Maine Medical Center Neighborhood Advisory Committee (NAC)  
Meeting Minutes

Date: Wednesday, October 11, 2023  
Time: 12:00 p.m.  
Location: via Zoom  
Recurrence: Monthly, 2nd Wednesday

Minutes Submitted by: Natalie Dubail  
Minutes Edited by: NAC Members

Attendees:  
Anne Pringle (WPNA) co-chair  
Marie Gray (PNA)  
Peter Dugas (PNA)  
Steven Scharf (WENA)  
Dominique Gabel (WENA)  
Moses Sabina (SJVNA)  
Zack Barowitz (LNA)  
Damon Yakovleff (LNA)  
Victoria Pelletier (City Council)  
Nell Donaldson (CoP)  
Matt Wickenheiser (MMC)  
Natalie Dubail (MMC)  
Brian Batson (MMC)  
Matt Wickenheiser (MMC)  
Jennifer McCarthy (MMC)  
Walter Pochebit (MMC)

1) Minutes  The Minutes of September 11th, 2023 will be revised and presented for approval in November’s meeting. It was suggested that what is produced should be titled “Notes”, not “Minutes”.

2) Construction Update (Q&A) – (5 Minutes)  
No MMC planned or scheduled Project construction activities that could impact surrounding neighborhood vehicle traffic, pedestrian flow, noise, after hour work, etc. for the remainder of this month and during the first couple of weeks of November.

Perimeter site fence and Jersey barriers, (modular concrete barriers separating traffic lanes in Congress and Gilman), will remain in place as is this winter. Site fence and barriers will be removed in March…. landscaping to follow in April.

Non MMC related work impacting Congress Street vehicle and pedestrian traffic

Ongoing utility work by NEUCO replacing/upgrading gas mains in Congress Street commences once more beginning Monday Oct 16 for an anticipated 3-4 week period.

Outbound traffic lane on Congress St will be closed from Weymouth Street to St John Street with one way traffic controlled by flaggers from 7AM to 7PM. NEUCO will be coordinating all communications,
required detours, flaggers, signage, cone markers, police details, etc. See Logistics plan published by NEUCO dated 9/18/23: https://mail.google.com/mail/u/0?ui=2&ik=688e17b5b2&attid=0.1&permmsgid=msg-f:1778927410513425712&th=18b0050e00dbb530&view=att&disp=safe

Action to be taken: N.D will send out a PDF of the logistics plan to the group, as many members had trouble with the link.

3) MMC Update (5 minutes)
Discussion Summary: Hospital patient volumes remain high, with approximately 15-30 patients in the ED waiting for beds at any given time. COVID numbers are remaining the same, with no major outbreaks. With flu season approaching, there has not been an uptick yet.

The question was asked if MMC needs more ER capacity. A MMC Representative stated there isn’t a need for additional capacity in the ER. The overflow in the ED is stemming from the issue of not having enough patient beds available. As mentioned in prior meetings, the issue of not having any beds available stems from the fact that there are about 100 patients at any given time that do not need hospital care. Rather, many of these patients need long term care, but with no available nursing home facilities – the hospital cannot discharge them.

With the addition of 96 beds next year, MMC is hoping that it will significantly help the issue. The Construction of the MFT is going well and MMC is hoping to open the addition on June 9th. With the month of May including tours and celebrations.

It was noted that there seems to be more parking enforcement by the City on the Western Prom between 5-8PM. The Director of Parking has personally been checking on the Gilman and St. John area. A resident noted that he is still seeing people with MMC stickers parking on Gilman Street during the day.

4) Updates (15 Minutes)
- Recuperative Care Center
Discussion Summary: Operations of the RCC seem to be running smoothly and any issues that had been raised in the past have seem to have been resolved at this time.

The RCC just celebrated their 1 year anniversary of the program. MMC, as well as the community have already seen the immense impact and value this facility has made in its 1st year. The implementation of this program opened up hospital beds for other community members to receive hospital level care (over 2,500 bed days). This has been a huge help to the already overloaded hospital. They currently are still working through a few open positions at the present time, but are fortunate for the support they are receiving from care team members from other locations. To this date, there have been 112 admissions to the RCC. The average length of stay has been less than a month. The program has helped 33% of patients exit homelessness - with the lack of options/housing in Portland, this is huge. There have also been many success stories from patients who attribute their accomplishments to this center.

The RCC Program Manager was able to share a few: “Accomplished sobriety for six weeks, accepted at a sober living house, infection gone and walking without walker.”
"Was able to finish my antibiotic treatment all the way for the first time."

"I've accomplished a lot since being here. I've been going to AA and am now going to a sober house."

"YMCA (??) bed. Dialysis starting. Learning how to be independent. ID, SS card, Birth certificate, EBT cards all ordered and received."

- Food Pantry

Discussion Summary: The food pantry continues to be the most successful in the state, based on the weight of food being given out, the unprecedented number of people being served. The problem they are running into is that there is simply not enough food to help everyone, because there are so many in need. The pantry is currently partnered with Good Shepherd Food Bank and local farms within the community and state. The pantry is also in desperate need of volunteers. MMC is looking to see how they can offer more volunteer opportunities’ to people in the community.

MMC is currently working with SJVNA on getting the food pantry mural up soon. The funds should be released this week to start the project. They are also working on getting additional signage for the community policing center. The community policing center and food pantry are symbiotically working together and the arrangement seems to be working well.

Action to be taken: B.B will share info on how to volunteer to support the pantry

5) Impact of Homelessness on MMC (15 minutes)

Discussion Summary: The NAC wanted to discuss the growing issue of homelessness in Portland and learn about the role and impact that it has had on operations at MMC. The issue was raised because of the homeless encampments that seem to be growing in various parts of the City. A member of WPNA asked how the hospital is dealing with the crisis, as there are reports of “repeat customers” in the hospital, taking up beds, with uncompensated care, etc.

A MMC Rep. acknowledged that although the issue may be more visible to the public now; MMC has been dealing with this issue for many years and it does not seem to be heavily impacting the hospital. There has been an uptick in homeless mothers delivering babies at the hospital and MMC is not allowed to discharge these patients, due to not having stable housing. The homeless population is just a reflection of the other concerns the hospital deals with such as behavioral health, nursing home shortages etc.

MMC staff are helping with the City’s Encampment Crisis Response Team and helping with the Mobile Outreach effort to the homeless, focusing on psychiatric care. These programs are very successful in France. The new CAMP program, to open this fall, should be an effective help with the addiction crisis. A comment was made that prevention and early intervention is very is critical to addressing the challenge of homelessness. It was suggested that perhaps a broader community coalition, including MMC, could approach the State for more support from the Opioid settlement funds.
Where MMC has seen an impact, when it comes to demographics, is the added numbers of “new Mainers” overloading the hospital. When the new residents arrived, they were seeing these patients for more acute injuries. Many of these patients have now moved out of Portland and into other areas of the state, where they now have established doctors, so they do not need to utilize hospital services. Although, the MH system supports them through primary care, it is still a huge undertaking for the system as a whole. The MMC Rep also commented that many of the new Mainers that have stayed in the area have actually started working for the hospital. “They are excellent workers - we are happy to have them and help them make a life here.”

As far as other situations, there has also always been some aggressive behavior in the ER at times, but situations of workplace violence have increased nation-wide. MMC is doing their best to train all care team member appropriately in WPV situations and other “tough” scenarios that they may come across. MMC is clear about their mission, they will take care of anyone who needs it and the other part of that mission is to create a healthy community.

6) Old Business (5 Minutes)

- Food Pantry Mural
  Discussion Summary: No new updates other than what was discussed prior

- “Glacier” Issue
  Discussion Summary: Member from LNA and WENA are going to meet onsite with MMC property management to look at what can be done about the ice buildup in the specific area mentioned last meeting. They will also bringing up the plowing issue in Union Station Plaza on behalf of the group.

7) New Business?

8) Adjourn

Next meeting: November 8, 2023 @ 12pm
Submitted by: Natalie Dubail

Acronym List:

CoP- City of Portland
LNA – Libbytown Neighborhood Association
MMC – Maine Medical Center
NAC – Neighborhood Advisory Committee
PNA- Parkside Neighborhood Association
SJVNA – Saint John Valley Neighborhood Association
SNF- Skilled Nursing Facility
WENA – West End Neighborhood Association
WPNA- Western Promenade Neighborhood Association