

May 24, 2022
Meeting Packet

Meeting Agenda

Community Benefits Advisory Committee (CBAC)

Beth Israel Deaconess Medical Center (BIDMC)

Tuesday, May 24, 2022

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 – 6:20 pm	FY22 Community Health Needs Assessment and Implementation Strategy
IV. 6:20 pm – 6:50 pm	Community-based Health Initiative Updates
V. 6:50 pm – 6:55 pm	Regulatory Update
VI. 6:55 pm – 7:00 pm	Next Steps and Adjourn

Next Meeting: June 28, 2022

Meeting Slides

BIDMC Community Benefits Advisory Committee Meeting

May 24, 2022

 Beth Israel Lahey Health

Welcome

 Beth Israel Lahey Health

Housekeeping

- Please join the meeting using video (if possible)
- If you lose your connection, please call in
 - Phone number: 1-929-205-6099
 - Meeting ID: 960 3026 9707
 - 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 Anna

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Content



- Welcome and Introductions
- Public Comment
- FY22 Community Health Needs Assessment and Implementation Strategy
- Community-based Health Initiative Updates
- Annual Regulatory Reporting: Community Benefits Expenditures

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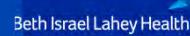
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FY22 Community Health Needs Assessment & Implementation Strategy

Hospital and System Priorities

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Hospital and System Priorities

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FY22 Community Health Needs Assessment and Implementation Strategy Prioritization Process

Beth Israel Lahey Health

Community Benefits Advisory Committee: provides recommendations for the hospital to consider for the FY23–25 Implementation Strategy

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graph LR
    A[Community identifies top health priorities and strategies  
Jan/Feb Community Listening Sessions] --> B[CBAC continues prioritization  
March CBAC Meeting]
    B --> C[Review system-level priorities*  
May CBAC Meeting (current meeting)]
    C --> D[Share final priorities with the community  
June Annual Public Meeting]
    D --> E[Hospital Board of Trustees votes to approve CHNA and adopt IS  
September 2022]
  
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Implementation Strategy progress and impact requires **collaboration** among community stakeholders, institutions and residents

*All BILH hospitals will collaborate with system leadership and incorporate system-level priorities into final IS

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MA EOHHS/DPH and AGO Focus Issues & Priorities

Beth Israel Lahey Health

EOHHS/DPH, AGO Focus Issues:

- Substance Use Disorders
- Housing Stability/Homelessness
- Mental Illness and Mental Health
- Chronic Disease - Cancer, Heart Disease, and Diabetes

DPH Determination of Need Health Priorities:

- Built Environment
- Social Environment
- Housing
- Violence and Trauma
- Employment
- Education

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FY22 Community Health Needs Assessment and Implementation Strategy

Hospital Prioritized Needs & Prioritized Cohorts

Beth Israel Lahey Health

Prioritized Needs:

Social Determinants of Health	Mental Health & Substance Use	Equitable Access to Care	Complex & Chronic Conditions
<ul style="list-style-type: none"> • Housing • Food • Jobs and Financial Security 	<ul style="list-style-type: none"> • Youth • Impacts of Trauma 	<ul style="list-style-type: none"> • Workforce 	<ul style="list-style-type: none"> • Cancer • Diabetes

Health Equity

Prioritized Cohorts:

- Youth
- Racially, Ethnically, & Linguistically Diverse Populations
- Low-Resourced Populations
- LGBTQIA+
- Families Affected by Violence and/or Incarceration

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FY22 Community Health Needs Assessment and Implementation Strategy

System Prioritized Need

Beth Israel Lahey Health

Prioritized Need:

- Mental Health / Behavioral Health



Community Benefits Service Areas

- Anna Jaques Hospital
- Addison Gilbert Hospital / Beverly Hospital
- Lahey Hospital & Medical Center
- Winchester Hospital
- Mount Auburn Hospital
- Beth Israel Deaconess Medical Center
- New England Baptist Hospital
- Beth Israel Deaconess Hospital - Needham
- Beth Israel Deaconess Hospital - Milton
- Beth Israel Deaconess Hospital - Plymouth
- BILH Gateway Municipality Investments
- Shared Service Area

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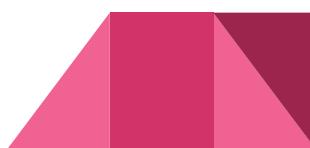
Beth Israel Lahey Health

Youth Advisors Presentation

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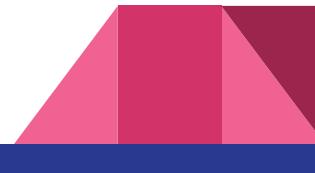
Agenda

- Welcome
- Introductions
- Recap and What We Have Been Working On
- What is a Health Priority?
- Selecting our Health Priority
- Selecting our Health Strategy
- Youth Advisors Reflections
- What are you looking forward to this summer?
- Questions
- Thank you!



Recap and What We Have Been Working On

- In December we presented about the social determinants of health and assets and opportunities in our neighborhoods
- Since then we have:
 - Reviewed key themes identified from data collected for the Community Health Needs Assessment
 - Learned about the goals of an Implementation Strategy and how it is related to the Community Health Needs Assessment
 - Learned how community health priorities and health strategies are selected and prioritized
- Using what we learned, we then chose a health priority and health strategy to focus on

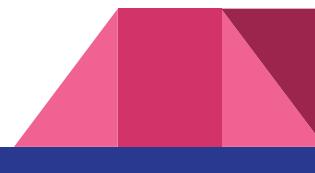


What is a Health Priority?

Definition: Health priorities are areas that a hospital/organization/government will focus on to improve quality of life for a population

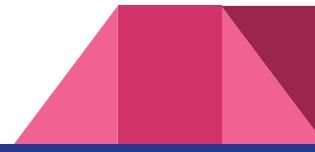
Selection Process: Selected by the hospital based on the top needs an individual or community identifies during a community needs assessment

Examples: Social Determinants of Health, Behavioral Health, and Chronic Health Conditions



Selecting a Health Priority (1)

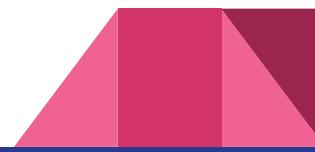
- The community needs assessment showed that there was limited access to mental health resources in our communities
- We decided to choose Mental Health through a Diversity, Equity, and Inclusion Lens because...
 - Communities of color are highly impacted by limited mental health resources
 - Economic inequities
 - Access to health care
 - Long wait lists to access resources
 - Not enough mental health resources in schools
- Social Determinants of Health (SDOH) are all connected - it was hard to choose
- Mental health is what helps us get through the day



Selecting a Health Priority (2)

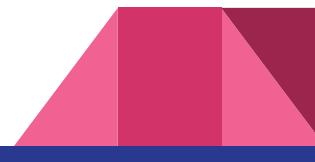
- In 2015-2019, 13.9% of high school students reported having suicidal thoughts
- 45.5% of Blacks, 37.6% of Latinos, and 34.7% of Asians in Boston have reported receiving poor service due to their race/ethnicity
- Youth have identified that they are facing discrimination, multiple stressors, and a need for additional services and supports
- Youth have also identified that they lack coping strategies to help them face the challenges they are facing everyday
- Particular need for supports for LGBTQIA+ youth

Source: Preliminary Boston CHNA-CHIP
Collaborative data



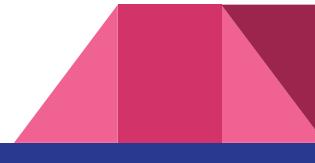
Why we selected Peer-to-Peer Support as a Health Strategy

- We selected Peer-to-Peer support as a health strategy because:
 - Teens support each other on a consistent basis
 - Teen rely on their friends to help get them through stressful experiences
 - Teens can relate to each other, as in many cases they are facing similar challenges
 - Social life, social anxiety, social media influence, financial stressors, school, coping mechanisms, etc.



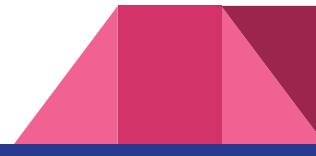
What does Peer-to Peer Support Mean to Us?

- Peer-to-Peer Support: People with same or similar experiences can help each other face challenges
 - Judgement Free
 - Creating a safe space
 - Listening
 - Giving advice
 - Sharing experiences



Mental Health through a DEI Lens

- Equity means everyone has the opportunity to attain their full health potential
- Poverty and lack of education are some of the social factors that contribute to health inequities
- Behavioral health challenges can lead to a high levels of stress, trauma, depression and anxiety which can increase hospitalizations
 - There are disparities in access to behavioral health services due to race, income and language
- Individuals are more open to express their feelings when they can identify with someone that looks like them



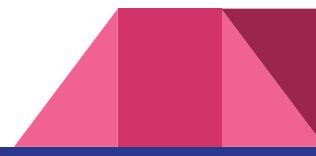
Reflections - Enzo

My takeaways from this experience:

- The feeling of actually having an effect on the community around you that you see everyday
- Learning about our own social determinants of health and learning how to identify them in our communities and how they affect us everyday

Summer time:

- I'm looking forward to continue working at the YMCA and try to find opportunities to further help my community



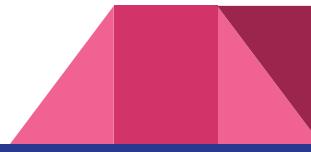
Reflections - Andres

My takeaways from this experience:

- Different social determinants of health
- Health priorities and strategies
- Importance of being involved in the process of the health needs assessments because they impact how much money is invested in our communities

Summer Time:

- I'm looking forward to visiting family in Dominican Republic this summer



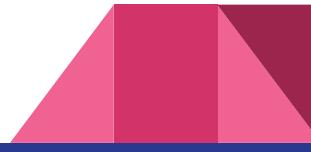
Reflections - Gigi

My takeaways from this experience:

- The importance of the community health needs assessment
- Learning about health strategies
- Learning about how every community has different needs

Summer time:

- Spending time with friends
- Work full time at Chick-Fil-A



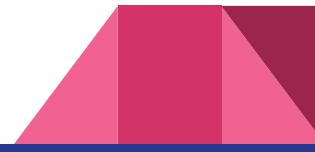
Reflections - Shakayla

What I will take away from this experience:

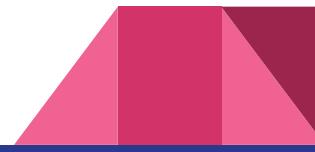
- The difference between Equity and Equality
- How SDOH affect our community

Summer time:

- Working at camp Harbor View
- The warm weather



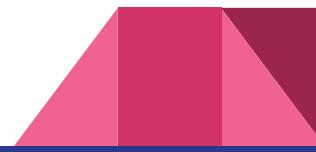
What are you looking forward to this summer?



Thank you!

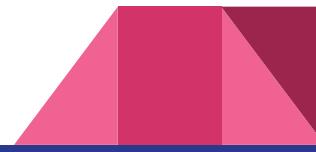
We would like to thank Beth Israel Deaconess Medical Center Community Benefits for working with us this year to educate us in the many ways the healthcare industry supports our communities.

We are thankful that you allow a space for youth to utilize their voices to share concerns about the challenges they are facing and how they can potentially be addressed.



Questions???

Thank You!





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Implementation Strategy

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FY23-25 Implementation Strategy

Strategy Considerations



Beth Israel Lahey Health

- Address the prioritized community health needs and/or populations in the hospital's community benefits service area
- Contribute to the systemic, fair and just treatment of all people
- Provide approaches across the up-, mid-, and downstream spectrum
- Are sustainable through hospital or other funding
- Are evidence-based or evidence-informed
- Leverage or enhance community partnerships
- Have potential for impact

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FY23-25 Implementation Strategy Social Determinants of Health - Food



Draft Goal: Enhance the built, social, and economic environment where people live, work, play, and learn in order to improve health and quality-of-life outcomes.

Potential Strategy:

- Support policy, systems, programs, and environmental changes to increase access to affordable, healthy foods and physical activity in communities and school environments

Partners Include*:

- About Fresh, The Daily Table, Fenway Cares, Sodexo, The Dimock Center

Feedback & Discussion:

- Are there specific opportunities or initiatives to address food insecurity that the hospital should consider supporting?
- In what ways can the hospital own, catalyze, or support initiatives?
- Are there other potential partners or initiatives to address this need?

* List is not exhaustive. May include current and previous partners.

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FY23-25 Implementation Strategy Social Determinants of Health - Housing



Draft Goal: Enhance the built, social, and economic environment where people live, work, play, and learn in order to improve health and quality-of-life outcomes.

Potential Strategies:

- Advocate for public policy that aims to increase access to affordable housing, housing stability, and healthy living conditions
- Support programs that stabilize or create access to affordable housing

Partners Include*:

- Asian CDC, City Life/Vida Urbana, Fenway CDC, Innovative Stable Housing Initiative (ISHI), Metro Housing|Boston, Opportunity Communities

Feedback & Discussion:

- Are there specific opportunities or initiatives to address housing insecurity/affordability that the hospital should consider supporting?
- In what ways can the hospital own, catalyze, or support initiatives?
- Are there other potential partners or initiatives to address this need?

* List is not exhaustive. May include current and previous partners.

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FY23-25 Implementation Strategy

Social Determinants of Health - Jobs & Financial Security

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Draft Goal: Enhance the built, social, and economic environment where people live, work, play, and learn in order to improve health and quality-of-life outcomes.

Potential Strategies:

- Partner with and support financial and economic mobility programs to increase financial stability for patients and residents
- Collaborate with local community partners to support job-training programs that strengthen the local workforce and address underemployment

Partners Include*:

- Community Servings, English for New Bostonians, Hack Diversity, JVS Boston, Sociedad Latina, The Partnership, Inc.

Feedback & Discussion:

- Are there specific opportunities or initiatives to address jobs and financial security that the hospital should consider supporting?
- In what ways can the hospital own, catalyze, or support initiatives?
- Are there other potential partners or initiatives to address this need?

* List is not exhaustive. May include current and previous partners.

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FY23-25 Implementation Strategy

Equitable Access to Care

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Draft Goal: Improve access to equitable, comprehensive, high quality health care services.

Potential Strategies:

- Promote access to health insurance, patient financial counselors, and needed medications for patients who are uninsured or underinsured
- Collaborate with BILH Workforce Development to increase the number of hospital staff utilizing job skills programs and encourage local recruitment and retention

Partners Include*: Charles River Community Health, Fenway Health, Found in Translation, South Cove Community Health Center, The Dimock Center

Feedback & Discussion:

- Are there opportunities or initiatives related to access to care that the hospital should consider supporting?
- In what ways can the hospital own, catalyze or support initiatives?
- Are there other potential partners or initiatives to address this need?

* List is not exhaustive. May include current and previous partners.

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FY23-25 Implementation Strategy Complex & Chronic Conditions



Draft Goal: Enhance access to health education, screening, and referral services in clinical and non-clinical settings

Potential Strategies:

- Address barriers to timely cancer screening and follow-up cancer care through culturally appropriate navigation and innovative programs
- Address chronic disease management through screening, monitoring, and evidence-based counseling and treatment

Partners Include*: Boston Breast Cancer Equity Coalition, Boston Public Health Commission, Community Care Alliance, DF/HCC Initiative to Eliminate Cancer Disparities, Joslin Diabetes Center

Feedback & Discussion:

- Are there opportunities or initiatives related to complex and chronic conditions that the hospital should consider supporting?
- In what ways can the hospital own, catalyze or support initiatives?
- Are there other potential partners or initiatives to address this need?

* List is not exhaustive. May include current and previous partners.

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FY23-25 Implementation Strategy Mental Health and Substance Use



Draft Goal: Promote social and emotional wellness by building equitable, accessible, and supportive behavioral health services

Potential Strategies:

- Increase access to culturally and linguistically appropriate behavioral health services
- Address the unique mental health needs of historically underserved youth
- Support violence prevention programs to foster safe neighborhoods, enhance community cohesion, and mitigate impacts of trauma

Partners Include*: Bridge Over Troubled Waters, Louis D. Brown Peace Institute, Fenway Health, Greater Boston Chinese Golden Age Center, North Suffolk Mental Health Association, Neighborhood Trauma Team, The Family Van, YMCA

Feedback & Discussion:

- Are there opportunities or initiatives related to mental health and substance use that the hospital should consider supporting?
- In what ways can the hospital own, catalyze or support initiatives?
- Are there other potential partners or initiatives to address this need?

* List is not exhaustive. May include current and previous partners.

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Community-based Health Initiative Update

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Healthy Neighborhoods Initiative (HNI) Updates



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- After extensive community engagement, *Healthy Bowdoin Geneva* and *We're Here for You: Fenway/Kenmore* project proposals were submitted and approved for funding
- Healthy Bowdoin Geneva: Improve social cohesion through community-wide events, more effective referral processes between agencies, a multilingual resource guide for residents, and engaging residents in community projects
- We're Here for You: Fenway/Kenmore: Community health navigation services; financial counseling and case management; expand free healthy food distributions; and resident leadership opportunities
- Second cohort of collectives selected, focused on the neighborhood of Chinatown and the City of Chelsea
- Final RFP for the neighborhoods of Allston/Brighton, Mission Hill, and Roxbury will be issued in 2023

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Boston Grantees Updates



- 16 grantees focused on housing affordability, jobs and financial security, and behavioral health
- About mid-way through the 3-year grant period (ending 12/31/23)
 - Data collection and evaluation capacity building activities continue
 - BIDMC will be meeting 1:1 with each grantee this summer to discuss program successes, challenges, and impact to date
 - More information about emerging themes and impact will be shared later this year
- Plan to hold a grantee showcase event in 2023/4

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Chelsea Grantees Updates



- Behavioral Health: North Suffolk Mental Health Association
 - Latino CART program
 - 2-year grant term ends 10/31/22
- Jobs and Financial Security: La Colaborativa
 - Chelsea Youth Employment program
 - 3-year grant term began 1/1/2022
- Housing Affordability Grantee: TBD
 - RFP will be issued summer 2022
 - 4-year grant term to begin by the end of 2022
- Data collection and evaluation capacity building activities continue for current grantees
- Will meet 1:1 with each grantee to discuss program successes, challenges, and impact to date

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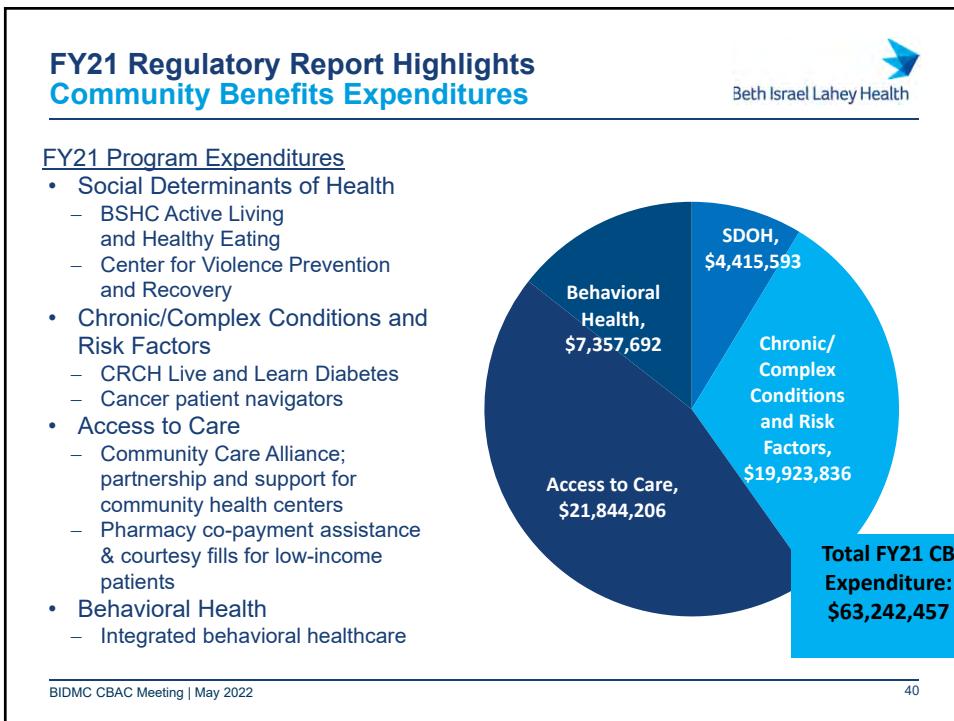
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Annual Regulatory Reporting

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FY21 Regulatory Report Highlights
Community Benefits Expenditures

FY21 Program Expenditures

- Social Determinants of Health
 - BSHC Active Living and Healthy Eating
 - Center for Violence Prevention and Recovery
- Chronic/Complex Conditions and Risk Factors
 - CRCH Live and Learn Diabetes
 - Cancer patient navigators
- Access to Care
 - Community Care Alliance; partnership and support for community health centers
 - Pharmacy co-payment assistance & courtesy fills for low-income patients
- Behavioral Health
 - Integrated behavioral healthcare

SDOH, \$4,415,593

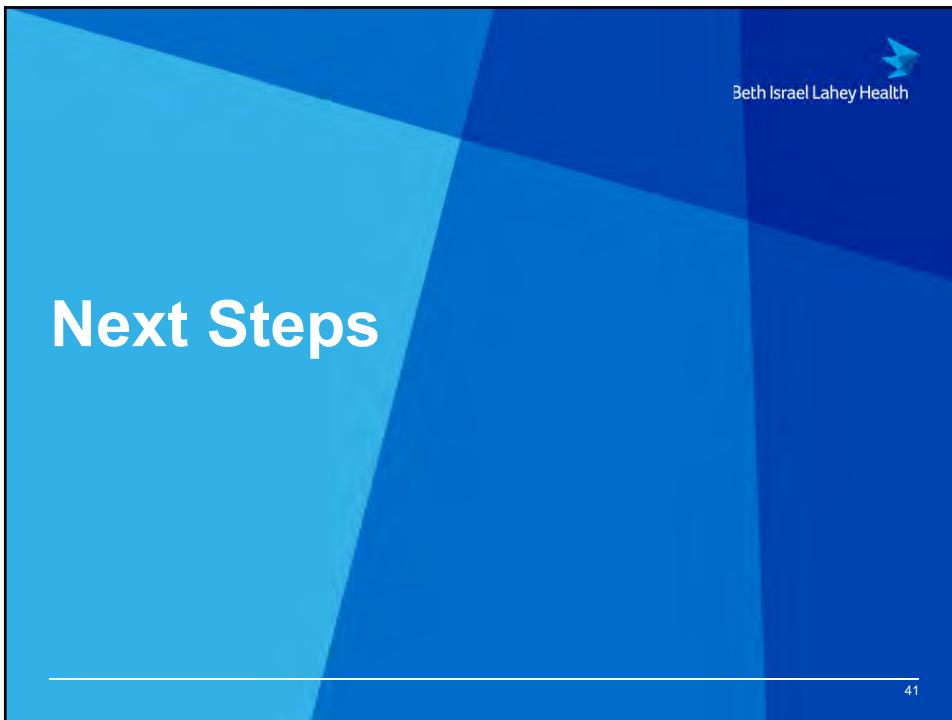
Behavioral Health, \$7,357,692

Chronic/Complex Conditions and Risk Factors, \$19,923,836

Total FY21 CB Expenditure: \$63,242,457

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Next Steps

CHNA/IS Report: Will be sent out for CBAC members by end of July.

Future meetings:

- June 28, 2022 (Annual meeting)
- September 8, 2022
- December 6, 2022 (Note date change)

Thank you!

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Additional Information



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FY22 CHNA Guiding Principles



Equity: Work toward the systemic, fair and just treatment of all people; engage cohorts most impacted by COVID-19



Collaboration: Leverage resources to achieve greater impact by working with community residents and organizations



Engagement: Intentionally outreach to and interact with hardy reached populations; including but not limited to people impacted by trauma, people with disabilities, communities most impacted by inequities, and others



Capacity Building: Build community cohesion and capacity by co-leading Community Listening sessions and training community residents on facilitation



Intentionality: Be deliberate in our engagement and our request and use of data and information; be purposeful and work collaboratively to identify and leverage resources for maximum benefit

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Advisory Committee Members	2019						2020				
	April 9th	May 21st	June 25th	July 23rd	September 24th	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				2022				
	March 23	June 22	September 28	December 14	March 23	May 24	June 28	September 8	December 6
Alberte Altine-Gibson			Ph	Ph					
Flor Amaya	Ph	Ph	Ph	A	Ph	Ph			
Maia Betts			Ph	Ph	A	A			
Elizabeth Browne	Ph	Ph	Ph	Ph	Ph	Ph			
Tina Chery	A	Ph							
Alexandra Chery Dorrelus		Ph	Ph	Ph	Ph	A			
Shondell Davis	Ph	Ph	Ph	Ph	Ph	Ph			
Richard Giordano	Ph	Ph	Ph	Ph	Ph	Ph			
Barry Keppard	Ph	Ph	Ph	Ph	Ph	Ph			
Kira Khazatsky			Ph	Ph	Ph	A			
Phillomin Laptiste	Ph	Ph							
Angie Liou	Ph	Ph	Ph	Ph	Ph	A			
James Morton	Ph	A	Ph	A	A	A			
Sandy Novack	Ph	Ph	Ph	Ph	Ph	Ph			
Holly Oh	Ph	Ph							
Alex Oliver-Davila	Ph	A	A	Ph	A	A			
Triniese Polk	Ph	A	A	Ph	A	Ph			
Jane Powers	Ph	Ph	A	A	Ph	Ph			
Richard Rouse	Ph	A	Ph	A	Ph	A			
Fred Wang	Ph	Ph	Ph	Ph	Ph	Ph			
BIDMC Staff - Ex Officio									
Walter Armstrong	Ph	Ph	Ph	Ph					
Lauren Gabovitch	A	Ph	Ph	Ph	Ph	A			
Nancy Kasen	Ph	Ph	Ph	Ph	Ph	A			
Marsha Maurer					Ph	Ph			
Kelina (Kelly) Orlando				Ph	Ph	Ph			
Joanne Pokaski	Ph	A	Ph	Ph	Ph	A			
Melody Route-Satchell		Ph	A						
Robert Torres	Ph	Ph	Ph	Ph	Ph	Ph			
LaShonda Walker-Robinson	Ph	Ph	Ph	Ph	Ph	Ph			

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