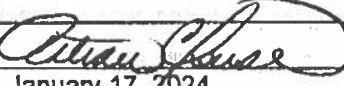


**DISCLOSURE BY NON-ELECTED STATE EMPLOYEE OF FINANCIAL INTEREST
AND DETERMINATION BY APPOINTING AUTHORITY
AS REQUIRED BY G. L. c. 268A, § 6**

RECEIVED
STATE ETHICS COMMISSION
2024 FEB 16 AM 11:35

	STATE EMPLOYEE INFORMATION
Name:	Antonio Sousa
Title or Position:	Deputy Director, Bureau of Health Care Safety & Quality
State Agency:	Department of Public Health
Agency Address:	67 Forest Street, Marlborough, MA 01752
Office Phone:	617-366-9557
Office E-mail:	Antonio.sousa@mass.gov
	My duties require me to participate in a particular matter, and I may not participate because of a financial interest that I am disclosing here. I request a determination from my appointing authority about how I should proceed.
	PARTICULAR MATTER
Particular matter E.g., a judicial or other proceeding, application, submission, request for a ruling or other determination, contract, claim, controversy, charge, accusation, arrest, decision, determination, or finding.	Assessment of continued operations for a health care facility given fiscal situation
Your required participation in the particular matter: E.g., approval, disapproval, decision, recommendation, rendering advice, investigation, other.	Participation in discussion and planning to mitigate public health impact, if closure of a health care facility were to occur, and continued provision of essential services to extent possible. I am not the final decision maker on these items with respect to my agency as this is handled at the senior management level within the Department and EOHHS.
	FINANCIAL INTEREST IN THE PARTICULAR MATTER
Write an X by all that apply.	<input type="checkbox"/> I have a financial interest in the matter. <input checked="" type="checkbox"/> My immediate family member has a financial interest in the matter. <input type="checkbox"/> My business partner has a financial interest in the matter. <input type="checkbox"/> I am an officer, director, trustee, partner or employee of a business organization, and the business organization has a financial interest in the matter. <input type="checkbox"/> I am negotiating or have made an arrangement concerning future employment with a person or organization, and the person or organization has a financial interest in the matter.
Financial interest in the matter	Family member employed at health care facility. Specific financial impact unknown
Employee signature:	
Date:	January 17, 2024

DETERMINATION BY APPOINTING OFFICIAL

	APPOINTING AUTHORITY INFORMATION
Name of Appointing Authority:	Elizabeth Kelley
Title or Position:	Director, Bureau of Health Care Safety & Quality
Agency/Department:	Department of Public Health
Agency Address:	67 Forest Street, Marlborough, MA 01752
Office Phone:	8572022174
Office E-mail	elizabeth.d.kelley@mass.gov
	DETERMINATION
Determination by appointing authority: Write an X by your selection.	As appointing official, as required by G.L. c. 268A, § 6, I have reviewed the particular matter and the financial interest identified above by a state employee. <input type="checkbox"/> I am assigning the particular matter to another employee, or <input type="checkbox"/> I am assuming responsibility for the particular matter, or <input checked="" type="checkbox"/> I have determined that the financial interest is not so substantial as to be deemed likely to affect the integrity of the services which the Commonwealth may expect from the employee.
Appointing Authority signature:	<i>Elizabeth Kelley</i>
Date:	2/12/2024
Comment:	

Attach additional pages if necessary.

File copy with:

State Ethics Commission, One Ashburton Place, Room 619, Boston, MA 02108