March 23, 2021 Meeting Packet

Meeting Agenda

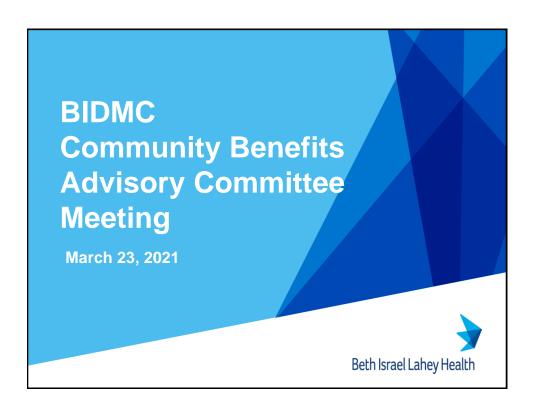


Community Benefits Advisory Committee (CBAC) Beth Israel Deaconess Medical Center (BIDMC) Tuesday, March 23, 2021 5:00 PM - 7:00 PM Zoom Link

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

Next Meeting: June 22, 2021

Meeting Slides



Housekeeping



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

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Content



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

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Welcome New CBAC Member



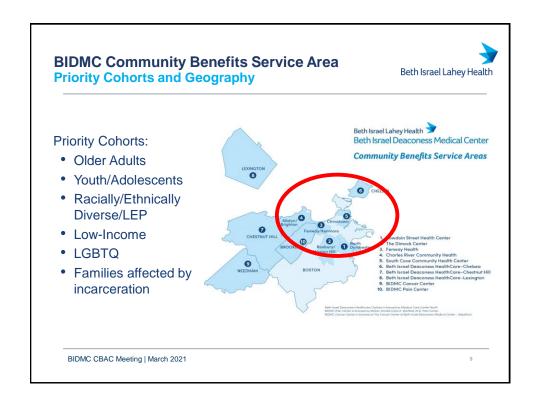
- Flor Amaya, PT DPT, MPH
- Director of Public Health, City of Chelsea

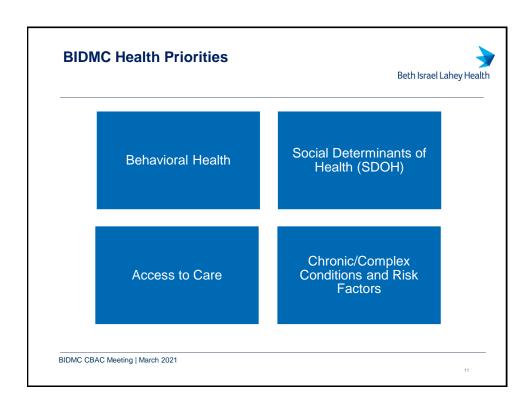


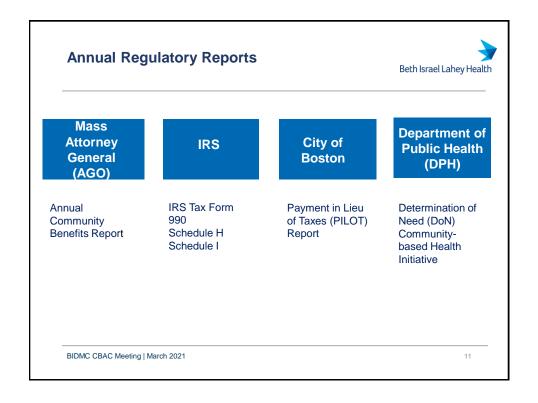
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Implementation Strategy



Annual Updates

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

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FY20 Community Benefits Program Highlights



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

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FY20 Sunset and Modified Community Benefits Programs



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

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FY21 BILH System Community Benefits Priorities



· Align Community Benefits priorities and goals:

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

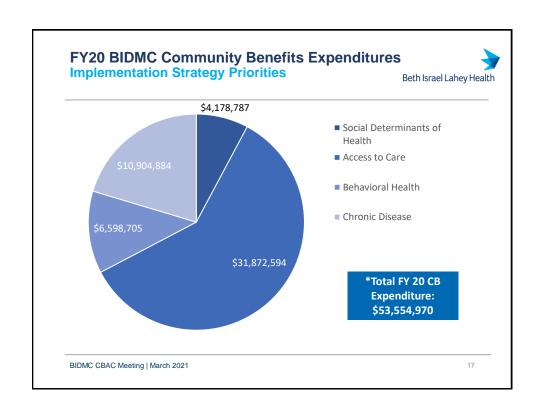
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FY21 BIDMC Priorities

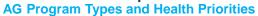


- Housing stability
 - Community-based Health Initiative investment (\$833K in 2021)
 - Measurement of shared outcomes: housing affordability, current housing situation, sense of agency
- · Food insecurity
 - Exploring partnerships to increase access to fresh food
 - Bowdoin Food for Health Initiative: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

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FY20 BIDMC CB Expenditures





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

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Community-based Health Initiative Update

CHI Grantee Updates



Progress to date:

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

Next milestones:

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

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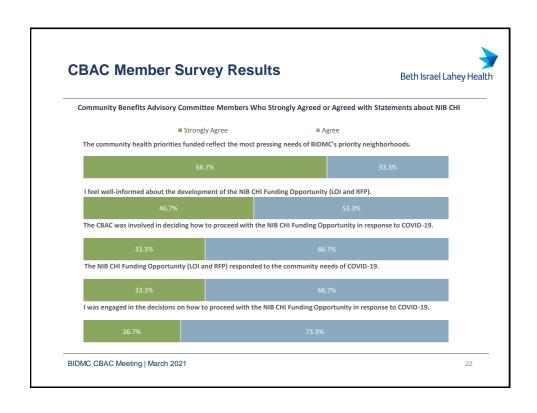
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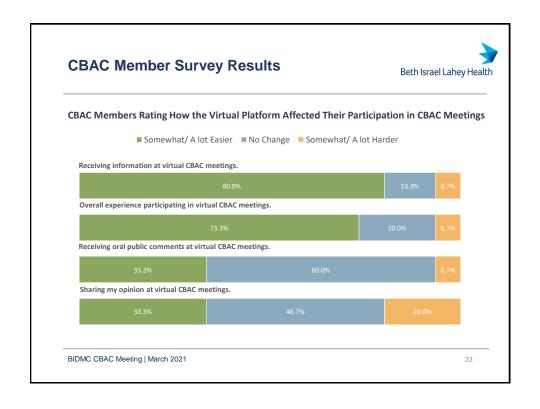
Healthy Neighborhoods Update



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

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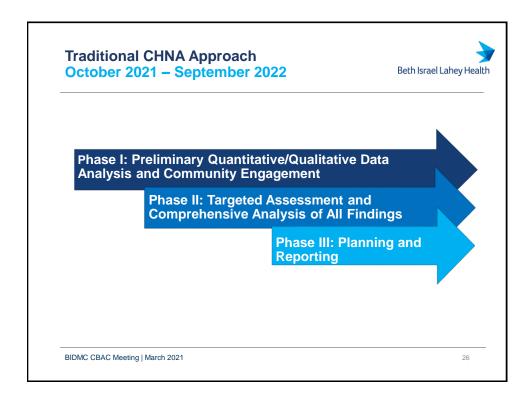
CHNA and Implementation Strategy Opportunity and Obligations



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

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

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FY 22 CHNA and Implementation Strategy Community Engagement



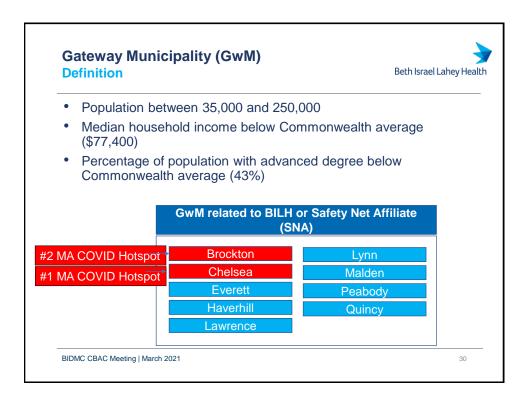
CBAC Members' Role:

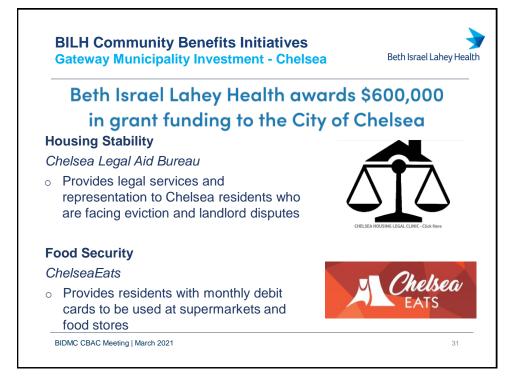
- Provide input to hospital leadership when designing the Community Health Needs Assessment (CHNA) and Implementation Strategy (IS)
- Participate in community engagement efforts and activities that guide the CHNA and identify the most pressing health needs in BIDMC's CBSA
- · Coordinate with regional CHNA / IS efforts

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







BILH Vaccination Beth Israel Lahey Health **Update** Staggered Invitations to 10 vaccination sites throughout highest impacted areas Massachusetts including: Administered 118,000 doses of COVID-19 vaccine to date Lawrence Multilingual outreach and support: Lynn o Phone call outreach to patients who lack Fall River SMS or email o Postcards sent to patients without email or Lowell phone on record Methuen Call Center to assist with verbal Middleton attestations and bookings o Community health center outreach to book Saugus eligible patients Brockton Primary care will play a crucial role in New Bedford vaccinátion efforts BIDMC CBAC Meeting | March 2021 32



Next Steps



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

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December 15, 2020 Meeting Minutes



Community Benefits Advisory Committee (CBAC)
Meeting Minutes
Tuesday, December 15, 2020, 5:00 PM - 7:00 PM
Held Virtually Via Zoom

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

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

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

Welcome

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

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

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

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

Public Comment Period

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

AGO Community Representative Feedback

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

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

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

Community-based Health Initiative Update

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

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

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

BILH Diversity, Equity and Inclusion Task Force

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

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

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

BILH Community Benefits Committee (CBC) Program Priorities

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

Evaluation

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

Adjourn

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

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