

September 8, 2022
Meeting Packet

Meeting Agenda

**Community Benefits Advisory Committee (CBAC)
Beth Israel Deaconess Medical Center (BIDMC)
Thursday, September 8, 2022
5:00 PM – 6:45 PM
RSVP to request Zoom link**

I. 5:00 pm – 5:10 pm	Welcome and Introductions
II. 5:10 pm – 5:25 pm	Public Comment
III. 5:25 pm – 5:55 pm	Community-based Health Initiative Updates
IV. 5:55 pm – 6:05 pm	FY23 Moving to Impact
V. 6:05 pm – 6:15 pm	FY22 CHNA and IS Wrap-Up
VI. 6:15 pm – 6:35 pm	CBAC Member Stories
VII. 6:35 pm – 6:45 pm	Next Steps and Adjourn

Next Meeting: Tuesday, December 6, 2022

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

September 8, 2022

Beth Israel Lahey Health 
Beth Israel Deaconess Medical Center

Welcome

Beth Israel Lahey Health 
Beth Israel Deaconess Medical Center

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Housekeeping

- Please join the meeting using video (if possible)
- If you lose your connection, please call in
 - Phone number: +1 646 931 3860
 - Meeting ID: 993 8509 9238
 - 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
- Community-based Health Initiative Updates
- FY23 Moving to Impact
- FY22 CHNA and FY23-25 Implementation Strategy
- CBAC Member Stories
- Next Steps and Adjourn

CBAC Member Updates

Welcome!



Samantha Taylor
Executive Director of
Bowdoin Street Health
Center



Lynne Courtney
Program Administrator,
BILH Workforce
Development

Thank you!



James Morton
CEO of the YMCA of
Greater Boston



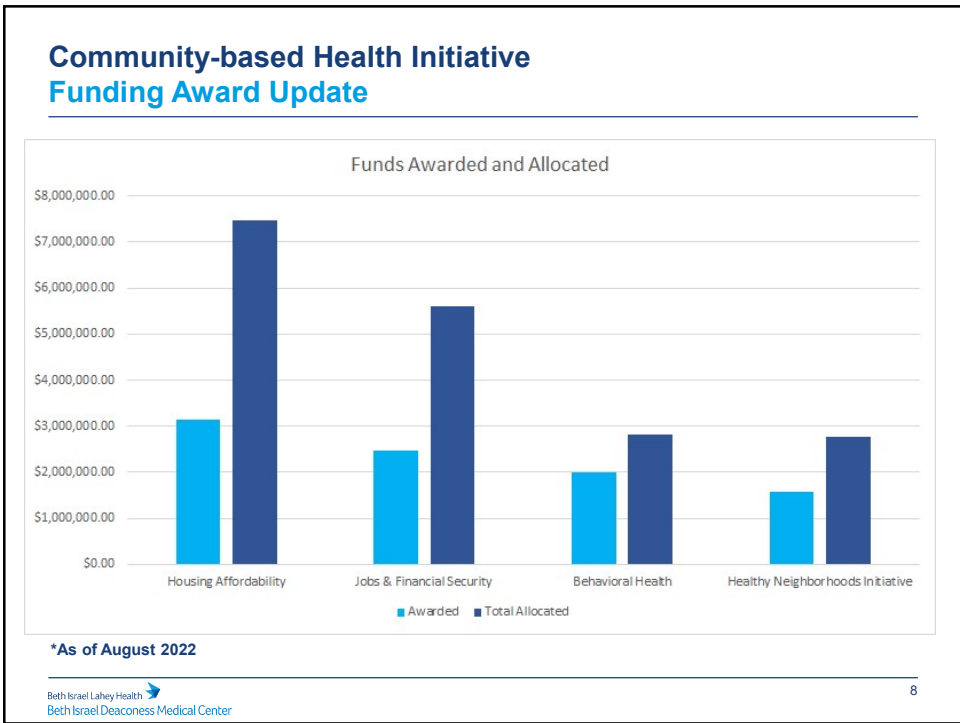
Joanne Pokaski
Assistant VP of BILH
Workforce
Development

Public Comment

Community-based Health Initiative Updates

Beth Israel Lahey Health
Beth Israel Deaconess Medical Center

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City of Chelsea RFP Housing Affordability

- **Overall Structure:** Issued a competitive RFP to address housing affordability in Chelsea, focusing on upstream solutions
- **Funding Amount:** \$705,000
- **# of Grantees:** 1
- **Eligibility:** Non-profit organization based in Chelsea and serving Chelsea residents
- **Strategic Focus Areas:**
 - Homelessness
 - Home ownership
 - Rental assistance
- **Release Date:** September 7, 2022
- **Proposal Due Date:** October 14, 2022

Healthy Neighborhoods Initiative (HNI) Planning Phase Bowdoin/Geneva and Fenway/Kenmore Updates (Cohort 1)

What worked well:

- Able to build on pre-existing relationships while supporting new ones
- Members increased collaboration (vs. competition)
- Facilitators were dedicated to hearing and incorporating all perspectives
- Collectives appreciated BIDMC as a funder and advocate for their neighborhoods and community vision

Lessons learned and incorporated into Cohort 2 (city of Chelsea and Chinatown):

- Level of effort higher than expected; levels of community infrastructure investment varied. *BIDMC response: more strongly encouraging use of planning funds and laid out tasks in more detail in the RFP.*
- Planning Phase took 3-6 months longer than expected. *BIDMC response: extended the Planning Phase by one month.*
- Collectives spent more time identifying community priorities than in dialogue about project design. *BIDMC response: encouraging collectives to use secondary data for identifying community priorities.*

Healthy Neighborhoods Initiative (HNI) Chinatown and Chelsea Collective (Cohort 2) Updates

- Project planning phase (ending by September 30):
 - Collectives must 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 findings, collectives will develop a project implementation plan
- To date each Collective has:
 - Finalized membership and charter
 - Reviewed existing data and identified areas of opportunity
 - Requested planning funds to support community engagement
 - Begun community engagement activities
- By October 2022, the project implementation plan will be submitted to the BIDMC Allocation Committee for review and approval

Grantee Showcase

- Save the date! BIDMC will be hosting a grantee showcase on **Thursday, June 15, 2023**
- An opportunity to share grantee impact and learn about grantee organizations and their projects
- BIDMC will invite hospital leadership and employees, community partners, community members, etc.
- Event to be held in the New Inpatient Building
- More information to come!



FY23 Moving to Impact

FY23 Moving to Impact

- Moving toward outcomes, BILH and BIDMC seek to foster evidence-informed/based initiatives
 - Use a BILH template for requesting grant proposals
 - Maximize impact by awarding multi-year grants
 - Standardize grant agreements including metrics and reporting
 - Share metrics with the CBAC
 - Aggregate metrics across the system for the BILH Community Benefits Committee
- Expand use of the BILH Community Benefits Database
 - Require programs to record and report program data
- Align timeline/dates to create greater system integration

FY22 CHNA and IS

Beth Israel Lahey Health
Beth Israel Deaconess Medical Center

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FY22 Community Health Needs Assessment FY23-25 Implementation Strategy

The Community Health Needs Assessment and Implementation Strategy are complete!

Thank you
and
Congratulations!

Beth Israel Lahey Health
Beth Israel Deaconess Medical Center

2022 Community Health Needs Assessment



Beth Israel Lahey Health
Beth Israel Deaconess Medical Center

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Takeaways

BIDMC Lessons Learned

Strengths:

- Planned community engagement intentionally and early with input from the CBAC; planning began in FY21
- Engaged focus cohorts meaningfully: Spanish-speaking essential workers, people affected by trauma and violence, Cantonese-speaking immigrants, youth
- Partnered with community champions
- Identified opportunities to meet historically underrepresented voices where they were at (e.g. standing support group meetings, etc.)

Opportunities:

- Utilize virtual and in-person engagement methods
- Build on and create partnerships to continuously engage the community
- Continue to optimize coordination with Boston CHNA-CHIP Collaborative and North Suffolk iCHNA

Please share a takeaway from the FY22 CHNA process. Members will have one minute to share reflections.

CBAC Member Stories

Community Benefits Advisory Committee Members Sharing Our Stories



Jane Powers,
Fenway Health



Alex Oliver-Dávila,
Sociedad Latina



Fred Wang, BIDMC
Trustee Advisor
Emeritus

Next Steps

Next Steps

CHNA/IS Report: Will be published on the BIDMC Community Benefits website on September 30th

CBAC Charter: Will be updated and shared prior to the December meeting

Future CBAC meetings:

- December 6, 2022 (will send updated calendar invite)
- March 28, 2023
- June 27, 2023
- September 19, 2023

Thank you!

Meeting Minutes

March 22, 2022

Community Benefits Advisory Committee (CBAC)
Community Benefits Meeting
Meeting Minutes
Tuesday, March 22, 2022, 5:00 PM - 7:00 PM
Held Virtually Via Zoom

Present: Flor Amaya, Elizabeth (Liz) Browne, Alexandra Chery Dorrelus, Shondell Davis, Lauren Gabovitch, Richard Giordano, Jamie Goldfarb, Nancy Kasen, Barry Keppard, Kira Khazatsky, Angie Liou, Marsha Maurer, Sandy Novack, Kelina (Kelly) Orlando, Joanne Pokaski, Jane Powers, Richard Rouse, Anna Spier, Robert Torres, LaShonda Walker-Robinson, Fred Wang

Absent: Maia Betts, James Morton, Alex Oliver-Dávila, Triniese Polk

Guests: Annie Rushman, Health Resources in Action (HRiA), Senior Associate; Kristin Mikolowsky, HRiA, Director, Research and Evaluation; David Luna, Consultant, John Snow, Inc. (JSI); Madison MacLean, Consultant, JSI; Alec McKinney, Senior Consultant, JSI

Welcome and Introductions

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

Nancy welcomed Marsha Maurer, BIDMC's Chief Nursing Officer and Senior Vice President, Patient Care Services, as a new member to the Community Benefits Advisory Committee (CBAC), filling the senior leader representative role previously held by Walter Armstrong.

Nancy also introduced Kelly Orlando, Executive Director of Ambulatory Operations at BIDMC and BID Healthcare Chelsea, as a new member of the CBAC. Nancy shared that Kelly has been representing BIDMC on the North Suffolk Integrated Community Health Needs Assessment (iCHNA).

Nancy also shared that Alberte Altine-Gibson left Bowdoin Street Health Center and has stepped down from the CBAC; Nancy thanked her for her dedication and said she would be missed.

The minutes from the December 14th CBAC meeting were reviewed and accepted.

Public Comment

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

Youth Advisors Update

Jamie Goldfarb, Program Administrator of Community Benefits, BIDMC, shared an update on the YMCA Youth Advisors program. Following the presentation to the CBAC in December, the Youth Advisors have been learning about health priorities and how to prioritize needs as part of a Community Health Needs Assessment (CHNA).

Jamie shared that the Youth Advisors reviewed the key themes identified through the BIDMC CHNA community engagement process and data collected from the youth survey they distributed. After reviewing the data, the youth selected Mental Health and Diversity, Equity, and Inclusion as the priorities they will focus on. In the upcoming months, the youth will learn about and identify evidence-based health strategies to address these priorities.

Community Health Needs Assessment Data Presentation (Prioritization)

Background and Community Engagement Summary

Nancy reminded the CBAC about BIDMC's Community Benefits Service Area (CBSA). She shared that BIDMC opened two new licensed sites at the end of the 2021 fiscal year in Peabody and Burlington. As Federal regulatory requirements dictate that a non-profit hospital must assess need in communities in which it has a licensed site, these two municipalities are now part of BIDMC's CBSA.

Nancy then provided a brief overview of the 2019 CHNA priority cohorts. She highlighted that after the CHNA was completed, the list was amended to include people impacted by violence and/or incarceration as recommended by the original Advisory Committee for the New Inpatient Building Community-based Health Initiative.

Historically, while BIDMC has assessed need across the entire CBSA, the hospital has focused its community benefits resources and efforts in the communities with the greatest health disparities. As such, BIDMC has prioritized programming in the Boston neighborhoods of Allston/Brighton, Bowdoin/Geneva, Chinatown, Fenway/Kenmore, Mission Hill, Roxbury, and the City of Chelsea. The Community Benefits team recommended that BIDMC continue to focus programming in these Boston neighborhoods and the City of Chelsea as these communities continue to experience inequities.

Nancy also shared that it was important to keep the Office of the Attorney General (AGO) and Department of Public Health priorities in mind for the CHNA and then highlighted the overlap with BIDMC's 2019 CHNA priorities. Nancy then reviewed the prioritization process and shared that at this meeting the CBAC will discuss recommendations for priorities.

Nancy provided an overview of the number of people who participated in focus groups, key informant interviews, and listening sessions. She highlighted that this work has been done in collaboration with the Boston CHNA-CHIP Collaborative and the North Suffolk iCHNA, for Boston and Chelsea, respectively, as well as other BILH hospitals.

Prioritization

David Luna, from JSI, presented the top priorities that emerged from BIDMC's community engagement activities: social determinants of health (SDOH), access to care, mental health, and diversity equity, and inclusion. David shared that the CBAC would be voting on sub-priorities to help narrow the focus of the Implementation Strategy (IS). Before voting, David highlighted different considerations to keep in mind while selecting a sub-priority and noted that all sub-priorities were heard during BIDMC's community engagement. Using Mentimeter, a tool to facilitate real-time polling, the CBAC members that were present voted on three sub-priorities for each of the four priorities. The CBAC then selected their top five sub-priorities from among the 12 priorities that had polled the highest in each of the previous votes. The top five sub-priorities selected by the CBAC were housing, economic insecurity, youth mental health, food insecurity, and impacts of trauma. After selecting the sub-priorities, the CBAC voted on the priority populations. The top four priority populations selected were: older adults, individuals with limited economic means, Black, Indigenous, and People of Color (BIPOC), and Youth.¹ For the final vote tally, see pages 29 – 32 from the March 22nd meeting packet found on bidmc.org/chi.

¹ CBAC members not present at the meeting were offered the opportunity to vote on the sub-priorities and priority populations via email. The final votes, inclusive of three additional votes received, were shared with the CBAC and are included in the March 22 meeting packet.

After completing the polling process, David asked the CBAC if there was a priority or population that did not rise in the rankings they wanted to advocate for. Several members advocated to lift up priorities and sub-priorities including racism and access to care and populations including those affected by violence and trauma, the homeless and unstably housed population, the LGBTQIA+ population, and non-English speaking individuals. David acknowledged the intersectionality between many of these priorities and populations and the challenge of narrowing the focus areas given the pressing needs of the community.

David thanked the group for voting on the sub-priorities and populations and for lending their expertise to the prioritization process.

Regulatory Updates

Robert Torres, Boston Region Director of Community Benefits, Beth Israel Lahey Health, provided an update on annual regulatory filings. BIDMC is required to report to the AGO, the City of Boston, the Internal Revenue Service, and the Department of Public Health. Robert shared that Community Benefits expenses must address the health needs and populations that were identified in the most recent CHNA and IS and be within BIDMC's CBSA. He reminded the CBAC that the IS can also be updated when emerging needs arise to address extreme circumstances, such as COVID-19. To respond to COVID-19, BIDMC updated its' IS to include COVID-19 related care and services and food insecurity needs. Robert shared examples of the different Community Benefits programs that BIDMC includes in its regulatory reporting. At the May CBAC meeting the Community Benefits team will share a breakdown of the Community Benefits expenditures that will be reported to the AGO.

CBAC Survey Results

Kristin Mikolowsky from Health Resources in Action (HRiA) introduced herself as a new member of the independent evaluation team for the Community-based Health Initiative. Kristin reminded the CBAC about the annual survey they completed in December and shared that the purpose of the survey is to assess the perceptions of the community engagement process as well as their experiences of participating in the CBAC. Survey results showed that in general CBAC members continue to strongly agree or agree with statements about CBAC meetings and the NIB CHI, such as whether the needs reflect the most pressing needs of BIDMC's priority neighborhoods. For more detail about CBAC survey responses, see pages 19– 22 from the March 22nd meeting packet found on bidmc.org/chi.

Next Steps

Robert shared that Healthy Neighborhoods Initiative applications for the Boston neighborhood of Chinatown and the City of Chelsea were due to BIDMC later that week. Robert thanked the attendees for joining and reminded everyone that the next scheduled meeting is May 24th, 2022 from 5-7pm.

Meeting Minutes

May 24, 2022

Community Benefits Advisory Committee (CBAC)
Beth Israel Deaconess Medical Center (BIDMC)
Tuesday, May 24, 2022
5:00 PM – 7:00 PM
Held Via Zoom

Present: Flor Amaya, Elizabeth (Liz) Browne, Shondell Davis, Richard Giordano, Barry Keppard, Danelle Marable, Marsha Maurer, Sandy Novack, Kelina (Kelly) Orlando, Trinieste Polk, Jane Powers, Anna Spier, Robert Torres, LaShonda Walker-Robinson, Fred Wang

Absent: Maia Betts, Alexandra Chery Dorrelus, Lauren Gabovitch, Nancy Kasen, Kira Khazatsky, Angie Liou, James Morton, Alex Oliver-Dávila, Joanne Pokaski, Richard Rouse

Guests: Annie Rushman, Health Resources in Action (HRiA), Senior Associate; Jessica Colon, YMCA of Greater Boston, Operations Director of Teen Development; YMCA Youth Advisors

Welcome and Introductions

Robert Torres, Director, Community Benefits, BIDMC and Beth Israel Lahey Health (BILH), welcomed everyone to the meeting and thanked them for joining. Robert then reviewed the agenda.

Public Comment

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

FY22 Community Health Needs Assessment and Implementation Strategy

Hospital and System Priorities

Anna Spier, Manager, Community Benefits, BIDMC, reviewed the timeline of the FY22 Community Health Needs Assessment (CHNA) and associated FY23-FY25 Implementation Strategy (IS). She shared that in this meeting the CBAC would review final BIDMC prioritized needs and cohorts, the system-level priorities, and strategies for addressing them. She emphasized that the CBAC provides recommendations that will be considered for the FY23-25 IS and that effectively executing these strategies – and seeing progress and impact - requires collaboration among community stakeholders, institutions, and residents.

Anna then discussed how a hospital’s Community Benefits strategies should be viewed in the context of coordinated initiatives across sectors to build long-term capacity to improve outcomes and reduce disparities around common health priorities. She reminded the CBAC of the state-wide focus issues that are considered to drive mortality and morbidity, as well as the six identified priorities that the MA Department of Public Health uses to guide Community-based Health Initiative investments, which focus on the social determinants of health.

Next, Anna shared the prioritized needs, sub-priority areas of focus, and prioritized cohorts that were selected based on the themes identified through the FY22 CHNA. She highlighted several differences from the FY19 CHNA, including new sub-priorities of youth mental health and the impacts of trauma. Anna also said that health equity was mentioned explicitly and that strategies for the IS would be selected through an equity lens. Anna explained that mental health/behavioral health had been prioritized by the BILH Board of Trustees Community Benefits Committee as a priority area of focus across the system. This theme was elevated as it is a need seen across all BILH hospitals and BILH and its hospitals are well-positioned to address.

Youth Advisors Presentation

Anna then introduced Jessica Colón from the YMCA of Greater Boston and the Youth Advisors with which BIDMC has been collaborating throughout the CHNA/IS process. One Youth Advisor provided a recap of what they had been working on since the last presentation to the CBAC in December 2021. Other Youth Advisors shared what a health priority was from their point of view, and that they had selected mental health through a diversity, equity, and inclusion lens as the priority they wanted to focus on for the rest of the program. Next, the Youth Advisors reviewed some of the secondary data that supported their priority selection, and shared that the young people had selected peer-to-peer support as a health strategy to address mental health. They discussed what peer-to-peer support meant to them and why it was important to look at mental health through an equity lens. The Youth Advisors then each shared their reflections of the experience and asked the CBAC what they were looking forward to over the summer.

One CBAC member mentioned their enthusiasm for this program and emphasized the importance of including young people in this work because they provide a unique perspective. Another CBAC member thanked the young people for their time and thoughtfulness for what they had done over the year. Other CBAC members provided positive feedback about the presentation and the Youth Advisor's engagement.

Jessica shared that one of the Youth Advisors had been selected to travel to Washington, DC and represent the YMCA of Greater Boston to present a project related to distributing hygiene kits to people experiencing homelessness.

Implementation Strategy

Robert then reviewed BIDMC's considerations for selecting strategies for the FY23-25 IS. For each of the prioritized needs and sub-priorities, he reviewed the draft goals, strategies, and some of the existing partner organizations with which BIDMC collaborates. He also asked the CBAC to help identify specific opportunities or initiatives that BIDMC could support or catalyze. He requested that the CBAC focus their suggestions on areas the hospital could leverage existing impactful work and to share existing impactful initiatives that BIDMC should be aware of.

Robert moderated a robust discussion regarding food insecurity, housing, jobs and financial security, equitable access to care, complex and chronic conditions, and mental health and substance use. CBAC members shared specific models, programs, and organizations they had heard about or with which they have been involved. Several themes emerged through the discussion, including ways BIDMC could consider providing support for policies to address prioritized needs, expanding existing BIDMC programs more broadly in partnership with community organizations, and specific equity considerations related to BIDMC's prioritized cohorts.

Robert thanked the CBAC for their engagement in the discussion and shared that their perspective was valuable as the IS strategies continued to be refined.

Community-based Health Initiative

Anna provided an update on the Community-based Health Initiative (CHI) grantees. She noted that the second cohort of Healthy Neighborhoods Initiative Collectives had been selected and announced (representing Chelsea and the Chinatown neighborhood of Boston). She also mentioned that a Request for Proposals (RFP) would be issued for the remaining three neighborhoods of Allston/Brighton, Mission Hill, and Roxbury in 2023.

Anna then provided a brief update about the cohort of 16 Boston-based grantees and said that BIDMC was planning to hold an event to highlight the grantees' work and impact, likely in 2023. Next, Anna shared a short update on the two current Chelsea-based grantees and noted that a RFP to identify a Housing Affordability grantee in Chelsea would be issued in summer 2022.

One CBAC member asked if there were any early indications of the impact of the current CHI grantees. Anna explained that Health Resources in Action was conducting an overarching evaluation of the CHI grantees to assess their collective impact and that grantees were also sharing program-specific data. She further noted that while there were some promising early results, more information about impacts and lessons learned would be shared with the CBAC as it became available.

Regulatory Update

Robert reviewed a breakdown of Community Benefits expenditures in Fiscal Year 2021, which totaled approximately \$63 million. He noted that the Non-Profit Hospital Community Benefits reporting guidelines from the Massachusetts Attorney General's Office allow for the inclusion of Health Safety Net payments and leveraged resources, which are included in the \$63 million. He also provided a few brief highlights of specific programs that were funded under each of the four current Community Benefits priority areas (Social Determinants of Health, Chronic/Complex Conditions and Risk Factors, Behavioral Health, and Access to Care).

Next Steps

Robert said that the full FY 22 CHNA/IS report would be shared with the CBAC by the end of July. He thanked the attendees for joining the meeting and reminded everyone that the next scheduled meeting was the annual meeting on June 28, 2022 from 5:00pm -6:00 pm.