

NEW INPATIENT BUILDING COMMUNITY ADVISORY COMMITTEE MEETING

Nancy Kasen, Director of Community Benefits

May 21, 2019

Beth Israel Lahey Health 
Beth Israel Deaconess Medical Center

Goals for the meeting:

- Learn about funding strategies that address Social Determinants of Health
- Decide on the health priority topic areas for community engagement
- Finalize the community engagement strategy

Votes needed for:

- Approval of meeting minutes
- Approval of updated Charter
- Health priority topic areas for community engagement
- Community engagement strategy

Community Advisory Committee Schedule *(Tuesday's from 5PM-7PM)*

Meeting Date	Meeting Deliverables
June 25, 2019	<ul style="list-style-type: none"> Review Final Community Engagement Results Begin Health Priority Selection Process
July 23, 2019 (Pending)	<ul style="list-style-type: none"> Finalize and Approve Selection of Health Priorities
August: No Meeting	
September 24, 2019	<ul style="list-style-type: none"> Review Draft Allocation Plan
October 22, 2019	<ul style="list-style-type: none"> Finalize Allocation Plan for CHI Funds Review Draft of DPH required <i>Health Priorities Strategy Form</i>

- Evaluation workgroup formed to guide evaluation
- May 7 Kick-Off Meeting:
 - Reviewed evaluation scope, focusing on Phase 1: Community Engagement Evaluation
 - Established clear roles and expectations for the evaluation process
 - Gathered feedback on draft Phase 1 Community Engagement Evaluation Plan
- Will meet 3-4 times per year to provide input on evaluation questions, needs, and methods on an ongoing basis

Consider:

- Who benefits?
- Who is harmed?
- Who influences?
- Who decides?
- What might be any unintended consequences?

Welcoming Public Comments

Housing Investment Summary: Our Multiple Approaches to Housing Through Determination of Need dollars (UPDATED to 12 partnerships)

	Partners	Funding
Housing Project Investments		\$2.2M
Housing Support Service		\$0.91M
Hybrid Housing Project Investment		\$1.55M
Community Engagement & Housing Stability		\$1.6M
Social Impact Funds		\$0.51M

- In 2017, we innovatively guided DoN obligated funding towards housing.
- Total amount **\$6.76 million** to be given away over 3-5 years.
- **\$1.51 million** could be re-invested
- **\$1 million** PSI/BHCHP unallocated
- We support housing and wrap-around services for our patients and use **Community Investment Tax Credits** to stretch \$ (additional \$750K).
- We plan to test multiple approaches and have devoted **\$650K** to evaluation and oversight to determine the best approach.
- Other Boston hospitals making similar investments and work collaboratively to improve community health with us.
 - Boston Children's \$1 million
 - Brigham Women's 750K

Goals

1

Identify policy, systems, population, and place-based approaches that address displacement and increase housing stability

2

Fund these approaches through an inclusive participatory grant process that centers community voice and power

Vision

A Greater Boston where long term, affordable, quality housing is a human right, universally available and accessible to all, and where those who have been most impacted by inequitable and oppressive systems are liberated and reaching higher levels of economic sufficiency and autonomy

Values

Racial & Ethnic Equity



Community Voice & Power



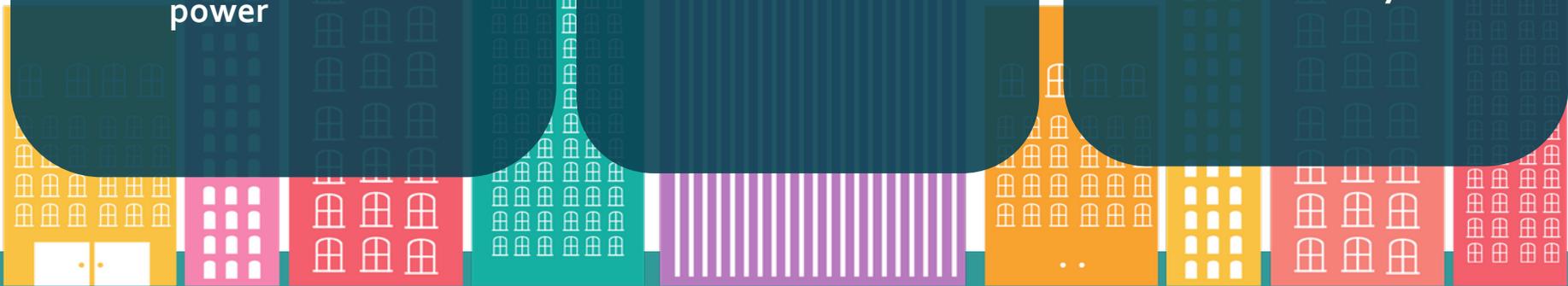
Collaboration



Flexibility



Solidarity



What is Participatory Grantmaking?

An approach to philanthropy that engages residents at different levels of the process and gives decision making power to those most impacted by funding decisions so that they can be part of the solutions.



INFORMING

Grantmakers
tell

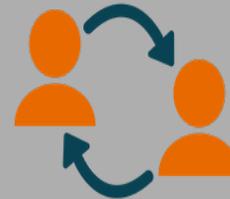
Non-grantmakers
receive



CONSULTING

Grantmakers
receive

Non-grantmakers
tell



INVOLVING

Two-way
communication
that leads to
grantmaker
decisions



DECIDING

Two-way
communication
that leads to joint
decision-making

Grantmaking

Flex
Fund

Upstream
Fund

Resident
Led



\$1,533,400

\$927,800

\$100,000

- Boston Medical Center=**\$1.2M***
- Boston Children's Hospital=**\$1M***
- Brigham & Women's=**\$750K***

*includes administrative costs

BOSTON IMPACT INITIATIVE

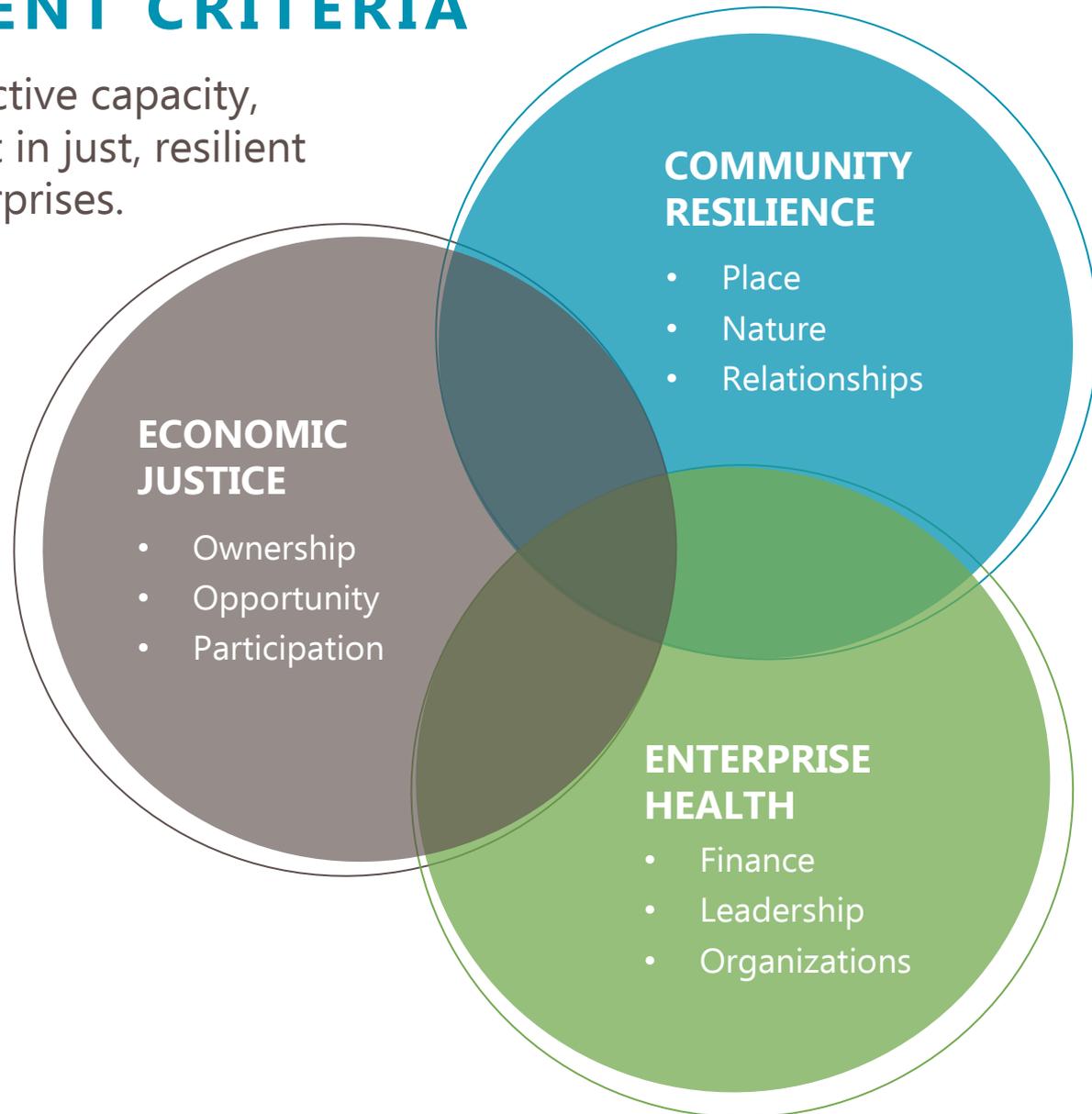


**WE ARE A PLACE-BASED, IMPACT
INVESTING FUND WITH A FOCUS ON
ECONOMIC JUSTICE**



INVESTMENT CRITERIA

To restore productive capacity, we need to invest in just, resilient and healthy enterprises.



FINANCING CERO

INVESTMENT TERMS

2012 GRANT	\$60,000 over 2 years
2013 LOAN	\$20,000 at 0% interest over 3 years
2013 CROWD	\$17,000 on IndieGogo
2014 DPO	\$340,000 at 4% dividend after 3 years
2016 LOAN	\$150,000 secured, \$175,000 unsecured at 3-5% over 7 years



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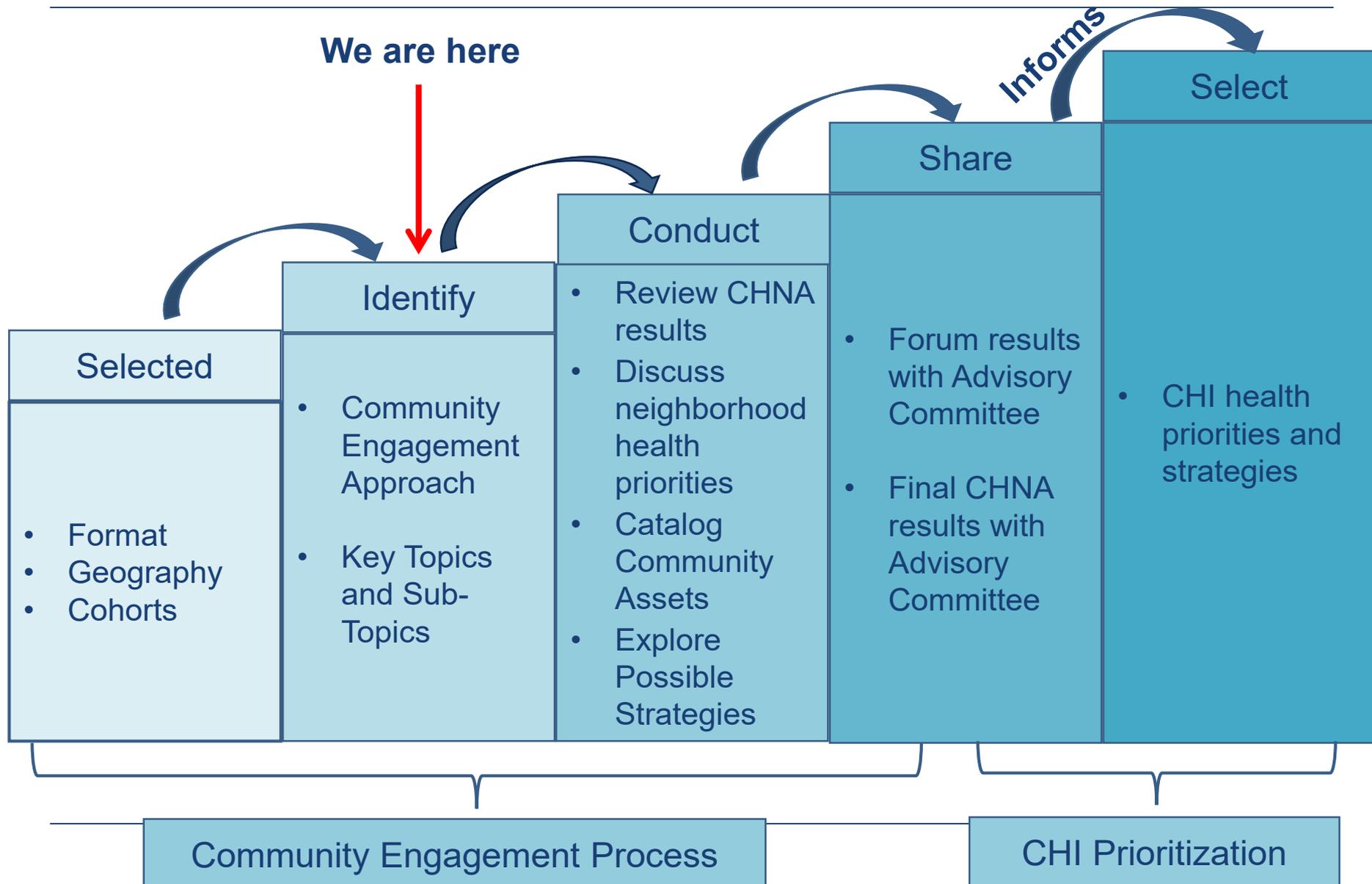
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Community Engagement Strategy Process



Community Engagement Strategy Selections

Community Forums

- ✓ Allston/Brighton
- ✓ Bowdoin/Geneva
- ✓ Chinatown
- ✓ Fenway/Kenmore
- ✓ Roxbury/Mission Hill

**Chelsea

Priority Populations

- ✓ Low Resource Families
- ✓ LGBTQ
- ✓ Older Adults
- ✓ Racial & Ethnic Diverse Populations
- ✓ Youth
- ✓ Families affected by Incarceration
- ✓ Homeless

Emphasis

- Low wage workers
- Transgender; Queer
- Disabled; no support system
- Recent immigrants & English Language Learners (ELL)
- At-risk for homelessness
- Re-entry population

** Discuss after iCHNA process completed

Community Engagement Strategy

Community Meeting Schedule

Neighborhood	Date	Time	Location
Chinatown	June 2, 2019	10 AM – 12 PM	South Cove Community Health Center
Bowdoin/Geneva	June 10, 2019	6 PM – 8 PM	St. Peter's Teen Center
Allston/Brighton	June 11, 2019	6 PM – 8 PM	Charles River Community Health
Fenway/Kenmore	June 12, 2019	6 PM – 8 PM	Morville House
Roxbury/Mission Hill	June 17, 2019	6 PM – 8 PM	Bruce Bolling Building

Community Engagement Strategy

Purpose of Community Meetings

Goals

- Share preliminary results of City's community health needs assessment, including emerging priorities
- Gain a better understanding of: (by neighborhood)
 - Residents' health-related priorities
 - Existing community assets
 - Potential strategies
- Gather detailed information to inform the Advisory Committee prioritization and allocation process

Proposed Health Priority Areas

- Education
- Employment/
Financial Security
- Housing
- Mental Health
- Substance Use
- Violence

Considerations

- Aligns with the Collaborative's CHNA results
- Missing:
 - Tobacco Use/Smoking
 - Chronic Disease – asthma, diabetes, heart disease, cancer
 - Other?
- Sub-topics and focus areas considerations

What health priority areas and/or sub-priority areas should be the focus of community meeting discussions?

Health Priority Areas

- Education
- Employment/
Financial Security
- Housing
- Mental Health
- Substance Use
- Violence

Selected sub-topics:

- **Education** – access, quality, elementary, high school, college
- **Employment/Financial Security** – job opportunities, job training, readiness, financial insecurity, financial literacy, re-entry population
- **Housing** – quality, affordability, homelessness
- **Mental Health** – access to care
- **Substance Use** – tobacco, opioids, alcohol, active recovery, active addiction, access to treatment
- **Violence** – interpersonal, domestic, community, trauma, survivors

Vote:

Community Engagement Strategy Health Priority Areas

The proposal is for inclusion of the following health priority areas in the CHI community engagement strategy:

Health Priority Areas

- *Education*
- *Employment/
Financial Security*
- *Housing*
- *Mental Health*
- *Substance Use*
- *Violence*

Selected sub-topics:

In addition to those prepopulated/identified:

- Education – Health education, health literacy, School assimilation, Afterschool programs, assistance to college prep, Life long learning, older adults learning, Advocacy education, Cost of education, Policy, Specificity to neighborhood
- Employment/Financial Security – Career exploration, Job readiness, Language barriers, Retraining, Opening small business, Reliable transportation, Paid and unpaid internships
- Housing – phrasing on who is their landlord, know someone who was evicted
- Mental health – education of undiagnosed symptoms, stigma, use of the word “stress”
- Substance Use – alcoholism, addiction, street/police security, vaping, marijuana, stability recovery, what breaks the cycle
- Violence – know your rights


**To Be Determined by Advisory
Committee at 5/21 Meeting**

Vote:

Community Engagement Strategy (Including Priority Areas for Consideration)

Community Forums

- Allston/Brighton
- Bowdoin/Geneva
- Chinatown
- Fenway/Kenmore
- Roxbury/Mission Hill

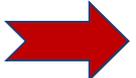
**Chelsea

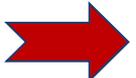
Priority Populations

- Low Resource Families
- LGBTQ
- Older Adults
- Racial & Ethnic Diverse Populations
- Youth
- Families affected by Incarceration
- Homeless

Health Priority Areas

- Have community members prioritize these areas at the meeting
- Have community members identify any overlapping priority areas

 Engage hard-to-reach populations

 Community Advisory Committee engagement is critical

** Discuss after iCHNA process completed

Advisory Committee Responsibilities:

- Review the Boston Collaborative drafted report (when available)
- Recruit participants from identified priority cohorts for forums
- Participate in community forums