

December 14, 2021
Meeting Packet

Advisory Committee Members	2021			
	March 23	June 22	September 28	December 14
Alberte Altine-Gibson			Ph	Ph
Flor Amaya	Ph	Ph	Ph	A
Maia Betts			Ph	Ph
Elizabeth Browne	Ph	Ph	Ph	Ph
Tina Chery	A	Ph		
Alexandra Chery Dorrelus		Ph	Ph	Ph
Shondell Davis	Ph	Ph	Ph	Ph
Richard Giordano	Ph	Ph	Ph	Ph
Barry Keppard	Ph	Ph	Ph	Ph
Kira Khazatsky			Ph	Ph
Phillomin Laptiste	Ph	Ph		
Angie Liou	Ph	Ph	Ph	Ph
James Morton	Ph	A	Ph	A
Sandy Novack	Ph	Ph	Ph	Ph
Holly Oh	Ph	Ph		
Alex Oliver-Davila	Ph	A	A	Ph
Triniese Polk	Ph	A	A	Ph
Jane Powers	Ph	Ph	A	A
Richard Rouse	Ph	A	Ph	A
Fred Wang	Ph	Ph	Ph	Ph
BIDMC Staff - Ex Officio				
Walter Armstrong	Ph	Ph	Ph	Ph
Lauren Gabovitch	A	Ph	Ph	Ph
Nancy Kasen	Ph	Ph	Ph	Ph
Kelina (Kelly) Orlando				Ph
Joanne Pokaski	Ph	A	Ph	Ph
Melody Route-Satchell		Ph	A	
Robert Torres	Ph	Ph	Ph	Ph
LaShonda Walker-Robinson	Ph	Ph	Ph	Ph

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

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

Meeting Agenda

Community Benefits Advisory Committee (CBAC)

Beth Israel Deaconess Medical Center (BIDMC)

Tuesday, December 14, 2021
5:00 PM – 7:00 PM

I. 5:00 pm – 5:05 pm	Welcome and Introductions
II. 5:05 pm – 5:20 pm	Public Comment
III. 5:20 pm – 5:30 pm	Annual Updates (Conflict of Interest Statement, Charter, CBAC Survey)
IV. 5:30 pm – 6:30 pm	FY 22 Community Health Needs Assessment (Youth Advisors, Preliminary Findings)
V. 6:30 pm – 6:50 pm	Health Neighborhoods Update
VI. 6:50 pm – 7:00 pm	Next Steps and Adjourn

Next Meeting: March 22, 2022

Meeting Slides

BIDMC Community Benefits Advisory Committee Meeting

December 14, 2021



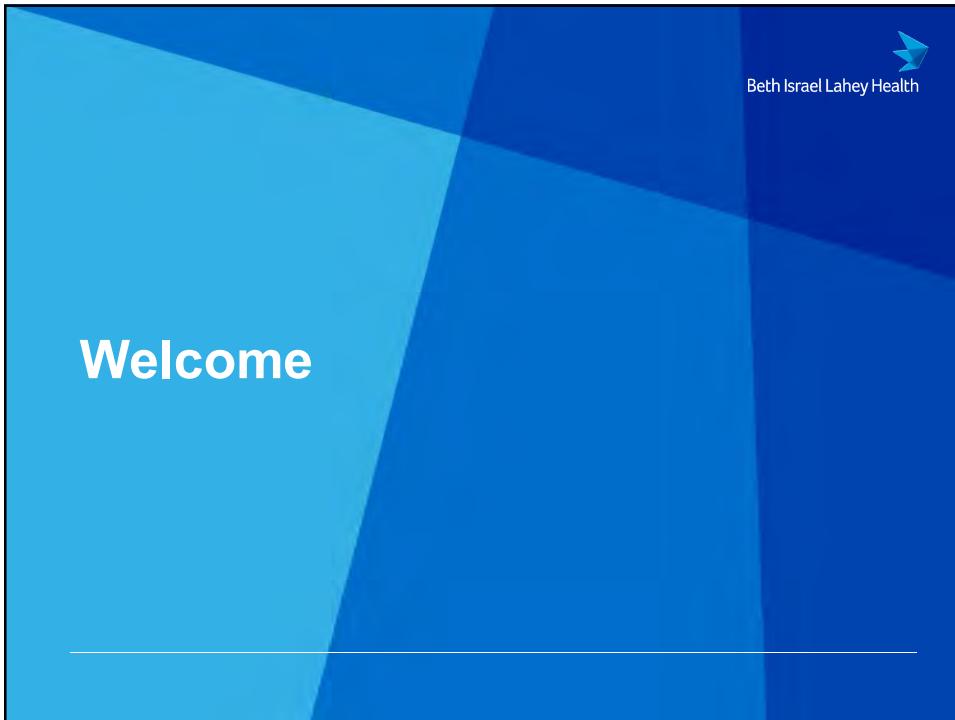
Beth Israel Lahey Health

Housekeeping



Beth Israel Lahey Health

- Please join the meeting using video (if possible)
- If you lose your connection, please call in
 - Phone number: 1-301-715-8592
 - Meeting ID: 947 6462 3664
- 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



Content

Beth Israel Lahey Health

- Welcome and Introductions
- Public Comment
- Annual Updates
 - Conflict of Interest Policy and Disclosure Statement, Charter, CBAC Survey
- FY 22 Community Health Needs Assessment
 - Youth Advisors Presentation
 - Preliminary Findings
- Healthy Neighborhoods Update
- Next Steps and Adjourn

BIDMC CBAC Meeting | December 2021

Beth Israel Deaconess Medical Center |  HARVARD MEDICAL SCHOOL TEACHING HOSPITAL

Public Comment

Beth Israel Lahey Health

**Annual Updates (Conflict of Interest
Policy and Disclosure Statement,
Charter, CBAC Survey)**

Conflict of Interest (COI) Policy and Statement

Beth Israel Lahey Health

- **Purpose:** Protect the integrity of the CBAC's decision-making process
- **Disclosable Interests:** Volunteer or governance roles (e.g. Board of Directors seat), compensation arrangements (e.g. Employer or consulting client), material ownership or investment interests (e.g. holding stock, being a part-owner)
- **Timing:** Upon joining the CBAC, annually, or when your situation changes (ad hoc)
- Disclosures are not necessarily conflicts of interest
- COI's are not required by any regulatory body; BIDMC considers COI disclosure statements to be a best practice
- **Next Step:** COI will be emailed to you as a follow up to today's meeting

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Beth Israel Deaconess | HARVARD MEDICAL SCHOOL
Medical Center TEACHING HOSPITAL

Attorney General's Office FY 21 Forms Overview - Community Representative Feedback Form

Beth Israel Lahey Health

- Required annually by the Attorney General's Office (AGO)
- Completed by the hospital's CBAC members and other community partners to assess community engagement processes
- CBAC member request:
 - Fill out the form and email directly to:
 - Attorney General's Office (at CBAdmin@state.ma.us)
 - Please copy jamie.goldfarb@bilh.org
- Due Date: **January 14, 2022**
- **Next Step:** Form will be emailed to you as a follow up to today's meeting

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Attorney General's Office FY 21 Forms
Overview - Community Representative Feedback Form

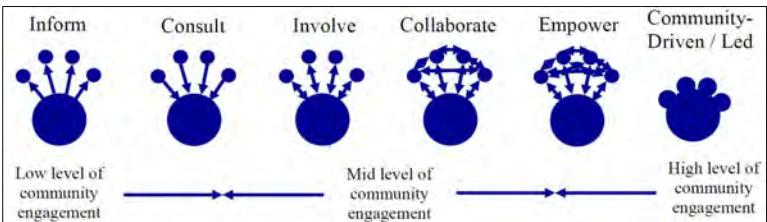
- Community Representative Feedback Form Overview
 - Section 1: Background information
 - Section 2: Level of engagement across Community Health Needs Assessment (CHNA) and/or Implementation Strategy
 - Section 3: Engagement Experience
- CBAC responses help inform BIDMC's Community Benefits program and future Community Benefits guidelines from the Attorney General

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Attorney General's Office FY 21 Forms
Hospital Self-Assessment Form



	FY 21 Level of Engagement	FY 22 Level of Engagement Goal
Engagement in developing and implementing plan to address significant needs documented in CHNA	Involve	Collaborate
Implementing Community Benefits programs	Collaborate	Collaborate
Update Implementation Strategy	Consult	Collaborate

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Charter and Survey Update

Beth Israel Lahey Health



- Community Benefits Advisory Committee (CBAC) Charter
 - Updated in 2020 to encompass a broader range of Community Benefits activities and align with Attorney General Office requirements; removed items that were no longer relevant
 - Charter will be updated in 2022
 - Annual CBAC member survey
 - Administered every year to measure CBAC effectiveness and satisfaction
 - 2021 CBAC survey will be administered at the end of today's meeting by Health Resources in Action (HRIa)

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FY 22 Community Health Needs Assessment

Beth Israel Lahey Health

Our Communities

BIDMC Youth Advisors

December 14, 2021



Agenda

Welcome

What we've been working on and learned

Youth Advisors Introductions

Facts about my community

Social Determinants of Health in our Communities

What's Next

Q&A

Closing





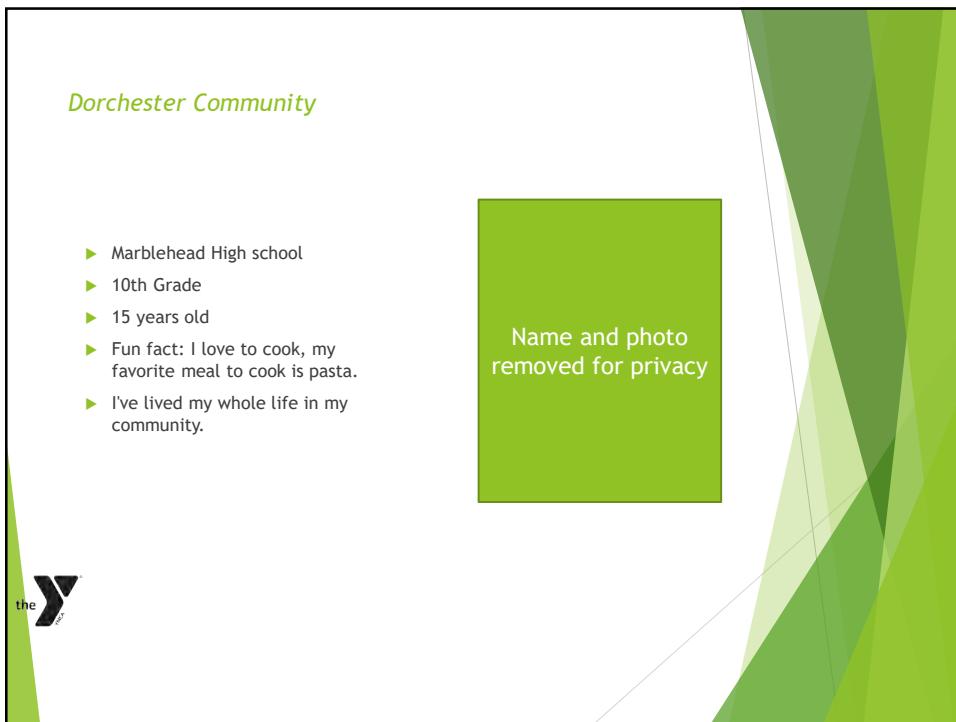
What we have been working on...

What we learned so far...

the 

- ▶ Providing input for youth community health needs assessment
- ▶ Identifying (assets and opportunities) social determinants of health in our communities

- ▶ We have learned how the health care system addresses public health needs in our communities
- ▶ How social determinants of health impact our communities (positively or negatively)
- ▶ What is a board of advisors and the boards function in the community



Dorchester Community

the 

- ▶ Marblehead High school
- ▶ 10th Grade
- ▶ 15 years old
- ▶ Fun fact: I love to cook, my favorite meal to cook is pasta.
- ▶ I've lived my whole life in my community.

Name and photo removed for privacy

Brighton Community

- ▶ Mary Lyon Pilot High School
- ▶ 12th Grade
- ▶ 17 years old
- ▶ Fun fact: I like taking pictures of the sky.
- ▶ I've lived in Brighton for 15 years.

Name and photo removed for privacy

Mission Hill/JP Community

- ▶ Boston Latin Academy
- ▶ 10th Grade
- ▶ 15 years old
- ▶ Fun fact: I lived in China and Japan for 3 months.
- ▶ I've lived in my community for my whole life.

Name and photo removed for privacy

Roxbury Community

- ▶ Margarita Muñiz Academy
- ▶ 9th Grade
- ▶ 15 years old
- ▶ Fun Fact: I like to ride my bike around Franklin Park.
- ▶ I've lived in my community for 8 years, I moved to the United States when I was 7 years old from the Dominican Republic.

Name and photo removed for privacy

the Y

Facts about my Community!

the Y



Brighton

A lot of elementary and high schools in Brighton.

A lot of restaurants and fast-food options.

Family oriented neighborhood.

I enjoy walking around my neighborhood, its pedestrian friendly.



Dorchester

Caribbean Restaurants.

I like taking the train, it's very close to my house.

Everything is in walking distance.

Friends live close by can visit frequently.



Mission Hill



Really good restaurants

Reggie Lewis Center

Boston Center for Youth and Families Tobin Center. I applied for my first job with Successlink this summer.

College friendly neighborhood.



Roxbury



Large latino/hispanic population

Zoo and Franklin Park walking distance

Tight nit community, everyone helps each other out.

I like the many Latino/Hispanic food options in my community.

Social Determinants of Health in Our Communities



Social Determinants of Health



Social determinants of health (SDOH) are conditions in the places where people live, learn, work, and play that affect a wide range of health and quality-of-life risks and outcomes. (source <https://www.cdc.gov/socialdeterminants/index.htm>)



What assets and opportunity mean to us...

Assets

- ▶ Something of economic value.
- ▶ Provide a future benefit.
- ▶ Something of value that can help improve the quality of life.

Opportunity

- ▶ Things that could be worked on.
- ▶ Things that can be improved.
- ▶ Areas of growth.



Brighton

Asset



Yonder Pouches
(Community and Social Context)

Opportunity



Safety in School
(Neighborhood and Physical Environment)





Roxbury

Asset



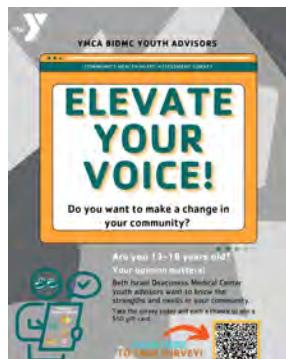
Access to Transportation
(Neighborhood and Physical Environment)

Opportunity



Peace Garden in Egleston Sq
(Community and Social Context)

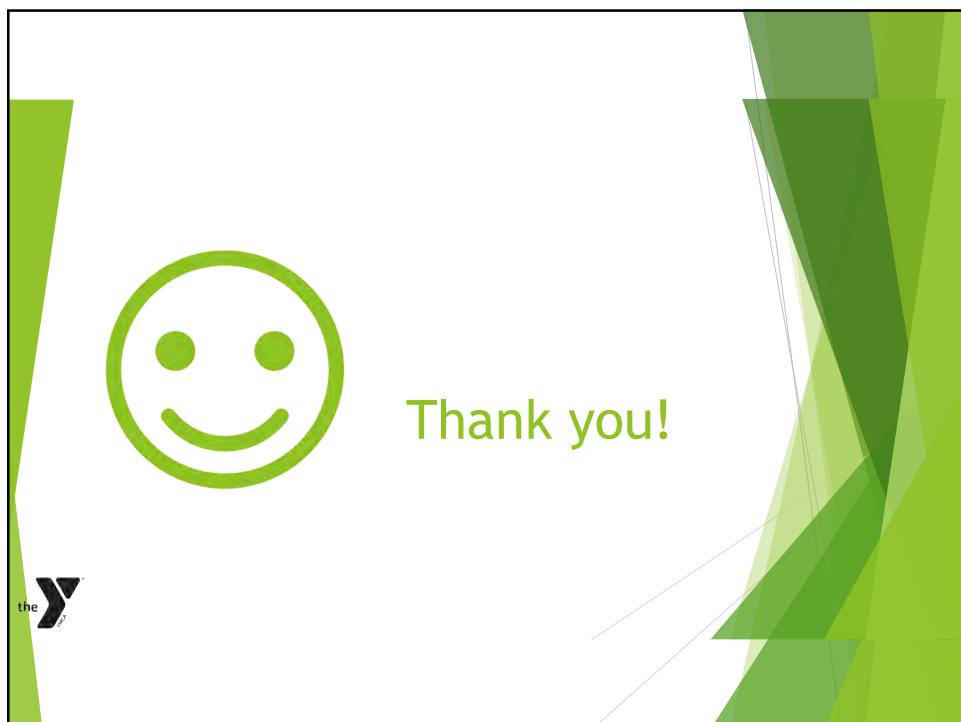
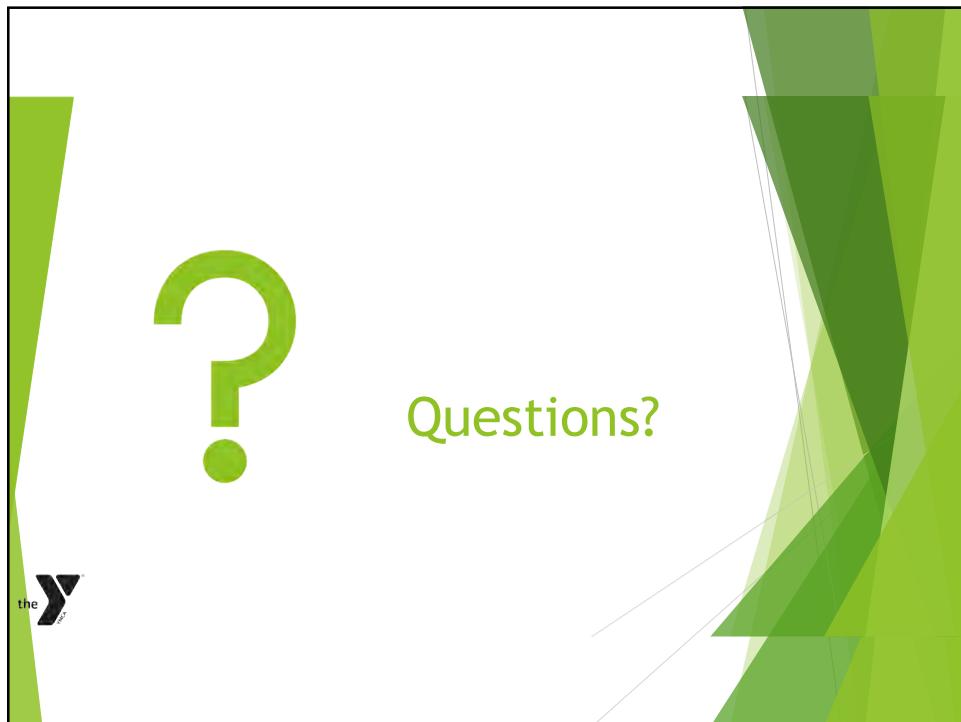
the YMCA



the YMCA

What's Next...

- ▶ Community Health Needs Assessment Survey
 - ▶ Currently collecting data (now through January 2022)
 - ▶ Data will be reviewed to identify needs and solutions in communities.
 - ▶ Learn/identify strategies to address issues in our communities.



Community Health Needs Assessment (CHNA) (Preliminary Findings)

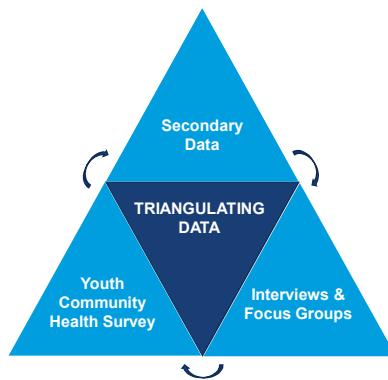
December 2021

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CHNA Progress Data Triangulation

Considerations:

- Balancing qualitative themes with secondary data
- Variations among Community Benefit Service Area (CBSA) communities (e.g., demographics, socioeconomic, availability of resources)
- Understanding priorities, barriers, and gaps for hardly reached populations
- Characteristics of survey respondents



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CHNA Progress
Activities to date

Collection of secondary data, e.g.:

- ✓ Massachusetts Department of Public Health
- ✓ Center for Health Information and Analytics (CHIA)
- ✓ County Health Rankings
- ✓ Behavioral Risk Factor Surveillance Survey
- ✓ Youth Risk Behavior Survey
- ✓ US Census Bureau



16 Key Informant Interviews



5 Focus Groups

- Spanish-speaking essential workers (2 groups)
- Individuals impacted by violence and/or incarceration
- Cantonese-speaking immigrants
- Youth Advisors



Coming Soon

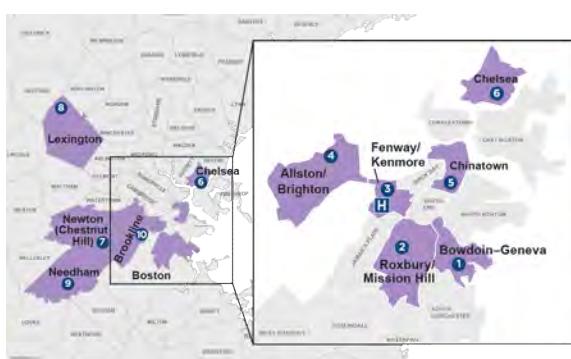


Youth Survey Responses

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CHNA Progress
Community Benefits Service Area



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Beth Israel Deaconess Medical Center

Community Benefits Service Area

Beth Israel Deaconess Medical Center
Bowdoin Street Health Center
The Dimock Center
Fenway Health
Charles River Community Health
South Cove Community Health Center
Beth Israel Deaconess Healthcare-Chelsea
Beth Israel Deaconess Healthcare-Chestnut Hill
Beth Israel Deaconess Healthcare-Lexington
BIDMC Cancer Center
BIDMC Pain Center

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CHNA Progress
Organizations engaged

Boston/Regional:

Health Local Health Authority / CBOs, Community Care Alliance	Youth After-school, youth jobs, skill development	BIPOC Faith-based orgs., immigrant, social-justice, essential workers
LGBTQ Parent advocates, health, social justice	SDOH Economic development / mobility, housing, workforce, violence/trauma	Additional Orgs. Women's business enterprises

Chelsea:

Health, regional planning, local hospitals / health centers, environmental justice, housing, mental wellness

Engaged by BIDMC and New England Baptist Hospital:

Brookline Municipal leaders	Newton (Chestnut Hill) Municipal leaders	Lexington Municipal leaders	Needham Municipal leaders Needham Community Council Council on Aging Human Rights Committee
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Regional Collaborations
Boston and Chelsea



Boston CHNA-CHIP Collaborative

- Exclusive focus on Boston
- Primary data collection running from October through January/February
- Prioritization process will begin in March
- City of Boston Department of Health and Human Services serving as back-bone organization
- 2019 health priorities: housing affordability and access, economic mobility, mental health & behavioral health, and accessing services

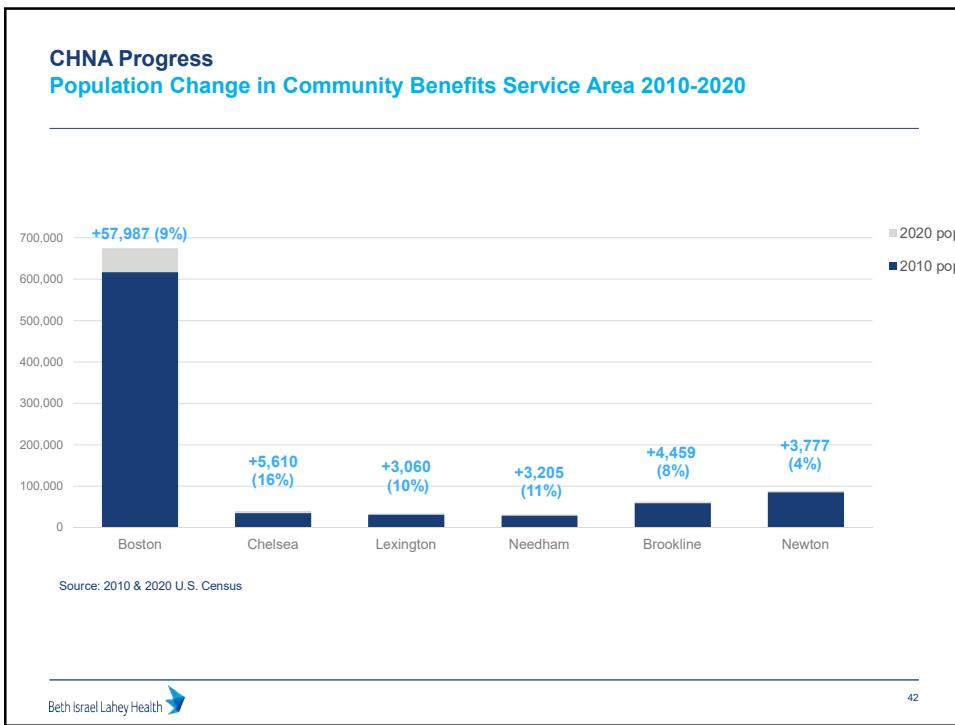
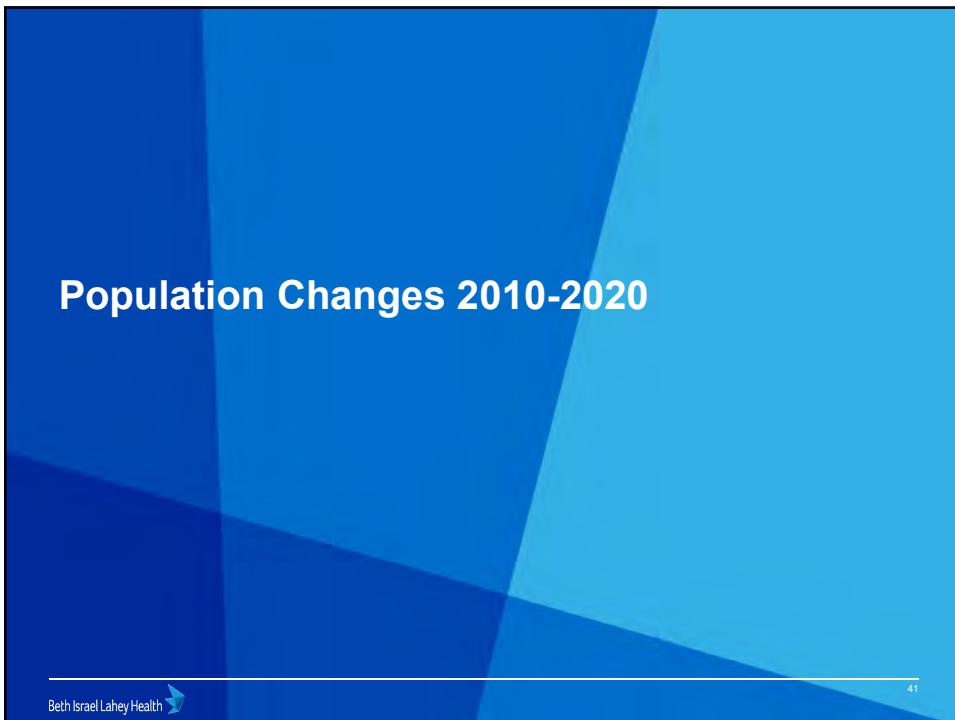


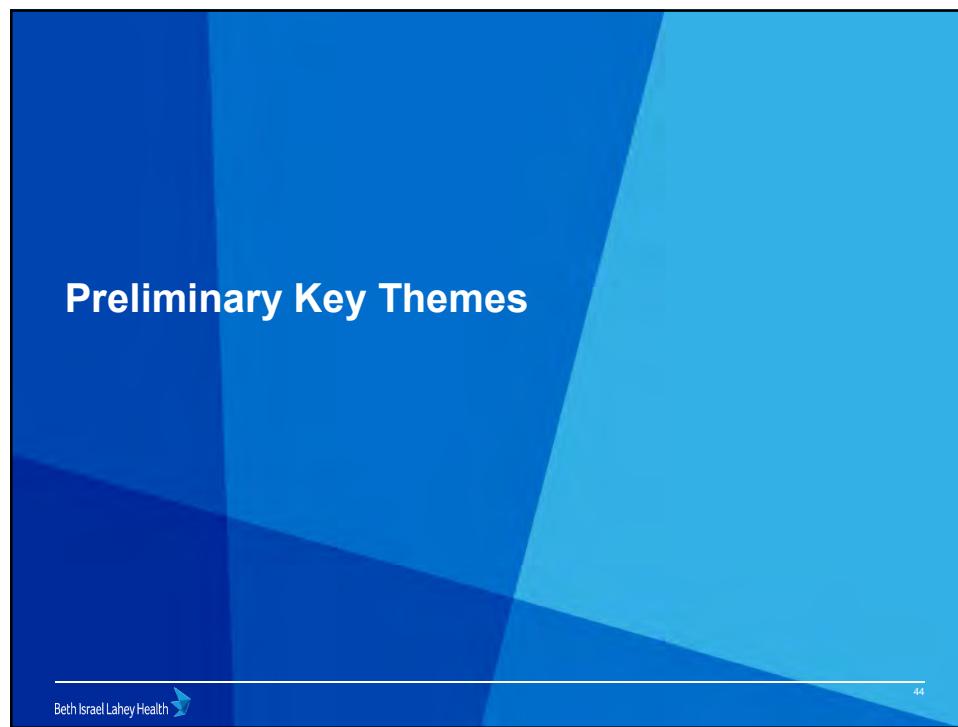
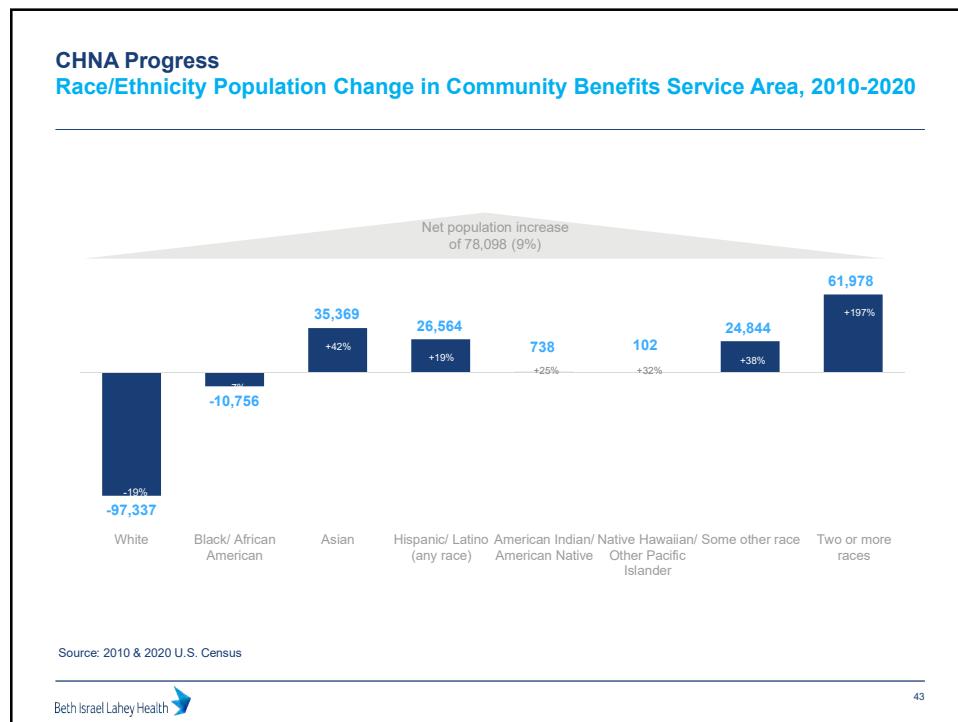
North Suffolk Public Health Collaborative
an initiative of the municipalities of Revere, Chelsea and Winthrop

- Focus on Chelsea, Revere and Winthrop
- Primary data collection running from November through December
 - Community survey launched in November; closing on December 15
- Prioritization process will begin in April
- Metropolitan Area Planning Council (MAPC) serving as the lead organization
- 2019 health priorities: housing, behavioral health, economic stability & mobility, and environmental health impacts

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CHNA Progress
Preliminary Key Themes

- **Social determinants of health**
- **Diversity, equity, inclusion**
- **Mental health**
- **Access to care and services**



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CHNA Progress
Preliminary Themes: Social Determinants of Health

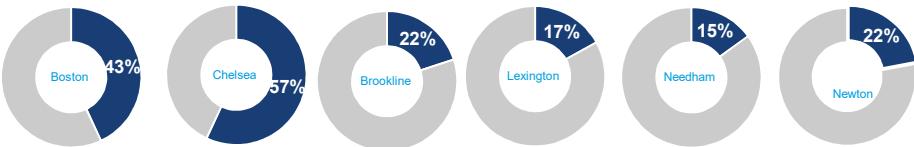
Primary concerns:

- Lack of affordable housing; gentrification and impacts of development in Boston neighborhoods
- Economic insecurity/high cost of living
- Food insecurity
- COVID exposed existing SDOH issues that inhibit access to care (e.g., transportation, internet access), especially for people of color and non-English speakers

When asked what they'd like to improve in their community, **59%** of BILH Community Health Survey respondents reported

 **"more affordable housing"**
(#1 response)

Percentage* worried about paying for one or more type of expense/bills in the coming weeks (Fall 2020)



Neighborhood	Percentage Worried
Boston	43%
Chelsea	57%
Brookline	22%
Lexington	17%
Needham	15%
Newton	22%

*Unweighted percentages displayed

Data source: COVID-19 Community Impact Survey, MDPH

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CHNA Progress
Preliminary Themes: Diversity, Equity, and Inclusion

- Significant recognition of how trauma, stress, anxiety of racism and discrimination affects health
- Concerns about discrimination against LGBTQ+ population, especially transphobia
- Racial and ethnic disparities in health care access and outcomes were further exposed by COVID
- Need more recognition and supportive services for non-English speakers and undocumented populations

"The inequities that have been impacting Black and Brown people are still happening today, over 18 months later. We have corporations and government and city officials talking about these disparities in health access, in food, in access to affordable and safe places to live."

- Key informant

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CHNA Progress
Preliminary Themes: Mental Health (Youth)

- Significant prevalence of stress, anxiety, behavioral health issues
 - Exacerbated by COVID
- Increase in behavioral health issues resulted in difficulties for educators and in-school providers/staff



Protecting Youth's Mental Health: the U.S. Surgeon General's Advisory, 2021.

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CHNA Progress
Preliminary Themes: Mental Health (Adult)

Mental health issues exacerbated by COVID – anxiety, stress, depression, isolation



“We need more mental health services that are not rooted in the white dominant culture, but that are rooted in people's cultural experiences.”
Key informant

Percentage* with 15 or more poor mental health days in the past month (Fall 2020)

Location	Percentage*
Boston	35%
Chelsea	31%
Brookline	25%
Lexington	16%
Needham	16%
Newton	29%

*Unweighted percentages displayed

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Data source: COVID-19 Community Impact Survey, MDPH

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CHNA Progress
Preliminary Themes: Access to Care

Difficulty accessing care because of:

- Long wait times
- Lack of providers
- Cost/insurance
- Language barriers
- Immigration status

Difficulties navigating and understanding healthcare system and insurance



“People don't have the best healthcare plans, if they have access to healthcare at all. If you have high deductibles, you're less likely to go to the hospital or to go to the doctor to get help. If you've got no healthcare, then that puts you in the emergency ward.”

– Focus group participant

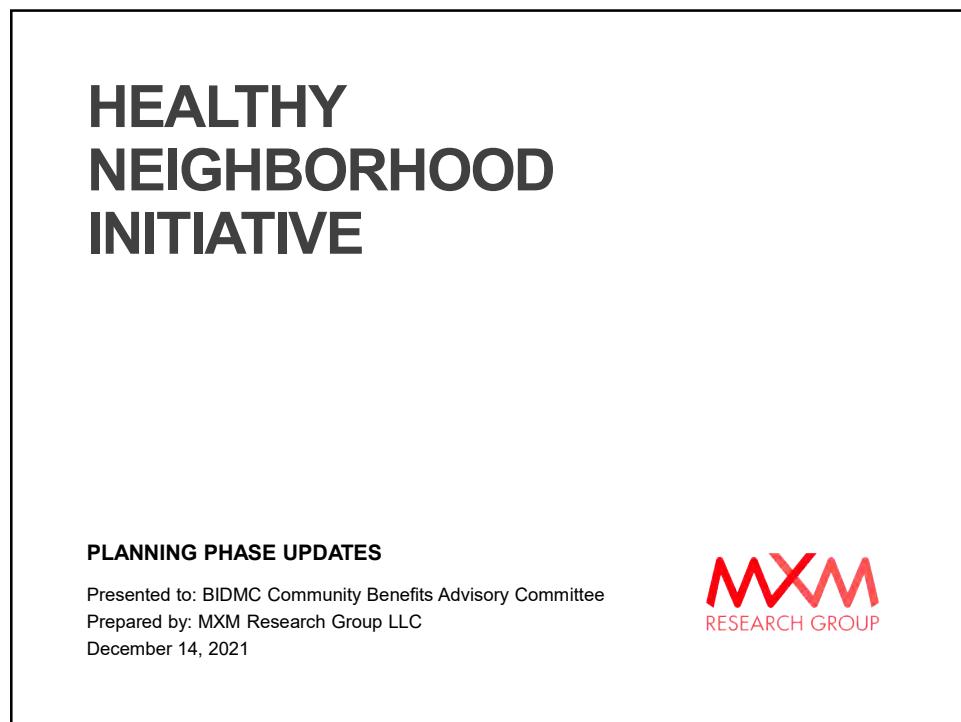
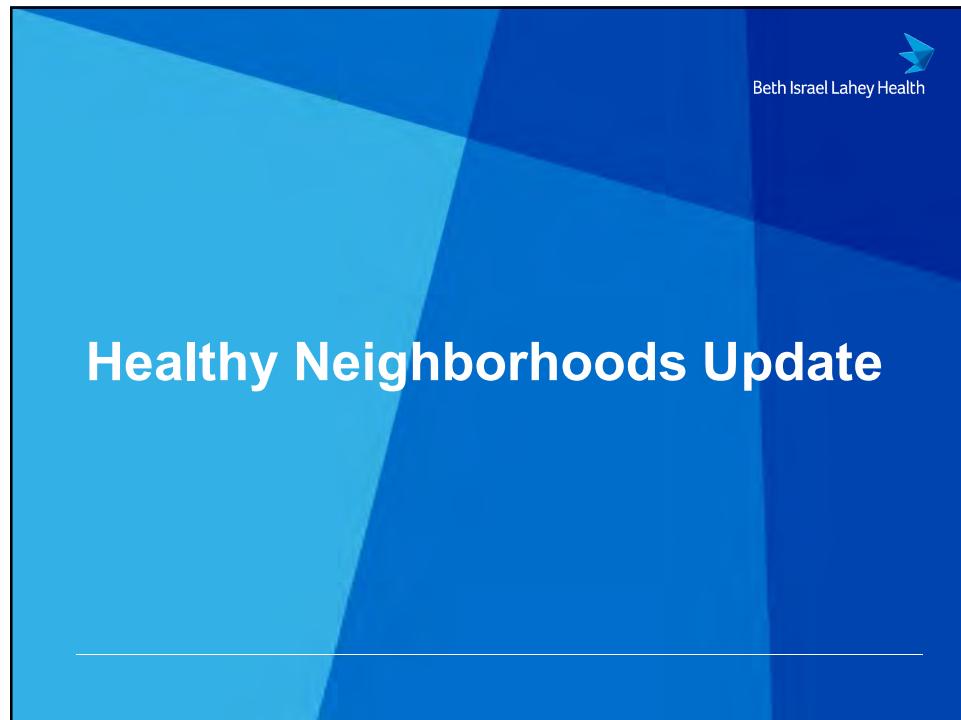
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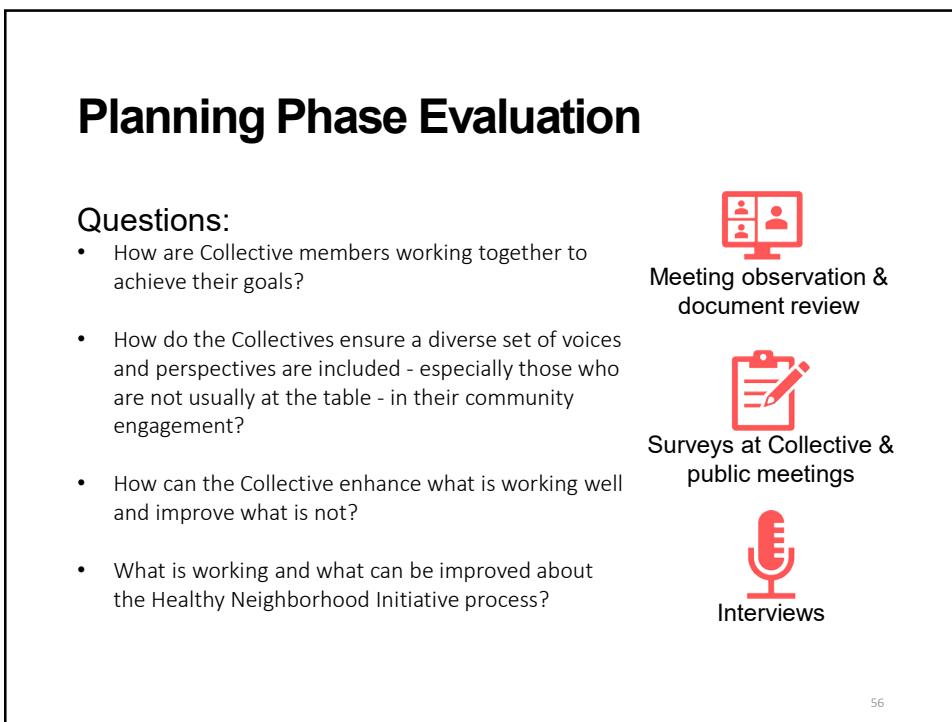
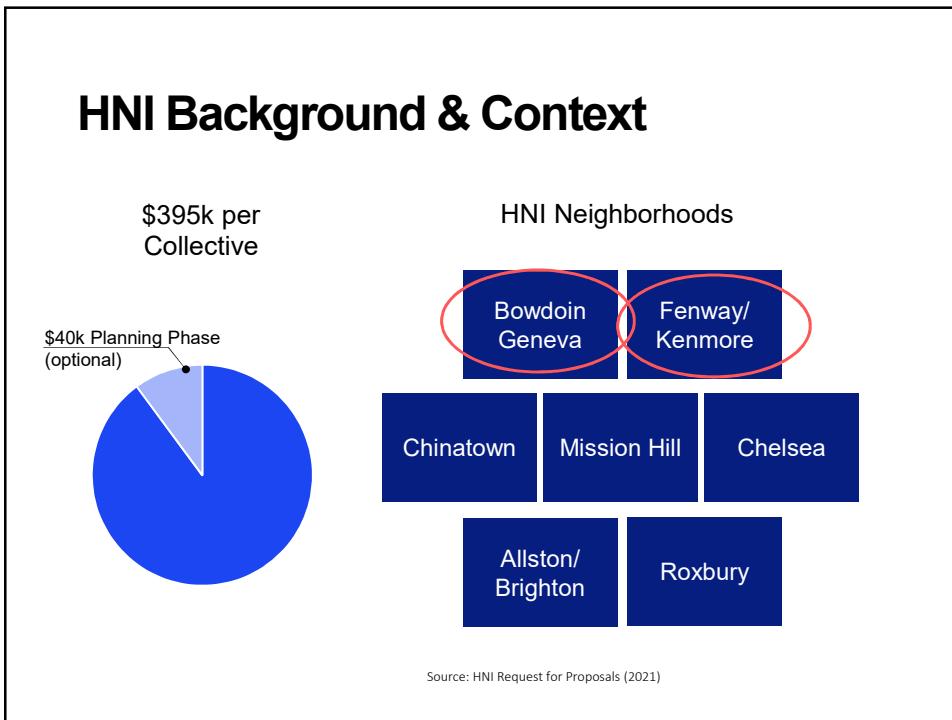
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Discussion

Discussion

- 1. Do these key themes resonate with you? Why or why not?**
- 2. Are there critical community health issues you did not see reflected in these findings?**
- 3. Substance use did not emerge as a key theme across the CBSA. What are your thoughts?**
- 4. What does the community need to see/know to help with prioritization at the CLS?**





Healthy Bowdoin Geneva

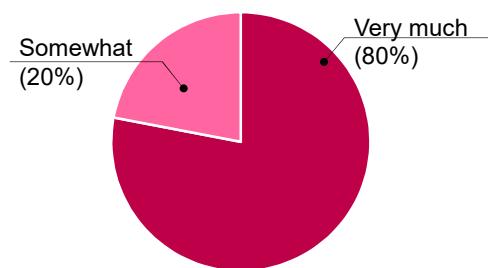
- **Collective membership**
 - Twelve organizations; seventeen people, six of whom are residents
- **Collective structure**
 - Two meetings per month, partnered with equity-focused consulting firm
- **Community engagement**
 - Three in-person community meetings, four multi-platform focus groups, survey reaching 280 people
- **Project selection**
 - Social capital as the identified area of greatest strength and need; voting; proposal sent 12/3



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Healthy Bowdoin Geneva

How much did you feel like your perspective was valued at the Collective meeting? (11/22)



“We are getting to know each other better every week. Participants are becoming excited about possibilities for working more closely to better our community.”

-Collective member, November 22, 2021

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We're Here for You: Fenway/Kenmore

- **Collective membership**
 - Seven organizations; twelve people, five of whom are residents
- **Collective structure**
 - Primarily small group meetings, asynchronous, in-kind donations of time and resources
- **Community engagement**
 - Three virtual Community Conversations, five in-person focus groups, survey reaching ~1400 people
- **Project selection**
 - Collective and Community feedback; proposal anticipated 12/15

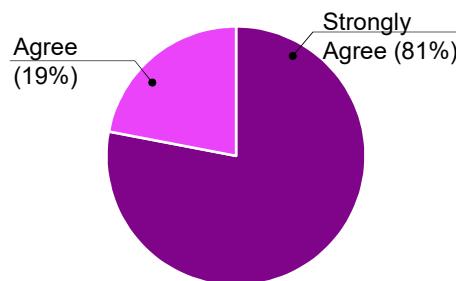


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We're Here for You: Fenway/Kenmore

All focus group and community conversations respondents **agreed**

"I felt like my opinions were valued at this meeting"



"We have a different relationship... than before. It wasn't an easy process but [staff] kept everybody on the same page."

-Collective member, November 22, 2021

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Project Evaluation Questions

Sample draft questions:

- How has the Collective developed its relationships, collaboration, and ability to engage community members?
- How have the projects and Collective development contributed to the goals and needs identified in the community engagement process? Do the outcomes align with the project's intended design? Did other outcomes emerge from this project?
- How has the Collective adapted the project to ongoing and/or emerging community needs/input?
- Are residents and Collective members satisfied with the process, timing, and outcomes?

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Project Evaluation Phases



Evaluation Design Jan – March 2022

- Integrated with Collective/ community kick-off
- Refine questions, criteria of success, meaningful data with Collective members



Data Collection April 2022 – July 2023

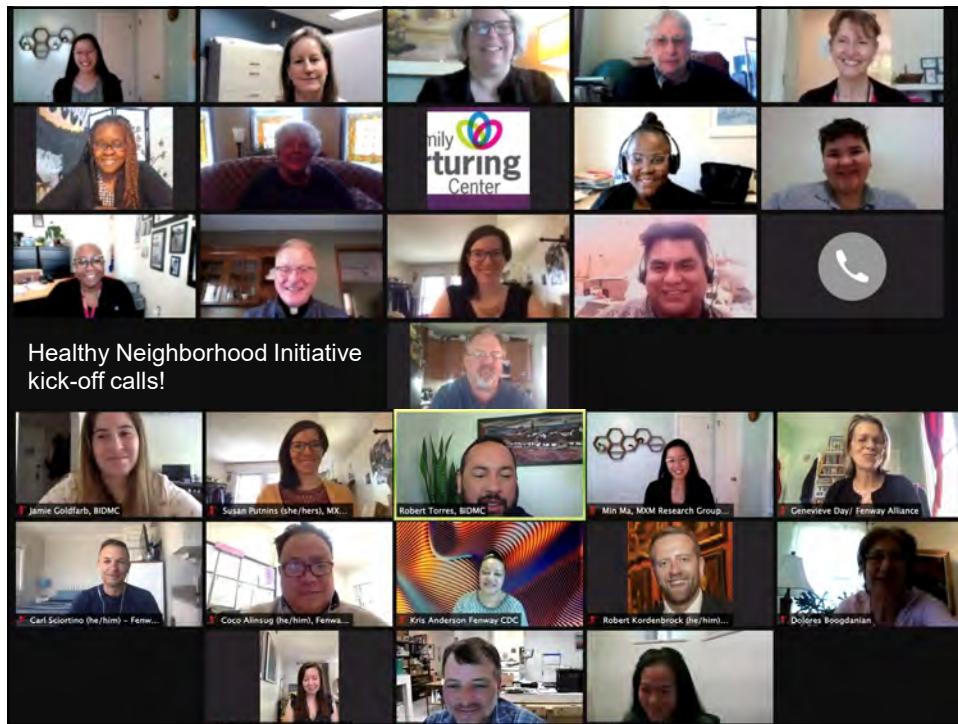
- Ex. Surveys, report-backs, focus groups, network mapping, ripple effect mapping
- Suggested budget for translation and incentives



Report & Use July 2022 – Aug 2023

- Alternating quarterly brief reports/deep dives with Collective
- Public meeting & share-out summer 2023

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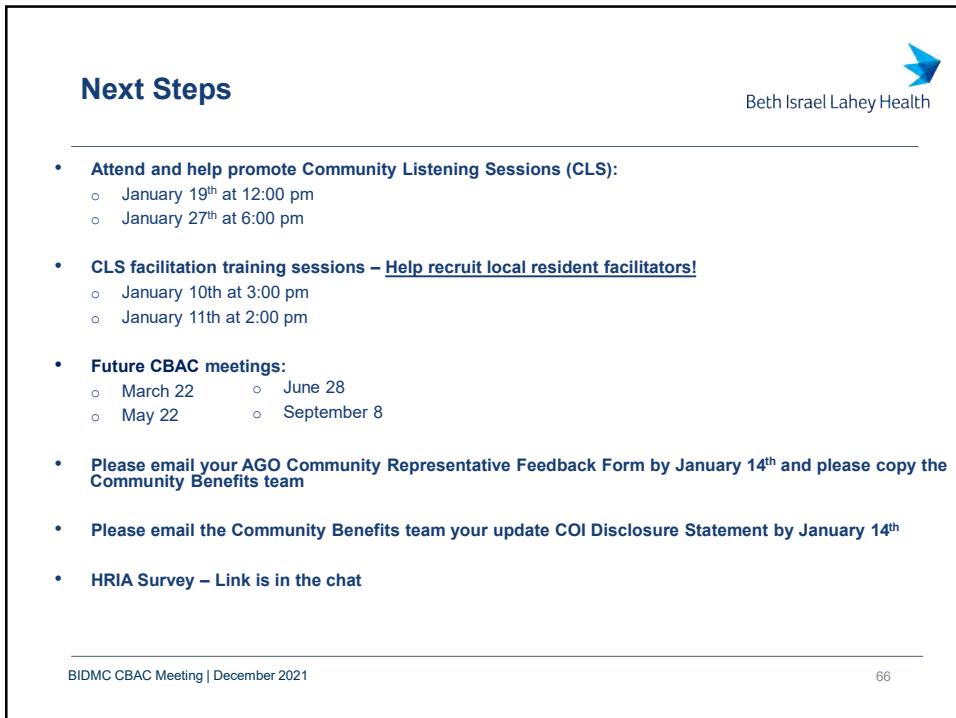
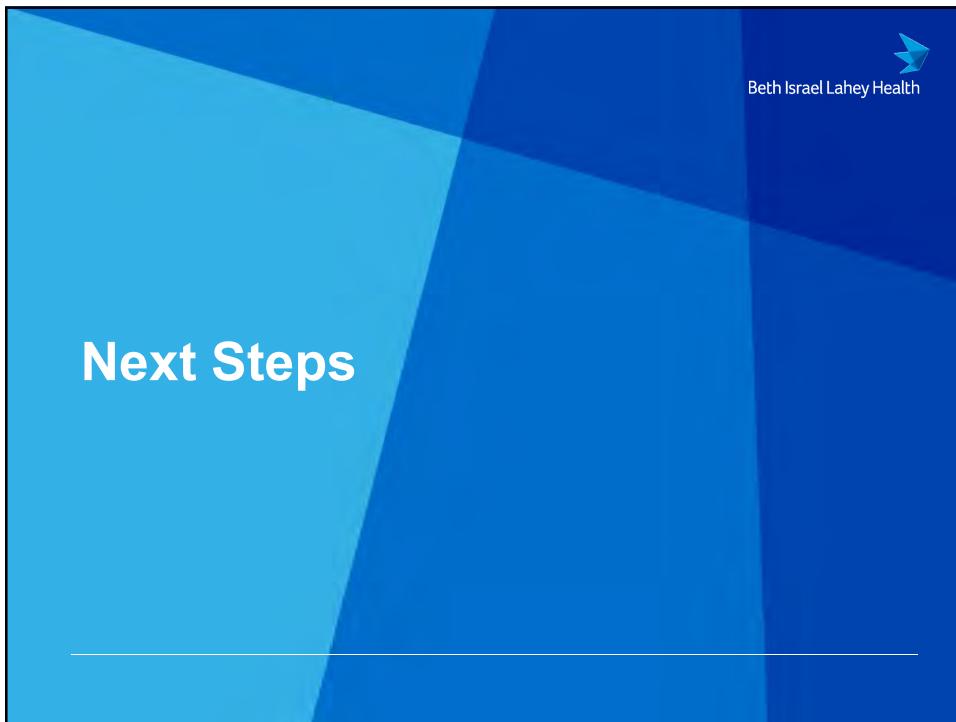


Healthy Neighborhoods Initiative Next Steps



Beth Israel Lahey Health

- Allocation Committee reviews project proposals in January
 - Collectives begin implementing their projects
 - Project must be completed by August 2023
- BIDMC integrates feedback into the 2022 Healthy Neighborhood Initiative RFP process
 - Release RFP in February for Chinatown and the city of Chelsea
- RFPs released in February 2023 for Allston/Brighton, Mission Hill, and Roxbury



September 28, 2021

Meeting Minutes

Community Benefits Advisory Committee (CBAC)
Annual Community Benefits Public Meeting
Meeting Minutes
Tuesday, September 28, 2021, 5:00 PM - 7:00 PM
Held Virtually Via Zoom

Present: Alberte Altine-Gibson, Flor Amaya, Walter Armstrong, Maia Betts, Elizabeth (Liz) Browne, Alexandra Chery Dorrelus, Shondell Davis, Lauren Gabovitch, Richard Giordano, Jamie Goldfarb, Nancy Kasen, Barry Keppard, Kira Khazatsky, Angie Liou, James Morton, Sandy Novack, Joanne Pokaski, Richard Rouse, Anna Spier, Robert Torres, LaShonda Walker-Robinson, Fred Wang

Absent: Alex Oliver-Dávila, Triniese Polk, Jane Powers, Melody Route-Satchell

Guests: Carrie Jones, John Snow, Inc. (JSI), Project Coordinator; Emmy Porto, North Suffolk Mental Health Association, Director of Community-Based Services; Annie Rushman, Health Resources in Action (HRiA), Senior Associate; Karina Teixerá, YMCA of Greater Boston, Executive Director of Teen Development

21 members of the public were also in attendance.

Welcome and Introductions

Nancy Kasen, Vice President, Community Benefits and Community Relations, Beth Israel Lahey Health (BILH), welcomed everyone and thanked them for joining the Annual Community Meeting. Nancy then reviewed the agenda.

Nancy introduced Maia Betts, Chief Behavioral Health Officer at The Dimock Center, as a new member to the Community Benefits Advisory Committee (CBAC), filling the role previously held by Holly Oh, MD.

Nancy also introduced Alberte Altine-Gibson, the Community Health Manager at The Bowdoin Street Health Center, as a new member to the CBAC, filling the role previously held by Phillomin Laptiste.

Nancy then welcomed Kira Khazatsky, the Chief Operating Officer at JVS to the CBAC. Kira fills the role previously held by Jerry Rubin.

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

Nancy provided a brief overview of BIDMC's Community Benefits Service Area and priorities. Nancy then shared the four health priorities identified during the 2019 Community Health Needs Assessment (CHNA): social determinants of health, chronic disease management and prevention, access to care, and behavioral health. She also shared BIDMC's priority cohorts: older adults; youth and adolescents; racially/ethnically diverse/limited English proficiency; low-income; Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, and Asexual (LGBTQIA+); and families affected by incarceration and/or violence.

Public Comment

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

Community-based Health Initiative Updates

Anna Spier, Manager of Community Benefits at BIDMC, provided a brief overview of BIDMC's Community-based Health Initiative (CHI). Anna shared that through an extensive community engagement process the CBAC selected four priority areas for funding: Housing Affordability, Jobs & Financial Security, Behavioral Health, and Healthy Neighborhoods. Following the selection of the priorities, Boston-based organizations applied for funding through a Request for Proposals (RFP) process. Organizations applied to one of three funding tracks: cross-sector partnerships for systems change, focused investments, and capacity building seed funding. After a competitive process, BIDMC's Allocation Committee awarded 16 grantees approximately \$6.6 million in funding to address housing affordability, jobs and financial security, and behavioral health. Anna explained that the fourth priority area, Healthy Neighborhoods, is being conducted through a separate process and will be discussed later in the meeting. Additionally, the City of Chelsea was awarded a \$270,000 grant to address behavioral health.

In July, the 16 grantees completed their evaluation planning period and submitted a 6-month progress report to BIDMC. Overall, grantees appreciated having the 6-month planning period and felt it added value to their work. Many reported an increase in their evaluation capacity and appreciated the tailored assistance they received from the independent evaluator, Health Resources in Action (HRiA). Grantees also reported challenges such as program recruitment, hiring, and the impact that COVID-19 has had on their work. A few grantees also expressed wanting more opportunities to network with each other and BIDMC staff; in response to this request, BIDMC Community Benefits staff will be hosting a virtual grantee gathering at the end of October.

Anna then introduced Emmy Porto, Director of Community-Based Services at North Suffolk Mental Health Association (NSMHA). Emmy shared that NSMHA is using CHI funds to support a behavioral health program called Latino Community Advance Response Team (CART), a clinical intensive case management program exclusively for uninsured and underinsured Chelsea immigrant residents. Latino CART aims to increase access to behavioral health services and connect individuals to community resources to improve stability. Emmy shared program successes and challenges during the first year and how they are using a new evaluation tool to enhance their program.

Robert Torres, Boston Region Director of Community Benefits, Beth Israel Lahey Health, gave an update on the Healthy Neighborhoods Initiative. Robert explained the purpose of the Healthy Neighborhoods Initiative is to address the unique assets and needs of each community. The first two neighborhoods participating in this initiative are Bowdoin/Geneva in Dorchester and Fenway/Kenmore. The selected Collectives, Healthy Bowdoin Geneva and We're Here for You: Fenway/Kenmore, are currently conducting community engagement activities to inform their project selection. Both Collectives are also working with MXM Research Group, a minority and women-owned business enterprise (MWBE), to help guide the evaluation of the initiative.

FY 21 Community Benefits Program Updates

Alberte provided a brief update on some of the Community Benefits work being done at Bowdoin Street Health Center (BSHC). At the beginning of the pandemic the health center recognized the need to increase access to food for high-risk patients and families. To address these needs, BSHC set up a food delivery program for members of their community to access fresh produce and other pantry items. Alberte also shared other food access programs run by BSHC such as Supplemental Nutrition Access Program (SNAP) enrollment (available to the entire neighborhood), a partnership with Fresh Truck, and farmers market coupons. Alberte also shared that one of their Community Health Workers applied for and

received a grant to restore an existing community garden. With the support of this funding and in-kind support from BIDMC, the garden has been renovated and continues to be a place where the community can come together.

Anna then introduced Karina Texiera, Executive Director of Teen Development at the YMCA of Greater Boston. The YMCA and BIDMC have established a partnership to pilot a nine-month youth program to engage six high school aged students in the upcoming Community Health Needs Assessment (CHNA) and Implementation Strategy (IS). Anna shared that in previous Boston CHNA cycles, the youth voice has been underrepresented. The aim of this program is to elevate and center the youth voice in the CHNA process and provide youth with a more meaningful “seat at the table.” Karina shared that the paid youth advisors will learn about the role of healthcare organizations, health equity, social determinants of health, community engagement and other related topics. Students will have the opportunity to apply these learnings by participating in a focus group, distributing surveys, and presenting to the CBAC. By the end of the program students will have gained workforce skills, engaged with their communities and informed the CHNA and IS.

FY 22 Community Health Needs Assessment (CHNA)

Robert shared that all BILH hospitals, including BIDMC, are preparing for the launch of the tri-annual CHNA and IS. He explained that the CHNA is the hospital’s opportunity to work with the community, to deeply engage with residents across the CBSA and identify their leading and emerging health needs, and work collaboratively to address prioritized needs. Robert shared that the CHNA and IS will be rooted in equity, collaboration, engagement, and capacity building.

Robert then provided an overview of the timeline and opportunities for individual and community engagement. In collaboration with the Boston CHNA-CHIP Collaborative, a regional partnership with Boston-based hospitals, community-based organizations, and residents, BIDMC will conduct focus groups, key informant interviews, and possibly distribute community surveys. The information collected, in addition to secondary data, will inform the prioritization process that will happen at the community listening sessions in January 2022. The prioritization process is where the community will prioritize the needs identified during the data collection process and discuss strategies and solutions for how to best address the needs. Robert shared that survey collection across BILH will begin this fall and that the survey will be available in 11 languages.

John Snow, Inc (JSI), public health and health system consultants, were selected as the vendor to assist in conducting the CHNA and IS with all ten BILH hospitals. Throughout this process, BILH aims to build community capacity. To support this commitment, JSI is hosting facilitation trainings to share best practices for focus group facilitation. Robert shared that these sessions are open to individuals who will co-facilitate a CHNA focus group or listening session, and to individuals looking to build their confidence and capacity in facilitation.

Adjourn

Jamie Goldfarb, Community Benefits Program Administrator at BIDMC, highlighted how people can contact the Community Benefits team. Jamie also shared resources and opportunities to participate in BIDMC’s CHNA and other regional assessment efforts. She then shared that the next BIDMC CBAC meeting will be held on December 14, 2021. Jamie thanked everyone for joining the meeting.