community service (BPD) reads major stats of specific incidents in the last month. Highlight: shooting at 42 Harrison Archways 9/10 1 a.m., technically a drive-by firing multiple shootings. The two victims were not life threatening.

Eric introduces Sam Chambers who can take your comments and concerns. The councilors representatives are not here. Tito Jackson represents the district that the SECHC is in.

Sam Chambers: Every week, the mayor meets with heads of various departments to try to identify and solve problems; realizing that a lot of the methadone addicts are coming on from Worcester and South Shore. Working with the City Council to increase funding for these programs.

Public Safety Committee. Nancy Farrington describes the recent creation of the Friends of O'Day Playground group and their mission which is three-fold 1) regarding the situation at O'Day Playground: create so much activity there that the bad actors won't want to be there. We meet once a month. Involve BHA, Villa, BPD; we want mothers to bring their kids in the park. 40-yearold prison-released gang members causing the problems; 2) Franklin Square – the police are not concerned with this park; 3) Community Services officers – 4th of every month, come meet and talk with them.

Development Committee. Eric quickly reviews that 46 Wareham approved this month, 3 floors commercial, 18 condo units on upper 3 floors. We wrote letter of support. As for 771 Harrison (the Cosmopolitan) – we wrote letter of support; recently discovered engineering and structural issues, need to supplement their plans with another public meeting and comment period. Loss of parking in the basement; change of condos to rentals. Harrison Albany block – gives overview of proposal. Anoush'ella – reviews recent licensing hearing before the city for beer and wine license and explains that we find out next week if they have received. Eric concludes with a call for development committee members.

Scholarship Committee. Andrew explains that we are starting 10th year of scholarship for South End seniors. Reviews the past year, explaining that we had a great fundraiser at the Gallery@ArtBlock; chocolate and wine tasting; June we awarded \$20k to 10 students. Designed to help with freshman year expenses. Looking for volunteers. Fundraiser is usually in February and for people reviewing the applications and getting the word out to appropriate h.s. seniors.

Membership Committee and Halloween Fest. Lisa Jenks explains that we have a new website; we are trying to come up with a marketing plan to reach everyone somehow. We want to promote the BFSNA and the Friends of Franklin Square, and have this lead up to the Halloween Party. BFSNA is going to take over the Halloween party event henceforth. Lisa is trying to get all of the information from WGMS who usually runs it. Event: Oct. 29 (pet costume contest).

Eric comments that we need to strive to make connections with the rest of our community, and this event is a great opportunity for that.

Friends of Blackstone and Franklin Square Parks Committee. Introducing Toni Crothall as acting President, gives an overview of what we have been doing in the parks; call for volunteers.

General Announcement by member: 10/4 6:30 p.m. Poetry reading at newly renovated St. Stephen's Hall.

Meeting concludes at approximately 9 p.m.

Blackstone / Franklin Square Neighborhood Association

Financial Report September 2016



Operating Account Balance September 20th, 2016	\$5,413.06
-Paid for Dropbox and USPS box	
Scholarship Account Balance September 20th, 2016	\$26,402.99
-Paid out all Scholarships (10)	
The Friends of Blackstone and Franklin Squares	\$23,478.17