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Executive Office of Health and Human Services
Department of Public Health
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September 17, 2024


Steven T. James
House Clerk
State House Room 145
Boston, MA 02133

Michael D. Hurley
Senate Clerk
State House Room 335
Boston, MA 02133

Dear Mr. Clerk,

Pursuant to Chapter 111 Section 2J, please find enclosed a report from the Department of Public Health entitled ***"Public Health Grant Trust Fund Report 2023."***

Sincerely,


Robert Goldstein, MD, PhD
Commissioner
Department of Public Health

Public Health Grant Trust Fund Report 2023

Massachusetts Department of Public Health

Executive Summary

The Public Health Trust was established to allow the Department of Public Health (MDPH) to participate in competitive grant opportunities with nonprofit partners. This provides MDPH with the ability to pursue funding opportunities that were previously impossible. Prior to the establishment of the Trust, there was no mechanism to accept private foundation funds in a timely manner and no mechanism to serve as a subcontract for a research grant. In particular, the establishment of this Trust is proving to be beneficial to MDPH and its academic/medical partners because it has supported opportunities around surveillance and data sharing so state public health data can be utilized for a variety of purposes to inform approaches for addressing current and emerging priorities.

Since the last reporting period, January - December 2022, MDPH has received funding for three new subcontracts that are administered through the Public Health Trust from the following organizations:

- American College of Obstetrics and Gynecology: \$20,000
- Council of State & Territorial Epidemiologists: \$199,946
- Association of Public Health Laboratories \$80,000

MDPH also received two ad credit in-kind awards from Google valued at up to \$495,000 for public health-related public service announcement campaigns and campaign launch support.

In addition, of the fourteen grants and subcontracts administered through the Public Health Trust that were funded in the prior reporting period, eleven continued to be funded in 2023 while three concluded.

Finally, MDPH is actively pursuing two new subcontracts that are pending award.

Legislative Mandate

The following report is hereby issued pursuant to M.G.L. Chapter 111, Section 2J –

Section 2J. There shall be a Public Health Grant Trust Fund. The commissioner shall administer the fund to collaborate with nonprofit organizations to participate in competitive grant opportunities that further the mission of the department.

There shall be credited to the fund money received from public and private sources to support public health competitive grant opportunities. Amounts credited to the fund shall not be subject to further appropriation. Money remaining in the fund at the end of a fiscal year shall not revert to the General Fund and shall be available for expenditure in subsequent fiscal years.

Annually, not later than January 1, the commissioner shall report on the activities of the fund to the clerks of the house of representatives and senate and to the chairs of the house and senate committees on ways and means. The report shall include: (i) an accounting of money received by the fund broken down by funding source; (ii) a description of the competitive grant opportunities and whether a competitive grant opportunity is in collaboration or partnership with a nonprofit organization; (iii) an accounting of money expended from the fund broken down by recipient; (iv) the amount of any unexpended balance; and (v) a description of anticipated competitive grant opportunities applied or expected to be applied to in the upcoming calendar year and whether the competitive grant opportunity is in collaboration or partnership with a nonprofit organization.

New Opportunities Awarded in 2023 Through the Public Health Trust

Title	Amount	Project Period	Subcontract Partnership/ Collaboration with a non-profit	Prime Award Recipient or Funder of Contract
Alliance for Innovation on Maternal Health (AIM) Patient Safety Bundles Technical Assistance Program	\$20,000	9/30/2023-8/31/2024	Yes	American College of Obstetrics and Gynecology (ACOG) funded by the Health Resources and Services Administration (HRSA)
Longitudinal Surveillance of Infants born with Neonatal Abstinence Syndrome (NAS)	\$199,946	08/01/2023-7/31/2024	Yes	Council of State & Territorial Epidemiologists (CSTE), funded by the Centers for Disease Control and Prevention (CDC)
Influenza Sequencing Center Project	\$80,000	06/07/2023-06/30/2024	Yes	Association for Public Health Laboratories (APHL) – CDC funded
Google.Org In-Kind Ads Public Service Announcement Program	Up to \$495,000 in ad credits	12/7/2023 – 6/30/2024	No	Google LLC

Descriptions of New Projects:

Alliance for Innovation on Maternal Health (AIM) Patient Safety Bundles Technical Assistance Program:

AIM is a national data-driven maternal safety and quality improvement initiative based on interdisciplinary consensus-based practices to improving maternal safety and outcomes. The program provides implementation and data support for the adoption of evidence-based patient safety bundles. AIM works through state teams and health systems to align national, state, and hospital level engagement efforts to improve overall maternal health outcomes. [Alliance for Innovation on Maternal Health \(AIM\) | ACOG](#)

Longitudinal Surveillance of Infants born with Neonatal Abstinence Syndrome (NAS): MDPH will expand their CSTE NAS surveillance implementation pilot project by exploring the feasibility of longitudinal surveillance among infants born with NAS. This feasibility assessment will be in the form of a report which identifies data resources, assesses opportunities and barriers, and determines resources and permissions needed. [NCBDDD’s Neonatal Abstinence Syndrome Surveillance Activities | About Us | NCBDDD | CDC](#)

Influenza Sequencing Center (ISC) Project: The Association for Public Health Laboratories (APHL), funded by the CDC, seeks to establish and provide next generation sequencing. The ISC will provide close

to real-time NGS data for influenza A and B utilizing APHL’s AIMS cloud-based environment for data transfer and analysis. [Influenza Sequencing Center \(aphl.org\)](https://aphl.org)

Google.Org In-Kind Ads Public Service Announcement Program Google LLC is providing In-Kind Ad Credits to MDPH through the Google.Org In-Kind Ads Public Service Announcement Program valued up to \$475,000 USD to be used by June 30, 2024, and previously accepted Campaign Launch Support valued at up to \$20,000 to be used by June 30, 2024. Ad credits will be utilized to support MDPH advertising related to mental health and online safety services.

Opportunities awarded 2019-2022 through the Public Health Trust that continued in 2023

Title	Amount	Project Period	Subcontract Partnership/ Collaboration with a non-profit	Prime Award Recipient
HEALing Communities Study	\$3,896,635.00	4/17/2019 – 3/31/2024	Yes	Boston Medical Center – NIH funded
MA Justice Community Opioid Network (JCOIN)	\$883,533.00	09/01/2019 – 8/31/2025	Yes	Baystate Medical Center – NIH funded
MA/Region 1 Partnership for Regional Health Disaster Response	\$500,000.00	09/30/2019 - 09/29/2024	Yes	Massachusetts General Hospital - ASPR funded
Prevention Policy Modeling Lab	\$391,420.00	01/01/2020- 9/29/2024	Yes	Stanford University – NIH funded
NAS Standardized Surveillance Case Definition Implementation Project	\$249,895.00	03/06/2020- 12/31/2023	Yes	Council of State and Territorial Epidemiologists (CSTE)- CDC funded
Reducing Racial Disparities in SMM post COVID19: Assessing the integration of maternal safety bundles and community-based doulas to improve outcomes for Black women	\$149,018.00	09/17/2020 – 06/30/2024	Yes	Tufts University – CDC funded

Predict to Prevent	\$105,028.00	05/15/2022-03/31/2024	Yes	Tufts University – NIH, NIDA funded
Linking PRAMS and Clinical Outcomes Data Multi-Jurisdiction Learning Community	\$135,000.00	4/30/2022 – 7/31/2023	Yes	Association of State and Territorial Health Officials (ASTHO)- CDC funded
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for STI Services and Care (supplement 2023)	\$416,399.00	9/1/2022-5/31/2024	Yes	National Association of City and County Health Officials (NACCHO) – CDC funded
Enabling integrated analysis of multi-modal data for state epidemiologists	\$800,000.00	09/26/2022-03/29/2024	Yes	Broad Institute – CDC funded
Early Life Course of Children with Congenital Structural Heart Anomalies	\$84,897.00	9/30/2022-9/29/2026	Yes	Boston University – CDC funded

Description of Ongoing Projects

HEALing Communities Study: The National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) launched the HEALing Communities Study (HCS) in 2019 to test the impact of a community-engaged intervention on community-level opioid overdose (OD) deaths. The study is a multi-site, parallel arm, cluster randomized, wait-list controlled trial. The HCS will test the impact of a comprehensive, data-driven community response plan to deploy evidence-based practices (EBPs) across multiple sectors to reduce opioid-related OD deaths. <https://healingcommunitiesstudy.org/>

MA Justice Community Opioid Network: MDPH is funded through a subcontract with Baystate Medical Center to serve as a partner on the federally funded National Institute of Health Justice Community Opioid Network research grant (JCOIN). The goal of JCOIN is to study approaches to increase high-quality care for people with opioid misuse and opioid use disorder (OUD) in criminal justice settings. JCOIN will test strategies to expand effective treatment and care in partnership with local and state justice systems and community-based treatment providers to generate real-world evidence to address the unique needs of individuals with OUD in criminal justice settings. <https://grantome.com/grant/NIH/UG1-DA050067-01>

MA Region 1 Partnership for Regional Health Disaster Response: MDPH is funded through a subcontract with the Massachusetts General Hospital under the federal Health and Human Services, Public Health Emergency Preparedness programming to serve as an implementation partner the Massachusetts/Region 1 Partnership for Regional Disaster Health Response. This initiative is working to develop innovative mechanisms that link medical experts in healthcare disaster response with other key governmental and community partners and stakeholders to improve coordination of planning and

response activities and enhance patient care during disasters, including COVID-19. <https://www.phe.gov/Preparedness/planning/PDHRCA-FOA/Pages/ma-partnership-rdhr.aspx>

Neonatal Abstinence Syndrome (NAS) Standardized Surveillance Case Definition Implementation

Project: MDPH was awarded funding through a partnership with the CDC, CSTE, and National Center for Birth Defects and Developmental Disabilities (NCBDD) to provide a mechanism for state and local public health organizations or agencies with public health authority to conduct population health surveillance using the CSTE NAS Standardized Surveillance Case Definition while leveraging existing surveillance infrastructure. This pilot project is an opportunity for jurisdictions to improve or develop standardized NAS Surveillance as well as identify key challenges with implementing the case definition in their jurisdiction. <https://www.cdc.gov/ncbddd/birthdefects/cbdrp.html>

Reducing Racial Disparities in SMM post COVID19: Assessing the integration of maternal safety bundles and community-based doulas to improve outcomes for Black women:

MDPH was awarded a subcontract from Tufts University to support efforts to add an additional layer of understanding of perinatal health and equity and expand health outcomes to look at mental health. Specifically, we will evaluate the impact of the COVID-19 pandemic on perinatal health and well-being and the potential for doulas to mitigate perinatal mood disorders, investigate the impact of structural racism and discrimination in the context of the COVID-19 pandemic on the health and well-being of persons during pregnancy and postpartum. [RFA-MD-20-008: Addressing Racial Disparities in Maternal Mortality and Morbidity \(R01 Clinical Trial Optional\) \(nih.gov\)](#)

Predict to Prevent: In partnership with Tufts University, MDPH will provide content expertise and data from the Public Health Data Warehouse with the goal of being better able to describe, discriminate, and predict the complex, relapsing nature and course of alcohol, tobacco, prescription, and other drug abuse, as well as further understanding of factors predicting drug and alcohol abuse trajectories, prevention program effects, and how services can be organized and delivered to improve enrollment, participation, retention, engagement, adherence and health outcomes. [PAR-18-062: Accelerating the Pace of Drug Abuse Research Using Existing Data \(R01 Clinical Trial Optional\) \(nih.gov\)](#)

Prevention Policy Lab: Stanford University is funded by the CDC to create models that improve public health decision-making in five key areas: HIV, viral hepatitis, sexually transmitted infections, tuberculosis, and school/adolescent health. MDPH serves as a subrecipient partner to contribute to development of modeling questions, study design, data acquisition, data analysis, development of decision tools and publications. <https://ppml.stanford.edu/projects>

Linking PRAMS and Clinical Outcomes Data Multi-Jurisdiction Learning Community: The Association of State and Territorial Health Officials (ASTHO), with support from the Centers for Disease Control and Prevention (CDC), launched the second cohort of this project to support states, territories, and jurisdictions as they build capacity to conduct data linkage activities between PRAMS and clinical outcomes data sets. These linked data sets will inform Patient-Centered Outcomes Research and clinical quality improvement initiatives in maternal and child health. <https://www.astho.org/>

Partnership to Support Leveraging Retail Health Clinics (RHC) and Pharmacies for STI Services and

Care: The National Association of City and County Health Officials (NACCHO) is funding MDPH through a subcontract to create trainings for the staff of pharmacies and RHC's to offer essential education to support expanded STI and HIV patient care in those settings.

<https://www.naccho.org/blog/articles/new-funding-opportunities-for-working-with-pharmacies-and-retail-health-clinics-to-provide-sexual-health-services>

Early Life Course of Children with Congenital Structural Heart Anomalies: MDPH is partnering with Boston University on this CDC-funded initiative to providing data from the Massachusetts Birth Defects Monitoring Program and provide feedback on the development of procedures and materials, assist in data management and reporting, and participate in the interpretation and dissemination of the project findings, including sharing with programs that may utilize this information to provide improved services and ensure continuity of care to those with congenital heart defects. [Congenital Heart Defects: CDC's Tracking and Research Activities | CDC](#)

Summary of Expenditures and Unexpended Balances January 2023-December 2023

Title	Total Award Amount	Amount Received 2023	Expenditures 2023*
HEALing Communities	\$3,896,635	\$141,220	\$175,044
MA Justice Community Opioid Network	\$883,533	\$127,060	\$92,648
CHOICES Learning Collaborative Partnership	\$50,000	\$50,000	\$50,771
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care / NACCHO	\$416,399	\$157,960	\$152,992
NAS Standardized Surveillance Case Definition Implementation Project	\$249,895	\$0	\$61,099
MA/Region 1 Partnership for Regional Health Disaster Response	\$100,000	\$0	\$266
Association of Public Health Laboratories Contract Agreement	\$80,000	\$30,000	\$0
Enabling integrated analysis of multi-modal data for state epidemiologists / Broad Institute	\$0	\$0	\$8,567
Early Life Course of Children with Congenital Structural Heart Anomalies	\$84,897	\$24,489	\$0
Public Health Database Fee - Medication for opioid-use disorder (MOUD)	\$0	\$17,466	\$0

Comparative Effectiveness Study			
Public Health Database Fee - Tufts	\$0	\$55,923	\$0
TOTAL		\$604,118	\$541,387

**The expended amount may be higher than the awarded amount for the calendar year due to the continued availability of funds from the prior budget period/project year. Some projects may have ended in prior years, but final billing was completed in 2023.*

Expenditure Details*

Title	Expenditures	Recipient	Purpose
CHOICES Learning Collaborative Partnership	\$50,770.50	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
HEALing Communities	\$175,043.60	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
MA/Region 1 Partnership for Regional Health Disaster Response	\$265.79	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
MA Justice Community Opioid Network	\$92,648.39	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
NAS Standardized Surveillance Case Definition Implementation Project	\$61,099.41	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care / NACCHO	\$21,351.98	Staff Payroll, Fringe Benefit and Indirect Costs	Salary Allocation and Payroll-Related Costs
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care / NACCHO	\$71,208.72	JSI Research & Training Institute	Costs associated with planning support for the Sylvie Ratelle STD/HIV Prevention Training Center
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care / NACCHO	\$3,764.16	Alison O'Keefe Marshall	Costs associated with medical services provided by individuals to clients
Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care / NACCHO	\$15,850.00	The General Hospital Corporation	Costs associated with medical services provided by organizations to clients

Partnership to Support Leveraging Retail Health Clinics and Pharmacies for Sexual Health Services and Care / NACCHO	\$40,816.82	University of Massachusetts	Costs associated with medical services provided by organizations to clients
Enabling Integrated Analysis of Multi-Modal Data for State Epidemiologists / Broad Institute	\$8,566.57	McInnis Consulting Services	Costs associated with IT consulting services
TOTAL	\$541,385.94		

**Expenditures include projects that were funded in prior years and final billing was completed in 2023.*

Pending Applications

Below is a list of applications that MDPH is actively pursuing that are pending award and contract execution. Without this Trust serving as mechanism to receive the funding, it would not be possible to serve as a funded partner on these opportunities.

- **Centers for Outbreak Analytics and Disease Modeling** - CDC grant application. A partnership between University of MA, University of TX - Austin, and MDPH. The purpose of the funding is to develop a network of innovators to design, prototype, test, refine, evaluate, and implement new and enhanced capabilities to improve disease modeling and analytics that enhance decision support during outbreaks of infectious diseases. University of Texas received the award notification, the contract for MDPH is pending execution. Amount anticipated: \$152,000.
- **Parents as Teachers** – MDPH applied for a Challenge Grant award from the Parents as Teachers National Center to assess community and program readiness to integrate doula services into the Parents as Teachers model and establish a strategic plan for doula integration. Doula integration into PAT will strengthen home visiting in providing culturally responsive, family-driven, and community-centered services to support birthing people of color and their infants. MDPH received an award notification, and the contract is pending execution. Amount anticipated: \$10,000.