Community Benefits Report

Fiscal Year 2025

Beth Israel Lahey Health
New England Baptist Hospital

TABLE OF CONTENTS

SECTION I: SUMMARY AND MISSION STATEMENT 3
Priority Cohorts 5
Basis for Selection 6
Key Accomplishments for Reporting Year 6
Plans for Next Reporting Year 7
SECTION II: COMMUNITY BENEFITS PROCESS 10
Community Benefits Leadership/Team 10
Community Benefits Advisory Committee (CBAC) 11
Community Partners 11
SECTION III: COMMUNITY HEALTH NEEDS ASSESSMENT 14
Approach and Methods 14
Summary of FY 2025 CHNA Key Health-Related Findings 16
SECTION IV: COMMUNITY BENEFITS PROGRAMS 18
SECTION V: EXPENDITURES 35
SECTION VI: CONTACT INFORMATION 36
SECTION VII: HOSPITAL SELF-ASSESSMENT FORM 37

SECTION I: SUMMARY AND MISSION STATEMENT

New England Baptist Hospital (NEBH) is a member of Beth Israel Lahey Health (BILH). The BILH network of affiliates is an integrated health care system committed to expanding access to extraordinary patient care across Eastern Massachusetts and Southern New Hampshire and advancing the science and practice of medicine through groundbreaking research and education. The BILH system is comprised of academic and teaching hospitals, a premier orthopedics hospital, primary care and specialty care providers, ambulatory surgery centers, urgent care centers, community hospitals, homecare services, outpatient behavioral health centers, and addiction treatment programs. BILH's community of clinicians, caregivers and staff includes approximately 5,900 physicians and 36,000 employees.

At the heart of BILH is the belief that everyone deserves high-quality, affordable health care. This belief is what drives BILH to work with community partners across the region to promote health, expand access, and deliver the best care in the communities BILH serves. NEBH Community Benefits staff are committed to working collaboratively with its communities to address the leading health issues and create a healthy future for individuals, families and communities.

While NEBH oversees local Community Benefits programming and community engagement efforts, Community Benefits is under the purview of the BILH Chief Community and Health Impact Officer. This structure makes sure that Community Benefits efforts, prioritization, planning and strategy align and/or are integrated with local hospital and system strategic and regulatory priorities and efforts to ensure health equity in fulfilling BILH's mission – *We create healthier communities – one person at a time – through seamless care and ground-breaking science, driven by excellence, innovation and equity* and values, encompassed by the acronym *WE CARE:*

- ***W**ellbeing - We provide a health-focused workplace and support a healthy work-life balance*
- ***E**mpathy - We do our best to understand others' feelings, needs and perspectives*
- ***C**ollaboration - We work together to achieve extraordinary results*
- ***A**ccountability - We hold ourselves and each other to behaviors necessary to achieve our collective goals*
- ***R**espect - We value diversity and treat all members of our community with dignity and inclusiveness*
- ***E**quity - Everyone has the opportunity to attain their full potential in our workplace and through the care we provide.*

The mission of NEBH is to transform the lives of those we serve by promoting wellness, restoring function, lessening disability, alleviating pain, and advancing knowledge in musculoskeletal diseases and related disorders. NEBH is also committed to being active in our community.

NEBH is committed to collaborating with community partners and residents across Boston to identify areas of special need in musculoskeletal disease and collaborate on programs to address these needs, with special focus on underserved populations through outreach, education and provision of services to address musculoskeletal health.

NEBH works with all segments of the population but in recognition of its strong ties to its surrounding community and its specific clinical expertise, NEBH focuses its Community Benefits efforts on improving the health and well-being of the low income, underserved populations living in the Boston neighborhood of Mission Hill/Roxbury and on musculoskeletal health. NEBH currently operates educational, outreach, and community-strengthening initiatives, collaborates with many of the community's leading service organizations.

The following annual report provides specific details on how NEBH is honoring its commitment and includes information on NEBH's Community Benefits Service Area (CBSA), community health priorities, target populations, and community partners, as well as detailed descriptions of its Community Benefits programs and their impacts.

More broadly, NEBH's Community Benefits mission is fulfilled by:

- **Involving NEBH's staff**, including its leadership and dozens of community partners in the Community Health Needs Assessment (CHNA) process as well as in the development, implementation, and oversight of the hospital's three-year Implementation Strategy (IS);

- **Engaging and learning from residents** throughout NEBH's Community Benefits Service Area (CBSA) in all aspects of the Community Benefits process, with special attention focused on engaging diverse perspectives, from those, patients and non-patients alike, who are often left out of similar assessment, planning and program implementation processes;

- **Assessing unmet community need** by collecting primary and secondary data (both quantitative and qualitative) to understand unmet health-related needs and identify communities and population segments disproportionately impacted by health issues and other social, economic and systemic factors;

- **Implementing community health programs and services** in NEBH's CBSA that address the underlying social determinants of health, barriers to accessing care, as well as promote equity to improve the health status of those who are often disadvantaged, face disparities in health-related outcomes, experience poverty, and have been historically underserved;

- **Promoting health equity** by addressing inequities and ensuring that all patients are welcomed and received with respect and have access to culturally responsive care; and

- **Facilitating collaboration and partnership within and across sectors** (e.g., state/local public health agencies, health care providers, social service organizations, businesses, academic institutions, community health collaboratives, and other community health organizations) to advocate for, support, and implement effective health policies, community programs, and services.

The following annual report provides specific details on how NEBH is honoring its commitment and includes information on NEBH's CBSA, community health priorities, priority cohorts, community partners, and detailed descriptions of its Community Benefits programs and their impact.

Priority Cohorts

NEBH's CBSA includes the Boston neighborhood of Mission Hill/Roxbury, as well as the municipalities of Dedham, Chestnut Hill (Newton) and Brookline. In FY 2025, NEBH conducted a comprehensive and inclusive Community Health Needs Assessment (CHNA) that included extensive data collection activities, substantial efforts to engage NEBH's partners and community residents, and thoughtful prioritization, planning, and reporting processes. These activities were in full compliance with the Commonwealth's updated Community Benefits Guidelines (February 2018). While NEBH is committed to improving the health status and well-being of those living throughout its entire CBSA, per the Commonwealth's updated Community Benefits Guidelines, NEBH's FY 2026 - 2028 Implementation Strategy (IS) will focus its Community Benefits resources on improving the health status of those who face health disparities, experience poverty, or who have been historically underserved living in its CBSA.

Based upon NEBH's FY 2025 CHNA, the community characteristics that were thought to have the greatest impact on health status and access to care in its CBSA were issues related to age, race/ethnicity, language, gender identity, immigration status, household composition, and economic security. There was consensus among interviewees, focus groups, and community listening session participants that people of color, recent immigrants, and non-English speakers were more likely to have poor health status and face systemic challenges accessing needed services than white, English speakers who were born in the United States. These segments of the population are impacted by language and cultural barriers that limit access to appropriate services, pose health literacy challenges, exacerbate isolation, and may lead to discrimination and disparities in access and health outcomes.

For its FY 2026 – 2028 IS, NEBH will work with its community partners, with a focus on Mission Hill/Roxbury, to develop and/or continue programming to improve well-being and create a healthy future for all individuals and families. In recognition of the health disparities that exist for certain segments of the population, NEBH's Community Benefits investments and resources will focus on improving the health status of the following priority cohorts:

- Youth
- Low-Resourced Populations
- Individuals Living with Disabilities
- Older Adults
- Racially, Ethnically and Linguistically Diverse Populations

Basis for Selection

Community health needs assessments; public health data available from government (public school districts, Massachusetts Department of Public Health, federal agencies) and private resources (foundations, advocacy groups); and NEBH's areas of expertise.

Key Accomplishments for Reporting Year

NEBH's most recent FY 25 CHNA and FY 26-FY 28 IS were approved and adopted, respectively, by the NEBH Board of Trustees during the fiscal year ended September 30, 2025. That CHNA and IS will inform the Community Benefits mission and activities of NEBH for the fiscal years ending September 30, 2026; September 30, 2027; and September 30, 2028.

This report covers NEBH's fiscal year ending September 30, 2025. The previous FY 22 CHNA and accompanying FY 23-FY 25 IS were approved by the NEBH Board before September 30, 2022 and informed the NEBH's Community Benefits initiatives for the fiscal years ending September 30, 2023; September 30, 2024; and September 30, 2025. As such, the accomplishments and activities included in this section as well as in Section IV: Community Benefits Programs relate to the CHNA and Implementation Strategy approved as of September 30, 2022.

Program accomplishments include:

- Addressing food insecurity was a top priority in FY 25. With the rising cost of food, many residents did not have the resources or funds to provide for their family or themselves. To help with food insecurity and access, NEBH provided food, including fresh fruit and vegetables, meals from local businesses and Stop & Shop gift cards to over 800 families and individuals that live in Mission Hill. Stop & Shop is the local grocery store in Mission Hill.

- NEBH collaborated with the community on much needed transportation for low-resourced populations, individuals with disabilities and specifically older adults. The Mission Link bus provides transportation to and from doctor's appointments, pharmacy, grocery store, etc. for those living in Mission Hill.

- NEBH collaborated with Mission Hill Neighborhood Housing Services (MHNHS) to help provide a resident services coordinator to assist residents that live in MHNHS

properties with finding resources, programs, filling out Residential Assistance for Families in Transition (RAFT) applications, forms, etc. The intern interacted with over 300 residents. These interactions included checking in on their financial, social, and physical wellbeing, assisting them with applications, encouraging older adults to attend events, connecting youth to programs in the community, etc.

- NEBH collaborated with the Tobin Community Center to provide fifteen scholarships to youth for summer camp.

- NEBH provided financial support for the After-School Program at the Tobin Community Center. This allows youth to participate in tutoring, and extracurricular activities including sports programs.

- NEBH held two back to school BBQs and provided much needed school supplies to over 425 students living in Mission Hill, giving them the items they need to be successful in school.

- Five students participated in the Meredith Cameron Youth Opportunity Internship.

- NEBH held four birthday celebrations, an ice cream social and two end of the summer BBQs for older adults helping with isolation. These events were held at the Tobin Community Center. Over 150 older adults attended each of the events.

- Six students participated in the Project Search Transition Program that provides real-life work experience combined with training in employability and independent living skills to help youths with significant disabilities make successful transitions from school to productive adult life.

Plans for Next Reporting Year

In FY 2025, NEBH conducted a comprehensive and inclusive CHNA that included extensive data collection activities, substantial efforts to engage NEBH's partners and community residents, and thoughtful prioritization, planning, and reporting processes. These activities were in full compliance with the Commonwealth's updated Community Benefits Guidelines. In response to the FY 2025 CHNA, NEBH will focus its FY 2026 - 2028 IS on four priority areas. These priority areas collectively address the broad range of health and social issues facing residents living in NEBH's CBSA who face the greatest health disparities. These four priority areas are:

- Equitable Access to Care
- Social Determinants of Health
- Mental Health and Substance Use
- Complex and Chronic Conditions.

These priority areas are aligned with the statewide health priorities identified by the Executive Office of Health and Human Services (EOHHS) in 2017 (i.e., Chronic Disease, Housing Stability/Homelessness, Mental Illness and Mental Health, and Substance Use Disorders). NEBH's priorities are also aligned with the priorities identified by the Massachusetts Department of Public Health (DPH) to guide the Community-based Health Initiative (CHI) investments funded by the Determination of Need (DoN) process, which underscore the importance of investing in the Social Determinants of Health (i.e., built environment, social environment, housing, violence, education, and employment).

The FY 2025 CHNA provided new guidance and invaluable insights on quantitative trends and community perceptions being used to inform and refine NEBH's efforts. In completing the FY 2025 CHNA and creating its FY 2026 - 2028 IS, NEBH, along with its other health, public health, social service, and community partners, is committed to promoting health, enhancing access and delivering the best care to all who live and/or work in its CBSA, regardless of race, ethnicity, language spoken, national origin, religion, gender identity, sexual orientation, disability status, immigration status, or age. As discussed above, based on the FY 2025 CHNA's quantitative and qualitative findings, including discussions with a broad range of community participants, there was agreement that for NEBH's FY 2026 - 2028 IS, it should work with its community partners to develop and/or continue programming to improve well-being and create a healthy future for all individuals and families. In recognition of the health disparities that exist for certain segments of the population, NEBH's Community Benefits investments and resources will continue to focus on improving the health status, addressing disparities in health outcomes, and promoting health equity for its priority cohorts, which include youth; low-resourced populations; older adults; racially, ethnically and diverse populations and individuals living with disabilities.

NEBH will partner with clinical and social service providers, community-based organizations, public health officials, elected/appointed officials, hospital leadership, and other key collaborators throughout its CBSA to execute its FY 2026 – 2028 IS.

- **Equitable Access to Care**
    - NEBH will work with the Mission Link Board and other community partners to enhance access to affordable, safe and accessible transportation in the Mission Hill neighborhood.

- **Social Determinants of Health**
    - NEBH will provide access to food through gift cards, food pantries, food, and meals from local businesses.
    - NEBH will continue to maintain McLaughlin Field and Park so that residents have access to open green space for activities and exercise.
    - NEBH will collaborate with Mission Hill Main Streets to beautify the streets.

- NEBH will provide clothing, household essentials, etc. to residents living in affordable housing.
- NEBH will provide a resident services intern to Mission Hill Neighborhood Housing Services to assist their residents with applications such as RAFT, SNAP, etc., and to assist residents with resources.
- NEBH will provide back to school supplies to students living in Mission Hill.
- NEBH will collaborate with the Madison Park High School to offer the Project Search program for students living with disabilities.
- NEBH will offer the Meredith Cameron Youth Opportunity Internship to students living in Mission Hill and/or Boston.
- NEBH will collaborate with NEBH HR and BILH Workforce Development on sponsoring community college courses and career and academic advising to NEBH staff.

- **Mental Health and Substance Use**
  - NEBH will work with the Mission Hill Senior Legacy, Tobin Community Center, Roxbury Tenants of Harvard and Mission Hill Neighborhood Housing Services to offer events and programs to older adults to help with isolation.
  - NEBH will work with the Tobin Community Center on programs for youth.
  - NEBH will explore and support offering training to community leaders to identify mental illness and substance abuse.

- **Complex and Chronic Conditions**
  - NEBH will continue its partnership with the Boston Public Library, Parker Hill Branch to offer Mindful Matters-Yoga for older adults.
  - NEBH will continue to provide summer camp scholarships to the Tobin Community Center.
  - NEBH will continue to support the Mission Hill Little League and Mission Hill Road Race.
  - NEBH will collaborate with housing developments in Mission Hill on their walking groups.

Hospital Self-Assessment Form

Working with its Community Benefits Leadership Team and its Community Benefits Advisory Committee (CBAC), the NEBH Community Benefits staff completed the Hospital Self-Assessment Form (Section VII). The NEBH Community Benefits staff also shared the Community Representative Feedback Form with its CBAC members and asked them to submit the form to the AGO website.

SECTION II: COMMUNITY BENEFITS PROCESS

Community Benefits Leadership/Team

The NEBH Board of Trustees along with its clinical and administrative staff is committed to improving the health and well-being of residents throughout its CBSA and beyond. World-class orthopedic clinical expertise, education and research along with an underlying commitment to health equity are the primary tenets of its mission. NEBH's Community Benefits Department, under the direct oversight of NEBH's Board of Trustees, is dedicated to collaborating with community partners and residents and will continue to do so in order to meet its Community Benefits obligations. Hospital senior leadership is actively engaged in the development and implementation of NEBH's Implementation Strategy, ensuring that hospital policies and resources are allocated to support planned activities.

It is not only the NEBH's Board of Trustee members and senior leadership who are held accountable for fulfilling NEBH's Community Benefits mission. Among NEBH's core values are the recognition that the most successful Community Benefits programs are implemented organization wide and integrated into the very fabric of the hospital's culture, policies, and procedures. A commitment to Community Benefits is a focus and value manifested throughout BILH and NEBH's structure and reflected in how care is provided at the hospital and in affiliated practices.

While NEBH oversees local Community Benefits programming and community engagement efforts, Community Benefits is under the purview of the BILH Chief Community and Health Impact Officer. This structure makes sure that Community Benefits efforts, prioritization, planning, and strategy focus on equity and align and are integrated with local and system strategic and regulatory priorities to ensure health equity in fulfilling BILH's mission – *We create healthier communities – one person at a time – through seamless care and ground-breaking science, driven by excellence, innovation and equity* and values, encompassed by the acronym *WE CARE:*

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The NEBH Community Benefits program is spearheaded by the Director of Community and Government Affairs who has direct access to and is accountable to the NEBH President and the BILH Vice President of Community Benefits and Community Relations, the latter of whom reports directly to the BILH Chief Community and Health Impact Officer. It is the responsibility of these leaders to ensure that Community Benefits is addressed by the entire organization and that the needs of cohorts who have been historically underserved are considered every day in discussions on resource allocation, policies, and program development.

This structure and methodology are employed to ensure that Community Benefits is not the purview of one office alone and to maximize efforts across the organization to fulfill the mission and goals of BILH and NEBH's Community Benefits program.

Community Benefits Advisory Committee (CBAC)
The NEBH Community Benefits Advisory Committee (CBAC) works in collaboration with NEBH's hospital leadership, including the hospital's governing board and senior management to support NEBH's Community Benefits mission to serve its patients compassionately and effectively, and to create a healthy future for them, their families, and NEBH's community. The CBAC provides input into the development and implementation of NEBH's Community Benefits programs in furtherance of NEBH's Community Benefits mission. The membership of NEBH's CBAC aspires to be representative of the constituencies and priority cohorts served by NEBH's programmatic endeavors, including those from diverse racial and ethnic backgrounds, age, gender, sexual orientation and gender identity, as well as those from corporate and non-profit community organizations.

The NEBH CBAC met on the following dates:

December 17, 2024
March 18, 2025
June 17, 2025
September 16, 2025

Community Partners
NEBH recognizes its role as a larger health system and knows that to be successful it needs to collaborate with its community partners and those it serves. NEBH's Community Health Needs Assessment (CHNA) and the associated Implementation Strategy (IS) were completed in close collaboration with NEBH's staff, community residents, community-based organizations, clinical and social service providers, public health officials, elected/appointed officials, hospital leadership and other key collaborators from throughout its CBSA. NEBH also participates in the Boston Community Health Collaborative (BCHC). Joining with such grassroots community groups and residents, the Boston Public Health Commission (BPHC), Massachusetts DPH, and academic partners, NEBH strives to create a vision for both city-wide and neighborhood-based health improvement.

NEBH's Community Benefits program exemplifies the spirit of collaboration that is such a vital part of NEBH's mission.

NEBH currently supports numerous educational, outreach, community health improvement, and health system strengthening initiatives within its CBSA. In this work, NEBH collaborates with many of its local community-based organizations, public health departments, municipalities and clinical and social service organizations. NEBH has a particularly strong relationship with Mission Main Task Force, Mission Hill Main Streets, Mission Hill Neighborhood Housing Services, Roxbury Tenants of Harvard (RTH) and the Tobin Community Center. These relationships include providing food to low resourced populations through food pantries, gift cards, food and prepared meals.

The following is a comprehensive listing of the community partners with which NEBH joins in assessing community need as well as planning, implementing, and overseeing its Community Benefits Implementation Strategy. The level of engagement of a select group of community partners can be found in the Hospital Self-Assessment (Section VII, page 37).

- ABCD-Parker Hill Fenway Service Center
- Alice Heyward Taylor Housing Development Task Force
- Boston Celtics
- Boston Center for Youth and Family Services, Tobin Community Center
- Boston Community Health Collaborative (BCHC)
- Boston Police
- Boston Public Health Commission
- Boston Public Library, Mission Hill Branch
- City of Boston Age Strong Commission
- City of Boston Mayor's Office
- City of Boston, Parks and Recreation Department
- Friends of McLaughlin Park
- Madison Park Technical Vocational High School
- Maurice J. Tobin School
- Mission Church
- Mission Grammar School
- Mission Hill Crime Committee
- Mission Hill Health Movement
- Mission Hill Little League
- Mission Hill Main Streets
- Mission Hill Neighborhood Housing Services
- Mission Hill Senior Legacy Project
- Mission Link

- Mission Main Task Force
- Private Industry Council
- Roxbury Tenants of Harvard
- Sociedad Latina
- Stop & Shop

SECTION III: COMMUNITY HEALTH NEEDS ASSESSMENT

The FY 2025 Community Health Needs Assessment (CHNA) along with the associated FY 2026-2028 Implementation Strategy was developed over a fifteen-month period from June 2024 to September 2025. These community health assessment, planning, and implementation efforts fulfill the Commonwealth of Massachusetts Attorney General's Office and federal Internal Revenue Service's (IRS) requirements. More specifically, these activities fulfill the NEBH's need to conduct a community health needs assessment, engage the community, identify priority health issues, inventory community assets, assess impact, and develop an Implementation Strategy. However, these activities are driven primarily by NEBH's dedication to its mission, its covenant to cohorts who have been historically underserved, and its commitment to community health improvement.

As mentioned above, NEBH's most recent CHNA was completed during FY 2025. FY 2025 Community Benefits programming was informed by the FY 2022 CHNA and aligns with NEBH's FY 2023 – FY 2025 Implementation Strategy. The following is a summary description of the FY 2025 CHNA approach, methods, and key findings.

Approach and Methods
The FY 2025 assessment and planning process was conducted in three phases between June 2024 and September 2025, which allowed NEBH to:

- assess community health, defined broadly to include health status, social determinants, environmental factors and service system strengths/weaknesses;
- engage members of the community including local health departments, clinical and social service providers, community-based organizations, community residents and NEBH's leadership/staff;
- prioritize leading health issues/population segments most at risk for poor health, based on review of quantitative and qualitative evidence;
- develop a three-year Implementation Strategy to address community health needs in collaboration with community partners, and;
- meet all federal and Commonwealth Community Benefits requirements per the Internal Revenue Service, as part of the Affordable Care Act, the Massachusetts Attorney General's Office, and the Massachusetts Department of Public Health.

NEBH's Community Benefits program is predicated on the hospital's commitment to promoting health and well-being, addressing health disparities, and working to achieve health equity. Health equity - the attainment of the highest level of health for all people - requires focused and ongoing efforts to address inequities and socioeconomic barriers to accessing care. Throughout the CHNA process, efforts were made to understand the needs of the communities that NEBH serves, especially the population segments that are often

disadvantaged, face disparities in health-related outcomes, and who have been historically underserved. NEBH's understanding of these communities' needs is derived from collecting a wide range of quantitative data to identify disparities and clarify the needs of specific communities and comparing it against data collected at the regional, Commonwealth and national levels wherever possible to support analysis and the prioritization process, as well as employing a variety of strategies to ensure community members were informed, consulted, involved, and empowered throughout the assessment process.

Through the FY25 Community Health Needs Assessment, in collaboration with Beth Israel Deaconess Medical Center (BIDMC), and the Boston Community Health Collaborative (BCHC), NEBH conducted a total of 43 (30 by NEBH/BIDMC) one-on-one interviews with key collaborators in the community, 23 focus groups (10 by NEBH/BIDMC) with segments of the population facing the greatest health-related disparities, and one community listening session that engaged 26 participants. In addition, both BILH and BCHC conducted Community Health Surveys to collect information from community residents.

NEBH participated in the Beth Israel Lahey Health (BILH) CHNA and collaborated with Beth Israel Deaconess Needham Hospital (BID Needham) and Beth Israel Deaconess Medical Center (BIDMC). With respect to BID Needham, NEBH and BID Needham both include Dedham in their CBSAs and, as a result, both gathered and shared information on this municipality as part of their assessment processes. With respect to BIDMC, NEBH and BIDMC both include the Roxbury and Mission Hill neighborhoods of Boston in their CBSAs. Similarly, both NEBH and BIDMC shared the information gathered on these neighborhoods as part of their processes.

In addition to this assessment, NEBH's Community Benefits staff collaborated with the Boston Community Health Collaborative (BCHC)'s Community Health Needs Assessment. The BCHC, consisting of Boston's hospitals, The Boston Public Health Commission, community-based organizations and community residents, conducted a robust and collaborative community health needs assessment for the City of Boston as a whole. The BCHC's Community Health Needs Assessment serves as a foundational resource for policymakers and community leaders, and informs community health improvement planning, priority setting, program and policy development, and collaboration. This is the third city-wide coordinated Community Health Needs Assessment and builds upon previous coordinated efforts in 2019 and 2022.

The articulation of each specific community's needs (done in partnership between NEBH and community partners) is used to inform NEBH's decision-making about priorities for its Community Benefits efforts. NEBH works in concert with community residents and leaders to design specific actions to be collaboratively undertaken each year. Each component of the plan is developed and eventually woven into the annual goals and agenda for the NEBH's Implementation Strategy that is adopted by the NEBH's Board of Trustees.

Summary of FY 2025 CHNA Key Health-Related Findings

Equitable Access to Care

- Interviewees, focus groups, and listening session participants identified a number of barriers to accessing and navigating the health care system. Many of these barriers were at the system-level, meaning that the issues stemmed from the ways in which the system did or did not function. System-level issues included full provider panels, which prevented providers from accepting new patients, long wait lists, and an inherently complicated health care system that was difficult for many to navigate. There were also individual level barriers to access and navigation. Individuals may be uninsured or underinsured, which may lead them to forego or delay care. Individuals may also experience language or cultural barriers - research shows that these barriers contribute to health disparities, mistrust between providers and patients, ineffective communication, and issues of patient safety.

Social Determinants of Health

- The social determinants of health are "the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks." These conditions influence and define quality of life for many segments of the population in the CBSA. Research shows that sustained success in community health improvement and addressing health disparities relies on addressing the social determinants of health that lead to poor health outcomes and drive health inequities. The assessment gathered a range of information related to housing, food insecurity, economic insecurity, education, access to care/navigation issues, and other important social There is limited quantitative data in the area of social determinants of health. Despite this, information gathered through interviews, focus groups, surveys, and the listening session reinforced that these issues have the greatest impact on health status and access to care in the region - especially issues related to housing, food security/nutrition, transportation and economic stability.

Mental Health and Substance Use

- Anxiety, chronic stress, depression, and social isolation were leading community health concerns. There were specific concerns about the impact of mental health issues for youth and young adults; trauma experienced by immigrants, migrants, and refugees, and social isolation among older adults.
- In addition to the overall burden and prevalence of mental health issues, residents identified a need for assistance navigating a complex behavioral health system, as it can be overwhelming for individuals experiencing mental health challenges.

Providing navigation assistance ensures people can access the right services at the right time, improving continuity of care and health outcomes.

- Youth mental health was a concern in the CBSA, including the prevalence of chronic stress, anxiety, and behavioral issues. These conditions were exacerbated throughout the pandemic, because of isolation, uncertainty, remote learning, and family dynamics.

Complex and Chronic Conditions

- Chronic conditions like cancer, heart disease, chronic lower respiratory disease, and stroke account for four of the six leading causes of death statewide, and it is estimated that there are more than $41 billion in annual costs associated with chronic disease. Perhaps most significantly, chronic diseases are largely preventable despite their high prevalence and dramatic impact on individuals and society.

For more detailed information, see the full FY 2025 NEBH Community Health Needs Assessment Report and Implementation Strategy on the hospital's website.

SECTION IV: COMMUNITY BENEFITS PROGRAMS

Priority Health Need: Social Determinants of Health **Program Name: Back to School Supplies** **Health Issue: Social Determinants of Health-Education/Learning, Social Determinants of Health-Income and Poverty**		
Brief Description or Objective	To provide much needed school supplies to children that live in affordable housing. Basic needs like pencils, pens, paper, and notebooks help students build confidence, engage in lessons, and gain knowledge that will help them to be successful.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To provide students that live in affordable housing developments with the supplies they need for school.	
Goal Status	Over 425 children received school supplies, including backpacks, notebooks, pens, calculators, etc.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Mental Health and Substance Use **Program Name: BILH Behavioral Health Access Initiative** **Health Issue: Mental Health/Mental Illness**		
Brief Description or Objective	To support increased access to mental health and substance use services and supports, NEBH participated with other BILH hospitals to pilot Behavioral Health Navigator grant programs, offer Mental Health First Aid (MHFA) trainings, provide behavioral health navigation and digital literacy trainings to BILH physical health navigators and amplify anti-stigma messaging, resources and supports.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	Increase knowledge and awareness of available behavioral health services and supports among clinical and non-clinical staff who provide patients/clients with physical and/or social determinants of health navigation services.	
Goal Status	Two (2) Behavioral Health Navigation and Digital Literacy workshops were conducted in FY25 with 13 participants, including RNs, CHWs/Navigators, Social Workers and a Housing Case Manager. In the program evaluation, 82% of participants felt confident to help navigate patients to appropriate behavioral health care and 70% felt confident to guide patients to web-based apps to help them meet their behavioral health needs.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	Offer Mental Health First Aid (MHFA) trainings to community residents and BILH staff across the BILH Community Benefits Service Area (CBSA).	
Goal Status	More than 146 community residents and BILH staff attended one of 11 MHFA trainings (9 Adult and 2 Youth, with 1 of the Adult trainings conducted in Spanish) provided across the BILH CBSA, of which 53% (78) completed all pre- and post-training requirements to receive Mental Health First Aid certification.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Equitable Access to Care **Program Name: BILH Workforce Development** **Health Issue: Additional Health Needs Identified by the Community**		
Brief Description or Objective	BILH is strongly committed to workforce development programs that enhance the skills of its diverse employees and provide career advancement opportunities. BILH offers incumbent employees "pipeline" programs to train for professions such as Patient Care Technician, Central Processing Technician and an Associate Degree Nurse Resident. BILH's Employee Career Initiative provides career and academic counseling, academic assessment, and pre-college and college-level science courses to employees at no charge, along with tuition reimbursement, competitive scholarships and English for Speakers of Other Languages (ESOL) classes. BILH is also committed to making employment opportunities available to qualified community residents through training internships conducted in partnership with community agencies and hiring candidates referred by community programs.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	In FY25, Workforce Development will continue to encourage community referrals and hires.	
Goal Status	In FY25, 306 job seekers were referred to BILH and 79 were hired across BILH hospitals.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	In FY25, Workforce Development will attend events and give presentations about employment opportunities to community partners	
Goal Status	In FY25, 42 events and presentations were conducted with community partners across the BILH service area.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	In FY25, Workforce Development will attend events and give presentations about employment opportunities to community partners	
Goal Status	In FY25, 306 job seekers were referred to BILH and 79 were hired across BILH hospitals.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	In FY25, Workforce Development will offer employees career development services.	
Goal Status	In FY25, 831 BILH employees received career development services.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Program Goal(s)	In FY25, Workforce Development will offer citizenship, career development workshops, and financial literacy classes to BILH employees.	
Goal Status	In FY25, 12 BILH employees attended citizenship classes, 102 BILH employees attended career development workshops, and 138 BILH employees attended financial literacy classes.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	In FY25, Workforce Development will offer English for Speakers of Other Languages (ESOL) classes to BILH employees.	
Goal Status	In FY25, 126 employees across BILH were enrolled in ESOL classes.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	In FY25, Workforce Development will offer internships in BILH hospitals to community members over the age of 18.	
Goal Status	In FY25, 131 community members placed internships across BILH hospitals to learn valuable skills.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	In FY25, Workforce Development will hire interns hired after internships and place in BILH hospitals	
Goal Status	In FY25, 36 interns were hired permanently in BILH hospitals.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Equitable Access to Care **Program Name: Addressing BILH Patient Health Disparities** **Health Issue: Additional Health Need Identified by the Community**		
Brief Description or Objective	BILH Health Equity Division sits within the Office of Community and Health Impact. BILH's Health Equity team's focus is on addressing health disparities to ensure equitable health outcomes across the patient populations served by BILH.	
Program Type	☒ Direct Clinical Services ☐ Community Clinical Linkages ☐ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	Meet or exceed goal of 2.65% reduction the occurrence of Severe Maternal Morbidity-Blood Transfusions during the measurement period ending September 30, 2025.	
Goal Status	Goal Not Met: 2.91% of BILH patients received Severe Maternal Morbidity-Blood Transfusions	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	Meet or exceed goal of 69.6% of BILH patients 18-85 years of age with a diagnosis of both diabetes and hypertension who meet control targets for both conditions (HbA1c <= 9.0% AND BP < 140/90 mmHg criteria) during the measurement period ending September 30, 2025	
Goal Status	Goal Met: 70.4% of the focus population met the control targets for both conditions (HbA1c <= 9.0% AND BP < 140/90 mmHg criteria) during the measurement period through September 2025	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	Meet or exceed goal of 74.8% of BILH patients 18-85 years of age with a diagnosis of hypertension whose blood pressure was adequately controlled (< 140/90 mmHg) during the measurement period ending September 30,	
Goal Status	Goal Met: 75% of the focus population had blood pressure that was adequately controlled (< 140/90 mmHg) during the measurement period	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	Meet or exceed goal of 76.5% of BILH patients 18-85 years of age diagnosed with diabetes (Type 1 and Type 2) who had a hemoglobin A1c (HbA1c) level of <= 9.0% during the measurement period ending September 30, 2025	
Goal Status	Goal Met: The average percentage, of the identified population above, whose hemoglobin A1c (HbA1c) level was <= 9.0% during the measurement period was 78.4% which exceeded the target average goal of 76.5%	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Social Determinants of Health **Program Name: Clothing and Household Essentials** **Health Issue: Mental Health-Physical Activity, Environmental Quality, Income and Poverty**		
Brief Description or Objective	Provide new winter coats, boots, hats, scarves, clothing, diapers, cleaning supplies, etc. to our community members in need, helping with self-confidence, elder isolation, physical activity, safety and overall wellness.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To provide new winter coats, boots, hats, scarves, clothing, cleaning supplies, etc. to our community members in need, helping with self-confidence, elder isolation, physical activity, safety and overall wellness.	
Goal Status	Over 350 Mission Hill residents, including children, adults and seniors received coats, hats, boots, shoes, clothing, diapers, cleaning supplies, soap, etc.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Social Determinants of Health **Program Name: Community Benefits Administration and Infrastructure** **Health Issue: Additional Health Needs Identified by the Community**			
Brief Description or Objective	Community Benefits and Community Relations staff implement programs and services in our Community Benefits Services Area, encourage collaborative relationships with other providers and government entities to support and enhance community health initiatives, conduct Community Health Needs Assessments and address priority needs and ensure regulatory compliance and reporting. Additionally, Community Benefits and Community Relations staff at BILH hospitals work together and across institutions to plan, implement, and evaluate Community Benefits programs. In FY24, the staff worked collaboratively to begin the Community Health Needs Assessment, and continued through FY25, sharing community outreach ideas and support, and help to distribute the community survey and identify key community residents for interviews and focus groups.		
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☐ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☒ Infrastructure to Support Community Benefits	
Program Goal(s)	Implement effective and efficient programs that support the community health needs of the Community Benefits Service Area.		
Goal Status	NEBH supported and implemented 14 programs and granted $161,981 to local organizations.		
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**	
Program Goal (s)	Offer evaluation capacity workshops to partner organizations and grantees to better understand impact.		
Goal Status	BILH offered five (5) evaluation workshops in FY25 focusing on data collection, analysis, interpretation, reporting and storytelling, with 96% of attendees reporting increased knowledge.		
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**	

Priority Health Need: Mental Health and Substance Abuse **Program Name: Elder Isolation** **Health Issue: Health Behaviors/Mental Health-Mental-Health, Health Behaviors/Mental Health-Physical Activity, Environmental Quality, Income and Poverty**		
Brief Description or Objective	There are many issues related to older adult health with isolation being one of them. NEBH is committed to the seniors living in and around Mission Hill/Roxbury/Jamaica Plain to help with elder isolation.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To increase access to social experiences for those who are isolated and lack family/caregiver and other social supports.	
Goal Status	NEBH held four birthday celebrations for older adults in the Mission Hill community. And, NEBH also held an ice cream social and two end of summer BBQs for older adults. Over 150 older adults attend these events.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Chronic and Complex Conditions **Program Name: Food for a Healthy Community** **Health Issue: Access to Healthy Food, Income and Poverty, Nutrition**		
Brief Description or Objective	Provide food, meals and grocery store gift cards and increase access to healthy foods with an emphasis on priority populations in Mission Hill.	
Program Type	☐ Direct Clinical Services Community Clinical Linkages ☒Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	Increase access to individuals and families who are food insecure.	
Goal Status	The number of individuals and families suffering from food insecurity has increased significantly. Over 800 individuals/families living in Mission Hill received much needed food, either meals from local businesses, food from local grocers and/or gift cards to the local grocery store, Stop & Shop.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**
Program Goal(s)	Increase access to low-cost healthy foods by providing fresh fruits and vegetables.	
Goal Status	Provided financial support for the Fair Foods program at Roxbury Tenants of Harvard (RTH). Over 2,839 bags of fresh fruit and vegetables were given to low-income families and individuals that live at RTH. NEBH collaborated with Stop & Shop to donate 500 turkeys and bags of food to Mission Hill residents during the holidays. NEBH provided another 300 residents/families with gift cards to Stop & Shop.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Social Determinants of Health **Program Name: Healthy Neighborhood** **Health Issue: Chronic Disease-Overweight/Obesity, Environmental Quality, Income and Poverty, Public Safety**	
Brief Description or Objective	Neighborhoods free of abandoned buildings, graffiti, and litter lead to lower crime and more activity in parks and play. More activity leads to better health, improved performance in school and long-term economic gains. Several long-term studies have been done that show this. Safe neighborhoods derive economic value from this as well as mental and physical health benefits.
Program Type	☐ Direct Clinical Services ☐ Access/Coverage Supports ☐Community Clinical Linkages ☐ Infrastructure to Support Community Benefits ☒Total Population or Community Wide Intervention
Program Goal(s)	To increase neighborhood involvement in physical activity, beautification projects and safety initiatives; collaborate with organizations on such efforts.
Goal Status	NEBH continues to maintain the City of Boston's McLaughlin Park, Ball Fields and Walking Path in Mission Hill. This allows the residents of Boston to use the field and parks for outdoor physical and social activities.

Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Program Goal(s)	Help address adult and childhood obesity by contributing to public parks improvements and maintenance, and through the promotion of wellness and exercise. Collaborate with Mission Hill Main Streets and support neighborhood beautification efforts.
Goal Status	NEBH continued to beautify the neighborhood by working with community members and Mission Hill Main Streets on initiatives aimed to keep Mission Hill beautiful. This includes cleaning the streets and graffiti removal.

Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Social Determinants of Health **Program Name: Meredith Cameron Youth Opportunity Internship** **Health Issue: Social Determinants of Health-Education/Learning, Social Determinants of Health-Income and Poverty**		
Brief Description or Objective	To provide high school and college students who permanently reside in the Mission Hill/Roxbury community a paid summer internship in positions that will be engaging, enriching and rewarding while providing exposure to health and science related career paths.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To provide high school and college students who permanently reside in the Mission Hill/Roxbury community a paid summer internship in positions that will be engaging, enriching and rewarding while providing exposure to health and science related career paths.	
Goal Status	Five students participated in the summer internship working in various departments, including the Lab, nursing units, operating room and preadmission screening.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Chronic and Complex Conditions **Program Name: Obesity Prevention** **Health Issue: Chronic Disease- Diabetes, Overweight and Obesity, Mental Health-Physical Activity, Environmental Quality, Income and Poverty, Nutrition**	
Brief Description or Objective	To support exercise programs and open space for youth and adults so that they keep active to help in the prevention of obesity.
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention ☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To support exercise programs for youth so that they keep active helping in the prevention of obesity.
Goal Status	• NEBH provided financial support for the summer camp at the Tobin Community Center, which allowed 15 youth to participate. The camp encourages young children to exercise and keep active, helping in the prevention of obesity. • NEBH provided financial support for the After-School Program at the Tobin Community Center. This allows youth to participate in tutoring, and extracurricular activities including sports programs. • NEBH provided financial support for the Mission Grammar Schools Basketball Team. • NEBH provides financial assistance to the Mission Hill Little League and the Mission Hill Road Race.

Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Social Determinants of Health **Program Name: Project Search** **Health Issue: Social Determinants of Health-Education/Learning, Social Determinants of Health-Income and Poverty**	
Brief Description or Objective	The Project Search High School Transition program is a one-year, school-to-work program with Madison Park High School. The program provides real-life work experience combined with training in employability and independent living skills to help youths with significant disabilities make successful transitions from school to productive adult life.
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention ☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	NEBH will collaborate with Madison Park High School to offer a one-year, school-to-work internship transition program for youth with significant disabilities.
Goal Status	• Six students from Madison Park High School (Boston Public School) participated in the program. The life work experience combined with training in employability and independent living skills assist youths with significant disabilities make successful transitions from school to productive adult life. • Students received a weekly stipend that helps to promote financial independence, allows students to contribute to their family's rent, groceries, and other expenses, and reinforces the financial literacy and responsible spending skills students are learning in the classroom at Madison Park High School.

Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Housing Stability/Homelessness **Program Name: Resident Services Coordinator** **Health Issue: Income and Poverty Housing Stability/Homelessness**			
Brief Description or Objective	The Resident Services Coordinator will work with identified residents who live in Mission Hill Neighborhood Housing Services properties with filling out forms, paperwork, etc. and connecting them to housing stability services.		
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits	
Program Goal(s)	To assist residents with Residential Assistance for Families in Transition (RAFT) applications, forms, etc. who live in Mission Hill Neighborhood Housing Services properties.		
Goal Status	• The Resident Services Coordinator worked with 25 residents that had very large rent arrearages assisting them with applications and other basic household needs including diapers, clothing, food, etc. • The Resident Services Coordinator interacted with over 250 residents. These interactions included checking in on their financial, social, and physical wellbeing, assisting them with applications, encouraging older adults to attend events, connecting youth to programs in the community, etc.		
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**	
Program Goal(s)	Build relationships with residents of Frawley-Delle Apartments, 706 Huntington Ave, One Gurney Street Apartments, One Halleck Street Apartments, Maria Sanchez House and HERE House through community outreach and involvement in local events, programming, and resources.		
Goal Status	• The Resident Services Coordinator assisted a resident that suffers from anxiety and agoraphobia, who was not comfortable allowing anyone into her home for an assessment. The coordinator continues to build trust with this resident and the resident now allows a caseworker, nurses, meals on wheels into her home. • Resident participation in events and programs has increased.		
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**	

Priority Health Need: Chronic and Complex Conditions **Program Name: Transportation for Seniors** **Health Issue: Chronic Disease-Arthritis, Cardiac Disease, Chronic Pain, Diabetes, Hypertension, Osteoporosis, Overweight and Obesity, Mental Health, Senior Health Challenges, Access to Health Care, Access to Healthy Food, Access to Transportation, Income and Poverty**		
Brief Description or Objective	Transportation is crucial to ensure access to essential services such as medical care, pharmacy and grocery shopping. The availability of affordable and adequate transportation enables older adults to live independently in their communities, helps to prevent isolation and the possible need for long-term care placement. Because the neighborhood of Mission Hill is located on a hill, transportation up and down the hill is needed, especially for older adults. As people grow older, their level of mobility often becomes limited. Without the Mission Link bus, older adults in the Mission Hill community would not have transportation to get to places like the grocery store, pharmacy or doctor's appointment. It also provides older adults with the opportunity to be more social and active.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☐ Total Population or Community Wide Intervention	☒ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To provide much needed transportation for older adults, getting them to and from their doctor's appointments, food shopping, pharmacy, etc. as well as providing the opportunity for them to be social and active.	
Goal Status	Over 7,000 residents used the bus in FY25. A new bus stop was added in FY25 that allowed residents that live at 650 Huntington Ave. the opportunity to be picked up and dropped off outside their building. The Mission Link Inc. has purchased a new bus that will be better equipped and easier for people with disabilities. The bus is scheduled to be delivered in early 2026.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

Priority Health Need: Social Determinants of Health **Program Name: Violence Prevention** **Health Issue: Violence and Trauma, Environmental Quality, Public Safety**	
Brief Description or Objective	NEBH does security rounds throughout the Mission Hill area. This service provides detection and deterrence in the neighborhood, 7 Days a week 24 hours a day at scheduled and unscheduled intervals. NEBH continually reviews and upgrades its video system to enhance recording quality and does rounds on an average of ten times a day. NEBH is called upon frequently by the Boston Police for video surveillance. NEBH supports youth basketball programs at the Tobin Community Center. These programs occupy neighborhood youth and provides space for positive activity and social interactions with law enforcement.
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention ☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	To collaborate with community groups in Mission Hill and the Boston Police to help keep community residents safe and to educate and keep our youth engaged in activities to prevent violence in our community.
Goal Status	NEBH continues to work with community groups in Mission Hill and the Boston Police to help educate and keep our youth engaged in activities to prevent violence in our community. NEBH does security rounds throughout the Mission Hill area. This service provides detection and deterrence in the neighborhood, 7 Days a week 24 hours a day at scheduled and unscheduled intervals. NEBH continually reviews and upgrades its video system to enhance recording quality and does rounds on an average of 6 times a day. NEBH is called upon by the Boston Police for video surveillance.
Time Frame Year: Year 3	**Time Frame Duration: Year 3** | **Goal Type: Process Goal**

Priority Health Need: Chronic and Complex Conditions **Program Name: Yoga for Older Adults** **Health Issue: Chronic Disease-Arthritis, Cardiac Disease, Chronic Pain, Diabetes, Hypertension, Osteoporosis, Overweight and Obesity, Mental Health-Physical Activity**		
Brief Description or Objective	Mindful Movement is a weekly yoga class for older adults living in Mission Hill. Yoga helps with medical issues that includes diabetes, high blood pressure, high cholesterol, and heart disease. It gives strength, flexibility, and mind-body awareness. It can decrease stress, relive anxiety, reduce inflammation, improve heart health, reduce chronic pain, help with depression, improves flexibility and balance and improves quality of life.	
Program Type	☐ Direct Clinical Services ☐ Community Clinical Linkages ☒ Total Population or Community Wide Intervention	☐ Access/Coverage Supports ☐ Infrastructure to Support Community Benefits
Program Goal(s)	Provide yoga for older adults living in Mission Hill to help with medical issues that includes diabetes, high blood pressure, high cholesterol, and heart disease.	
Goal Status	Over 35 older adults participated in the weekly yoga class held in the fall, spring and summer. Participants have stated they feel better, have more flexibility, feel less stress and isolated.	
Time Frame Year: Year 3	**Time Frame Duration: Year 3**	**Goal Type: Process Goal**

SECTION V: EXPENDITURES

Item/Description	Amount
CB Expenditures by Program Type	
Direct Clinical Services	$0
Community-Clinical Linkages	$188,840
Total Population or Community Wide Interventions	$575,677
Access/Coverage Supports	$96,607
Infrastructure to Support CB Collaborations	$13,549
Total Expenditures by Program Type	$874,673
CB Expenditures by Health Need	
Chronic Disease	$344,376
Mental Health/Mental Illness	$106,832
Substance Use Disorders	$13,550
Housing Stability/Homelessness	$56,442
Additional Health Needs Identified by the Community	$353,474
Total Expenditures by Health Need	$874,673
Leveraged Resources	
Total Leveraged Resources	$88,547
Net Charity Care Expenditures	
HSN Assessment	$1,080,230
Free/Discounted Care	N/A
HSN Denied Claims	$111,587
Total Net Charity Care	$1,191,818
Total CB Expenditures	$2,155,038
Additional Information	
Net Patient Services Revenue	$179,184,505
CB Expenditure as % of Net Patient Services Revenue	1.20%
Approved CB Budget for FY26 (*Excluding expenditures that cannot be projected at the time of the report)	$1,924,962
Bad Debt	$262,994
Bad Debt Certification	Yes

Optional Supplement	
Comments	NEBH paid $370,872 to the City of Boston's voluntary PILOT Program. The funds contribute to the health and wellbeing of those living in the City of Boston.

SECTION VI: CONTACT INFORMATION

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SECTION VII: HOSPITAL SELF-ASSESSMENT FORM

Hospital Self-Assessment Update Form – Year 1

Note: This form is to be completed in the Fiscal Year in which the hospital completed its triennial Community Health Needs Assessment

I. Community Benefits Process:

1. Community Benefits in the Context of the Organization's Overall Mission:

- Are Community Benefits planning and investments part of your hospital's strategic plan? ☒Yes ☐No
    - If yes, please provide a description of how Community Benefits planning fits into your hospital's strategic plan. If no, please explain why not:

While NEBH oversees local Community Benefits programming and community engagement efforts, Community Benefits is under the purview of the BILH Chief Community and Health Impact Officer. This structure makes sure that Community Benefits efforts, prioritization, planning and strategy align and/or are integrated with local hospital and system strategic and regulatory priorities and efforts to ensure health equity in fulfilling BILH's mission – We create healthier communities – one person at a time – through seamless care and ground-breaking science, driven by excellence, innovation and equity and values, encompassed by the acronym WE CARE:

Wellbeing - We provide a health-focused workplace and support a healthy work-life balance
Empathy - We do our best to understand others' feelings, needs and perspectives
Collaboration - We work together to achieve extraordinary results
Accountability - We hold ourselves and each other to behaviors necessary to achieve our collective goals
Respect - We value diversity and treat all members of our community with dignity and inclusiveness
Equity - Everyone has the opportunity to attain their full potential in our workplace and through the care we provide.

The mission of NEBH is to transform the lives of those we serve by promoting wellness, restoring function, lessening disability, alleviating pain, and advancing knowledge in musculoskeletal diseases and related disorders. NEBH is also committed to being active in our community.

2. **Community Benefits Advisory Committee (CBAC):**

- Members: Elaine Adams, Health and Wellness Instructor, Roxbury Tenants of Harvard, Laura Adams, Director of Senior Services, Roxbury Tenants of Harvard, Melissa Carlson, Deputy Commissioner of Programs and Partnerships, Boston Age Strong Commission, Sophie Deung, Senior Programs Leader, Roxbury Tenants of Harvard and Mission Hill resident, Patricia Flaherty, Executive Director, Mission Hill Neighborhood Housing Services, Karen Gately, Executive Director, Roxbury Tenants of Harvard, John Jackson, Director, Boston Center for Youth and Families Tobin Community Center, NEBH Trustee, Toni Komst, Board Member, Community Alliance of Mission Hill, Mission Hill resident, Mary Ann Lawrence, Mission Hill Resident, Paige Legassie-Main, Vice President, Business Partner, Human Resources, New England Baptist Hospital, Brian Miller, Special Education Teacher, Boston Public Schools, David Passafaro, President, NEBH*, Lynn Stewart, Manager of Amenities and Student Services, NEBH, Courtney Wright, Executive Director, Mission Hill Main Streets and David Welch, Board Member, Mission Hill Neighborhood Housing Services

3.

- Leadership: David Passafaro, President*, Mary Sullivan Smith, DNP, RN, NEA-BC, Interim President, Senior Vice President, Chief Operating Officer & Chief Nursing Officer**, Brian Smith, Market Chief Financial Officer, Metro Boston Paige Legassie-Main, Vice President, Business Partner, Human Resources Dr. Brian Hollenbeck, MD, Senior Vice President, Chief Medical Officer & Chief, Section of Infectious Diseases Val Giordano, Chief of Staff and Vice President, Real Estate

  *Retired April 2025 **Interim President, May 2025

- Frequency of meetings: Quarterly

4. Involvement of Hospital's Leadership in Community Benefits: Place a checkmark next to each leadership group if it is involved in the specified aspect of your Community Benefits process:

Place a checkmark next to each leadership group if it is involved in the specified aspect of your Community Benefits process:

	Review Community Health Needs Assessment	Review Implementation Strategy	Review Community Benefits Report

Senior leadership	☒	☒	☒
Hospital board	☒	☒	☒
Staff-level managers	☒	☒	☒
Community representatives on CBAC	☒	☒	☒

For any check above, please list the titles of those involved and describe their specific role:

Hospital Board:
NEBH's Board of Trustees – reviewed and approved its CHNA and adopted its Implementation Strategy.

Community Benefits Advisory Committee - oversaw CHNA and Implementation Strategy process.

Senior Leadership:

- **David Passafaro**, President * Designated a member of the senior leadership team to the CBAC and participated in the approval process.
- **Mary Sullivan Smith**, DNP, RN, NEA-BC, Interim President, Senior Vice President, Chief Operating Officer & Chief Nursing Officer**
- **Brian Smith,** Market Chief Financial Officer, Metro Boston
- **Paige Legassie-Main,** Vice President, Business Partner, Human Resources
- **Brian Hollenbeck**, MD, Senior Vice President, Chief Medical Officer & Chief, Section of Infectious Diseases
- **Val Giordano**, Chief of Staff and Vice President, Real Estate
- **Nancy Kasen**, Vice President of Community Benefits and Community Relations, and Community Benefits team: designed, directed and oversaw the CHNA and IS, managed prioritization process, drafted Implementation Strategy
- **Christine Dwyer**, Director, Community and Government Affairs: led NEBH community engagement efforts
- **BILH Board of Trustees Community Benefits Committee** (CBC): guided the process for the system

*Retired April 2025 **Interim President, May 2025

5. <u>Hospital Approach to Assessing and Addressing Social Determinants of Health</u>
    - How does the hospital approach assessing community needs relating to social determinants of health? (150-word limit)

NEBH undertook a robust, collaborative and transparent assessment and planning process. The approach involved extensive quantitative and qualitative data collection

and substantial efforts to engage community residents, with special emphasis on population segments often left out of similar efforts. The assessment was supported by NEBH's Community Benefits Advisory Committee (CBAC). The CBAC is comprised of community members, service providers, and other stakeholders who live and/or work in NEBH's CBSA. NEBH's Implementation Strategy (IS) reflects the hospital and the CBAC's prioritization of the following social determinants of health: economic stability, education, food insecurity and nutrition, housing, and transportation

- How does the hospital incorporate health equity in its approach to Community Benefits? (150-word limit)

NEBH and BILH are committed to health equity, the attainment of the highest level of health for all people. Throughout the assessment process, NEBH worked to understand the needs of all populations in the Community Benefits Service Area, including those who have been historically underserved. Health equity is an overarching lens applied to all four pillars within the NEBH's Implementation Strategy. The Implementation Strategy is designed to address the underlying social determinants of health and barriers to accessing care

- How does the hospital approach allocating resources to Total Population or Community-Wide Interventions? (150-word limit)

NEBH's Implementation Strategy includes a range of programs and resources to address the prioritized needs within the hospital's Community Benefits Service Area. The majority of NEBH's community benefits initiatives are focused on cohorts and geographies based on identified needs. Additionally, NEBH collaborates with many community partners to own, catalyze and/or support total population and community-wide interventions.

6. <u>Maternal Health Focus</u>

- How does your organization assess maternal health status in the Community Needs Assessment Process? (150-word limit)

NEBH's Community Health Needs Assessment (CHNA) process includes comprehensive collection and review of primary and secondary data sources. Secondary data sources include the Center for Health Information Analysis (CHIA), Community Health Equity Survey (CHES), County Health Rankings, MA DPH, National Center for Health Statistics and U.S. Census Bureau. The hospital's data table has a section for Maternal and Child Health/Reproductive Health which includes infant mortality rate (%) and low birth weight (%). In addition to secondary data capture and review, throughout the CHNA NEBH engages with the community to collect primary data via a survey, focus groups and listening sessions to directly enable community residents to identify priorities.

- How have you measured the impact of your Community Benefits programs and what challenges have you faced in this measurement?

NEBH is a member of Beth Israel Lahey Health, which, as a system, is working to address maternal health equity. Beth Israel Lahey Health established its Maternal Health Quality and Equity Council (MHQEC) in September of 2023. The Council's objective is to improve maternal health outcomes and eliminate inequities in care, with an overarching aim to reduce the occurrence of maternal morbidity and mortality. The Council is comprised of representatives from all of the BILH hospitals providing maternity services, as well as BILH leadership, including BILH Health Equity system leadership. BILH's Vice President of Health Equity serves as the Executive Sponsor. Additionally, BILH established a health equity goal beginning in FY 25 – a year over year improvement in maternal transfusion rate (the goal is to reduce disparities in maternal transfusion rates measured at the system level).

- Do you need assistance identifying community-based organizations doing maternal health work in your area?

MHQEC looks forward to spreading this work and collaborating with its myriad of long-standing community partners in pursuit of maternal health equity.

II. Community Engagement

1. Organizations Engaged in CHNA and/or Implementation Strategy

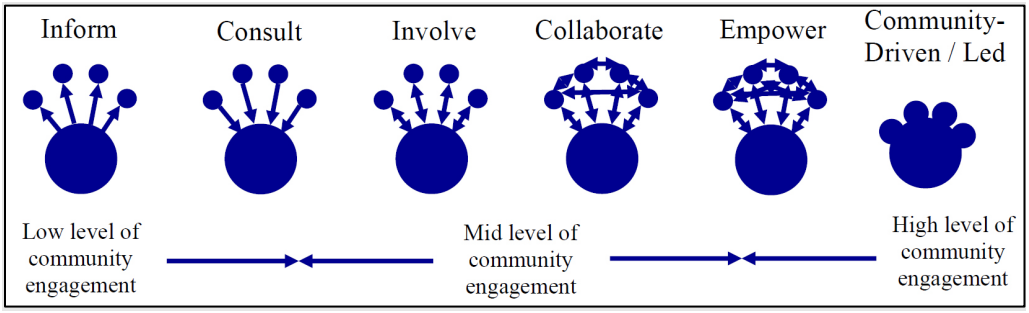
   Use the table below to list the key partners with whom the hospital collaborated in assessing community health needs and/or implementing its plan to address those needs and provide a brief description of collaborative activities with each partner. Note that the hospital is not obligated to list every group involved in its Community Benefits process, but rather should focus on groups that have been significantly involved. Please feel free to add rows as needed.

Organization	**Name and Title of Key Contact**	**Organization Focus Area**	**Brief Description of Engagement** (including any decision-making power given to organization)
Mission Hill Neighborhood Housing Services	Patricia Flaherty, Executive Director	Housing organizations	Stable and Affordable Housing was identified as a social determinant of health in the NEBH and citywide FY 25 CHNA. NEBH collaborated with Mission Hill Neighborhood Housing Services

			on a housing program. NEBH provided an intern to work with residents from Mission Hill Neighborhood Housing Services properties on housing stability, connecting them with resources and services, homelessness prevention, and the reduction of social isolation. The intern assisted families and seniors with a range of issues from rent arrearage and inability to fill out applications for rent relief to food insecurity, help with resources, accessing summer camps and after school activities for children and programs for older adults.
Mission Hill Link, Inc.	Mary Ann Nelson, President	Other	Transportation was identified as a major issue and social determinant of health in the FY 25 CHNA. NEBH collaborates with Mission Link, Inc. to provide transportation to older adults living in Mission Hill. A new bus stop was added in FY 25 and a new bus was purchased in FY 25 with delivery in early 2026. Over 7,000 residents ride the Mission Link each year.
Tobin Community Center	John Jackson, Center Director	Other	NEBH collaborates with the staff at the Tobin Community Center on programs for youth and older adults. NEBH supports their Summer Camp program, Afterschool program, Mighty Mission Basketball Team, Mission Hill Senior Legacy, and violence prevention education and events.
Boston Public Schools, Madison Park High School	Brian Miller, Special Education Teacher, Madison Park High School	Schools	NEBH collaborates with Madison Park High School to offer a one-year, school-to- work internship through the Project SEARCH High School Transition Program.

			The program provides real-life work experience combined with training and independent living skills to help youth with significant disabilities make successful transitions from school to productive adult life. The Special Education teacher/department at Madison Park High School identifies students for the program at NEBH.
Roxbury Tenants of Harvard (RTH)	Laura Adams, Director, Senior Services		Food Insecurity was identified as one of the top three social determinates of health in the NEBH FY 25 CHNA. Many residents do not have access to healthy food. NEBH collaborated with RTH on Food Insecurity. Offering fresh fruits and vegetables on a weekly basis and hot meals to older adults.

2. Level of Engagement Across CHNA and Implementation Strategy
   Please use the spectrum below from the Massachusetts Department of Public Health1 to assess the hospital's level of engagement with the community in implementing its plan to address the significant needs documented in its CHNA, and the effectiveness of its community engagement process.



For a full description of the community engagement spectrum, see page 11 of the Attorney General's Community Benefits Guidelines for Non-Profit Hospitals.

[1] "Community Engagement Standards for Community Health Planning Guideline," Massachusetts Department of Public Health, available at: http://www.mass.gov/eohhs/docs/dph/quality/don/guidelines-community-engagement.pdf. For a full description of the community engagement spectrum, see page 11 of the Attorney General's Community Benefits Guidelines for Non-profit Hospitals.

A. Community Health Needs Assessment: Please assess the hospital's level of engagement in developing its CHNA and the effectiveness of its community engagement process.

Category	Level of Engagement	Did Engagement Meet Hospital's Goals?	Goal(s) for Engagement in Upcoming Year(s)
Overall engagement in assessing community health needs	Involve	Goal was met	Involve
Collecting data	Involve	Goal was met	Involve
Defining the community to be served	Collaborate	Goal was met	Collaborate
Establishing priorities	Collaborate	Goal was met	Collaborate

- For categories where community engagement did not meet the hospital's goal(s), please provide specific examples of planned improvement for next year:

B. Implementation Strategy: Please assess the hospital's level of engagement in developing and implementing its plan to address the significant needs documented in its CHNA and the effectiveness of its community engagement process.

Category	Level of Engagement	Did Engagement Meet Hospital's Goals?	Goal(s) for Engagement in Upcoming Year(s)
Overall engagement in developing and implementing filer's plan to address significant needs documented in CHNA	Collaborate	Goal was met	Collaborate
Determining allocation of hospital Community Benefits resources/selecting Community Benefits programs	Consult	Goal was met	Consult
Implementing Community Benefits programs	Collaborate	Goal was met	Collaborate
Evaluating progress in executing Implementation Strategy	Collaborate	Goal was met	Collaborate
Updating Implementation Strategy annually	Consult	Goal was met	Consult

- For categories where community engagement did not meet the hospital's goal(s), please provide specific examples of planned improvement for next year:

3. Opportunity for Public Feedback
   Did the hospital hold a meeting open to the public (either independently or in conjunction with its CBAC or a community partner) at least once in the last year to solicit community feedback on its Community Benefits programs? If so, please provide the date and location of the event. If not, please explain why not.

   In FY25, NEBH held four CBAC meetings, a community listening session and an annual meeting that were broadly advertised to the public. Additionally, four newsletters were distributed to inform the community about the Community Health Needs Assessment and Implementation Strategy process, including opportunities for input, and other Community Benefits updates.

CBAC Meetings:

December 17, 2024
March 18, 2025
June 17, 2025

Annual Meeting:
September 16, 2025
Listening Session:
February 19, 2025

4. Best Practices/Lessons Learned: The AGO seeks to continually improve the quality of community engagement.

   What community engagement practices are you most proud of? (150-word limit)

   NEBH is most proud of its committed CBAC and the long-standing relationships it has with many community-based organizations, the public health department, and other government partners. NEBH is proud of its collaboration with these and other organizations that allow for meaningful community engagement.

   What lessons have you learned from your community engagement experience? (150-word limit)

Working collaboratively with other hospitals, community-based organizations, public health agencies, residents, and area coalitions enhances the level and quality of NEBH's community engagement efforts.

III. Regional Collaboration

1. Are Community Benefits planning and investments part of your hospital's strategic plan? ☒Yes ☐No
    a. **If so, briefly describe it. If not, why?**
2. If the hospital collaborates with any other filer(s) in conducting its CHNA, Implementation Strategy, or other component of its Community Benefits process (e.g., as part of a regional collaboration), please provide information about the collaboration below.
    - Collaboration
    - Institutions Involved
    - Brief description of goals of collaboration
    - Key communities engaged through collaboration. If you did not participate in a collaboration, please explain why not:

For its FY 2025 CHNA, Beth Israel Lahey Health (BILH) took the unique approach of designing and implementing a system-wide, highly coordinated CHNA and prioritization process across each of the system's 11 licensed hospitals, including NEBH. While NEBH focuses its Community Benefits resources on improving the health status of those in its CBSA experiencing significant barriers to care, this system-wide approach enhances opportunities for collaboration and alignment with respect to addressing unmet need and maximizing impact on community health priorities. Together, BILH hospitals are identifying efficient ways to share information, address health needs, and identify common indicators to measure programmatic impact.

In addition to this assessment, NEBH's Community Benefits staff collaborated with the Boston Community Health Collaborative (BCHC)'s Community Health Needs Assessment. The BCHC, consisting of Boston's hospitals, The Boston Public Health Commission, community-based organizations and community residents, conducted a robust and collaborative community health needs assessment for the City of Boston as a whole. The BCHC's Community Health Needs Assessment serves as a foundational resource for policymakers and community leaders, and informs community health improvement planning, priority setting, program and policy development, and collaboration. This is the third city-

wide coordinated Community Health Needs Assessment and builds upon previous coordinated efforts in 2019 and 2022.