

March 28, 2023
Meeting Packet

Meeting Agenda

Community Benefits Advisory Committee (CBAC)
Beth Israel Deaconess Medical Center (BIDMC)
Tuesday, March 28, 2023
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 – 5:40 pm | Youth Advisors Presentation |
| IV. 5:40 pm – 6:20 pm | Regulatory Updates |
| V. 6:20 pm – 6:40 pm | Community-based Health Initiative Updates |
| VI. 6:40 pm – 6:55 pm | CBAC Member Stories |
| VII. 6:55 pm – 7:00 pm | Next Steps and Adjourn |

Next Meeting: June 27, 2023

Meeting Slides

Beth Israel Deaconess Medical Center Community Benefits Advisory Committee Meeting

Nancy Kasen, VP, Community Benefits And Community Relations, BILH

Robert Torres, Director, Community Benefits, BIDMC

Anna Spier, Program Manager, Community Benefits, BIDMC

Jamie Goldfarb, Program Administrator, Community Benefits, BIDMC

March 28, 2023

Beth Israel Lahey Health 

Beth Israel Deaconess Medical Center

Housekeeping

- Please join the meeting using video (if possible)
- If you lose your connection, please call in
 - Phone number: +1 309 205 3325
 - Meeting ID: 969 4504 9042
 - 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

- Welcome and Introductions
- Public Comment
- Youth Advisors Presentation
- Regulatory Updates
- Community-based Health Initiative Updates
- CBAC Member Stories
- Next Steps and Adjourn

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Welcome and Introductions

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Welcome New Members!



Jane Foley, DNP, MHA, RN

Interim Senior VP of
Patient Care Services,
Chief Nursing Officer,
BIDMC



Pamela D. Everhart, JD

Senior VP, Regional Public
Affairs & Community Relations,
Fidelity Investments

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Welcome New Members!



Shantel Gooden, MPA

Senior Director of Behavioral
Health Administration,
The Dimock Center



Amy Nishman, MPH, MSW

Senior Vice President of
Strategy,
JVS Boston

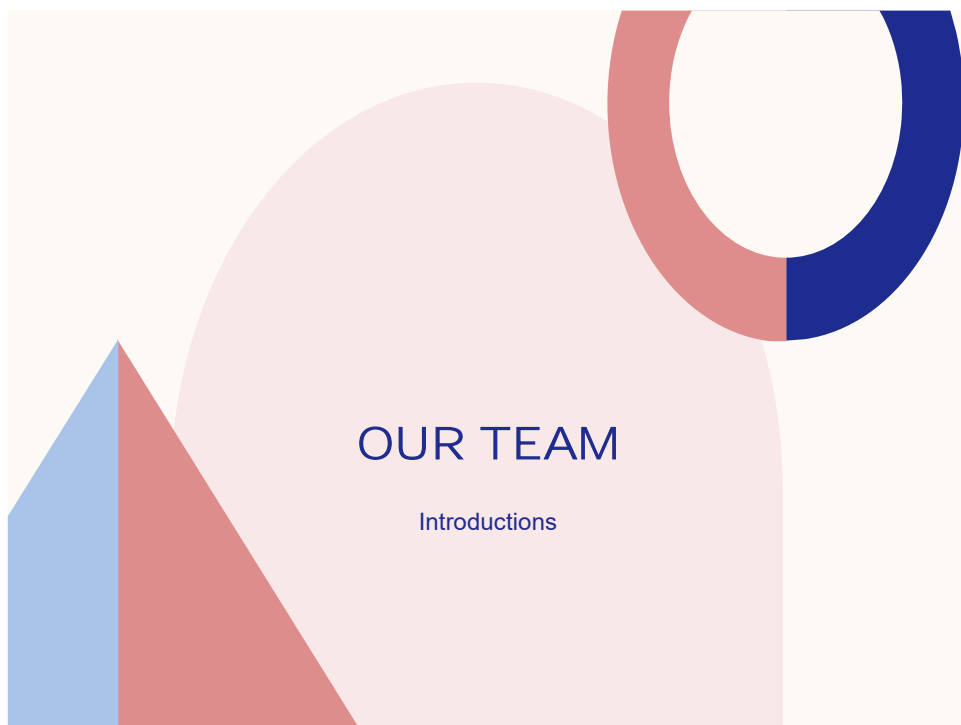
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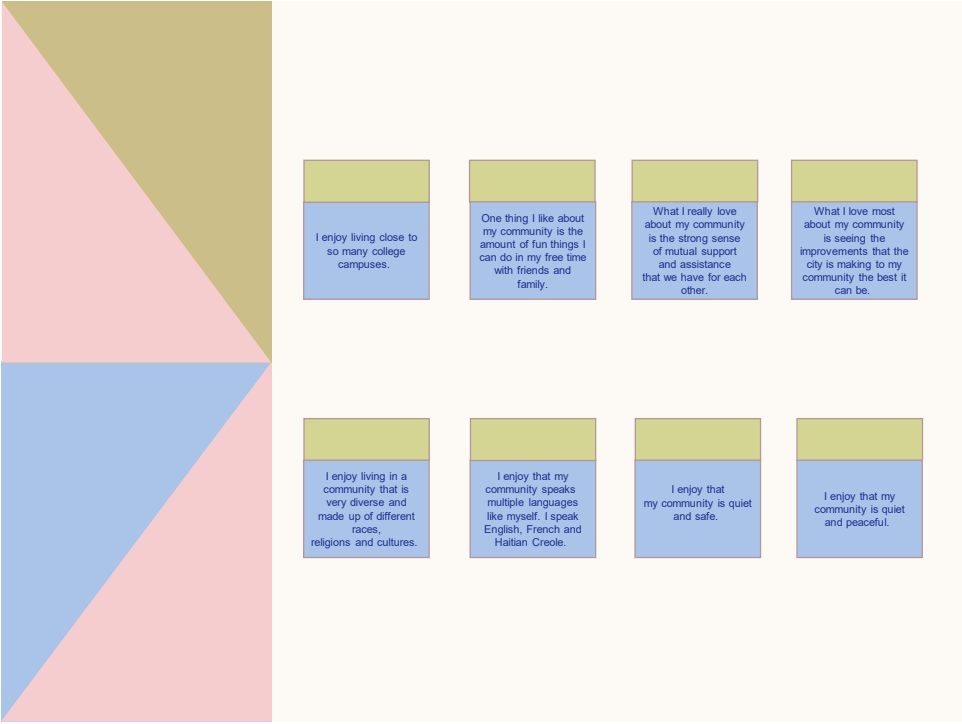
Public Comment

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Youth Advisors

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ELIGIBILITY CRITERIA

What did the process look like?

- Using BIDMC's core principles, we took the time to create our own. Our Youth Advisor's values emphasized:
 1. Finding **joy**
 2. **Showing compassion** and **suspending judgement**.
 3. **Helping youth** and **enhancing lives**
 4. Maintaining an **open mind**.
 5. The ability to **celebrate and appreciate** all
- We used these core values to narrow down our list of priorities when selecting grantees. We determined that there are 5 things that our grantees must have to get the funding.
 - Aligns with our values
 - Reflects diversity
 - Focus on Youth
 - Addresses Mental Health
 - SMART Goals

How did this feel?

- It challenged me to think.
- Allowed me to reflect on my community.
- Required me to be very intentional in my decision making.

CREATING THE APPLICATION

What did the process look like?

1. **Drafted Questions** to provide more insight.
2. **Consolidated and prioritized Questions** that maximize the amount of information we can get.
3. **Required a referral letter** from a current or past youth participant.
4. Reviewed Applications and Asked Follow ups

How did this feel?

- **Collaborative project** that involved everyone's ideas.
- The importance of **communication**
- A **creative process**
- **New lessons learned**



SELECTING FINAL GRANTEES



**“TEENS ARE THE FUTURE. HAVING
A SAY IN OUR COMMUNITY AND
WHAT IMPACTS IT IS IMPORTANT.”**

- Youth Advisors

SOCIEDAD LATINA

Sociedad Latina

- Is an organization that **focuses on youth and families**.
- Work on **different solutions** to end poverty, **mental health**, racism, and lack of education.
 - **Goal:**
 - Create **Youth Advisory Board** that creates **Youth Led programming**.
 - Create a needs assessment

Why did we select them?

- **Teen Led** Programming
- **Diversity** in leadership and members
- **Referral Letter**
- Similar **core values** to our grant team and to the YMCA.



DOC WAYNE

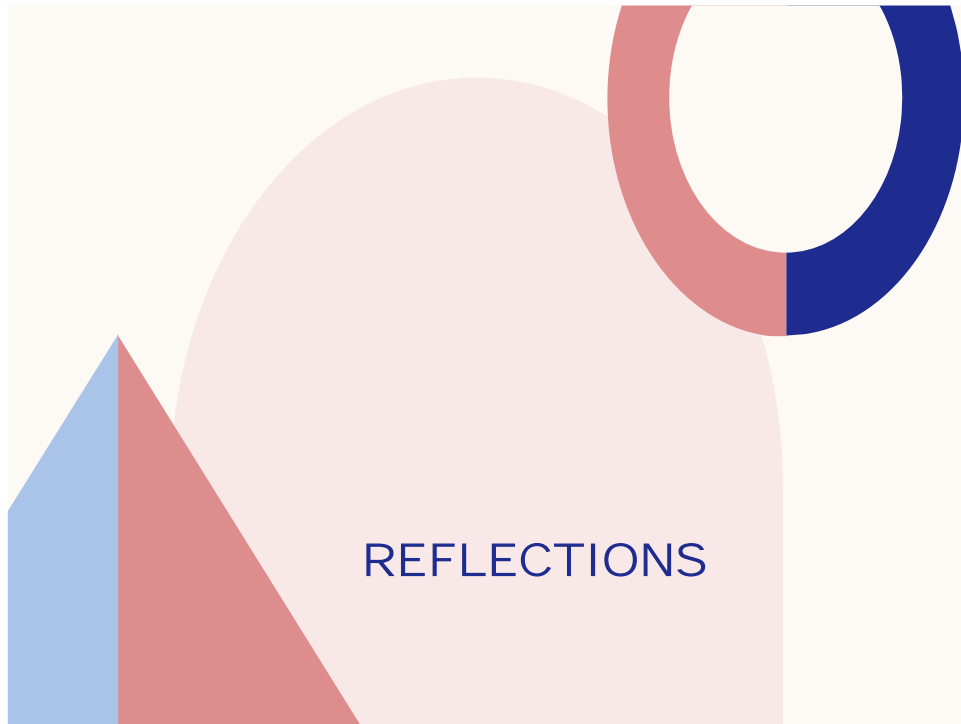
What are they working on?

- **Focus on youth's** physical and **mental health**.
- **Group therapy** that uses sports to teach mental health like emotion regulation, advocating for yourself and group communication.
- **Published research**
 - Implements programs such as **Chalk Talk**.
 - This service helps assist **youth** in learn **social and emotional learning (SEL)** skills.

Why did we select them?

- Our **experience** with youth
- **Diversity** in leadership and youth.
- **Potential**





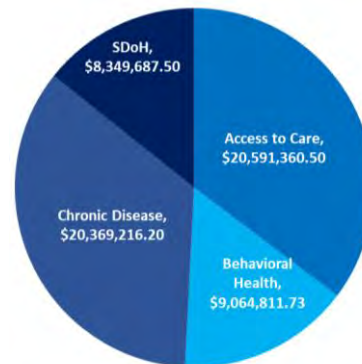
Annual Regulatory Reports Reporting Agencies

| Mass Attorney General (AGO) | Internal Revenue Service (IRS) | City of Boston | Department of Public Health (DPH) |
|----------------------------------|--|---|---|
| Annual Community Benefits Report | IRS 990 Tax form Schedule H Schedule I | Payment in Lieu of Taxes (PILOT) Report | Determination of Need (DoN) Community-based Health Initiative |

FY22 Regulatory Report Highlights Draft Community Benefits Expenditures

FY22 Program Expenditures

- **Social Determinants of Health**
 - YMCA Youth Advisors Program
 - Education & Workforce Development
- **Chronic/Complex Conditions and Risk Factors**
 - Live & Learn Diabetes
 - Cancer Patient Navigators
- **Access to Care**
 - BSHC Community Health Workers
 - Community Care Alliance
- **Behavioral Health**
 - Collaborative Care Model
 - Screening, Brief Intervention, and Referral to Treatment



***Total FY22 CB
Expenditure:
\$58,375,076**

*Total includes charity care as allowed by the Office of the Attorney General.

FY22 Program Highlights

Food, Housing, Mental Health

Food Insecurity

- Active Living & Health Eating
 - BSHC partners with Fair Foods to distribute fruits and vegetables and with the Boston Public Health Commission to distribute Farmers Market coupons
- The Dimock Center Food Insecurity
 - A gift-card based program which provided flexibility and independence for individuals to purchase necessary food and household items

Housing Instability

- Social Work Housing Support
 - BIDMC's social work department provides housing support to patients in need of short or long-term housing (e.g., Hospitality Homes)
- DoN Housing Affordability
 - BIDMC's housing affordability grantees aim to reduce homelessness, reduce displacement, and increase home ownership for low-income individuals and families

Mental Health and Substance Use

- Center for Violence Prevention and Recovery
 - Leads the way in developing a continuum of education, outreach, and treatment interventions to respond to victims of interpersonal, sexual, community violence, and homicide bereavement

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FY23 Program Priorities

Current and Upcoming

Equitable
Access to Care



- Center for Diversity, Equity, and Inclusion
 - Created and charged with working with Department Chairs to increase recruitment and retention of under-represented minority and women faculty, and to oversee data collection on health care disparities at BIDMC
 - # of Underrepresented in Medicine clinicians recruited; % change over time
- Community Care Alliance
 - Support The Dimock Center's Clinical Stabilization Services (CSS) by providing \$1.2M over five years
 - Funds will be used to restore and renovate the Dr. Marie E. Zakrzewska (Z) building
- Beth Israel Lahey Health Advocacy
 - Advocate for and support policies and programs that address healthcare access
 - # of policies reviewed; # of policies supported

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FY23 Program Priorities Current and Upcoming



- **Neighborhood Trauma Team**
 - BSHC, in partnership with Greater Four Corners Action Coalition (GFCAC), provides outreach to individuals, families, and neighborhoods impacted by community violence
 - # of neighborhood incidents responded to; # of therapeutic sessions provided
- **Youth Summer Jobs Program**
 - Provides paid summer jobs to introduce high school students to careers in the medical field
 - # of youth involved; job skills
- **Environmental Sustainability**
 - BIDMC is actively engaged in creating a vibrant, sustainable community that fosters healthy lifestyles, enhances quality of life, and improves environmental conditions
 - Greenhouse gas emissions; % local food and beverage spend; waste diversion

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FY23 Program Priorities Current and Upcoming



- **Bowdoin Street Health Center Integrated Behavioral Health Care**
 - The Integrated Behavioral Health Clinician provides co-located, collaborative care within the primary care clinic and serves as a consultant to primary care staff to provide clinical interventions for patients
 - # behavioral health consultations in primary care; # individual therapy sessions
- **Determination of Need Behavioral Health**
 - Behavioral health grantees aim to increase access to high-quality and culturally and linguistically appropriate mental health and substance use services by building provider and community capacity
 - # of participants and their demographics; Mental health symptoms (PHQ-8; PHQ-9; PSYCHLOPS) ; Stigma (Recovery Assessment Scale (RAS-DS); General Help-Seeking Questionnaire (GHSQ)
- **YMCA Youth Advisors**
 - YMCA Youth Advisors are funding two organizations who are working on youth mental health
 - To Be Determined

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FY23 Program Priorities

Current and Upcoming

Complex and
Chronic Conditions



The Wellness Center at Bowdoin Street Health Center

- The Wellness Center offers Bowdoin/Geneva residents the opportunity to learn and practice healthy habits in their own neighborhood
- # of farmers market coupons distributed; # food bags distributed; youth involvement in fitness in the city
- Cancer Patient Navigators
 - BIDMC offers the services of bilingual and bicultural Cancer Patient Navigators who bridge the gap between community providers and the medical center
 - # of unique patients served by Latinx and Chinese patient navigators
- Lung Cancer Early Detection Screening
 - Provide CT lung cancer screening to eligible patients
 - # of patients receiving early detection lung cancer screening

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CB.CR Guiding Principles

Updated



Accountability: Hold each other to efficient, effective and accurate processes to achieve our system, department and communities' collective goals.



Community Engagement: Collaborate meaningfully, intentionally and respectfully with our community partners and support community initiated, driven and/or led processes especially with and for population experiencing the greatest inequities.



Equity: Apply an equity lens to dismantle systems of oppression and work towards the systemic, fair and just treatment of all people of any race, ethnicity, religion, gender, sexual orientation, age, immigration and/or disability status, so that all communities and people can achieve their full health and overall potential.



Impact: Employ evidence-based and evidence-informed strategies that align with system and community priorities to drive measurable change in health outcomes.

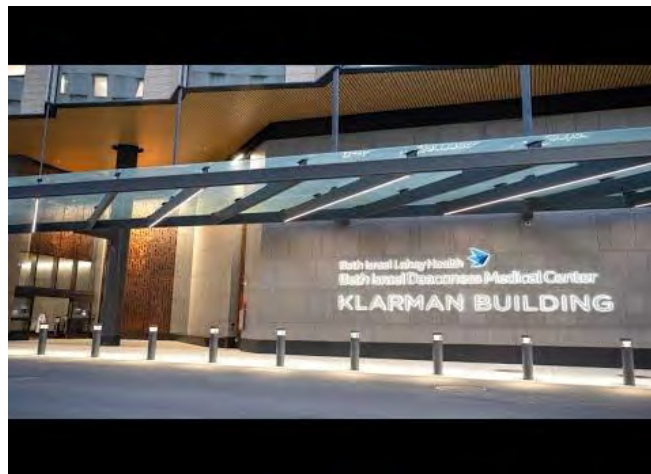
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Community-based Health Initiative Updates

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BIDMC's Klarman Building Ribbon Cutting



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Healthy Neighborhoods Initiative (HNI) Cohort 1 Updates

- Implementation through February 2024
- Healthy Bowdoin Geneva:
 - Coordinator hired over the summer
 - Working on Collective dynamics
 - Developing multilingual resource guide
- We're Here for You: Fenway/Kenmore:
 - Launching first cohort of Fenway Cares resident leader program this month
 - Fenway CDC is currently providing financial stability services to 46 residents
 - Filmed and interviewed Collective members to produce multi-lingual videos for community outreach



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Healthy Neighborhoods Initiative (HNI) Cohort 2 Updates

- Implementation through August 2024
- Chelsea HNI:
 - Hired a project coordinator
 - First community workshop held in February was on women's heart health; March workshops were about menopause
- Chinatown HOPE:
 - Formed workgroups to facilitate implementation of each part of the program



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Community-based Health Initiative

Healthy Neighborhoods Initiative (HNI) Updates

All four current Collectives participated in a joint meeting in January to share their experiences and help inform the third and final HNI cohort (Allston/Brighton, Mission Hill and Roxbury)

- RFP for the final three neighborhoods was released at the end of February
 - Provided more structure and emphasis around the use of planning funds
 - Extended deadlines slightly to allow more time for Collective and proposal development
- Proposals are due March 30 and Collectives will be notified by April 20

2022 CBAC Member Survey

Purpose: To assess perceptions of the community engagement process as well as experiences of participating in the Community Benefits Advisory Committee

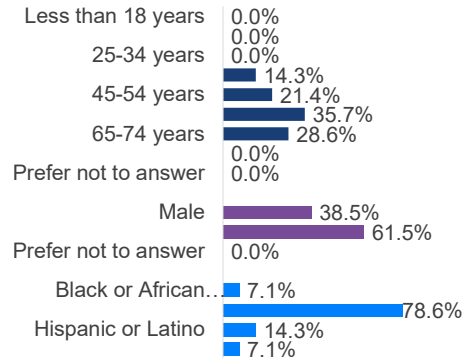
Methods: Self-administered online in December 2022

- Response rate: 65% (N=15)

CBAC Member Respondent Characteristics

2022 CBAC Meeting Attendance:

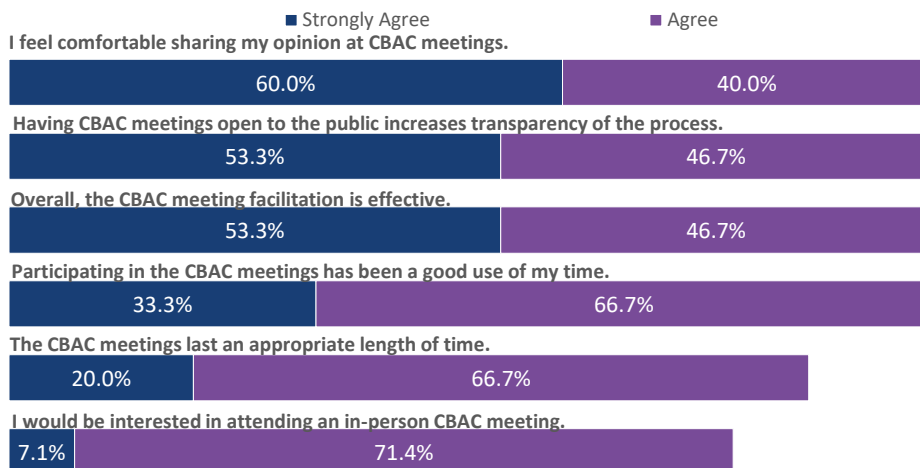
All (100%) of survey respondents reported attending at least two of the four CBAC meetings in 2022.



NOTE: N=14 for age and race/ethnicity; N = 13 for gender questions

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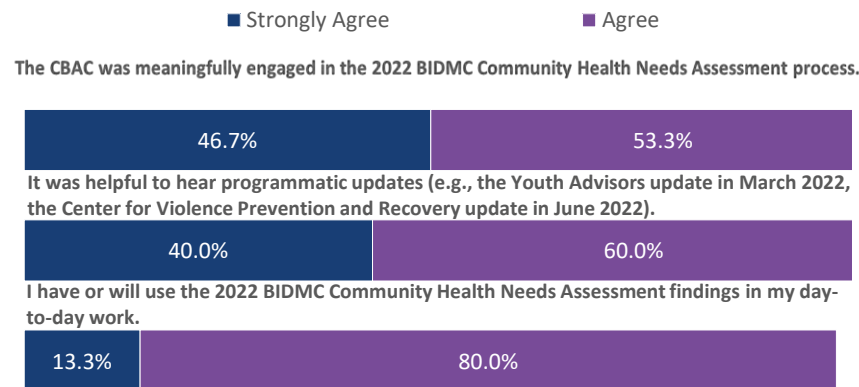
CBAC Participation Experience: Percent of respondents who strongly agreed / agreed



Data Source: Beth Israel Deaconess Medical Center Community Benefits Advisory Committee (CBAC) Member Survey, 2022
Note: Data organized in descending order by percent of "Strongly Agree"; N = 15 for all except in-person CBAC meeting statement (N = 14)

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CBAC Respondents' Rating of Content of CBAC Meetings (n = 15)

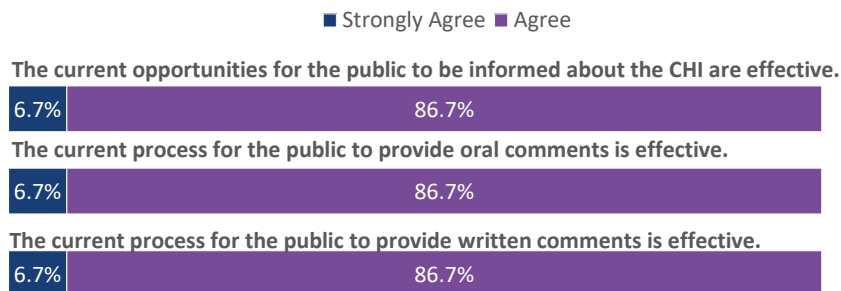


"I will use it to inform health interventions." – Survey respondent

Data Source: Beth Israel Deaconess Medical Center Community Benefits Advisory Committee (CBAC) Member Survey, 2022
Note: Data organized in descending order by percent of "Strongly Agree."

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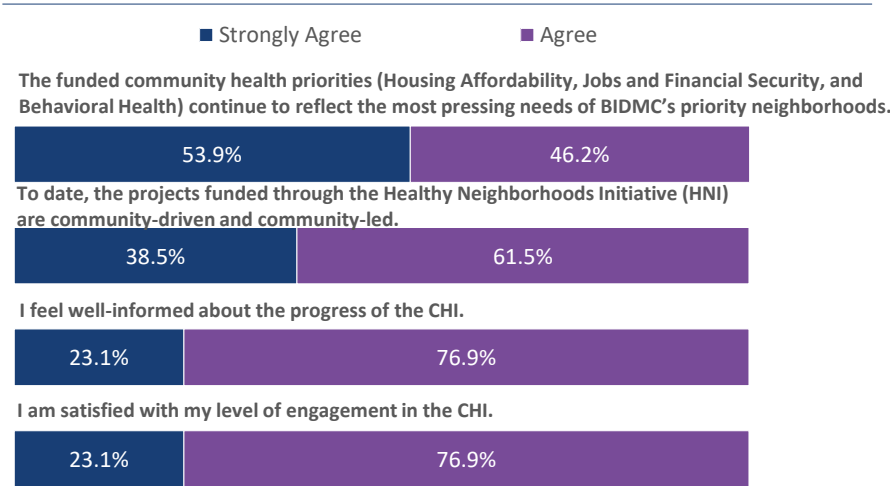
CBAC Perceptions of Community Engagement: Percent of respondents who strongly agreed / agreed (n = 15)



Data Source: Beth Israel Deaconess Medical Center Community Benefits Advisory Committee (CBAC) Member Survey, 2022

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CBAC Perceptions of CHI Funding Process: Percent of respondents who strongly agreed / agreed (n = 13)



Data Source: Beth Israel Deaconess Medical Center Community Benefits Advisory Committee (CBAC) Member Survey, 2022
Note: Data organized in descending order by percent of "Strongly Agree."

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CBAC Member Stories

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Community Benefits Advisory Committee Members

Sharing Our Stories



Richard Giordano
Fenway Community Development
Corporation



Kelina (Kelly) Orlando
BIDMC

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Next Steps

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Next Steps

Save the Date: BIDMC Community Grantee Open House will be held June 15, 2023 in the Klarman Building from 11am-2pm. Invitations will be sent out in April.

Future CBAC meetings:

- June 27, 2023
- September 19, 2023
- December 12, 2023

Thank you!

Meeting Minutes

September 8, 2022

Community Benefits Advisory Committee (CBAC)
Beth Israel Deaconess Medical Center (BIDMC)
Thursday, September 8, 2022
5:00 PM – 6:45 PM
Held Via Zoom

Present: Flor Amaya, Maia Betts, Elizabeth (Liz) Browne, Lynne Courtney, Shondell Davis, Richard Giordano, Jamie Goldfarb, Nancy Kasen, Barry Keppard, Sandy Novack, Alex Oliver-Dávila, Trinieese Polk, Jane Powers, Richard Rouse, Anna Spier, Samantha Taylor, Robert Torres, Fred Wang

Absent: Alexandra Chery Dorrelus, Lauren Gabovitch, Kira Khazatsky, Angie Liou, Marsha Maurer, Kelina (Kelly) Orlando, LaShonda Walker-Robinson

Guests: Annie Rushman, Health Resources in Action (HRiA). One member of the public was in attendance.

Welcome and Introductions

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

Nancy welcomed Samantha Taylor, the Executive Director of Bowdoin Street Health Center and Lynne Courtney, Program Administrator for Workforce Development at BILH to the CBAC. Nancy shared that James Morton and Joanne Pokaski were stepping down from the CBAC and thanked them for their service.

The minutes from the March 22, 2022 and May 24, 2022 CBAC meetings were reviewed and accepted.

Public Comment

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

Community-based Health Initiative Updates

Robert Torres, Director of Community Benefits, provided updates on the Community-based Health Initiative (CHI).

Funding Award Update

Robert reminded the CBAC that in 2019 they voted to allocate 40% of CHI funds to Housing Affordability, 30% of funds to Jobs & Financial Security, and 15% each of the funds to Behavioral Health and the Healthy Neighborhoods Initiative (HNI). He shared the approximate percentages of allocated funds that had been awarded as of August 2022 for each of the four priority areas: Housing Affordability (42%), Jobs and Financial Security (45%), Behavioral Health (73%), and HNI (57%). He stated that approximately \$7 million still needs to be awarded and that the Allocation Committee would aim to align the remaining funds to be awarded with the allocation percentages approved by the CBAC.

City of Chelsea Housing Affordability Request For Proposal (RFP)

Robert shared that on September 7th BIDMC released a competitive Request for Proposals (RFP) to address housing affordability in the city of Chelsea. He explained that one grantee will be awarded \$705,000 by the Allocation Committee and that the selected organization must be located in the city of

Chelsea and serve Chelsea residents. He said that the strategic focus areas for this RFP align with the priorities selected by the CBAC including homelessness, home ownership and rental assistance. The deadline for proposals is October 14th and proposals will be reviewed by the Allocation Committee.

Healthy Neighborhoods Initiative (HNI) Updates

Robert provided an update on the first two selected HNI Collectives representing Bowdoin/Geneva and Fenway/Kenmore (Cohort 1). As part of the evaluation of the planning phase, Cohort 1 HNI Collectives shared that the planning phase allowed them to build and create new partnerships, increased collaboration (vs. competition), and allowed for dedicated facilitators to hear and incorporate all perspectives. HNI Collectives appreciated that BIDMC, through the HNI funding mechanism, provided an opportunity to fund and advocate for their neighborhoods and community visions. HNI Cohort 1 Collectives also shared opportunities for improvement, including that forming a Collective took more effort than expected and that neighborhoods had varying levels of resources they could commit to Collective formation. In response, Robert shared that with the subsequent HNI cohort (Cohort 2), BIDMC encouraged Collectives to use planning funds for outside facilitation and included tasks to support collective development in the RFP. BIDMC also learned that the Cohort 1 HNI planning phase took longer than expected and that more focus was put on identifying community priorities than on project development. In response, in the second HNI RFP, BIDMC extended the planning phase and is encouraging new collectives to use secondary data to identify community priorities.

Robert then provided an update on the second set of HNI Collectives, Chinatown and the city of Chelsea (Cohort 2). He shared that Cohort 2 HNI Collectives were wrapping up the project planning phase; during this process Collectives are required to conduct an inclusive, community driven/led process by holding at least three community engagement opportunities that are open to the public and advertised broadly to residents. Based on community engagement findings and secondary data, the Cohort 2 Collectives will develop a project to implement and submit to BIDMC's Allocation Committee for review and approval.

One CBAC member asked if Collectives were explicitly required to engage the youth voice, and if not, whether this could be included in future RFPs. Nancy replied that this could be incorporated into future HNI RFPs. Another member asked if BIDMC is achieving its goals through the HNI. Anna, Manager of Community Benefits shared that BIDMC is working with an independent evaluator to learn if the HNI is a successful funding mechanism and that the intention is to share findings broadly.

FY23 Moving to Impact

Nancy Kasen shared that BIDMC would soon begin implementing the Fiscal Year (FY) 2023 Implementation Strategy. She shared that over the past few years BILH Community Benefits had been working to align strategies across the system with the aim of increasing impact and improving community health. To support these efforts BILH, in partnership with Mass General Brigham, developed a system-wide database to streamline data collection from internal and external stakeholders. In addition, Nancy shared that over time, the system would begin moving towards multi-year grants, with a focus on maximizing impact in the community. One member was concerned about whether small organizations would have the capacity to use this database. Jamie Goldfarb, Program Administrator of Community Benefits shared that the database would likely minimize grantee effort compared to previous data collection tools and that she had received positive feedback from stakeholders who had already used this database. Nancy also shared that BILH would provide training for organizations to use the database.

FY22 Community Health Needs Assessment (CHNA) and Implementation Strategy Wrap-Up

Jamie shared that the 2022 Community Health Needs Assessment (CHNA) and FY23-25 Implementation Strategy have been completed and that they would be posted on the BIDMC Community Benefits webpage after approval by BIDMC's Board of Trustees. Jamie thanked the CBAC for their support and involvement during the CHNA process.

Jamie then highlighted key strengths from the CHNA process, including early and intentional community engagement planning, meaningfully engaging focus cohorts, partnering with community champions, and identifying opportunities to meet historically underrepresented voices where they were, such as existing support group meetings. She then described opportunities for future improvement, such as using both virtual and in-person engagement methods, building on and creating partnerships to continuously engage the community, and continuing to optimize coordination with the Boston CHNA-CHIP Collaborative and the North Suffolk iCHNA.

CBAC members then shared their reflections on the process. Several members shared they felt a real invitation from BIDMC to provide guidance on what community outreach should look like. Additionally, they shared that BIDMC listened and responded to the information that was provided. Robert shared that the community connections CBAC members created for BIDMC were instrumental in the success of the CHNA.

CBAC Member Stories

Anna introduced a new meeting segment, CBAC Member Stories. She explained that this was an opportunity to get to know each other since members have not been gathering in person for CBAC meetings. Jane Powers, Chief of Staff at Fenway Health; Alexandra Oliver-Dávila, Executive Director of Sociedad Latina; and Fred Wang, BIDMC Trustee Advisor Emeritus were the first three CBAC members to share. Each member shared where they grew up, their career backgrounds, their interests and hobbies, and what led them to join the CBAC.

Anna stated that this segment would be a standing agenda item until all CBAC members have had an opportunity to share.

Next Steps

Anna mentioned that the CBAC Charter would be updated and shared prior to the next meeting. She thanked the attendees for joining and reminded everyone that the next scheduled meeting was December 6, 2022.

Meeting Minutes

December 6, 2022

Community Benefits Advisory Committee (CBAC)
Beth Israel Deaconess Medical Center (BIDMC)
Tuesday, December 6, 2022
5:00 PM – 7:00 PM
Held Via Zoom

Present: Elizabeth (Liz) Browne, Lynne Courtney, Shondell Davis, Lauren Gabovitch, Richard Giordano, Nancy Kasen, Barry Keppard, Marsha Maurer, Sandy Novack, Kelina (Kelly) Orlando, Jane Powers, Richard Rouse, Anna Spier, Robert Torres, LaShonda Walker-Robinson, Fred Wang

Absent: Flor Amaya, Maia Betts, Alexandra Chery Dorrelus, Kira Khazatsky, Angie Liou, Alex Oliver-Dávila, Triniese Polk, Samantha Taylor

Guests: Kristin Mikolowsky, Health Resources in Action (HRiA)

Welcome and Introductions

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

Public Comment

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

FY22 Community Benefits Data Dashboard

Anna Spier, Manager of Community Benefits, shared the first iteration of BIDMC's Community Benefits Data Dashboard, a tool that will be used to help track, analyze and display data to gain deeper insight about the impact and work of the department. She explained that we are piloting what data to include in the dashboard and welcomed input from the CBAC about what would be most useful to see. Several CBAC members indicated that having the visual was helpful. One CBAC member suggested that it would be helpful to have more information about the types of community events attended and supported, and another said there may be opportunity to share additional process measures that can show progress toward outcomes. Another CBAC member requested that data by neighborhood be shared in the future, given the diversity and size of BIDMC's Community Benefits Service Area.

Anna thanked the CBAC members for their thoughts and shared that the data dashboard will be presented twice per year at the June and December meetings, in addition to the regulatory reporting numbers that are shared at the March meetings. Anna stated that over time the dashboard will be more complete and incorporate suggestions from CBAC members, when possible.

Community-based Health Initiative Updates

Robert Torres, Director of Community Benefits, provided updates on the Community-based Health Initiative (CHI). He shared preliminary data from Health Resources in Action related to the Boston cohort of grantees from July 1, 2021-September 30, 2022, demonstrating the reach and selected demographic information about the participants enrolled to date. He stated that more information will be available in spring 2023 and that updates will continue to be shared with the CBAC. Robert also shared a couple de-identified participant stories that grantees had provided.

Next, Robert shared information about the Chinatown HOPE and Chelsea Healthy Neighborhoods Initiative collectives and their project proposals that were recently awarded funding. Chinatown HOPE's project involves the activation of open space in Chinatown through gardening, arts, cultural programming and resident leadership development. The Chelsea Healthy Neighborhoods Initiative Collective will develop and implement workshops to support women's wellness and health in Chelsea. Robert also provided an update regarding the CHI grantees in Chelsea – North Suffolk Mental Health Association, La Colaborativa, and Comunidades Enraizadas Community Land Trust.

Regulatory Updates

Nancy shared a series of regulatory updates related to the CBAC. She reviewed the role and membership composition of the CBAC and summarized the proposed changes to the charter that had been shared in advance of the meeting. The CBAC members in attendance verbally agreed that the changes made sense due to there not being a quorum, a vote was not taken. Next, Nancy went over the annual Conflict of Interest Disclosure Statements and explained their importance. She also reminded CBAC members about the importance of completing the FY22 Community Representative Feedback Form for the Massachusetts Attorney General's Office and reviewed the Massachusetts Department of Public Health's Continuum of Community Engagement.

Nancy then shared the corrected Charity Care expenditure amount for the FY21 Attorney General's Office report (\$51,016,036). She explained that the Charity Care amount previously shared at the CBAC's March 2022 meeting inadvertently contained the wrong numbers; the number has now been corrected and finalized with the Attorney General's Office.

Nancy told the CBAC that BILH will soon be announcing a funding opportunity focused on supporting the creation, expansion or reopening of a licensed birthing center. She asked the CBAC to spread the word in the community and notify the team if they know of any organizations that may be interested.

CBAC Member Stories

Anna explained that this portion of the meeting was an opportunity to get to know each other since members have not been gathering in person for CBAC meetings. Barry Keppard, LaShonda Walker-Robinson, and Richard Rouse each shared where they grew up, their career backgrounds, their interests, and what led them to join the CBAC.

Anna stated that this segment would be a standing agenda item until all CBAC members have had an opportunity to share.

Next Steps

Kristin Mikolowsky from Health Resources in Action shared a brief online survey for CBAC members to provide information about their experience. Anna thanked the attendees for joining and reminded everyone about the deadlines for completing the Community Representative Feedback forms and Conflict of Interest Disclosure Statements. She then reminded everyone that the next scheduled meeting was March 28, 2023 before ending the meeting.

| Advisory Committee Members | 2023 | | | |
|----------------------------|----------|---------|--------------|-------------|
| | March 28 | June 27 | September 19 | December 12 |
| Flor Amaya | Ph | | | |
| Elizabeth Browne | A | | | |
| Alexandra Chery Dorrelus | A | | | |
| Shondell Davis | Ph | | | |
| Pamela Everhart | Ph | | | |
| Richard Giordano | Ph | | | |
| Shantel Gooden | Ph | | | |
| Barry Keppard | Ph | | | |
| Amy Nishman | Ph | | | |
| Angie Liou | Ph | | | |
| Sandy Novack | Ph | | | |
| Alex Oliver-Davila | A | | | |
| Triniese Polk | Ph | | | |
| Jane Powers | Ph | | | |
| Richard Rouse | Ph | | | |
| Samantha Taylor | Ph | | | |
| Fred Wang | Ph | | | |
| BIDMC Staff - Ex Officio | | | | |
| Lynne Courtney | Ph | | | |
| Jane Foley | Ph | | | |
| Lauren Gabovitch | Ph | | | |
| Nancy Kasen | Ph | | | |
| Kelina (Kelly) Orlando | Ph | | | |
| Robert Torres | Ph | | | |
| LaShonda Walker-Robinson | Ph | | | |

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