

March 23, 2021
Meeting Packet

Meeting Agenda



Community Benefits Advisory Committee (CBAC)
Beth Israel Deaconess Medical Center (BIDMC)
Tuesday, March 23, 2021
5:00 PM – 7:00 PM
[Zoom Link](#)

I. 5:00 pm – 5:05 pm	Welcome and Introductions
II. 5:05 pm – 5:20 pm	Public Comments
III. 5:20 pm – 5:35 pm	Community Benefits Program Updates
IV. 5:35 pm – 6:00 pm	Community-based Health Initiative Update
V. 6:00 pm – 6:30 pm	FY22 Community Health Needs Assessment
VI. 6:30 pm – 6:50 pm	Beth Israel Lahey Health Updates
VII. 6:50 pm – 7:00 pm	Next Steps and Adjourn

Next Meeting: June 22, 2021

Meeting Slides

BIDMC Community Benefits Advisory Committee Meeting

March 23, 2021



Beth Israel Lahey Health

Housekeeping



Beth Israel Lahey Health

- Please join the meeting using video
- If you lose your connection, please call in
 - Phone number: 1-929-205-6099
- Everyone will be muted upon arrival
- Please use the chat function for requests to be unmuted, to ask questions, or to make comments
- Our Zoom moderator is Jamie



Welcome and Introductions

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Content



- Welcome and Introductions
- Public Comments
- Community Benefits Program Updates
- Community-based Health Initiative Update
- FY22 Community Health Needs Assessment
- BILH Updates
- Next Steps and Adjourn

Welcome New CBAC Member



- **Flor Amaya, PT DPT, MPH**
- Director of Public Health, City of Chelsea



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Public Comments

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Community Benefits Program Updates

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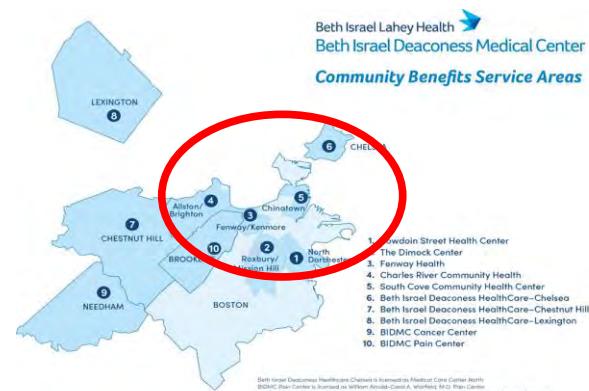
BIDMC Community Benefits Service Area Priority Cohorts and Geography

Beth Israel Lahey Health  Beth Israel Deaconess Medical Center

Community Benefits Service Areas

Priority Cohorts:

- Older Adults
- Youth/Adolescents
- Racially/Ethnically Diverse/LEP
- Low-Income
- LGBTQ
- Families affected by incarceration



Beth Israel Deaconess HealthCare & Lexington HealthCare Center, BIDMC Pain Center is licensed as a beth Israel Deaconess Medical Center (BIDMC) Pain Center. BIDMC Cancer Center is licensed as The Cancer Center of Beth Israel Deaconess Medical Center (BIDMC) - BIDMC.

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BIDMC Health Priorities



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Behavioral Health

Social Determinants of Health (SDOH)

Access to Care

Chronic/Complex Conditions and Risk Factors

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Annual Regulatory Reports



Beth Israel Lahey Health

**Mass
Attorney
General
(AGO)**

IRS

**City of
Boston**

**Department of
Public Health
(DPH)**

Annual
Community
Benefits Report

IRS Tax Form
990
Schedule H
Schedule I

Payment in Lieu
of Taxes (PILOT)
Report

Determination of
Need (DoN)
Community-
based Health
Initiative

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Implementation Strategy Annual Updates



- Review and update Implementation Strategy at least annually to capture regulatory and programmatic changes as well as emergent needs
- BIDMC FY20 and FY21 Implementation Strategy updates include:
 - Addressing emerging needs of COVID-19
 - Including efforts under Access to Care related to testing, vaccination and education
 - Including efforts related to addressing food insecurity and housing stability

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FY20 Community Benefits Program Highlights



- COVID-19 efforts
 - Provided resources to the community at-large and Community Care Alliance health centers
 - Collaborated with various hospitals, Safety Net Affiliates and government agencies
- Expanded pharmacy services and payment assistance
- Workforce Development
 - Continued summer youth jobs in a virtual setting
- Center for Violence Prevention and Recovery
 - Expanded its direct support to people facing food insecurity, housing instability, and additional behavioral health challenges due to pandemic related stressors

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FY20 Sunset and Modified Community Benefits Programs



- Kit Clark Senior Services
 - Transportation services to assist patients traveling from Bowdoin Street Health Center to BIDMC have switched from Kit Clark Senior Services to Acuity Link (medical transportation platform)
- Active Living Healthy Eating & Greater Boston Food Bank Mobile Market
 - Food initiatives at Charles River Community Health supported by time limited grants that ended
- Cancer Patient Navigator Network
 - Pivoted due to COVID-19 from in person meetings at BIDMC to virtual meetings supported by other network collaborators
- COVID-19
 - Some programs were modified significantly in order to continue during the pandemic (workforce development and BSHC food initiatives etc.)

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FY21 BILH System Community Benefits Priorities



- Align Community Benefits priorities and goals:
 - Housing stability: increase housing stability for those at risk for eviction or homelessness
 - Food insecurity: increase access to low-cost healthy foods for those in need
- Build staff and grantee evaluation capacity
 - Measure the impact of Community Benefits investments
 - Use data to inform future strategic investments
 - Implement new Community Benefits data and reporting system
- Spread evidence-informed/based strategies
 - Support the most effective programming with the aim of improving community health

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FY21 BIDMC Priorities



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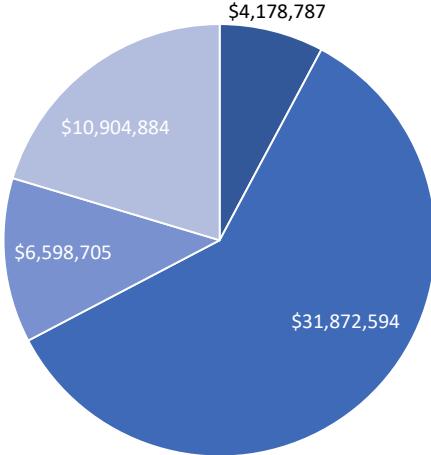
- Housing stability
 - Community-based Health Initiative investment (\$833K in 2021)
 - Measurement of shared outcomes: housing affordability, current housing situation, sense of agency
- Food insecurity
 - Exploring partnerships to increase access to fresh food
 - Bowdoin Food for Health Initiative: Food delivery to high-risk patients, in partnership with Fresh Truck
 - Measurement: Pounds or units of food distributed
- Evaluation capacity
 - Working with Director of Data and Evaluation on standardizing and aligning metrics

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FY20 BIDMC Community Benefits Expenditures
Implementation Strategy Priorities



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Implementation Strategy Priority	Expenditure (\$)
Social Determinants of Health	\$31,872,594
Access to Care	\$10,904,884
Behavioral Health	\$6,598,705
Chronic Disease	\$4,178,787

***Total FY 20 CB Expenditure: \$53,554,970**

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FY20 BIDMC CB Expenditures
AG Program Types and Health Priorities

Beth Israel Lahey Health

CB Expenditures		BIDMC Totals
Program Type		
	Direct Clinical Services	\$5,804,875
	Community-Clinical Linkages	\$2,848,648
	Total Population or Community-Wide Initiatives	\$3,939,830
	Access/Coverage Support	\$18,381,472
	Infrastructure to Support Community Benefits	\$221,750
	Collaboration	\$31,196,575
	Total	\$31,196,575
	Chronic Disease Management and Prevention	\$15,865,565
	Mental Health	\$5,376,519
	Housing Stability/Homelessness	\$765,560
	Substance Use	\$3,096,520
	Additional Health Needs	\$6,092,411
	Total	\$31,196,575

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Community-based Health Initiative Update

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CHI Grantee Updates



Progress to date:

- Grantee agreements signed and first payments made
- Grantee learning collaborative webinars:
 - January: logic models
 - February: shared outcome measures workshop

Next milestones:

- Finalizing logic models and shared outcome measures
- Data use agreements and data collection
- First progress reports due in July

Healthy Neighborhoods Update



- **Feb. 17:** RFP released for first two Boston neighborhoods: Bowdoin/Geneva and Fenway Kenmore
- **March 18:** RFP submission deadline
 - Allocation Committee will be reviewing applications
- **April 23:** Notification of intent to award
- **May - August:** Community engagement activities and development of project and evaluation plan
- **September:** Approximate project start date

CBAC Member Survey Results

Beth Israel Lahey Health

Community Benefits Advisory Committee Members Who Strongly Agreed or Agreed with Statements about NIB CHI

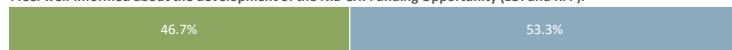
■ Strongly Agree ■ Agree

The community health priorities funded reflect the most pressing needs of BIDMC's priority neighborhoods.



Strongly Agree: 66.7%	Agree: 33.3%
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I feel well-informed about the development of the NIB CHI Funding Opportunity (LOI and RFP).



Strongly Agree: 46.7%	Agree: 53.3%
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The CBAC was involved in deciding how to proceed with the NIB CHI Funding Opportunity in response to COVID-19.



Strongly Agree: 33.3%	Agree: 66.7%
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The NIB CHI Funding Opportunity (LOI and RFP) responded to the community needs of COVID-19.



Strongly Agree: 33.3%	Agree: 66.7%
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I was engaged in the decisions on how to proceed with the NIB CHI Funding Opportunity in response to COVID-19.



Strongly Agree: 26.7%	Agree: 73.3%
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CBAC Member Survey Results

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CBAC Members Rating How the Virtual Platform Affected Their Participation in CBAC Meetings

■ Somewhat/ A lot Easier ■ No Change ■ Somewhat/ A lot Harder

Receiving information at virtual CBAC meetings.



Somewhat/ A lot Easier: 80.0%	No Change: 13.3%	Somewhat/ A lot Harder: 6.7%
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Overall experience participating in virtual CBAC meetings.



Somewhat/ A lot Easier: 73.3%	No Change: 20.0%	Somewhat/ A lot Harder: 6.7%
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Receiving oral public comments at virtual CBAC meetings.



Somewhat/ A lot Easier: 33.3%	No Change: 60.0%	Somewhat/ A lot Harder: 6.7%
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Sharing my opinion at virtual CBAC meetings.



Somewhat/ A lot Easier: 33.3%	No Change: 46.7%	Somewhat/ A lot Harder: 20.0%
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FY22 Community Health Needs Assessment (CHNA)

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CHNA and Implementation Strategy Opportunity and Obligations

Opportunity to influence the health of residents throughout the communities BILH serves

- Understand community assets and assess and address health-related needs of those living in BILH CBSAs with an emphasis on historically underserved residents and populations impacted most by inequities
- Collaborate with community-based organizations, community leaders, and residents to develop innovative solutions and evidence-based strategies to address health needs
- Align Community Benefits and priorities across the system for broader impact
- Meet all state and federal requirements for non-profit hospitals

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**FY22 CHNA and Implementation Strategy (IS)
Community Engagement**

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Specific Populations	Translation/ Interpretation Languages
Cohorts most impacted by COVID-19	Spanish
Racially and ethnically diverse/non-English speakers	Portuguese
People impacted by violence and incarceration	Haitian Creole
Youth	Cape Verdean
Older adults	Mandarin
LGBTQ+ population	Cantonese
Low-income adults and families. Others?	Russian

**Who in our CBSA do we hardly reach?
How do we best engage them?
How do we best engage as we emerge from COVID 19?**

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BILH Updates

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Gateway Municipality (GwM)

Definition



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- Population between 35,000 and 250,000
- Median household income below Commonwealth average (\$77,400)
- Percentage of population with advanced degree below Commonwealth average (43%)

GwM related to BILH or Safety Net Affiliate (SNA)	
<div style="background-color: red; color: white; padding: 2px 5px;">#2 MA COVID Hotspot</div> <div style="background-color: red; color: white; padding: 2px 5px;">#1 MA COVID Hotspot</div>	<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="flex: 1;"> <p>Brockton</p> <p>Chelsea</p> <p>Everett</p> <p>Haverhill</p> <p>Lawrence</p> </div> <div style="flex: 1;"> <p>Lynn</p> <p>Malden</p> <p>Peabody</p> <p>Quincy</p> </div> </div>

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BILH Community Benefits Initiatives

Gateway Municipality Investment - Chelsea



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Beth Israel Lahey Health awards \$600,000 in grant funding to the City of Chelsea

Housing Stability

Chelsea Legal Aid Bureau

- Provides legal services and representation to Chelsea residents who are facing eviction and landlord disputes



CHELSEA HOUSING LEGAL CLINIC - [Click Here](#)

Food Security

ChelseaEats

- Provides residents with monthly debit cards to be used at supermarkets and food stores



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BILH Vaccination Update



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- 10 vaccination sites throughout Massachusetts
- Administered 118,000 doses of COVID-19 vaccine to date
- Multilingual outreach and support:
 - Phone call outreach to patients who lack SMS or email
 - Postcards sent to patients without email or phone on record
 - Call Center to assist with verbal attestations and bookings
 - Community health center outreach to book eligible patients
- Primary care will play a crucial role in vaccination efforts

Staggered Invitations to highest impacted areas including:
Lawrence
Lynn
Fall River
Lowell
Methuen
Middleton
Saugus
Brockton
New Bedford

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Next Steps

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Next Steps



- Please send in your Conflict of Interest disclosure form if you have not already done so
- Future meetings:
 - June 22, 2021
 - September 28, 2021
 - December 14, 2021

December 15, 2020

Meeting Minutes



**Community Benefits Advisory Committee (CBAC)
Meeting Minutes**

**Tuesday, December 15, 2020, 5:00 PM - 7:00 PM
Held Virtually Via Zoom**

Present: Walter Armstrong, Richard Giordano, Lauren Gabovitch, Jamie Goldfarb, Nancy Kasen, Barry Keppard, Phillomin Laptiste, Angie Liou, Sandy Novack, Holly Oh, MD, Alex Oliver-Davila, Joanne Pokaski, Triniese Polk, Jane Powers, Luis Prado, Richard Rouse, Anna Spier, Robert Torres, LaShonda Walker-Robinson, Fred Wang

Absent: Elizabeth (Liz) Browne, Tina Chery, James Morton, Jerry Rubin

Guests: Carrie Jones, John Snow, Inc. (JSI), Coordinator; Madison MacLean, JSI, Consultant; Alec McKinney, JSI, Senior Project Director; Danelle Marable, Director of Evaluation and Data, Beth Israel Lahey Health (BILH); Valerie Polletta, Health Resources in Action (HRiA), Associate Director, Research & Evaluation; Annie Rushman, HRiA, Senior Associate

Welcome

Nancy Kasen, Vice President, Community Benefits and Community Relations, BILH, welcomed everyone to the meeting and thanked them for joining.

Nancy shared that Luis Prado is retiring from the City of Chelsea's Department of Health and Human Services. She thanked him for his service to the community and for being an active member of the Community Benefits Advisory Committee (CBAC).

Robert Torres, Director of Community Benefits, Beth Israel Deaconess Medical Center (BIDMC), then introduced Shondell Davis as a new member of the CBAC. Shondell was born and raised in Boston, worked for many years in the healthcare industry, and now works with the Cory Johnson Center for Post-Traumatic Healing.

The minutes from the September 22 CBAC meeting were reviewed and accepted.

Public Comment Period

There were no oral or written public comments shared during this meeting.

AGO Community Representative Feedback

Robert introduced the annual community representative feedback form. He explained it is a two-page form that is filled out by community members that are engaged in a hospital's Community Health Needs Assessment and/or Implementation Strategy. He then reviewed the Massachusetts Department of Public

Health's Continuum of Community Engagement, which highlights various levels of community engagement ranging from inform (lowest level) to community-driven/led (highest level). Robert provided examples of community engagement and explained how they would be classified along the continuum. He shared that the form will ask members to report on engagement related to the execution of the Implementation Strategy. Robert explained that BIDMC's goal is to move towards the higher levels of the continuum, as appropriate, and that the responses from CBAC members will help shape BIDMC's Community Benefits program.

Robert said that members can reach out to the Community Benefits team with any questions. He mentioned that the form is due on January 15, 2021 to the Attorney General's Office and requested that a copy also be sent to him. He confirmed that the Community Benefits team would email the form with the instructions after the meeting.

Community-based Health Initiative Update

Nancy provided a brief overview on the Community-based Health Initiative (CHI). She shared that on December 4, the Community Benefits team announced that 16 Boston-based organizations had been selected to receive funding for projects in the areas of housing affordability, jobs & financial security, and behavioral health. Funding amounts ranged from \$100,000 to \$1 million. She also shared that there was one \$270,000 grant awarded to a behavioral health organization in the City of Chelsea. Nancy explained that the members of the CHI Allocation Committee were guided by five core principles when they reviewed applications: impact, community, health and racial equity, sustainability, and moving upstream. Nancy also shared the breakdown of funds that were allocated to each health priority area, and showed how it closely aligned to the original allocations approved by the CBAC in September 2019.

Members of the Community Benefits team then provided a brief overview of each grantee's proposals, including the priority area(s) each was focusing on.

Jamie Goldfarb, Program Administrator of Community Benefits, BIDMC, then shared that the first two neighborhoods selected to participate in the Healthy Neighborhoods Initiative were Bowdoin/Geneva and Fenway/Kenmore. She shared that the Request for Proposals will be released in February 2021, with applications due in March 2021. Selected applicants will then conduct community engagement and develop a project plan that will be reviewed by the Allocation Committee. Jamie explained that this will be an iterative process and the next set of neighborhoods will be announced in 2022.

BILH Diversity, Equity and Inclusion Task Force

Nancy shared that recent events have catalyzed the need for a deeper and broader institutional approach to address inequity and disparities within BILH and the communities it serves. She shared that as the second largest employer in Massachusetts, BILH has a unique responsibility and an outsized ability to positively impact the community through patients and families, employees, and community partners. She explained that although there have been numerous initiatives to address diversity, equity, and inclusion (DEI), there is now a renewed focus and commitment to achieving sustainable change.

Nancy then provided a brief overview of the task force leading the DEI initiatives and the process undertaken to ensure diverse voices and perspectives were included. Nancy shared that 48 listening sessions were held and over 4,000 employees responded to a system-wide survey. Phillomin (Philly) Laptiste, Executive Director of Bowdoin Street Health Center and Joanne Pokaski, Senior Director of Workforce Development & Community Relations at BIDMC shared the DEI Task Force's final

recommendations. They reviewed the Task Force's recommended actions in the areas of infrastructure, culture and leadership, talent, patient care, academics, and community investments.

BILH Community Benefits Committee (CBC) Program Priorities

Anna Spier, Manager of Community Benefits, BIDMC, reminded the CBAC that they discussed the health priorities selected by the BILH Community Benefits Committee (CBC) at the September meeting. Nancy shared the CBAC's views about food insecurity and housing being pressing needs in the community with the CBC. The CBC endorsed the recommendation to add these as two priorities in the category of social determinants of health. Anna then provided examples of the goals that will be used to measure impact in each of the priority areas. She explained that moving forward, BILH will be moving towards collecting more outcome-based measures. BILH recently hired a Director of Evaluation and Data that will help support data collection efforts for Community Benefits.

Evaluation

Valerie Polletta, Associate Director of Research & Evaluation at Health Resources in Action (HRiA), shared that as a part of the evaluation plan, HRiA created a voluntary and anonymous survey to evaluate the CBAC's process related to the CHI. Time was dedicated to filling out the online survey during the meeting. For members not in attendance, a link to the survey was emailed after the meeting.

Adjourn

Jamie reminded the CBAC that the Community Benefits team will email the Attorney General's Community Representative Feedback Form after the meeting. Additionally, the annual Conflict of Interest Disclosure form will be emailed out. She shared that the Community Benefits team will reach out to orient new members who have not completed this form before.

Jamie thanked the attendees for joining and reminded everyone that the next scheduled meeting is March 23, 2021 from 5-7 pm.

Advisory Committee Members	2019						2020				
	April 9th	May 21st	June 25th	July 23rd	September 24	October 22nd	January 28	April 28	June 23	September 22	December 15
Elizabeth Browne	X	X	Ph	Ph	X	X	X	Ph	Ph	Ph	A
Tina Chery	X	A	A	A	Ph	A	A	Ph	A	A	A
Shondell Davis											Ph
Richard Giordano	X	X	X	X	X	X	X	Ph	Ph	Ph	Ph
Sarah Hamilton	X	X	X	X	X	X	X	A	Ph		
Barry Keppard	X	X	A	X	X	X	X	Ph	Ph	Ph	Ph
Phillomin Laptiste	X	X	X	A	X	X	X	Ph	Ph	A	Ph
Theresa Lee	X	A	X	A	X	A	X				
Angie Liou								Ph	Ph	Ph	Ph
James Morton								A	Ph	Ph	A
Sandy Novack								Ph	Ph	Ph	Ph
Holly Oh	X	X	A	X	X	X	X	Ph	A	Ph	Ph
Alex Oliver-Davila	Ph	X	A	A	A	X	A	A	Ph	Ph	Ph
Luis Prado	A	X	A	X	A	X	X	Ph	Ph	A	Ph
Triniese Polk							X	A	Ph	Ph	Ph
Jane Powers	A	X	X	X	X	X	X	Ph	Ph	Ph	Ph
Richard Rouse	X	X	X	X	X	X	X	A	A	Ph	Ph
Jerry Rubin	X	A	A	X	X	X	X	Ph	A	Ph	A
Fred Wang	X	X	X	X	X	X	X	Ph	Ph	Ph	Ph
BIDMC Staff - Ex Officio											
Walter Armstrong							X	Ph	Ph	Ph	Ph
Lauren Gabovitch	X	A	A	X	X	X	A	Ph	Ph	A	Ph
Nancy Kasen	X	X	X	X	X	X	X	Ph	Ph	Ph	Ph
Joanne Pokaski	X	A	A	X	X	X	A	Ph	Ph	Ph	Ph
Robert Torres							X	Ph	Ph	Ph	Ph
LaShonda Walker-Robinson	X	X	Ph	X	X	X	X	Ph	Ph	A	Ph

Key	
X	Participated in person
A	Absent
Ph	Participated by Phone or Video

Advisory Committee Members	2021			
	March 23	June 22	September 28	December 14
Flor Amaya	Ph			
Elizabeth Browne	Ph			
Tina Chery	A			
Shondell Davis	Ph			
Richard Giordano	Ph			
Barry Keppard	Ph			
Phillomin Laptiste	Ph			
Angie Liou	Ph			
James Morton	Ph			
Sandy Novack	Ph			
Holly Oh	Ph			
Alex Oliver-Davila	Ph			
Triniese Polk	Ph			
Jane Powers	Ph			
Richard Rouse	Ph			
Fred Wang	Ph			
BIDMC Staff - Ex Officio				
Walter Armstrong	Ph			
Lauren Gabovitch	A			
Nancy Kasen	Ph			
Joanne Pokaski	Ph			
Robert Torres	Ph			
LaShonda Walker-Robinson	Ph			

Key	
X	Participated in person
A	Absent
Ph	Participated by Phone or Video