

Community Benefits Advisory Committee (CBAC)
Meeting Minutes
Tuesday, December 10, 2024, 5:00 PM - 7:00 PM
Held Virtually Via Zoom

Present: Elizabeth (Liz) Browne, Lynne Courtney, Shondell Davis, Pamela Everhart, Lauren Gabovitch, Nancy Kasen, Angie Liou, Kelly McCarthy, Jean McClurken, Amy Nishman, Sandy Novack, Alex Oliver-Dávila, Emmanuella René, Richard Rouse, Leo Ruiz Sanchez, Anna Spier, Samantha Taylor, LaShonda Walker-Robinson, Fred Wang, Anna Welland

Absent: Flor Amaya, Alexandra Chéry Dorrelus, Pat Folcarelli, Shantel Gooden, Barry Keppard, Kelina (Kelly) Orlando, Triniese Polk

Guests: Madison MacLean, John Snow Inc.; Kristin Mikolowsky, Health Resources in Action (HRiA), Jarrod Dore, BIDMC

Welcome

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

Nancy then reviewed the agenda. She thanked Richard Giordano for his service on the Community Benefits Advisory Committee (CBAC) and welcomed Leo Ruiz Sanchez to the CBAC. She then thanked Liz Browne for her service and welcomed Anna Welland to the CBAC. She also shared that Robert Torres recently transitioned to a new role at BILH and that Anna Spier, BIDMC Community Benefits and Community Relations Manager joined the CBAC. The minutes from the June 25, 2024 CBAC meeting were reviewed and accepted.

Public Comment Period

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

Dana-Farber Cancer Institute Collaboration Update

Jarrod Dore, Vice President of Capital Facilities and Engineering at BIDMC, provided an update on the development of the proposed new Dana-Farber Cancer Institute building and collaboration with BIDMC. He shared a timeline of recent and upcoming land-use regulatory milestones and the proposed location of the future cancer hospital in relation to existing structures. He shared renderings of different views of the building and answered questions from CBAC members.

Community-based Health Initiative Housing Investment

Nancy Kasen provided an overview of the Community Investment Tax Credit (CITC) program that allows Community Development Corporations (CDCs) and Community Support Organizations to receive an allocation of tax credits in exchange for investments made to CDCs. She shared that the Massachusetts Department of Public Health Division of Community Health Planning and Engagement has authorized BIDMC to invest approximately \$400,000 of excess Community-based Health Initiative evaluation budget back into the community.

Nancy explained that BIDMC recommended addressing housing affordability by making grant(s) to CDCs participating in the CITC program in order to further leverage these investment dollars. After providing a reminder about the CBAC's Conflict of Interest policy and disclosing member conflicts, Nancy opened the topic for discussion and asked for CBAC members to weigh in on the criteria that

BIDMC should consider for such grant(s). CBAC members agreed with BIDMC's recommendation for funding housing and leveraging these funds via the CITC. CBAC members offered considerations such as prioritizing projects with deeply affordable units and housing for older adults and those individuals living with disabilities.

FY25 Community Health Needs Assessment (CHNA)

Anna Spier, Manager of Community Benefits and Community Relations at BIDMC, shared the Community Benefits Service Area (CBSA) map and provided an update on the Community Health Needs Assessment (CHNA) process from April to December 2024. She highlighted the intentional efforts to reach historically underserved cohorts through interviews, focus groups and a Community Health Survey. She then presented preliminary data from the Community Health Survey, emphasizing responses by different demographic characteristics and the collaborations with the Boston Community Health Collaborative, North Suffolk Public Health Collaborative, Tufts Medical Center and Cambridge Health Alliance.

Next, Anna summarized preliminary priorities, key themes and considerations for triangulating data from different sources. She reviewed community strengths and the preliminary priority areas identified in the assessment: Social Determinants of Health, Equitable Access to Care, Mental Health and Substance Use and Complex and Chronic Conditions. She noted that community health concerns had largely remained consistent between FY22 and FY25. For each priority area, Anna shared information and data on the primary concerns as well as representative quotes from interviewees.

Madison MacLean from John Snow, Inc. then introduced a real-time polling tool known as Menti to help facilitate discussion and prioritization of the preliminary CHNA results. Robust discussion followed for each category to determine if the sub-priorities resonated with the CBAC and whether any additional sub-priorities should be added. CBAC members then ranked each of the preliminary sub-priorities and priority cohorts. Madison explained that the polling results would not necessarily represent the final sub-priorities and cohorts, yet represent an important data point in the prioritization process.

CBAC Survey

Kristin Mikolowsky from Health Resources in Action (HRiA) shared a link for CBAC members to complete a survey about their experience as members.

Next Steps and Regulatory Reminders

Anna reminded attendees that the Community Representative Feedback Form from the Attorney General's Office (AGO) is completed annually by the hospital's CBAC members and community partners to assess community engagement. She reviewed the form's contents and reviewed next steps, including the CBAC member survey, submission of Conflict of Interest Forms, and the CHNA community listening session.

Adjourn

Anna thanked the attendees for joining the meeting and reminded everyone that the next scheduled meeting would be in-person on Wednesday, March 26, 2025, from 5-7 p.m.