

Community Benefits Report

Fiscal Year 2023

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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 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 4,000 physicians and 35,000 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's 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 Diversity, Equity and Inclusion 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.

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 neighborhoods 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 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 social and institutional inequities, racism, and bigotry and ensuring that all patients are welcomed and received with respect and have access to culturally responsiveness 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 neighborhoods of Mission Hill/Roxbury neighborhoods of Boston, as well as the cities of Dedham, Chestnut Hill (Newton) and Brookline. In FY 2022, 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 for FY 2019. 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 2023 - 2025 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 assessment, the community characteristics that were thought to have the greatest impact on health status and access to care in the NEBH 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 older adults, individuals with disabilities, individuals who speak a language other than English, and those who are economically insecure were most likely to have poor health status and face systemic challenges accessing care and services. Quantitative data compiled from the US Census Bureau highlighted the diversity that existed in the Mission Hill neighborhood, particularly with respect to age and race/ethnicity. Census Bureau data also highlighted issues of economic security that dominated the assessment findings. One issue to be noted was the lack of data available by gender identity and sexual orientation at the community or municipal level. Research shows that those who identify as lesbian, gay, bisexual, transgender, and/or queer/questioning experience health disparities and challenges accessing services.

For its FY 2023 – 2025 Implementation Strategy (IS), NEBH will work with its community partners, with a focus on the Boston neighborhoods of 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 the improving the health status of the following priority cohorts:

- Youth
- Older Adults
- Racially, Ethnically and Linguistically Diverse Populations
- Low-Resourced 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

The accomplishments and activities highlighted in this report are based upon priorities identified and programs contained in NEBH's FY 2022 Community Health Needs Assessment (CHNA) and FY 2023-2025 Implementation Strategy (IS)

Addressing food insecurity was a top priority in FY23. 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 business' and Stop & Shop gift cards to over 550 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 provides

transportation to and from doctor's appointments, pharmacy, grocery store, etc. for those living in Mission Hill.

NEBH collaborated with the Boston Celtics to offer three Sr. Celtics exercise programs for older adults. Over 140 older adults attended each program that provided exercise, education on healthy living and fall prevention and a healthy meal.

NEBH collaborated with Mission Hill Neighborhood Housing Services (MHNHS) to provide a part time 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 150 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 a back to school BBQ and provided much needed school supplies to over 250 students living in Mission Hill, giving them the items they need to be successful in school.

Seven students participated in the Meredith Cameron Youth Opportunity Internship.

NEBH held four celebrations for older adults helping with isolation. These parties were held at the Tobin Community Center and Roxbury Tenants of Harvard. Over 100 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.

NEBH collaborated with Cristo Rey High School Boston on their Work Study Program. Two students were at the hospital one to two days a week gaining healthcare/work experience.

Plans for Next Reporting Year

In FY 2022, 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 for FY 2019. In response to the FY 2022 CHNA, NEBH will focus its FY 2023 - 2025 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 2022 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 2022 CHNA and FY 2023 - 2025 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 identify, sexual orientation, disability status, immigration status, or age. As discussed above, based on the FY 2022 CHNA's quantitative and qualitative findings, including discussions with a broad range of community participants, there was agreement that for NEBH's FY 2023 - 2025 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; Older Adults; Individuals with Disabilities; Racially, Ethnically and Linguistically Diverse Populations and Low-Resourced Populations.

NEBH partners 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 2023 – 2025 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.
- NEBH will work with local groups and organizations on a resource guide for residents.

- **Social Determinants of Health**

- NEBH will provide access to food through gift cards, food pantries, food, and meals from local businesses.
- NEBH will 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 an 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 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 collaborate with Roxbury Tenants of Harvard on their walking group.
 - NEBH will continue its partnership with the Boston Celtics to offer Sr. Celtics programs.
 - NEBH will continue to provide summer camp scholarships to the Tobin Community Center.
 - NEBH will continue to support the Mission Hill Littler League and Mission Hill Road Race.

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, page 32-35). The NEBH Community Benefits staff also shared the Community Representative Feedback Form with its CBAC members who participated in NEBH's CHNA 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 Diversity, Equity and Inclusion 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 *WECARE*:

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- *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 NEBH Community Benefits program is spearheaded by the Director of Community and Government Affairs. The Director of Community and Government Affairs has direct access 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 Diversity, Equity and Inclusion 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 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. 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 20, 2022, March 21, 2023, June 20, 2023, and September 26, 2023

Community Partners

NEBH recognizes its role in 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 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'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 collaborated on its FY 2023 – 2025 IS, as well as on its FY 2022 CHNA. The level of engagement of a select group of community partners can be found in the Hospital Self-Assessment Form (Section VII, page 32-35).

The Hospital's community partners include:

- ABCD-Parker Hill Fenway Service Center
- Alice Heyward Taylor Housing Development
- Boston Celtics
- Boston Center for Youth and Family Services, Tobin Community Center
- 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 High School
- Maria Sanchez House
- 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
- One Gurney Street Apartments
- Private Industry Council
- Roxbury Tenants of Harvard
- Sociedad Latina
- Stop & Shop

SECTION III: COMMUNITY HEALTH NEEDS ASSESSMENT

The FY 2022 Community Health Needs Assessment (CHNA) along with the associated FY 2023-2025 Implementation Strategy was developed over a twelve-month period from September 2021 to September 2022. 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 2022. FY 2023 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 2022 CHNA approach, methods, and key findings.

Approach and Methods

The FY 2022 assessment and planning process was conducted in three phases between September 2021 and September 2022, 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, as well as the current and historical discrimination and injustices that underlie existing disparities. 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.

Between October 2021 and February 2022, NEBH's assessment included 85 (20 by NEBH/BIDMC) one-on-one interviews with key collaborators in the community, 24 focus groups (5 by NEBH/BIDMC) with segments of the population facing the greatest health-related disparities, and two community listening sessions that engaged over 40 participants. In addition, BID Needham conducted a community health survey, which gathered information from more than 450 community residents from BID Needham's CBSA, including 86 residents from Dedham. BID Needham shared this information with NEBH. The Boston Public Health Commission fielded a COVID-19 Health Equity Survey in December 2020/January 2021; as such, NEBH and BIDMC, based on recommendations from the Boston CHNA-CHIP Collaborative Steering Committee, opted not to field a survey in Boston. This survey of a random sample of over 1,650 residents examined issues related to job loss, food insecurity, access to services, mental health, vaccination, and perceptions of risk around COVID-19.

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 2022 CHNA Key Health-Related Findings

Equitable Access to Care

- Individuals 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 stem from the way in which the system does or does not function. System level issues included providers not accepting new patients, long wait lists, and an inherently complicated healthcare system that is 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 economic insecurity, education, food insecurity, access to care/navigation issues, and other important social factors.
- There is limited quantitative data in the area of social determinants of health. Despite this, information gathered through interviews, focus groups, survey, and listening sessions suggested 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, and economic stability.

Mental Health and Substance Use

- Anxiety, chronic stress, depression, and social isolation were leading community health concerns. The assessment identified specific concerns about the impact of mental health issues for youth and young adults, the mental health impacts of racism, discrimination, and trauma, and social isolation among older adults. These difficulties were exacerbated by COVID-19.
- In addition to the overall burden and prevalence of mental health issues, residents identified a need for more providers and treatment options, especially inpatient and outpatient treatment, child psychiatrists, peer support groups, and mental health services.
- Substance use continued to have a major impact on the CBSA; the opioid epidemic continued to be an area of focus and concern, and there was recognition of the links and impacts on other community health priorities, including mental health, housing, and homelessness. Individuals engaged in the assessment identified stigma as a barrier to treatment and reported a need for programs that address common co-occurring issues (e.g., mental health issues, homelessness).

Complex and Chronic Conditions

- Chronic conditions such as cancer, diabetes, chronic lower respiratory disease, stroke, and cardiovascular disease contribute to 56% of all mortality in the Commonwealth and over 53% of all health care expenditures (\$30.9 billion a year). 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 2022 NEBH Community Health Needs Assessment and Implementation Plan Report on the hospital's website.

SECTION IV: COMMUNITY BENEFITS PROGRAMS

Priority Health Need: Total Population or Community-Wide Interventions 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	<input type="checkbox"/> Direct Clinical Services <input type="checkbox"/> Community Clinical Linkages <input checked="" type="checkbox"/> Total Population or Community Wide Intervention <input type="checkbox"/> Access/Coverage Supports <input type="checkbox"/> 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 225 children received school supplies, including backpacks, notebooks, pens, calculators, etc.
Program Year: Year 1	Goal Type: Process Goal

Priority Health Need: Total Population or Community-Wide Interventions**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

- | | |
|---|---|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | |

Program Goal(s)

To provide new winter coats, boots, hats, scarves, clothing, cleaning supplies, hand sanitizer, 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.

Program Year: Year 1**Goal Type: Process Goal**

Priority Health Need: Equitable Access to Care**Program Name: BILH Office of Diversity, Equity, and Inclusion****Health Issue: Additional Health Needs (Access to Care)****Brief
Description or
Objective**

BILH's Diversity, Equity, and Inclusion (DEI) office develops and advocates for policies, processes and business practices that benefit the communities and our workforce. The DEI vision is to “Transform care delivery by dismantling barriers to equitable health outcomes and become the premier health system to attract, retain and develop diverse talent.”

Program Type

- | | |
|--|--|
| <input type="checkbox"/> Direct Clinical Services | <input checked="" type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support |
| <input type="checkbox"/> Total Population or Community | Community Benefits |
| Wide Intervention | |

**Program
Goal(s)**

1. Across BILH, increase BIPOC representation among new leadership (directors and above) and clinical (physicians and nurses) hires with an aim of at least 25% representation.
2. Increase spend with diverse businesses by 25% over the previous fiscal year across the system.
3. Expand system-wide DEI learning, in alignment with enterprise learning management solution.
4. Support creation or expansion of local DEI committees/resource groups.

Goal Status

- Across BILH there was a 25% increase in BIPOC leadership (directors and above) and clinical (physicians and nurses) hires over FY22.
- More than \$50 million was contracted to Women and Minority-owned Business Enterprises (WMBE) in FY23. This is a 22% increase over FY22.
- 8 system-wide DEI trainings were conducted for all BILH staff and hospitals.
- NEBH formed/created/sustained a Diversity, Equity and Inclusion Council to guide the hospital's efforts to nurture and sustain a diverse, equitable and inclusive organizational culture – and to make meaningful and lasting change for our patients, our employees and our communities.

Program Year: Year 1**Goal Type: Process Goal**

Priority Health Need: Equitable Access to Care
Program Name: BILH Workforce Development
Health Issue: Additional Health Needs (Education/Jobs)

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 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
 ☐ Access/Coverage Supports
☐ Community Clinical Linkages
 ☐ Infrastructure to Support Community Benefits
☒ Total Population or Community Wide Intervention

- Program Goal(s)**
1. In FY23, Workforce Development will continue to encourage community referrals and hires.
 2. In FY23, Workforce Development will attend events and give presentations about employment opportunities to community partners.
 3. In FY23, Workforce Development will offer internships in BILH hospitals to community members over the age of 18.
 4. In FY23, Workforce Development will hire interns hired after internships and place in BILH hospitals.
 5. In FY23, Workforce Development will offer English for Speakers of Other Languages (ESOL) classes to BILH employees.
 6. In FY23, Workforce Development will offer citizenship, career development workshops, and financial literacy classes to BILH employees.

- Goal Status**
- In FY23, 225 job seekers were referred to BILH and 70 were hired across BILH hospitals.
 - In FY23, 67 events and presentations were conducted with community partners across the BILH service area.
 - In FY23, 54 community members placed in internships across BILH hospitals to learn valuable skills. NEBH participated in offering these internships.
 - In FY23, 22 interns were hired permanently in BILH hospitals. [Hospital] participated in these hirings.
 - In FY23, 45 employees across BILH were enrolled in ESOL classes. NEBH employees participated in these classes.
 - In FY23, 20 BILH employees attended citizenship classes, 135 BILH employees attended career development workshops and 189 BILH employees attended financial literacy classes. NEBH employees participated in these offerings.

Program Year: Year 1

Goal Type: Process Goal

Priority Health Need: Total Population or Community-Wide Interventions
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

- | | |
|---|---|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | |

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 three birthday celebrations and three Sr. Celtics events for older adults in the Mission Hill community. And, NEBH also held two end of summer BBQs for older adults. Over 140 older adults attend these events.

Program Year: Year 1

Goal Type: Process Goal

Priority Health Need: Chronic Disease**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☐ Access/Coverage Supports☒ Community Clinical Linkages☐ Infrastructure to Support☐ Total Population or Community
Wide Intervention

Community Benefits

**Program
Goal(s)**

1. Increase access to individuals and families who are food insecure.
2. Increase access to low-cost healthy foods by providing fresh fruits and vegetables.

Goal Status

- The number of individuals and families suffering from food insecurity has increased significantly. Over 600 individuals/families living in Mission Hill received much needed food, either meals from local businesses, food from local grocer and/or gift cards to the local grocery store, Stop & Shop.
- Provided financial support for the food pantry at Roxbury Tenants of Harvard (RTH). The pantry provided emergency food for low-income families and individuals that live at RTH.
- Provided financial support for bags of fresh fruit and vegetables to Roxbury Tenants of Harvard. Over 645 bags of fresh produce were given to residents.
- NEBH collaborated with Stop & Shop to donate 500 turkeys and bags of food to Mission Hill residents during the holidays.

Program Year: Year 1**Goal Type: Process Goal**

Priority Health Need: Built Environment**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

- | | |
|---|---|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | |

Program Goal(s)

1. To increase neighborhood involvement in physical activity, beautification projects and safety initiatives; collaborate with organizations on such efforts.
2. Help address adult and childhood obesity by contributing to public parks improvements and maintenance, and through the promotion of wellness and exercise.
3. Collaborate with Mission Hill Main Streets and support neighborhood beautification 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.
- 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.

Program Year: Year 1**Goal Type: Process Goal**

Priority Health Need:**Program Name: Infrastructure to support Community Benefits collaborations across BILH hospitals****Health Issue: Chronic Disease-Arthritis, Cardiac Disease, Chronic Pain, Diabetes, Hypertension, Osteoporosis, Overweight and Obesity, Mental Health-Physical Activity, Access to Healthy Food, Access to Transportation, Nutrition****Brief Description or Objective**

All Community Benefits staff at each Beth Israel Lahey Health (BILH) hospital worked together to plan, implement, and evaluate Community Benefits programs. Community Benefits staff continued to understand state and federal regulations, build community engagement and evaluation capacity, and collaborate on implementing similar programs. BILH continues to refine the Community Benefits (CB) database, as part of a multi-year strategic effort to streamline and improve the accuracy of regulatory reporting, simplify the collection of and access to standardized CB financial data, and create a uniform, system-wide tracking and monitoring model.

Program Type

- | | |
|--|--|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | |
| <input type="checkbox"/> Total Population or Community Wide Intervention | <input checked="" type="checkbox"/> Infrastructure to Support Community Benefits |

Program Goal(s)

1. By September 30, 2023, BILH Community Benefits and Community Relations staff will participate in workshops to build community engagement skills and expertise.
2. By September 30, 2023, continue to refine a database that collects all necessary and relevant IRS, AGO, PILOT, Department of Public Health (DoN), and BILH Community Benefits data to more accurately capture and quantify CB/CR activities and expenditures.
3. By September 30, 2023, all BILH Hospitals will launch a Community Connections newsletter on a quarterly basis to communicate community benefits activities to community partners, residents, and vested parties.

Goal Status

- All 10 BILH Community Benefits hospitals participated in 4 community engagement workshops.
- All FY23 regulatory reporting data were entered into the Community Benefits Database. The ability for community organizations to apply for grants was added in FY23.
- NEBH launched and sent 2 newsletters to a mailing list of 100 organizations and people.

Program Year: Year 1**Goal Type: Process Goal**

Priority Health Need: Total Population or Community-Wide Interventions
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	<input type="checkbox"/> Direct Clinical Services <input type="checkbox"/> Access/Coverage Supports <input type="checkbox"/> Community Clinical Linkages <input type="checkbox"/> Infrastructure to Support <input checked="" type="checkbox"/> Total Population or Community Community Benefits Wide Intervention
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Program Goal(s)	The goal of this program is to offer high school and college students who permanently reside in the Mission Hill/Roxbury (priority) community and or Boston paid summer employment.
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Goal Status	Five students participated in the summer internship working in various departments, including the Lab, nursing units, operating room and preadmission screening.
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Program Year: Year 1	Goal Type: Process Goal
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Priority Health Need: Chronic Disease Program Name: Mindful Movement 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	<div> <input type="checkbox"/> Direct Clinical Services <input type="checkbox"/> Access/Coverage Supports </div> <div> <input type="checkbox"/> Community Clinical Linkages <input type="checkbox"/> Infrastructure to Support Community Benefits </div> <div> <input checked="" type="checkbox"/> Total Population or Community Wide Intervention </div>
Program Goal(s)	Provide yoga once a week for older adults living in Mission Hill to help with medical issues that includes stress, diabetes, high blood pressure, high cholesterol, and heart disease.
Goal Status	Over 30 older adults participated in the yoga class weekly. More classes were added in 2023. Participants have stated they feel better, have more flexibility, feel less stress and isolated.
Program Year: Year 1	Goal Type: Process Goal

Priority Health Need: Chronic Disease

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

- | | |
|---|--|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | 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 additional 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 provides financial assistance to the Mission Hill Little League and the Mission Grammar School basketball team.

Program Year: Year 1

Goal Type: Process Goal

Priority Health Need: Total Population or Community-Wide Interventions
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 Technical Vocational 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
 ☐ Access/Coverage Supports
☐ Community Clinical Linkages
 ☐ Infrastructure to Support Community Benefits
☒ Total Population or Community Wide Intervention

Program Goal(s)

NEBH will continue to collaborate with Madison Park Technical Vocational High School to offer a one-year, school-to-work internship transition program.

Goal Status

- Six students from Madison Park Technical Vocational 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 Technical Vocational High School.
- NEBH gainfully employed one student from the program. The other students returned to the program for the 23/24 school year.

Program Year: Year 1 **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**

- | | |
|---|---|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | |

**Program
Goal(s)**

1. To assist residents with Residential Assistance for Families in Transition (RAFT) applications, forms, etc. who live in Mission Hill Neighborhood Housing Services properties.
2. Build relationships with residents of Frawley-Delle Apartments, 706 Huntington Ave, One Gurney 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 worked with five 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 150 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.
- The Resident Services Coordinator assisted a resident that suffers from anxiety and agoraphobia, who was not comfortable allowing a caseworker into her home for an assessment. The coordinator set up the telehealth visit with a behavioral health specialist.
- Resident participation in events and programs has increased.

Program Year: Year 1

Goal Type: Process Goal

Priority Health Need: Chronic Disease

Program Name: Sr. Celtics

Health Issue: Chronic Disease- Diabetes, Overweight and Obesity, Mental Health- Physical Activity, Environmental Quality, Income and Poverty, Nutrition

Brief Description or Objective

The Sr. Celtics program encourages older adults that live in the Mission Hill community to maintain an active lifestyle through participation in fitness and health education classes.

Program Type

- | | |
|---|---|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | |

Program Goal(s)

Lack of physical fitness and poor nutrition are among the leading risk factors associated with obesity and chronic health issues. The Sr. Celtics program encourages older adults to participate in fitness and health education classes.

Goal Status

NEBH collaborated with the Boston Celtics to offer the Sr. Celtics program to Mission Hill seniors. Three events were held with over 140 seniors attending each event. The program focused on exercise and keeping seniors moving, fall prevention, mental health and nutrition.

Program Year: Year 1

Goal Type: Process Goal

Priority Health Need: Access to Healthcare
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 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

- | | |
|--|---|
| <input type="checkbox"/> Direct Clinical Services | <input checked="" type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input type="checkbox"/> Total Population or Community Wide Intervention | |

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 to get to appointments, grocery store, pharmacy, etc. The Mission Link board is working with the City of Boston on increasing ridership and communication.

Program Year: Year 1

Goal Type: Process Goal

Priority Health Need: Total Population or Community-Wide Interventions**Program Name: Tuition Assistance****Health Issue: Social Determinants of Health-Education/Learning, Social Determinants of Health-Income and Poverty****Brief Description or Objective**

Provide high school tuition assistance to students that live in affordable housing to cover some of the costs associated with their tuition.

Program Type

- | | |
|---|---|
| <input type="checkbox"/> Direct Clinical Services | <input type="checkbox"/> Access/Coverage Supports |
| <input type="checkbox"/> Community Clinical Linkages | <input type="checkbox"/> Infrastructure to Support Community Benefits |
| <input checked="" type="checkbox"/> Total Population or Community Wide Intervention | |

Program Goal(s)

Provide high school tuition assistance to Mission Hill students that live in affordable housing to enable them to continue their education and finish high school.

Goal Status

Two Mission Hill students were given assistance so that they may finish the school year and go onto college. Both have full scholarships to college.

Program Year: Year 1**Goal Type: Process Goal**

Priority Health Need: Violence Prevention Program Name: Violence Prevention Health Issue: Violence and Trauma, Environmental Quality, Public Safety	
Brief Description or Objective	<p>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.</p> <p>NEBH supports youth basketball programs including PAL (Police Athletic League) at the Tobin Community Center. These programs occupy neighborhood youth and provides space for positive activity and social interactions with law enforcement.</p>
Program Type	<div> <input type="checkbox"/> Direct Clinical Services <input type="checkbox"/> Access/Coverage Supports </div> <div> <input type="checkbox"/> Community Clinical Linkages <input type="checkbox"/> Infrastructure to Support Community Benefits </div> <div> <input checked="" type="checkbox"/> Total Population or Community Wide Intervention </div>
Program Goal(s)	<p>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.</p>
Goal Status	<ul style="list-style-type: none"> • NEBH continued to provide security rounds throughout the Mission Hill area. • NEBH supported youth basketball programs at the Tobin Community Center. • NEBH worked with neighborhood organizations including the Boston Police Department and PAL to collaborate and provide violence prevention education and other activities for youth.
Program Year: Year 1	Goal Type: Process Goal

SECTION V: EXPENDITURES

Item/Description	Amount	Subtotal Provided to Outside Organizations (Grant/Other Funding)
CB Expenditures by Program Type		
Direct Clinical Services		
Community-Clinical Linkages	\$174,308.00	\$20,900.00
Total Population or Community Wide Interventions	\$620,024.00	\$110,896.00
Access/Coverage Supports	\$96,087.00	\$66,686.00
Infrastructure to Support CB Collaborations	\$13,817.00	
Total Expenditures by Program Type	\$904,236.00	
CB Expenditures by Health Need		
Chronic Disease	\$373,866.30	
Mental Health/Mental Illness	\$111,444.85	
Substance Use Disorders		
Housing Stability/Homelessness	\$59,738.35	
Additional Health Needs Identified by the Community	\$359,186.50	
Total by Health Need	\$904,236.00	
Leveraged Resources	\$111,744.00	
Total CB Programming		
Net Charity Care Expenditures		
HSN Assessment	\$1,050,289.33	
Free/Discounted Care		
HSN Denied Claims	\$219,873.96	
Total Net Charity Care	\$1,270,163.29	
Total CB Expenditures	\$2,286,143.29	

Additional Information	
Net Patient Services Revenue	\$215,745,800.00
CB Expenditure as % of Net Patient Services Revenue	1.06%
Approved CB Budget for FY24 (*Excluding expenditures that cannot be projected at the time of the report)	\$2,286,143.29
Bad Debt	\$636,401.82
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.	
NEBH subsidized \$500,000 in Behavioral Health Services outside of its CBSA.	

SECTION VI: CONTACT INFORMATION

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SECTION VII: HOSPITAL SELF-ASSESSMENT FORM

Office of the Massachusetts Attorney General

Hospital Self-Assessment Update Form – Years 2 and 3

Note: This form is to be completed in the two Fiscal Years following the hospital's completion of its triennial Community Health Needs Assessment

I. Community Benefits Process:

- Has there been any change in composition or leadership of the Community Benefits Advisory Committee in the past year? ☒ Yes ☐ No
 - If so, please list updates:
Ellen Walker, Executive Director, Mission Main Streets, is no longer on the Community Benefits Advisory Committee (CBAC). New CBAC members are: Michael Howe, Director, Health Equity & Special Projects, NEBH; Sydney Duong, Clinical Dietician, NEBH; and Courtney Wright, Executive Director, Mission Hill Main Streets

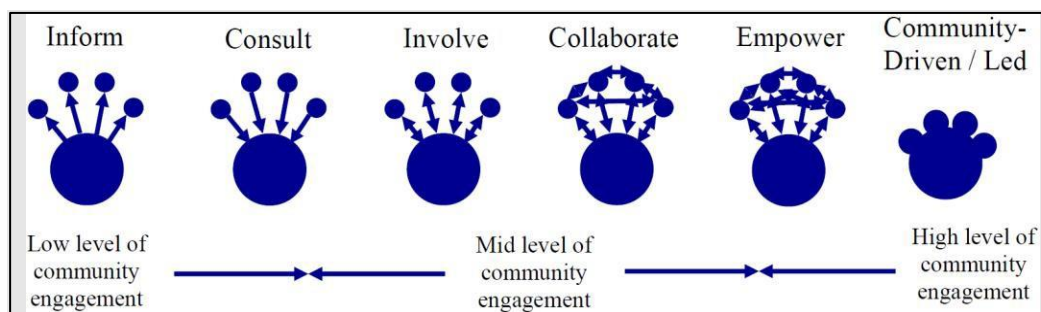
II. Community Engagement:

1. If there have been any updates to the key partners with whom the hospital collaborates, please indicate in the table below. Please feel free to add rows as needed.

Organization	Name and Title of Key Contact	Organization Focus Area	Brief Description of Engagement
Mission Hill Neighborhood Housing Services	Patricia Flaherty, Executive Director	Housing organizations	<p>Stable and Affordable Housing was identified as the number one social determinant of health in the NEBH and citywide CHNA.</p> <p>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.</p> <p>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.</p>

Mission Hill Link, Inc.	MaryAnn Nelson, President	Other	Transportation was identified as a major issue and social determinate of health in the CHNA. NEBH collaborates with Mission Link, Inc. to provide transportation to older adults living in Mission Hill. The Mission Link board is working with the City of Boston on enhancing the service.
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; 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	Housing organizations	Food Insecurity is a priority at RTH. 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 seniors and also contributed to their food pantry. The pantry provided emergency food for low-income families and individuals.

2. 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.



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.

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	Empower	Yes	Collaborate
Determining allocation of hospital Community Benefits resources/selecting Community Benefits programs	Empower	Yes	Collaborate
Implementing Community Benefits programs	Collaborate	NEBH implemented a housing program to help with housing stability, eviction prevention, connection to resources, etc. Food insecurity and basic household items as well as transportation continues to be a major need and priority.	Collaborate
Evaluating progress in executing Implementation Strategy	Involve	Yes	Collaborate
Updating Implementation Strategy annually	Involve	Yes	Collaborate

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

Click or tap here to enter text.

IV. Optional FY20 Question: Please describe how the COVID-19 pandemic impacted the hospital's process for engaging its community and developing responsive Community Benefits programs.

Click or tap here to enter text.

3. 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.

The meeting was held on September 26, 2023, at New England Baptist Hospital in the Potter Conference Room.

III. Updates on Regional Collaboration:

1. If the hospital reported on a collaboration in its **Year 1 Hospital Self-Assessment**, please briefly describe any updates to that collaboration, including any progress made and/or challenges encountered in achieving the goals of the collaboration.

For its FY 2022 CHNA, New England Baptist Hospital (NEBH) took the unique approach of designing and implementing a system-wide, highly coordinated CHNA and prioritization process across each of the system's 10 licensed hospitals, including BIDMC, encompassing 49 municipalities and six Boston neighborhoods. While NEBH focuses its Community Benefits resources on improving the health status of those in its CBSA experiencing the significant health disparities and 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. NEBH also collaborated with Boston CHNA-CHIP Collaborative and North Suffolk Integrated Community Health Needs Assessment Initiative. Together, BILH hospitals are identifying efficient ways to share information, address health needs, and identify common indicators to measure programmatic impact.

The New England Baptist Hospital Implementation Strategy includes a diverse range of programs and resources to address the prioritized needs within New England Baptist Hospital community benefits service area. The majority of New England Baptist Hospital's community benefits initiatives are focused on community partners and sub-populations due to identified disparities or needs. New England Baptist Hospital strategies include partnerships with youth and older adults, housing developments, and community agencies. Examples include collaborating with the Tobin Community Center, Mission Hill Neighborhood Housing Services and Roxbury Tenants of Harvard (RTH) on programs, and partnerships that provide and allow access to healthy food, events to help with social isolation, housing stability, and transportation. Additionally, New England Baptist Hospital collaborates with many community partners to support total population and community-wide interventions including the Food Programs at the Maria Sanchez House, One Gurney Street Apts., Frawley-Delle Apts., HERE House, Tobin Community Center and RTH, Summer Camp program at the Tobin Community Center, Sr. Celtics and the quarterly Sr. birthday parties, Resident Services Coordinator at Mission Hill Neighborhood Housing Services and the Mission Hill Link bus.

2. If the hospital entered a regional collaboration in the past year, please provide the information requested of regional collaborations on p. 5 in the **Year 1 Hospital Self-Assessment Form**.
Collaboration: NEBH worked collaboratively with each of the 9 other hospitals in the BILH system to design and implement a system-wide, highly coordinated CHNA and prioritization process across each of the system's 10 licensed hospitals.
Institutions involved: Anna Jaques Hospital, Beth Israel Deaconess Hospital – Milton, Beth Israel Deaconess Hospital – Needham, Beth Israel Deaconess Hospital – Plymouth, Beth Israel Deaconess Medical Center, Beverly and Addison Gilbert Hospitals, Boston CHNA-CHIP Collaborative, Lahey Hospital and Medical Center, Mount Auburn Hospital, North Suffolk Integrated Community Health Needs Assessment Initiative, and Winchester Hospital. **Brief description of goals of the collaboration:** NEBH collaborated with the other 9 hospitals in the BILH system to add rigor to the hospitals' assessments and planning processes, promoting alignment across hospital efforts and strengthening relationships between and among BILH hospitals, community partners and the community-at-large. NEBH also collaborated with Boston CHNA-CHIP Collaborative and North Suffolk Integrated Community Health Needs Assessment Initiative. **Key communities engaged through collaboration:** NEBH collaborated with the other 9 hospitals in the BILH system to engage the 49 municipalities and six Boston neighborhoods who were part of the individual Community Benefits Service Areas from each of the licensed hospitals. NEBH also collaborated with Boston CHNA-CHIP Collaborative and North Suffolk Integrated Community Health Needs Assessment Initiative.