

St. Elizabeth's Medical Center

A STEWARD FAMILY HOSPITAL



St. Elizabeth's Medical Center Community Benefits Plan **FY 2018**

2018

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Our Mission Statement



Mission Statement

Steward Health Care is committed to providing the highest quality care with compassion and respect.

We dedicate ourselves to:

- *Delivering affordable health care to all in the communities we serve*
- *Being responsible partners in the communities we serve*
- *Serving as advocates for the poor and underserved in the communities we serve*

Values

Compassion:

Providing care with empathy in such a way that the person experiences acceptance, concern, hopefulness and sensitivity

Accountability:

Accepting responsibility for continuous performance improvement, embracing change and seeking new opportunities to serve

Respect:

Honoring the dignity of each person

Excellence:

Exceeding expectations through teamwork and innovation

Stewardship:

Managing our financial and human resources responsibly in caring for those entrusted to us.



Overview

St. Elizabeth's Medical Center (SEMC), founded in 1868, is part of Steward Health Care System, the largest for-profit private hospital operator in the United States. Steward is a physician-led health care services organization committed to providing the highest quality of care in its communities and operates 39 community hospitals in the United States and the country of Malta. St. Elizabeth's primary service area is comprised of metro-Boston towns including the Allston-Brighton, Back Bay and West Roxbury neighborhoods of Boston, Brookline, Newton, Waltham, Weston and Watertown.

St. Elizabeth's is a 267-bed academic medical center affiliated with Tufts University School of Medicine and located in the Allston-Brighton neighborhood of Boston. Allston-Brighton is one of 22 neighborhoods in the city of Boston, Massachusetts. Located in the heart of an urban community, St. Elizabeth's serves a culturally diverse population. As an integral member of these ethnically and racially diverse neighborhoods, St. Elizabeth's strives to provide culturally and linguistically competent services for all patients.

Community Benefits Program

St. Elizabeth's designated Allston-Brighton and surrounding neighborhoods as the primary areas of focus. Planning for Community Benefits centers on the needs and activities of these communities, incorporates several hospital departments, and involves joint efforts with the area's health and human service agencies and centers. Our Community Benefits Program objective also complements our long-standing ministry as a Catholic hospital.

St. Elizabeth's maintains a Community Benefits Department that focuses on integrating care across the spectrum of hospital, primary, and community-based care. The Manager of Community Relations & Volunteer Services is responsible for assessment, development, implementation, review, and administration of our community benefits processes and programs through collaboration with various community partners, coalitions, and health centers.

The results and recommendations found in our most recent Population Health Impact Report (PHIR), which are outlined in this document, are designed to be the basis for strategic community health planning actions for St. Elizabeth's and its community partners.

2015-2016 Community Health Needs Assessment

In 2015-2016, St. Elizabeth's Medical Center completed a Population Health Improvement Report (PHIR). The purpose of this process was to use data analysis to identify the health priorities in our service area. We looked at the assets and deficits in the community in order to improve existing programs currently in place through our collaborative community network. In addition, we identified emerging health issues that may require programmatic intervention or the development of new strategies going forward.

The Massachusetts Department of Public Health defined St. Elizabeth's service area and we used this as the designated geographical area for the report. This included the cities and towns of Allston-Brighton, Back Bay, Brookline, Newton, Waltham, Watertown, and West Roxbury, with populations totaling approximately 360,000. We pulled extensive data for the report from online data sources (including the U.S. Census, Mass CHIP, the Federal Reserve Bank, and others), from Community Provider and Community Resident Surveys and from two focus groups comprised of community members from diverse backgrounds.

After compiling information from all of these sources, we developed the PHIR as a framework to guide the discussion for what St. Elizabeth's, in coordination with community partners, can do to improve the health of local populations. Our aim is to enhance the patient experience, improve population health, and reduce per capita medical costs. We will focus our community benefits efforts towards individuals and families who are most vulnerable due to unemployment, poverty, substance abuse, mental health illness, and chronic disease. Our data indicates that race and ethnicity play a role in disease susceptibility. We will apply resources to understanding and compensating for this phenomenon.

We recommend the following for the St. Elizabeth's Medical Center FY 2018 Community Benefits Plan. This plan is a working document that we can amend at any time.

Community Benefits Plan

Priority 1: Chronic Diseases: Cardiovascular Health

In many of the areas St. Elizabeth's serves, heart disease is the leading causes of deaths due to chronic disease. Brookline and Newton have higher percentages of deaths due to heart disease than both state and national rates. Programs providing cardiovascular health screenings are essential in early identification of heart disease. Identified early, the consequences of these diseases can be mitigated and reduce the number of deaths that they cause each year.

Target Population: All

Statewide Priorities: Supporting Health Care reform; chronic disease management in disadvantaged populations; reducing Health Disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth's Community Relations

Potential Community Partners: Oak Square YMCA

Three-Year Goals:

- Educate community members about the importance of early screening as a means to prevent heart disease.
- Identify and coordinate with partners in the surrounding communities and create regular cardiovascular screening and education programming.
- Host free blood pressure screening events within the community at least quarterly.

Estimated cost: Approximately \$4,000

Costs associated with event planning (flyers, marketing support, giveaway items and incentives for attending) and compensation for event staffing.

Priority 2: Chronic Diseases: Diabetes

Promoting healthy behaviors such as an active life, healthy eating, and disease self-management are important to chronic disease maintenance. St. Elizabeth's will support programs listed below focused on promoting healthy lifestyles and on increasing awareness of diabetes.

Diabetes Support Group- free diabetes support group meetings open to all individuals with diabetes in the community and serve as a discussion forum.

TEEN Program- a pediatrician-led program designed for adolescents ages 10-20 who are prone to be overweight or are overweight. The program incorporates exercise, education, and empowerment tools aimed at promoting a healthy lifestyle.

Farmers Market- the Oak Square Farmers Market provides access to healthy foods open every week from June through October and is near several local bus routes and the green line.

Farmers Market Voucher Program- Provides diabetic patients from St. Elizabeth's community with vouchers to use at local farmers markets to buy fresh fruits and vegetables. Participants enroll through the St Elizabeth Diabetes Education Program where we are monitoring their health outcomes. St. Elizabeth's will continue to fund programs for Carney Hospital and St. Mary's Center for Women and Children in Dorchester, MA.

Target Population: Allston-Brighton community

Statewide Priorities: Supporting health care reform; chronic disease management in disadvantaged populations; reducing health disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth's Community Relations & Diabetes Center, St Mary's Case Manager

Potential Community Partners: Mass Farmers Market, Oak Square YMCA, TEEEN, St Mary's Center for Women & Children, Carney Hospital

Three-Year Goals:

- Enhance community knowledge of programs available and increase participation in various programs.
- Promote education in the community around diabetes and healthy life styles choices including food access and incorporating healthy fruits and vegetables into daily meals.
- Demonstrate effectiveness of programs using health indicators and through tracking patient data.

Estimated cost: \$64,966 (TEEN – \$7,500, Farmers Market - \$2,500, Farmers Market Voucher Program - \$54,966)

Priority 3: Chronic Diseases: Cancer Care

In many of the areas St. Elizabeth’s serves, heart disease, followed by cancer are the leading causes of death from chronic disease. The rates of cancer found were at or above the state average in all towns with available data, and Waltham and Watertown have higher percentages of deaths due to cancer. Programs providing cancer screenings are essential in early identification cancer. Identified early, the consequences of these diseases can be mitigated and reduce the number of deaths that they cause each year.

Target Population: Adults in all towns within the PSA

Statewide Priorities: Supporting health care reform; chronic disease management in disadvantaged populations; reducing health disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth’s Community Relations and the St. Elizabeth’s Medical Center Cancer Care Committee

Potential Community Partners: American Cancer Society, Dana Farber Cancer Institute, Facing Cancer Together

Three-Year Goals:

- Determine which types of cancer are the most prevalent across the hospital PSA and which types of cancer have the highest fatality rates in Waltham and Watertown.

- Educate community members about the importance of screening and prevention in partnership with the American Cancer Society.
- Participate in regular screening and prevention events to address the most prevalent types of cancer in the hospital's PSA.

Estimated cost: Approximately \$4,000;

Costs associated with event planning (flyers, marketing support, giveaway items and incentives for attending) and compensation for event staffing.

Priority 4: Chronic Diseases: Orthopedics

Our multidisciplinary Bone and Joint Center brings together a team of orthopedic and sports medicine specialists to address joint replacements, sports injuries, trauma and even arthritis. Through programs and partnerships, St. Elizabeth's will provide resources and education to the community on living both a healthy and active life.

Target Population: All

Statewide Priorities: Supporting Health Care reform; chronic disease management in disadvantaged populations; reducing Health Disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth's Community Relations, Department of Orthopedics, Boston Orthopedic Hand Center

Potential Community Partners: Oak Square YMCA

Three-Year Goals:

- Work with Department of Orthopedics to enhance community knowledge of services available and promote education in the community around healthy life styles choices.
- Provide various screenings at community events including carpal tunnel and hand, foot and ankle screenings.

Priority 5: Substance Abuse

Through programs and partnerships, St. Elizabeth's will provide extensive funding, resources, and education to address the substance abuse problem in the community.

PAATHS Program- Providing Access to Addictions, Treatment, Hope and Support Program in collaboration with the Boston Public Health Commission, Carney Hospital, and local community health centers.

Allston-Brighton Substance Abuse Task Force- a coalition of community agencies and residents that mobilizes youth, families, community members and leaders to prevent and reduce substance abuse among youth and adults in our community.

Medical Legal Partnership- St. Elizabeth's has experienced a dramatic increase in substance abuse and Neonatal Abstinence Syndrome (NAS). MLP will provide attorneys and paralegals to socially high-risk pregnant and parenting women (OB-GYN, Comprehensive Addiction Program). The MLP will work alongside our physicians to determine what these socially high-risk patients need to live healthier lifestyles.

Target Population: Adults and youth in the community with substance abuse disorders

Statewide Priorities: Supporting health care reform; chronic disease management in disadvantaged populations; reducing health disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth's Community Relations, Access to Care, Bureau of Addictions Prevention, Treatment and Recovery Support Services, Boston Public Health Commission, SECAP

Potential Community Partners: Boston Public Health Commission, Allston-Brighton Substance Abuse Task Force, Medical Legal Partnership

Three-Year Goals:

- Provide ongoing support and partnership to the Allston-Brighton Substance Abuse Task Force.
- Continue to support Substance Abuse Navigator to serve as a resource for community members in need of support for their substance abuse disorder.

- Reduce the amount of fatal and non-fatal overdoses within the St. Elizabeth’s service area.
- Integrate attorneys into OB-GYN Practice providing assistance during pregnancy to educate on the best plan of action for the fetus, which would ultimately reduce the number of infants with NAS.

Estimated cost: \$198,779 (PAATHs- \$57,526 ABSATF- \$86,063 MLP \$55,190)

Priority 6: Mental Health

Behavioral Health Navigator- In 2014, as part of a Steward system-wide initiative, St. Elizabeth’s started a Behavioral Health Navigator program. Our navigator works to create structures and processes to support the successful integration of newly insured behavioral health patients with primary care and outpatient services. The focus is to alleviate gaps in care and provide a continuum of quality services to improve overall patient health.

ABHC Mental Wellness Committee- The committee is working to promote and establish a training curriculum and create a “Safe Space Ambassadors/Allies Program” where individuals can attend multi-series trainings on how to be a front-lines “safe” person.

Target Population: Adults and youth in the community with behavioral health and substance abuse disorders

Statewide Priorities: Supporting health care reform; chronic disease management in disadvantaged populations; reducing health disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth’s Community Relations, Behavioral Health Navigator Program Coordinator

Potential Community Partners: Allston Brighton Health Collaborative

Three-Year Goals:

- Work with our Behavioral Health Navigator to educate community members about behavioral health programs.

- Increase the utilization rate of behavioral health services among individuals within the hospital service area.
- Attend Mental Wellness Committee Meetings and collaborate with our own Behavioral Health Navigator.

Estimated cost: Approximately \$4,000

Costs associated with event planning (flyers, marketing support, giveaway items and incentives for attending) and compensation for event staffing.

Priority 7: Community Collaboration

St. Elizabeth’s will provide significant funding to support the Allston Brighton Health Collaborative, a collaboration of community organizations devoted to working together to promote and improve the health and wellbeing of the communities of Allston and Brighton.

Target Population: Residents of Allston and Brighton

Statewide Priorities: Supporting Health Care reform; chronic disease management in disadvantaged populations; reducing health disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth’s Community Relations

Potential Community Partners: Allston Brighton Health Collaborative, Allston Brighton Substance Abuse Task Force, Charles River Community Health Center, Charlesview Community Center, Presentation School Foundation, Boston College, all interested community organizations and residents

Three-Year Goals:

- Leverage greater funding resources to support community health programming that benefits the Allston and Brighton neighborhoods.
- Improve access to and utilization of health resources through increased awareness of resources available.
- Increase access to information on how to live a healthier lifestyle.

Estimated cost: \$71,151

Priority 8: Community Donations

Using hospital guidelines, St. Elizabeth's will provide financial support to our community organizations whose programs and events aid or support targeted, underserved populations. The receiving organizations provide direction as to how best to utilize funds to assist marginalized patients due to immigration status, income, lack of insurance, etc.

Target Population: Underserved, vulnerable populations

Statewide Priorities: Chronic disease management in disadvantaged populations; reducing Health Disparities; promoting wellness of vulnerable populations

Responsible Parties: St. Elizabeth's Community Relations

Potential Community Partners: St. Elizabeth's will continue to support our community partners with annual sponsorships and will evaluate new sponsorship requests to support those that align with our Community Benefits Plan.

Three-Year Goals:

- Financially support organizations that provide continuum of care services to vulnerable populations after hospital discharge.
- Process, evaluate, and respond to all requests for support received by community organizations adhering to hospital guidelines.

Estimated cost: \$30,000

Priority 9: Support Groups, Classes, and Donated Space

St. Elizabeth's will offer hospital space, free of charge, to community groups and organizations whose aim is to improve health and wellbeing of community members.

Target Population: Underserved, vulnerable populations

Statewide Priorities: Chronic disease management in disadvantaged populations; reducing Health Disparities; promoting wellness of vulnerable populations

Three-Year Goals:

- Respond to community needs by providing free resources that would not otherwise be available.

- Serve as a community resource for groups seeking space to hold meetings on health related topics.

Responsible Parties: St. Elizabeth's Community Relations

Potential Community Partners: American Red Cross, Alcoholics Anonymous, Narcotic Anonymous

Estimated cost: \$0

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