Baystate Medical Center
Springfield, Massachusetts

FY 2020 Community Benefits Annual Report
October 1, 2019 – September 30, 2020

As filed with Massachusetts Office of the Attorney General
## EXECUTIVE SUMMARY

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>Baystate Medical Center 759 Chestnut Street, Springfield, Massachusetts 01199 413-794-0000 baystatehealth.org</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIMARY SERVICE AREA</td>
<td>Hampden County</td>
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<tr>
<td>FACILITY TYPE</td>
<td>Not-for-profit</td>
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<tr>
<td>TOTAL LICENSED BEDS</td>
<td>734</td>
</tr>
<tr>
<td>NUMBER OF EMPLOYEES</td>
<td>6,122.5 FTEs*</td>
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<tr>
<td>YEAR ESTABLISHED</td>
<td>1883</td>
</tr>
<tr>
<td>ETHNIC MIX OF PATIENTS</td>
<td>52.0% White; 33.0% Hispanic; 10.7% Black; 1.3% Asian; 0.1% American Indian or Alaskan Native; 0.1% Native Hawaiian or Pacific Islander; 2.8% Other</td>
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<tr>
<td>PAYER MIX OF PATIENTS</td>
<td>40,500 Inpatient Discharges 43.54% Medicare; 26.93% Medicaid; 24.45% Managed Care; 1.26% Non-Managed Care; 3.82% Other</td>
</tr>
<tr>
<td>ANNUAL EMERGENCY SERVICES STATISTICS</td>
<td>65,478 Emergency Service Visits 33.75% Medicaid; 2.69% Free Care; 11.73% Healthnet; 0.51% Commonwealth Care; 51.33% Other</td>
</tr>
<tr>
<td>PRESIDENT/CEO</td>
<td>Nancy Shendell-Falik, RN, MA President, Baystate Medical Center Senior Vice President of Hospital Operations, Baystate Health Baystate Health 759 Chestnut Street, Springfield, Massachusetts 01199 413-794-5516 <a href="mailto:nancy.shendell-falik@baystatehealth.org">nancy.shendell-falik@baystatehealth.org</a></td>
</tr>
<tr>
<td>COMMUNITY BENEFITS CONTACT</td>
<td>Annamarie Golden  Director, Government and Community Relations  280 Chestnut Street, 6th Floor, Springfield, Massachusetts 01199 413-794-7622 <a href="mailto:annamarie.golden@baystatehealth.org">annamarie.golden@baystatehealth.org</a></td>
</tr>
<tr>
<td>HOSPITAL SERVICES</td>
<td>Baystate Medical Center is a 734-bed academic medical center based in Springfield, Massachusetts. Baystate Medical is home to western New England’s only tertiary care referral medical center, Level I Trauma Center and Level II Pediatric Trauma Center, and neonatal and pediatric intensive care units. The medical center also includes Baystate Children's Hospital and the Wesson Women and Infants’ Unit, and is the regional campus of the University of Massachusetts Medical School - Baystate. Baystate Medical is also the community’s major referral hospital, providing the highest level of care for conditions such as cancer, acute, and chronic cardiovascular illness, nervous system illness, digestive illness, and other diseases that affect the major organs of the body.</td>
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<tr>
<td>DHCFP ID</td>
<td>2339</td>
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<tr>
<td>HEALTH SYSTEM</td>
<td>Baystate Health, Inc.</td>
</tr>
<tr>
<td>COMMUNITY HEALTH NETWORK AREA (CHNA)</td>
<td>#4 Community Health Connection (Springfield)</td>
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*Based on FY 2020 data
COMMUNITY BENEFITS MISSION STATEMENT

Baystate Medical Center (BMC) carries out Baystate Health’s (Baystate) mission “to improve the health of the people in our communities every day with quality and compassion.” In keeping with this commitment to improve health, BMC provides many valuable services, resources, programs, and financial support - beyond the walls of the hospital and its facilities and into the communities and homes of the people it serves. As BMC is part of Baystate’s integrated health care system it is able to provide further benefits to communities served through coordination within and among the system’s various entities.

BMC shares and supports Baystate’s Community Benefits Mission Statement¹ “to reduce health disparities, promote community wellness, and improve access to care for vulnerable populations.” Baystate embraces the definition of health to include social determinants, such as economic opportunity, affordable housing, education, safe neighborhoods, food security, social and racial justice, and arts/culture – all elements that are needed for individuals, families, and communities to thrive.

BMC aims to improve the health status of individuals and communities by focusing its limited community benefits and charitable resources on upstream, population-based initiatives and interventions. In 2016, Mark Keroack, MD, MPH, President and CEO, Baystate Health, signed the American Hospital Association’s #123Equity Pledge. With support from the Office of Government and Community Relations, Baystate is investing resources to increase awareness and build capacity among its 12,000 team members and community partners on related topics including cultural humility, health equity, social determinants of health, and implicit bias in health care. In FY 2020, Baystate also adopted the Dignity Model, created by Dr. Donna Hicks, as a framework to strengthening relationships in the workplace among employees, leaders, and patients. The Dignity Model is also a tool for conflict solution. Through its Elevating Dignity dialogue series and Baystate’s leadership commitment to reading “Leading with Dignity” and putting it into practice, the hospital system aims to enhance the organization’s overall success.

BMC is committed to applying a health equity lens to current and all future community health planning and improvement efforts. This will be demonstrated through future hospital community benefits investments that support projects and initiatives that are intentional in how they address health equity (health disparities and inequities). BMC looks forward to sharing its health equity journey through annual status reports filed and posted electronically on the Equity of Care website, including the actions taken to date, challenges faced, and results from these efforts, and lessons learned that may be helpful for other organizations.

To fulfill Baystate’s Community Benefits Mission, BMC will:

- Focus on prevention and increasing access to quality, culturally humble health care;
- Focus on amelioration of root causes of health disparities and inequities, including related social and economic determinants;
- Measure improvements in community health status that result from these efforts; and
- Invest the time, talent, and resources necessary to accomplish these goals.

¹ Baystate Health’s Board of Trustees adopted a community benefits mission statement on July 13, 2010.
**BMC PRIORITY POPULATIONS**

- Children and youth
- LGBQ+ and transgender youth
- Older adults
- People living on low-or-poverty level incomes
- People living unsheltered/homeless
- People living with disabilities
- People of color, particularly Latinos and Blacks
- People reentering society after incarceration
- People with mental health and/or substance use disorder (especially those with dual diagnoses)
- Refugees, both documented and undocumented

BMC’s priority populations are publicized on the hospital website at [baystatehealth.org/communitybenefits](http://baystatehealth.org/communitybenefits) and the Massachusetts Attorney General’s website.

**KEY ACCOMPLISHMENTS OF REPORTING YEAR**

The BMC Community Benefits Advisory Council (CBAC) continues to meet monthly (2nd Thursday) and provides oversight to Baystate’s Better Together Grant Program. Membership includes hospital team members and community stakeholders. Due to COVID-19, meetings were switched to a virtual platform.

In FY 2020, Baystate hosted its first ever system-wide CBAC retreat. This full-day event in November 2019 brought together members from all the hospital CBACs, employees, and community members alike, to share on their “CBAC story.” Short presentations were held to describe key successes from each group and lessons learned. Annamarie Golden, Director of Community Relations, Baystate shared on the history of the Community Benefits (CB) program and presented CB expenditure trends over the past few years. Frank Robinson, Vice President of Public Health, Baystate Health, also shared on the system’s Anchor Mission work. The second half of the day was dedicated to working on revising Baystate’s CB vision and mission statements, as well as the CBAC charter and membership process. This work was not finalized at the retreat, but continues to develop.

BMC continues to be a member of the Coalition of Western Massachusetts Hospitals and Insurer (Coalition), a partnership between eight (8) not-for-profit hospitals and an insurer in western Massachusetts that includes: Baystate Medical Center, Baystate Franklin Medical Center, Baystate Noble Hospital, Baystate Wing Hospital (including Baystate Mary Lane Outpatient Center), Cooley Dickinson Hospital, Mercy Medical Center (part of Sisters of Providence Health System, a member of Trinity Health - New England), Shriners Hospitals for Children – Springfield, and Health New England, a local health insurer whose service area covers the four counties of western Massachusetts.

The Coalition formed in 2012 to unite hospitals in western Massachusetts, share resources, and work in partnership to conduct their community health needs assessments (CHNA) and address regional health needs. BMC worked in collaboration with the Coalition to conduct the 2019 CHNA, and is already in collaboration with its community advisory body, the Regional Advisory Committee (RAC), for the 2022 assessment. The 2019 CHNA was conducted to update the findings of the 2016 assessment so BMC could better understand the health needs of the communities served and meet its fiduciary requirement as a tax-exempt hospital.
The Coalition engaged **Public Health Institute of Western Massachusetts (PHIWM)** based in Springfield, Massachusetts, as the lead consultant to conduct the CHNAs. PHIWM was supported by three other consultant teams: Collaborative for Educational Services, based in Northampton, Massachusetts; Franklin Regional Council of Governments, based in Greenfield, Massachusetts; and Pioneer Valley Planning Commission (PVPC), based in Springfield, Massachusetts.

Following the CHNA, BMC developed a **Strategic Implementation Plan (SIP)**, formally known as the Implementation Strategy, required by Section 501(r), which documents the efforts of BMC to prioritize and address health needs identified in the 2019 CHNA. For the period of 2020-2022, BMC, in partnership with its CBAC, identified five (5) high-priority health needs to be the focus of current and future hospital community health planning efforts. BMC will address the focus areas through existing hospital resources, programs, services, and grant investments, as well as future grant investments and in-kind resources. These strategic priority health needs, as identified through the 2019 CHNA and prioritization process are:

1. **EDUCATION**: BMC continues its commitment to increase access to educational and workforce opportunities, especially for priority populations identified in the 2019 CHNA.

2. **MENTAL HEALTH AND SUBSTANCE USE**: BMC recognizes an urgent need for improved access to mental health services and increased resources for substance use treatment and prevention.

3. **BUILT ENVIRONMENT**: Residents of the BMC service area continue to encounter barriers to care caused by many built environment elements including transportation, access to care, and food insecurity.

4. **FINANCIAL HEALTH**: BMC recognizes the importance of economic dignity and wealth creation for low- and moderate-income families as a predictor of health. BMC will continue to lift up and meet this need through its community partnerships and training/education plans.

5. **VIOLENCE AND TRAUMA**: The BMC service area has a great need for increased resources and coordinated care for individuals and families who are at-risk of, or have experienced(ing) various forms of violence and trauma. Gun violence in particular is of interest to BMC and was a sub-focus in the 2019 CHNA.

**Education**

**Baystate Springfield Educational Partnership (BSEP)**: The BSEP program engaged 285 (unique number of participants is smaller) high school students from all Springfield High Schools and several charter and private schools. FY 2020 accomplishments include:

- BSEP program engaged 209 (unique number of participants is smaller) high school students from all Springfield High Schools and several charter and private schools. Numbers were impacted by program transitioning to virtual environment.
- In May 2020, BSEP conducted a series of one-time workshop on-line for 103 students that focused on COVID-19 information, mental health support, and changes to activity in the hospital.
- Coordinated four pathology–based summer workshops for 45 students.
- Coordinated summer internships at Baystate Medical Center for 24 students. BSEP trained (7) students as certified nursing assistants, two (2) behavior resource technicians, two (2) Operating Room Assistants, and several other areas supporting changed hospital operations including the assembling of swab testing kits.
- Placed 18 students in work experience throughout the year as part of the Workforce Innovation and Opportunity Act (WIOA) program and other funded workforce development initiatives.
Increases in the minimum wage are beginning to impact the number of students that can have a work experience under the grant.

**Five rising BSEP seniors participated in breast cancer research through an online program with the Pioneer Valley Life Science Institute (PVLSI).**

**Coordinated the Baystate Summer Academy program virtually for 17 undergraduate students from the local area. It ran for 10 weeks once a week over the summer of 2020.**

**Awarded 26 former BSEP participants $25,000 in scholarships to support their pursuit of undergraduate and graduate education. Total Baystate scholarships awarded to date now exceeds $750,000.**

**The second level public health class created a public service announcement (PSA) on social isolation. Roll out was complicated due to the pandemic. This PSA was created in partnership with Focus Springfield (local public access television station).**

The **Community Liaison & Outreach Specialist’s** purpose at the Baystate Mason Square Neighborhood Health Center (BMSNHC) is to reach out and identify unmet community health needs by finding and identifying people who are medically vulnerable and underserved in the Mason Square and surrounding communities, as well as assist patients with how to access affordable, high quality, cost-effective health care. The outreach specialist identifies unmet community health needs and provides outreach to underserved residents of the Mason Square community via the coordination of health education focus groups, a community advisory board, community health forums, fairs, and collaboration with various community stakeholders. The community liaison serves on the Mason Square Health Center's Community Advisory Board (CAB). The purpose of the CAB is to be a liaison between the health center and the community to ensure that services provided meet the expectations of the community, while improving the health of patients it serves. The CAB continued to convene virtually during the pandemic. All CAB members received an emergency preparedness kit totaling $1,349.52 during COVID-19 Pandemic and National Emergency Preparedness Month.

As imagined, the role of the Specialist and their activities were greatly impacted by COVID-19 precautions taken by BMC to have staff work from home and visitor restrictions at the clinic. Before the state-wide shut down, the Community Liaison & Outreach Specialist was able to host educational events at the health center for patients in honor of HIV/AIDS Awareness Month, Child Health Month, National Diabetes Awareness Month, Healthy Heart Month, Nutrition Awareness Month and Colon Cancer Awareness Month. Patient engagement ranged from 20-70 at each event. Other key initiatives coordinated in FY 2020 included:

**Great American Smoke Out:** On Thursday 11/15/19 I coordinated an Annual Mini Great American Smoke Out Fair in the front lobby of the BMSNHC from 10am-2pm for approximately 60 people. I was joined by Springfield Health & Human Services Tobacco Program. We displayed information as follows:

- **Black Men of Greater Springfield 1st Annual Thanksgiving Luncheon/Resource Festival:** On Saturday 11/17/19 I coordinated a resource fair and coat drive at DeBerry School. There were 20 resource vendors in attendance for 400+ people. I also assisted the Noble Warrior Youth Sports & Mentoring Initiative Program with collecting and giving out 400+ coats to a number of people who came in for coats only.
- **21st Annual Coat Drive:** We collected 540 coats; 60 pairs of gloves; 30 caps; 20 scarves; and 25 other items from staff and various community organizations such as the; The Noble Warriors
Youth Sports & Mentoring Initiative Program (150 men, 60 teen boys and 25 small children coats); Mason Square C-3 Policing (50 coats); Burlington Coat Factory (80 coats); and doctors & other staff of Baystate Mason Square Neighborhood Health Center (175 coats); We gave out all 540 coats and all of the other items. We received 25 coats that were valued @ $125 each, while several other new coats had various values.

- **Volunteers:** Coordinated 3 volunteers to assist the parents of children who had doctors’ appointment in the health center’s children playroom Monday-Friday 8am-5pm @4 hours per day each volunteer for a combine total of 1,100 hours from October 1, 2019-February28, 2020. Approximate value $13,000.00.

- **COVID-19 Personal Protective Equipment (PPE) Donation:** Community Liaison & Outreach Specialist requested and teamed up with the Delta Sigma Theta Sorority, Inc. and the Black Men of Greater Springfield (BMOGS) to provide the Third Baptist Church Food Pantry staff and volunteers with the necessary PPE to continue providing food for the community in a safe manner. The Deltas donated 50 face masks and 4 large bottles of hand sanitizers. The BMOGS donated a box of gloves @100 pairs and 50 face masks.

- **Summer Basic Needs:** Due to the heat and the COVID-19 Pandemic, several patients found themselves in need of items that they don’t usual make a request for. The Community Liaison utilized social media to assist with providing 6 patients who requested the following items; two refrigerators (valued at $1,000 each), three air conditioners (valued at $200 each), and one microwave (valued at $129).

- **Patient Story:** In August 2020, the Community Liaison was able to find resources for a family of four who lost everything in a fire. Members of the Mason Square C-3 group donated clothes to the mother and three children.

The **Baystate Health Sciences Library’s Patient and Consumer Health Information Services** continues a service model going into the fourth year since consolidating the service locations for consumer health information services and the Baystate Health Sciences Library. This occurred in the fall of 2016 with the elimination of the Consumer Health Library location now used by Pharmacy Services, at 3600 Main St. and that had once provided a dedicated librarian position. Walk-in information services to the general public has since then been offered on site at Baystate’s 9,700 sq. ft. physical library space, assisting patients and their families seeking directions to appointments. Patients and family members often had been coming to the Library from the nearby day surgery services down the hall, with persons arriving for appointments wanting to obtain some basic information on their condition or procedures, or, asking how to best help a family member or other loved one in time of health-related concern. The number of visits in the first two quarters of FY 2020 had been running parallel with the previous year, averaging 2 walk-in visits per day seeking some type of assistance, and over 100 consumer health information queries submitted either in person, by email or phone, or through the Library’s “Ask a Librarian” feature through the patient portal or the Library’s Consumer Health Information page on the Library website.

**Consumer Health Information space.** A corner of the library has been designated as a consumer health information space, where newsletters, popular health-related books, videos, and now the library’s new graphic medicine collection are all shelved with graphic medicine, one of the newest and most popular genres in health information that is helpful to both the provider and the health consumer. Materials are all conveniently located close to the library’s three-dimensional anatomical models. Many community residents, patients, families, and other members of the general public also had been regularly coming to the library to look up general health information or to use the library’s personal computers to access health related web sites or licensed resources that the library subscribes to. Most often health consumers’ requests involve identifying and locating general health information and library staff would be available
weekdays between 7 am and 5 pm to assist. When Covid-19 hit however, the Library was accessible to certain employees only via authorized employee ID badge access. This change corresponded to the Baystate suspension of access to visitors, volunteers, vendors and other non-employees as a mitigation and safety response to the pandemic. As a result, there were no further in-person visits to the Library by the general public since early March of FY 2020.

**Library walk-ins.** Since the previous year, given the minimal on-site staffing and suspension of visiting hours or public access, walk-in assistance at the Service Desk or in the Consumer Health section, came to an abrupt halt before the end of the second quarter of FY 2020. Instead, any inquiries that made their way to the Library were through virtual means.

“Ask a Librarian” patient portal feature. Many members of the general public living close to Baystate, current and former patients, as well as local residents in the larger community continued to contact the library either via email, phone calls, even regular postal mail, or through the Baystate patient portal’s “Ask a Librarian feature” which is also accessible through the Consumer Health Information subject guide or via the library’s website. Most of the inquiries have been searched and answered by the Library Manager, at times with participation of other library staff. The “Ask a Librarian” feature has been the primary means of assistance for FY21 because of the inaccessibility of the physical space, and because of its presence on the Baystate public website or patient portal.

While questions still generally either ask for assistance in obtaining test results or information about diagnostic and other tests or records of medical procedures, or ask for basic, background health related information. What was unique in FY 2020 was that the numbers of request here also dipped precipitously in the third quarter because all elective procedures and surgeries were suspended. Thus, consumers were less apt to be using the patient portal or gathering basic information in advance of a procedure.

**Covid-19 Subject Guide for Health Consumers.** Instead, a new and significant category of information emerged, namely any information dealing with the dangerous virus that was attacking the health and well-being of people around the globe, namely Covid-19. As with any consumer health question, people were interested in background information and especially signs and symptoms of the disease. There was so much public misinformation and fear that even the medical profession could not predict or explain major aspects of the virus. It was critical that the Library launched a separate subject guide for health professionals and one for consumer information about Covid-19 and aimed especially at dispelling false information. The consumer Covid-19 subject guide relied heavily on non-commercial information resources, and especially government sites such as CDC, the Massachusetts Department of Public Health, the World Health Organization and other trusted organizations. Some of the information requests were augmented with PDFs of sections form the major Library licensed databases, most of which offer a section on consumer health in both English and Spanish. As always, the Library avoids any controversial information that might contradict one’s medical provider and consistently reminds the patient or consumer that the Ask a Librarian service does not dispense medical advice or replace a conversation with their health care provider. Instead, it is hoped that the information provided can elevate anyone’s understanding to better converse with their provider and raise important questions. Common questions included, “how do I know if I have the virus? Or, can I get Covid from our family pets? Or still, “what are the most important safety measures to avoid infection?” As the months went by, people asked about incubation periods, the best types of masks, Covid test sites and when and how a vaccine might be available. Most persons were referred to the subject guide and provided with copies of database consumer information or links to trusted websites.
The University of Massachusetts Medical School – Baystate (UMMS-Baystate) regional campus, home to the Population-based Urban and Rural Community Health (PURCH) medical student track, has become a trusted partner to the Baystate Health CBACs. Representatives from the PURCH track are active participants at each group and collaborate with members on initiatives such as recruitment of UMMS-Baystate Community Faculty, Population Health Clerkship preceptors, Standardized Patients, Admissions Committee interviewers, and Poverty Simulation participants. The PURCH track community-based educational experience is framed and informed by the work of CBACs in addressing CHNA priority goals. In the BMC service area, PURCH students have been able to partner with community organizations such as the Martin Luther King Jr. Family Services and Square One.

Mental Health and Substance Use

Hampden District Attorney Anthony D. Gulluni along with Baystate Health, Trinity Health of New England, and the Center for Human Development have collaborated to provide free Narcan to participating municipal police and fire departments throughout Hampden County. Baystate Pharmacy coordinates the purchasing and distribution (as supplies last) to registered municipal police and fire departments. The goal is for first responders to be able to access free Narcan quickly in the event they run low on supply. To date, about 18 municipal departments have enrolled in the program with over 1,300 doses of Narcan given.

Built Environment

BMC is committed to reducing health disparities in Springfield and has invested significant resources in its three community-based health centers and a pediatric clinic located in Springfield’s low-income neighborhoods that have both HPSA and MUA/MUP designation. BMC health centers are primary care first-contact sites for thousands of underserved, low-income people. In FY 2020, these community training sites for the Medical Residency Program provided continuity of care for 30,946 unduplicated patients and over 98,122 patient encounters/visits annually. Through the various sponsored programs (grants), BMC is able to provide enhanced services such as HIV/STI/Hepatitis C screening and treatment to high risk, vulnerable populations who share a disproportionate burden of certain diseases.

Baystate Regional Tuberculosis Program (BRTP) is housed at Baystate Mason Square Neighborhood Health Center. The TB Clinic registered nurses continued to actively manage medications management to care of patients who could not be supported by their local Board of Health nurses. Patients are still presenting with underlying diseases and a greater number of patients need coordination of care for suspect, latent or active tuberculosis. The majority of patients served are non-English speaking immigrants who have been referred for examination and treatment after receiving a positive PPD test, positive blood lab test (T-spot or QuantiFERON) or with a history of TB exposure in their native country. The clinic also see patients who are US born or from other countries that have a Positive T-Spot and QuantiFERON lab tests, abnormal chest x-rays and abnormal CT scans findings. The TB Clinic serves both adult and pediatric patients. Patients continue to arrive from Nepal, Burma, and Somalia in large numbers, with an increase in arrival of patients from Iran, Iraq, Kenya, Russia, Vietnam and various regions of Africa several times during the year.

For FY 2020, BRTP saw a total of 729 patients for physician visits and 598 patients for nurse visits. The pandemic hit BRTP greatly and had a decrease in the amount of patients that were seen during the FY. 317 patients were seen for physicians’ visits and 144 patients for nurse visits. Telehealth visits were implemented to reduce in person contact. This was a difficult situation because some patents weren’t
answering their calls. The ones that we were able to reach by phone weren't following up on the physicians recommendations on the doing labs and Chest X-Rays. The ones that were following the recommendations started receiving their medication by pharmacy deliveries and sometimes, no one was home to receive the medication. Additionally, several TB Clinics in Massachusetts closed during the year sending an influx of referrals to BRTP. Some patients drove almost two hours for a consultation. The patients weren't happy about the idea of driving too far to see a provider when they could have been seen in their area of that clinic hadn't been closed. Some of the patients needed to be on treatment, and for this reason, they have to come back every month for a nurse visit.

**MIGHTY (Moving, Improving and Gaining Health Together at the Y)** is a community-based, multi-disciplinary, pediatric, obesity treatment program. It is held at multiple locations including the YMCA of Greater Springfield, YMCA of Greater Westfield, YMCA in Greenfield, and most recently, the Scantic Valley YMCA located in Wilbraham. MIGHTY includes 14 two hour sessions of physical activity, nutrition, and behavior modification, over a one year period. It targets children and adolescents age 5-21. Sessions are augmented by individual exercise training, weekly phone calls, monthly group activities, cooking classes, free swimming lessons, behavioral health consults, and gardening experience. In addition, participants and their families are given a free six-month membership to their local YMCA. Ongoing monthly maintenance groups are available to all previous program participants. In FY 2020 the MIGHTY program in Springfield had a very successful and busy year, enrolling and serving over 105 obese children and their families, and continues to expand with several new programmatic options and increased staff for both exercise and nutrition. Expansion of MIGHTY to Westfield, Greenfield, and Wilbraham was made possible through a two-year grant from Kohl's Cares.

**Financial Health**

**Financial Counselors** assisted over 18,270 patients and processed and completed over 1,150 applications in FY 2020 for MassHealth, Health Safety Net, and Baystate’s own Financial Assistance Program. Financial Counselors have all been trained and certified by the state as Certified Account Counselors to assist patients in applying for available state and federal programs.

BMC serves on the Action Tank for **MassMutual Foundation’s Live Mutual Project (LMP)** serving the North End of Springfield. The LMP brings together community partners and resource to revitalize the North End neighborhood through the lenses of workforce development, community resource sharing, and financial workshops. New North Citizens Council serves as a lead community organizer for this project. The Action Tank consists of community residents and other partner organizations including Springfield Public Libraries, Way Finders, and Brightwood Health Center. The BMC CBAC in 2018 voted to earmark $170,000 of Determination of Need funding to invest in the LMP. The next step in this initiative is for the residents to brainstorm how they would like to see these dollars used in FY21.

**Violence and Trauma**

At the end of March 2020, all **Trauma and Injury Prevention (TIP) Program** initiatives were placed on hold due to COVID-19. The Injury Prevention Coordinator was redeployed to co-assist the Adult Trauma Performance Improvement.

**Brains at Risk**, a curriculum that raises awareness about traumatic brain injury and promoting responsible
driving practices was put on hold due to COVID-19. The curriculum combines video, graphics, and group discussions to demonstrate the importance of choices made behind the wheel. The program is the only one in western Massachusetts. Judges, district attorneys, clerk magistrates, probation officers, and defense attorneys make referrals to the program and may require it as a condition of probation or as an alternative to formal sentencing.

According to the Centers for Disease Control and Prevention (CDC), falls are the leading cause of fatal and nonfatal injuries in people age 65 and older. Falling is the most common cause of trauma in the geriatric population. Twenty percent of falls result in injuries and are the leading cause of traumatic mortality in the elderly. Fear of falling which develops in 20-39% of people who fall can lead to further limiting activity, independent of the injury. Common injuries due to falls are head injuries, shoulder and forearm fractures, spine fractures, pelvic fractures, and hip fractures, and rob this population of their independence. TIP offers two falls prevention programs:

- **Balance Act:** (On hold due to COVID-19) in collaboration with Baystate Health Senior Class, Baystate Rehabilitation Care, Baystate Home Infusion & Respiratory Services, and Health New England. Each attendee is given a balance screening, a discussion about the results with a physical therapist, instruction for specific exercises, information about environmental safety and equipment, a falls prevention checklist, and a lecture about injuries that can be sustained as a result of a fall.

- **Falls Prevention Initiative (FPI):** (Low participation during COVID-19 restrictions) is a quality improvement initiative that was developed by Injury Prevention Coordinator Ida Konderwicz RN, BSN, CEN and Erin Jarosz, Clinical Supervisor, Baystate Rehabilitation Care. FPI is an offspring of Balance Act; which is co-sponsored by Health New England. Instructions are given for exercises to improve balance and information about environmental home safety and equipment. FPI has implemented validated screening questionnaires. Baystate Rehabilitation Department offers both Physical and Occupational Therapy Falls Prevention specialized therapy using standardized assessments and pre/post survey questionnaires. TIP also provided education, preceptor hours and collaborated with Erin Jarosz, BMC Rehab Supervisor for Western New England OT Doctoral students on Falls Prevention.

TIP continues to participate in former state Governor Deval Patrick’s Safe and Successful Youth Initiative (SSYI) with the goal of working with young men of color whose lives have been tragically impacted by violence and poverty. Throughout the pandemic programming continued with correspondents meeting virtually via Zoom or the phone.

TIP has been educating community members on Stop the Bleed (STB). Members are given information so they can confidently perform life-saving hemorrhage control until pre-hospital personnel can arrive and assume the care of the injured. Providing these basic life-saving techniques that anyone can perform at the scene will save lives. Training kits have been purchased so Baystate can continue to build and grow its training capacity in the region. TIP started a Western Massachusetts STB coalition and has educated approximately 4,000 individuals. TIP received a grant from Western Massachusetts Homeland Security Advisory Council to purchase more STB kits. TIP participated in the first Western Massachusetts National STB day. In addition, TIP worked with graduating nurses residents on STB and they will be adding to their curriculum moving forward. All Stop the Bleed classes were suspended in March 2020 due to COVID.

Other key accomplishments during FY 2020:
TIP collaborated with BH concussion experts to create a concussion card. This card was placed in exit writer in all of the BH ED. Patients diagnosed with a concussion would be given this information at discharge to provide proper follow-up with in our BH Health Care System.

The American College of Surgeon requires mandatory universal screening for alcohol use for all trauma patients who are admitted with a stay > 24 hours, and we must reach 80% compliance with this mandate. Alcohol screening must be documented, and any patients with a positive screen must receive an intervention 100% of the time. TIP and team collaborated with BMC Behavioral Health and Clinical Informatics to regionally implement the use of AUDIT tool in CIS. This tool will help identify excessive drinking as the cause of the presenting illness. It provides a framework for intervention to help risky drinkers reduce or cease alcohol consumption and thereby avoid the harmful consequences of their drinking. The AUDIT also helps to identify alcohol dependence and some specific consequences of harmful drinking.

TIP in collaboration with ROCA successfully obtained funding through the Gun Violence Grant. Our inpatient Social Workers provided in person Trauma Informed therapy to the male and female attendees. The grant provided funds to reimburse the Social Workers salary for their time away from BMC. Placed on hold due to COVID.

TIP created Distracted Driving cards to include the new Hands Free Law, they were translated into multiple languages. Unable to move forward for creation and distribution of posters due to COVID.

TIP collaborated with all Western MA hospitals for our second annual National STB day. It was cancelled due to COVID.

TIP collaborated with Pediatric Trauma to obtain Children Miracle Network funding to purchase car seats for the ED. These car seats will be distributed to families of children that were in car crashed and families that are involved with domestic violence and need a car seat to flee. TIP was also able to distribute car seats to Holyoke, Springfield and Chicopee Fire Departments for their community car seat check. These program educate parents on the proper installation of car seats & encourages safe use of them (replacing old or damaged items)

TIP jointly provided by VA Central Western Massachusetts Healthcare System, One Call Away, to develop the first annual conference called The First Response for Veterans; Crisis Intervention and Supporting the Unique Health Care Needs of Our Veterans.

TIP in collaboration with BSEP students created a slogan on Distracted Driving called One Notification Could be Your Final Destination. This slogan was turned into a PSA in collaboration with Focus Springfield. This was viewed on Focus Springfield Facebook page.

TIP was invited to sit on the Home Base’s Suicide Prevention Campaign Roundtable co-hosted by Brigadier General (ret.) Jack Hammond, Executive Director of Home Base; Massachusetts Representative John Vells, Vice Chair of the Joint Committee on Veterans and Federal Affairs; and Eric Segundo, Director of Veterans’ Services for the town of Ludlow. Further meetings placed on hold due to COVID-19.

TIP was part the hospital wide Annual Continuing Education Retreat Planning Committee. TIP provided nursing support in the Pediatric Surgery Office.

Collaboration with Hampden County District Attorney’s office and the Springfield Police for a Gun Buy Back event.

Provision of education to BSEP and Pediatric Residents on Sexual Assault Forensic Evidence Collection.
TIP Committees and Facilitation of events:
- BMC Community Benefits Advisory Board
- Hampden County Healthy Improvement Plan (HCHIP)
- Child Fatality Team (On hold due to COVID)
- MA Prevention Injuries Now Network
- Continuing Education Retreat Planning Committee

The Baystate Family Advocacy Center (FAC) of Baystate Children’s Hospital provides care to over 300 children and families for outpatient medical assessments and inpatient/emergency room consultations continue at about 46 visits per year. The FAC Mental Health Team continued to experience a very busy year and saw a total of 4268 visits in FY 2020. In total, 695 patients were seen, with 195 of those being new to FAC. The FAC provides significant case management services to families participating in forensic interviews, which are performed by the District Attorney’s forensic interviewer as well as local police officers in the FAC’s own forensic interviewing facility. Altogether the FAC provided direct services to over 1,200 adults, children, and their families.

The FAC continues to strengthen its presence in the community as a dynamic, trauma-focused Children’s Advocacy Center. It is of paramount importance to provide trauma-focused, culturally sensitive services to patients, their families, and the community. As a result of grant resources over the years, the FAC has been able to not only ensure that their staff is fully trained to provide these services but has also been able to extend these training opportunities to the community.

The Victims of Crime Act (VOCA) grants, Trauma Focused Assessment and Treatment Program, and the Homicide Bereavement Program provided over $1,100,000 in FY 2019 in funding towards services provided at the FAC to children and families impacted by sexual abuse, physical abuse, and commercial sexual exploitation, child witness to violence, community violence, and homicide. In FY 2020 the FAC’s VOCA funding was increased to over $1,242,000. These programs continue to provide best practice evidenced-based psychotherapies and case management services to children and their families in western Massachusetts. The VOCA funded, Homicide Bereavement Program, continues to strengthen its presence in the community. The primary focus of this program is to serve co-victims of homicide. These services include individual and group therapy, education, and support to families of victims, as well as the greater community. This program has grown significantly in the past few years and has been featured in the Springfield Republican as well as Masslive for its work.

The Suicide Bereavement Program, which received its funding in FY 2018, continues to meet its main goals to provide individualized, coordinated, evidence-based trauma and grief-focused mental health services to children and adolescents who have lost a loved one to suicide in western Massachusetts. Free services include: culturally sensitive needs assessment, individual and group trauma and grief focused therapy, crisis counseling, peer support, information and referrals, as well as activities for transforming pain into meaning-making and healing. Services are available for children and adolescents in English and Spanish.

The FAC continues to support the community in many other ways. FAC members sit on the county Child Fatality Review Board. Together with a group of community volunteers, called the Prevention Collaborative, the FAC has delivered about half a dozen talks on child sexual abuse prevention in the community. At the request of the Northwest Regional District Attorney’s Office, Dr. Boos is now providing medical examinations at the Franklin County Community Advisory Council in Greenfield, and attends the
Franklin County Case Review meetings.

The FAC was awarded a third Substance Abuse and Mental Health Services Administration / National Child Traumatic Stress Initiative grant in October 2016, allowing the FAC to expand its training throughout Massachusetts and into Puerto Rico. It is a five-year, $2 million grant which funds Partners in Care: Community-Based Implementation of Evidence-Based Treatment for Childhood Trauma’s (Partners in Care). The project’s overarching goal is to improve access to and quality of evidence-based trauma-informed care for children and families who experience trauma and loss by addressing health disparities and reducing barriers to treatment throughout Massachusetts.

**Activities that address other CHNA priorities:**

Partners for a Healthier Community, Inc. d/b/a Public Health Institute of Western Massachusetts (PHIWM), is a key partner of Baystate Health. In addition to providing an unrestricted grant to PHIWM, Baystate Health also contracts with PHIWM for additional capacity building, technical assistance, and evaluation as related to grantees awarded funding through the system’s Better Together Grant Program.

PHIWM is working on multiple strategies to address health equity in the region. One of PHIWM’s strategic goals is to advance racial justice in order to decrease health inequities for residents who live in areas with low opportunity in the Hampden, Hampshire, Berkshire, and Franklin Counties. Tailored projects address climate change and age friendly environments (Live Well Springfield), asthma and lead poisoning (Healthy Homes Collaboration and Pioneer Valley Asthma Coalition), and adolescent sadness and depression (Youth Mental Health Coalition). PHIWM is a key leader in regional community health needs assessments as well as authoring reports on critical issues such as Sexual Violence Against Girls and Women and Youth Health Report. PHIWM creates bridges between healthcare and social services and serves as part of the Medicaid ACO BeHealthy Partnership. PHIWM continues to build capacity through community based research and evaluation by using data to inform interventions and enhance impact.

**FY 2020 accomplishments include:**

- The Pioneer Valley Asthma Coalition had success with increasing awareness of air quality in partnership with Yale University, enhanced healthy homes strategies to mitigate asthma by expanding to Holyoke and is partnering with Square One and the MA Department of Public Health on Lead Poisoning reduction.
- Live Well Springfield (LWS) used the Go Fresh Mobile Market to run emergency food distribution program during the Covid 19 pandemic to address food insecurity and quarantine/social distancing needs. LWS’s Resident Advisory Council was instrumental in helping to create a plan for Springfield addressing climate change and racial justice funded by the Kresge Foundation. LWS’ exciting effort in Age Friendly Place Making and PHIWM is leading a Health Impact Assessment to study housing policy and post incarceration housing barriers. PHIWM continues to partner on regional issues such as ending homelessness, transportation, and very much front and center this year, Covid 19 resources.
- Springfield Healthy Homes took their project to scale and continues to serve families in the Greater Springfield area that had been flagged in the Baystate Health system for having asthma related visits or admittances. Working together with other community based partners, PHIWM set up a system for healthcare and community agencies to screen and educate residents, and if they desired, assess and remediate their homes for asthma triggers. Asthma exacerbation incidences decreased and emergency department use continues to be tracked. Feedback from families that
received this education and home services were unanimously positive and grateful. The Springfield Healthy Homes work also expanded its focus to lead abatement in 2019. In partnership with the City, PHIWM is helping to roll out communications and services to provide lead abatement to any resident of Springfield.

- PHIWM continues to sophisticate the region’s access to local data. During the Covid 19 pandemic, PHIWM stood up a Covid 19 Dashboard creating an easy way for western MA residents, policy makers and organizational leaders to understand the case/morbidity and mortality trends at both a county level and at municipal level. More recently we have added in vaccination rates. We also provided several webinars to educate about the coronavirus and met with entities such as school committees and town leaders to help them interpret their data. It is clear that Covid 19 is an added burden to people and communities of color perpetuating inequities already revealed in other regional reports.

- Bridging healthcare and social services effort continues to deepen. PHIWM continued to bolster 413Cares.org. This software allows for anyone to search for resources and also for providers to do “closed referrals” as needed. PHIWM partnered with both the Human Service Forum and many community based organizations as well as healthcare entities. And a local television station has agreed to be the media sponsor.

- PHIWM kicked off a Youth Mental Health Coalition, with particular emphasis on youth of color, through funding from the MA Dept. of Public Health Office of Problem Gambling. We have brought together over twenty stakeholders representing youth, therapists, Springfield Public Schools (SPS), behavioral health service providers, grassroots advocates such as OutNow and EstoyAqui. Our Coalition is working on a universal screening feasibility assessment with SPS, augmenting Multi-Tiered Support Services between SPS and community based organizations, creation of a de-stigmatization communications campaign to “normalize” mental health and professional development trainings for adults to better support young people.

In FY 2020, Baystate continued its support of the 413Cares, the community resource database, overseen by PHIWM. Coordinators of 413Cares visited all Hampden County CBACs to continue its expansion and diversity of resources and “claimed” sites. The database has hundreds of resources listed and has adopted functionality to provide webpage translation into multiple languages. During the COVID-19 pandemic, 413Cares was a critical resource for the community to stay up to date with services available.

Transgender Support Group, through a partnership with UniTy of Pioneer Valley, Baystate continues to be a primary and critical link for transgender individuals in western Massachusetts. As the only transgender support group in the region, UniTy has been active for over 13 years. It provides participants access to information on services such as mental health services, social and spiritual support networks as well as links to primary health care within Baystate Health. Support group participants and UniTy of Pioneer Valley increased public awareness of transgender needs by participating in educational community events, health fairs, and open forums that promote education of transgender care and services. Some of these events included Springfield Pride Flag Raising, Transgender Day of Remembrance, Noho Pride and Parade, Springfield Gay Straight Alliance Day, and a Career Training Seminar for Transwomen.

As part of an annual tradition, Baystate Health team members generously donate school supplies for local elementary schools located in each of our four hospital communities. This year, due to COVID-19 we were unable to hold school supplies donation drives. To fulfill our annual commitment to supporting local schools, Baystate’s Community Benefits Program funded the purchase of much needed school supplies. We were able to leverage our organization’s purchasing power and order the school supplies through
vendor contracts. With an investment of $25,000 we were able to provide an assortment of school supplies, including cleaning and disinfecting wipes, hand sanitizer, crayons, markers, earbuds, face masks, colored pencils, erasers, dry erase markers, and much more. The donations benefited 17 elementary schools, 300 classroom, 450+ teachers/staff, and 5,000 students. In addition, over $2,000 worth of gift cards were donated by team members and gifted to the beneficiary schools. Beneficiary schools in the BMC service area included: Brightwood Elementary School, William N. DeBerry Elementary School, EduCare Springfield, Gerena Community School, Lincoln Elementary School, Margaret C. Ells Elementary School, and Milton Bradley Elementary School.

Baystate Health continued its funding of the **Hampden County Healthy Improvement Plan (HCHIP)** in FY 2020. Pioneer Valley Planning Commission and Public Health Institute of Western Massachusetts are the backbone support organizations for the HCHIP. In FY 2020, the HCHIP received notice they were selected as a recipient of the Massachusetts Community Health and Healthy Aging Fund grant to support the CHIP infrastructure. For the past eight years, Hampden County has ranked 14\textsuperscript{th} in respect to overall health outcomes according to the County Health Rankings and Road Map produced annually by the Robert Wood Johnson Foundation. The HCHIP is a county-wide network aimed at improving Hampden County’s health ranking by focusing on the following five domains: Health Equity; Behavioral Health; Primary Care, Wellness, and Preventative Care; Healthy Eating and Active Living; and Public Safety, Violence & Injury Prevention. Quarterly network gatherings and monthly domain meetings are held continuously throughout the year to discuss strategy development and indicator monitoring.
Plans for Next Reporting Year

In FY 2020, BMC, in partnership with its CBAC, will continue to engage and partner with the community to address unmet health care needs of residents. In addition to supporting local community-based efforts, BMC will continue to pursue grant funds from outside sources in support of collaboration between the hospital and its community partners to enhance current or implement additional programs to meet the existing and newly identified needs of its target populations. BMC will expand efforts to communicate to the general public about its community benefits activities, investments, and partnerships through press coverage, social media, and other means as appropriate.

Community Engagement

The CBAC, in collaboration with the Coalition of Western Massachusetts Hospitals/Insurer, plans on expanding in the area of community engagement for the 2022 CHNA. Increased opportunity for community engagement will come through the following three strategies:

1. Community conversations - large gathering where the Coalition invites community stakeholders to discuss community health and social needs over a meal.
2. Community chats – smaller gatherings where Coalition members enter into existing meeting spaces to share and facilitate a dialogue around community health and social needs
3. Community Forum – the Office of Government and Community Relations, alongside the BMC CBAC, will plan a community forum to share out on the community benefits program at Baystate and engage residents on ways that Baystate can further its community impact.

The Office of Government and Community Relations will integrate these findings in the 2022 CHNA. Community engagement efforts related to the 2019 CHNA will be summarized through a Community Engagement Report to be released in 2020, as a supplement to the CHNA.

As part of the new Attorney General guidelines, BMC will also be completing a yearly self-assessment that measures and tracks community benefit progress. The self-assessment is a tool that helps ensure the hospital and its CBAC are investing resources into the prioritized health needs, as highlighted through the CHNA, as well as aligning these health needs to its implementation strategy.

Community Benefits Advisory Council

The BMC CBAC will work with Baystate’s Community Benefits Specialist on developing policies and procedures for the CBAC in FY 2020. Collaboratively, they will brainstorm and implement detailed documentation around a community benefits mission and vision statement, a revised CBAC charter, and standardized membership processes across the health system.

The Office of Government and Community Relations intends to convene a system-wide CBAC retreat for all internal and community members. This would be the first gathering of its kind for Baystate. The aim of the CBAC retreat is to provide a space for members to network, share updates around their respective hospital’s community benefit work, and participate in work groups to build out a community benefit mission and vision statement, as well as revise the current charter and membership processes.

Training and Capacity Building

BMC, with support from the Office of Government and Community Relations, will identify training
opportunities to build capacity among its community partners on related topics including, but not limited to: cultural humility, health equity, social determinants of health, implicit bias in health care, data (qualitative/quantitative), and program evaluation. BMC intends to engage the Public Health Institute of Western Massachusetts to facilitate and implement these capacity building trainings.

**Opportunities for Funding**

In an effort to increase accessibility and the ability to communicate on a timelier basis, Baystate will continue implementing and increasing awareness (internal and external) about its system-wide online sponsorship request and grants management system (Foundant). Among many benefits Baystate’s community partners will appreciate is the ability to control organizational contact information; to draft, save and submit online applications; and to upload documents and reports. All requests for BMC funding (community benefits, social impact, marketing, and event sponsorships) will be required to be submitted online via this upgraded system and according to the corresponding funding cycle (three per year). Funding decisions will remain at the local hospital leadership level.

Formerly referred to as the “DoN Grant Program,” Baystate’s system-wide Better Together grant program unites health care and community-based nonprofit organizations across Baystate’s service areas to shape future health care and human services. The aim is to develop approaches that, by targeting the social determinants of health (SDH), will improve people’s overall well-being and make our communities healthier places to live. Better Together is a system-wide grant program, yet each hospital entity convenes their own annual or bi-annual application process, in partnership with the hospital CBAC, and with support from the Office of Government and Community Relations.

Better Together is funded with hospital Determination of Need (DoN) funding to address community health needs. DoN funding is required by Massachusetts Department of Public Health (DPH) when a hospital invests in a DPH approved capital project (facilities and equipment). Better Together awards outcomes-based grants (1-3 years), pilot/mini-grants (1-2 years), and community education and training grants (1 year) to eligible non-profit organizations with current IRS designated 501(c)(3) status that have projects directly benefiting residents of the communities served by the hospital, with a focus on underserved and vulnerable populations.

The BMC CBAC, with support from the Office of Government and Community Relations, will release a Better Together Request for Proposal (RFP) in FY 2020 and award funding to local community-based organizations and community health initiatives that address BMC’s health priorities identified in the 2019 CHNA. For this RFP, the BMC CBAC voted to seek proposals specifically targeting Education as a social determinant of health.
COMMUNITY BENEFITS PLANNING PROCESS

Community Benefits Leadership Team

The BMC CBAC, Baystate Health Board of Trustees, and Baystate Wing Hospital Board of Directors are actively involved in overseeing community benefits activities and investments. In July 2010, the Baystate Health Board of Trustees assigned oversight of community benefits to the Baystate Health Governance Committee. Through regular board meetings, internal hospital meetings, and leadership activities, Baystate is actively involved in shaping community benefits activities and investments provided throughout the system. Throughout FY 2020, the system’s Vice President, Government and Community Relations, under the direction of the Sr. Vice President and Chief Consumer Officer, supervised the Director of Community Relations.

Community Benefits Team Meetings

The Baystate Health Board Governance Committee meets twice a year and is charged with advocating for community benefits at the board level and throughout the health system and community; aligning the system’s four (4) hospital-specific community benefits implementation strategies into the health system’s strategic plan; periodic review of CHNA data; approval of a community benefits mission statement and health priorities; review impacts of community benefits activities and investments; and ensure Baystate’s community benefits are in compliance with guidelines established by the Massachusetts Attorney General and IRS. Annually, the Office of Government and Community Relations provides updates to the Baystate Health Board of Trustees, Baystate Health President’s Cabinet, and other Baystate leadership teams, as requested.

The BMC CBAC continues to bring a community lens and filter for the hospital’s health priorities. The CBAC provides a community perspective on how to increase wellness and resilience opportunities for optimal health for an entire population; guidance in matching BMC resources to community resources, thus making the most of what is possible with the goal to improve health status and quality of life; and policy advocacy to assure and restore health equity by targeting resources for residents.

Participants on the BMC CBAC represent the constituencies and communities served by the hospital and are responsible for reviewing community needs assessment data and use this analysis as a foundation for providing the hospital with input on its community health planning efforts and community benefits investments.
Community Partners

Baystate Medical Centers’ community partners include, but are not limited to:

1. Alzheimer’s Association
2. American Foundation of Suicide Prevention
3. American Heart Association (AHA) Multicultural Health Initiatives
4. American International College (AIC) School of Health Sciences *
5. Arise for Social Justice
6. Baystate Mason Square Health Center Community Advisory Board *
7. Behavioral Health Network (BHN)
8. Caring Health Center
9. Center for Human Development (CHD)
10. Coalition of Western Massachusetts Hospitals/Insurer
11. Community Foundation of Western Massachusetts
12. Develop Springfield
13. Dress for Success Foot in the Door
14. Educare *
15. Embrace Race
16. Food Bank of Western Massachusetts
17. Gandara Mental Health Center
18. Gardening the Community
19. Hampden County District Attorney’s Office
20. Hampden County Health Coalition
21. Healing Racism Institute of Pioneer Valley
22. Health New England (HNE) *
23. Link to Libraries
24. Local Boards of Health (Amherst, Chicopee, Holyoke, Northampton, Springfield, West Springfield *)
25. Massachusetts Department of Public Health (Massachusetts DPH)
26. Massachusetts Public Health Association (MPHA)
27. Martin Luther King, Jr. Family Services/Mason Square Health Task Force
28. Mass in Motion
29. Massachusetts Association of Community Health Workers
30. MassMutual Foundation
31. Medical Home Work Group for Children with Special Needs
32. Men of Color Health Awareness (MOCHA)
33. MetroCare of Springfield *
34. MotherWoman
35. New North Citizens’ Council (NNCC) *
36. Parent Villages
37. Perinatal Support Coalition of Hampden County
38. Pioneer Valley Asthma Coalition
39. Pioneer Valley Planning Commission (PVPC)
40. Project Baby Springfield
41. Project Coach *
42. Public Health Institute of Western Massachusetts (PHIWM) *
43. Revitalize CDC *
44. ROCA
**COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)**

In 2019, BMC, in partnership with the Coalition, conducted a CHNA pursuant to the requirements of Section 501(r) of the Internal Revenue Code ("Section 501(r)"). This assessment was conducted to update the findings of the 2016 CHNA so BMC could better understand the health needs of the communities it serves and to meet its fiduciary requirement as a tax-exempt hospital. The Coalition engaged PHIWM as the lead consultant to conduct the CHNAs. PHIWM was supported by three other consultant teams: Collaborative for Educational Services, Franklin Regional Council of Governments, and PVPC.

**Organizational Policy**

Per the Internal Revenue Service (IRS) and the Massachusetts Office of the Attorney General, each non-profit hospital must conduct a formal CHNA every three-years in partnership with community organizations and individuals across the hospital’s service area. The aim is to identify community assets as well as the critical gaps and/or needs in public health resources and the weak connections between medical care and community care.

**Program Results**

The CHNA is the basis for developing strategic and accountable community benefits activities and investments. In an ideal situation, an effective and large scale community benefits activity or investment will demonstrate measurable impacts on the health status and quality of life for residents - effectively closing gaps when current data is compared to initial CHNA baseline indicators. At a more practical
program level, the CHNA guides a “theory of change” – linking health needs to community benefits efforts to desired program and community outcomes.

**Date of Last Assessment Completed, and Current Status**

In 2019, BMC, in partnership with the Coalition, conducted a CHNA of the combined and shared geographic area served by Baystate Medical Center pursuant to the requirements of Section 501(r) of the Internal Revenue Code (“Section 501(r)”). The CHNA report and findings were published on the hospital’s website in 2019.

**Community Health Needs Assessment Findings**

The 2019 CHNA was conducted using a determinant of health framework as it is recognized that social and economic determinants of health contribute substantially to population health. It has been estimated that less than a third of our health is influenced by our genetics or biology. Our health is largely determined by the social, economic, cultural, and physical environments that we live in and healthcare we receive. Among these “modifiable” factors that impact health, social and economic factors are estimated to have the greatest impact. The County Health Rankings model, developed by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, estimates how much these modifiable factors contribute to health, based on reviews of the scientific literature and a synthesis of data from a number of national sources.

It is estimated that social and economic factors account for 40% of our health, followed by health behaviors (30%), clinical care (20%), and the physical environment (10%). Many health disparities occur as a result of inequities in these determinants of health. According to the County Health Rankings, among Massachusetts’ counties, Hampden County ranked last out of 14 counties in the state for both health factors and health outcomes in 2016. Worcester County ranked somewhat higher at seventh in health outcomes and eleventh in health factors. Hampshire County was ranked higher at fifth in health outcomes and third in health factors.

The BMC service area of Hampden County continues to experience many of the same prioritized health needs identified in BMC’s 2016 CHNA. Social and economic challenges experienced by the population in the service area contribute to the high rates of chronic conditions and other health conditions identified in this needs assessment. These social and economic factors also contribute to the health disparities observed among priority populations, which include children, older adults, Latinos, Blacks, GLBQ+ and transgender youth, refugees, low-income individuals, homeless persons, and those living in poverty. Additional data is needed to better understand the needs of these populations in order to reduce inequities. The BMC service area population continues to experience a number of barriers that make it difficult to access affordable, quality care, some of which are related to the social and economic conditions in the community, and others which relate to the healthcare system. Mental health and substance use disorders were consistently identified as top health conditions impacting the community, and the inadequacy of the current systems of care to meet the needs of individuals impacted by these disorders arose as an important issue that needs to be addressed. The opioid crisis has emerged as a top issue impacting the health of the community. Progress has been made to address some of the prioritized health needs previously identified, such as teen pregnancy and childhood obesity; however, rates remain high.

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3 The Patient Protection and Affordable Care Act (Pub. L. 111-148) added section 501(r) to the Internal Revenue Code, which imposes new requirements on nonprofit hospitals in order to qualify for an exemption under Section 501(c)(3), and adding new reporting requirements for such hospitals under Section 6033(b) of the Internal Revenue Code.
and work needs to be continued.

Below is a summary of the prioritized community health needs identified in BMC’s 2019 CHNA.

**SOCIAL AND ECONOMIC DETERMINANTS THAT IMPACT HEALTH**
- Social Environment
- Housing Needs
- Lack of Access to Transportation, Healthy Food, and Places to be Active
- Lack of Resources to Meet Basic Needs
- Need for Financial Health
- Educational Needs
- Violence
- Environmental Exposures

**BARRIERS TO ACCESSING QUALITY HEALTH CARE**
- Insurance and Health Care Related Challenges
- Limited Availability of Providers
- Need for Culturally Sensitive Care
- Need for Transportation
- Lack of Care Coordination
- Health Literacy and Language Barriers

**HEALTH CONDITIONS AND BEHAVIORS**
- Mental Health and Substance Use
- Chronic Health Conditions
- Infant and Perinatal Health
- Sexual Health
- Alzheimer’s Disease and Dementia

**Consultants/Other Organizations**

BMC is a member of the Coalition, a partnership between eight (8) not-for-profit hospitals and an insurer in western Massachusetts that includes: Baystate Medical Center, Baystate Franklin Medical Center, Baystate Noble Hospital, Baystate Wing Hospital (including Baystate Mary Lane Outpatient Center), Cooley Dickinson Hospital, Mercy Medical Center (part of Sisters of Providence Health System, a member of Trinity Health - New England), Shriners Hospitals for Children – Springfield, and Health New England, a local health insurer whose service areas covers the four counties of western Massachusetts.

The Coalition formed in 2012 to unite hospitals in western Massachusetts, share resources, and work in partnership to conduct their community health needs assessments (CHNA) and address regional health needs. BMC worked in collaboration with the Coalition to conduct their 2019 CHNA. This assessment was conducted to update the findings of the 2016 CHNA so BMC could better understand the health needs of the communities it serves and to meet its fiduciary requirement as a tax-exempt hospital.

The Coalition engaged PHIWM as the lead consultant to conduct the CHNAs. PHIWM was supported by three other consultant teams: Collaborative for Educational Services, Franklin Regional Council of Governments, and PVPC.
The following organizations, community stakeholders, and public health experts were interviewed:

- Adamopolous, Ava, Program Director, Boys and Girls Club of Springfield
- Avery, Jennifer, Reentry Caseworker, Franklin County Sheriff’s Department
- Bakowski, Lisa, Principal, Edward P. Boland School
- Berkowitz-Gosselin, Leah, Clinical Social Worker, Baystate Family Advocacy Center’s Homicide Bereavement Program
- Brzezinski, Jen, Reentry Caseworker, Franklin County Sheriff’s Department
- Caisse, Edward III, High Risk Reentry Program Coordinator, Hampden County Sheriff’s Department
- Calabrese, Jessica, Community Health Center of Franklin County
- Carey, Cameron, Community Health Center of Franklin County
- Caufton-Harris, Helen, Commissioner of Public Health, City of Springfield
- Chartrand, Ken, Reentry Coordinator, Franklin County Sheriff’s Department
- Cluff, Ben, Veterans’ Services Coordinator, Massachusetts Department of Public Health, Bureau of Substance Use Services
- Ewart, Jared, Community Health Center of Franklin County
- Ferderman, Julie, Health Director, Town of Amherst
- Gonzalez, Joesiah, Director of Youth Services, New North Citizen’s Council
- Hamilton, Wes, Community Health Center of Franklin County
- Heidenreich, Maria, Community Health Center of Franklin County
- Hoynnoski, Arcey, Community Health Center of Franklin County
- Hyry-Dermith, Dalila, Supervisor, Massachusetts Department of Public Health, Division for Perinatal, Early Childhood and Special Needs, Care Coordination Unit
- Jacobson, Allie, Community Health Center of Franklin County
- Judd, Christine, Director, Roca Springfield and Holyoke
- Kaplan, Lawrence, Developmental Pediatrician, Shriners Hospital for Children-Springfield
- Laurel, Charles, Clinician, Franklin County Sheriff’s Department
- LeBlanc, Ashley, Nurse Navigator, Mercy Hospital Cancer Center
- Luippold, Susan, Community Health Center of Franklin County
- Margosian, Alex, LICSW Clinician, Franklin County Sheriff’s Department
- Mercado, Reuben, Reentry Caseworker, Franklin County Sheriff’s Department
- Nash, Shirin, Pathologist and Cancer Committee Outreach Coordinator, Mercy Hospital Cancer Center
- Neubauer, Deb, Clinician, Franklin County Sheriff’s Department
- Petrie, Maegan, Community Health Center of Franklin County
- Phillips, Kelly, Founder and Director, KP Fit
- Pliskin, Ariel, Clinical Intern, Franklin County Sheriff’s Department
- Sayer, Ed, Community Health Center of Franklin County
- Schwartz, Levin, Director, Clinical and Reentry Services, Franklin County Sheriff’s Department
- Van der Velden, Allison, Community Health Center of Franklin County
- Velis, Stephanie, Oncology Program Coordinator, Mercy Hospital Cancer Center
- Walker, Phoebe, Director of Community Services, Franklin Regional Council of Governments
- Welenc, Susan, Community Health Center of Franklin County
- Wheeler, Felicia, Mother and Advocate
CHNA Data Sources

The primary goals of the 2019 CHNA were to update the list of prioritized community health needs identified in the 2016 CHNA and to the extent possible, identify potential areas of action. The prioritized health needs identified in the 2019 CHNA include community level social and economic determinants that impact health, barriers to accessing quality health care, and specific health conditions and behaviors within the population. Assessment methods included:

- Analysis of social, economic, and health quantitative data from Massachusetts Department of Public Health, the U.S Census Bureau, the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS), the County Health Ranking Reports, Community Commons, and a variety of other data sources;
- Analysis of findings from five (5) focus groups, forty seven (47) chats, two (2) community conversations, and sixteen (16) key informant interviews conducted for BMC;
- Analysis of findings from an additional seven (7) focus groups and thirty-four (34) key informant interviews conducted for other Coalition members and considered relevant for this CHNA;
- Review of existing assessment reports published since 2016 that were completed by community and regional agencies serving BMC’s service area.

To the extent possible given data and resource constraints, priority populations were identified using information from focus groups and interviews as well as quantitative data stratified (or broken down) by race/ethnicity and age. Quantitative analysis (secondary data from DPH, Massachusetts CHIP, Hospital Inpatient/ED Discharge, and Ambulatory Care Sensitive Conditions), involved review of health assessments conducted by other organizations in recent years, key informant interview, and focus groups. Preliminary assessment findings were also discussed with community stakeholders during a series of “listening sessions” and feedback from participants helped validate findings.

Community Definition

BMC is a 734-bed academic medical center (including Baystate Children’s Hospital) based in Springfield, Massachusetts and is western New England’s only tertiary care referral medical center, Level 1 trauma center, and neonatal and pediatric intensive care units. BMC serves as a regional resource for specialty medical care and research, while providing comprehensive primary medical services to the community.

The service area for BMC includes all 23 communities within Hampden County, including the third largest city in Massachusetts – Springfield (population over 150,000). Three adjacent cities (Holyoke, Chicopee, and West Springfield) create a densely-populated urban core that includes over half of the population of the service area (270,000 people), and 91% of Hampden County is classified as urban (US Census, 2013-2017). Smaller communities exist to the east and west of this central core area. Many of these communities have populations under 20,000 people. The Pioneer Valley Transit Authority, the second largest public transit system in the state, serves 11 communities in the service area, and connects suburban areas to the core cities and services. The service area has more racial and ethnic diversity than many other parts of western Massachusetts. County-wide, 24% of the population is Latino, 8% is black, and 2% is Asian (ACS, 2013-2017), though this diversity is not equally spread throughout the region and tends to be concentrated in the urban core.
A substantial proportion of the county’s population is from other countries. In 2017, 22% of the state’s immigrants came to western Massachusetts. West Springfield has welcomed the highest proportion in Hampden County; 15% of the city’s population are foreign-born (US Census, ACS, 2013-2017). The current political climate has exacerbated threats to immigrant health related to the behavioral, cultural, and structural systems that determine individual health decision on a daily basis. According to the MDPH, in the past 5 calendar years (2014-2018), there were 2,314 refugees with health assessments in western Massachusetts. This assessment is the first medical screening provided to refugees; it is their gateway into the medical system.

Economically, the BMC service area is home to many of the largest employers in the region as well as numerous colleges and universities, and provides a strong economic engine for the broader region. The largest industries and employers include health care, service, and wholesale trade and manufacturing. At the same time, the county struggles with higher rates of unemployment and poverty, lower household incomes, and lower rates of educational attainment. The median household income in the service area is about $52,000 ($22,000 less than the state). The poverty rate is more than 60% higher than statewide, and the child poverty rate is an alarming 27%, with more than one out of every four children in Hampden County living in poverty (ACS, 2013-2017). Despite being at the core of the Knowledge Corridor region, only 27% of the population age 25 and over has a bachelor’s degree, compared to 43% statewide.
The following table depicts the population of towns that comprises BMC’s community definition.

<table>
<thead>
<tr>
<th>Hampden County</th>
<th>2017 Population Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agawam</td>
<td>28,849</td>
</tr>
<tr>
<td>Blandford</td>
<td>1,260</td>
</tr>
<tr>
<td>Brimfield</td>
<td>3,745</td>
</tr>
<tr>
<td>Chester</td>
<td>1,380</td>
</tr>
<tr>
<td>Chicopee</td>
<td>55,515</td>
</tr>
<tr>
<td>East Longmeadow</td>
<td>16,291</td>
</tr>
<tr>
<td>Granville</td>
<td>1,624</td>
</tr>
<tr>
<td>Hampden</td>
<td>5,196</td>
</tr>
<tr>
<td>Holland</td>
<td>2,496</td>
</tr>
<tr>
<td>Holyoke</td>
<td>40,341</td>
</tr>
<tr>
<td>Longmeadow</td>
<td>15,864</td>
</tr>
<tr>
<td>Ludlow</td>
<td>21,502</td>
</tr>
<tr>
<td>Monson</td>
<td>8,836</td>
</tr>
<tr>
<td>Montgomery</td>
<td>864</td>
</tr>
<tr>
<td>Palmer</td>
<td>12,279</td>
</tr>
<tr>
<td>Russell</td>
<td>1,793</td>
</tr>
<tr>
<td>Southwick</td>
<td>9,758</td>
</tr>
<tr>
<td>Springfield</td>
<td>154,758</td>
</tr>
<tr>
<td>Tolland</td>
<td>500</td>
</tr>
<tr>
<td>Wales</td>
<td>1,892</td>
</tr>
<tr>
<td>Westfield</td>
<td>41,700</td>
</tr>
<tr>
<td>West Springfield</td>
<td>28,704</td>
</tr>
<tr>
<td>Wilbraham</td>
<td>14,671</td>
</tr>
<tr>
<td><strong>Total Service Area</strong></td>
<td><strong>469,692</strong></td>
</tr>
</tbody>
</table>


To learn more about the findings from BMC’s CHNA and its implementation strategy to address the identified health needs please visit www.baystatehealth.org/communitybenefits.

All documents are available for FREE in PDF downloadable format. To request a FREE hard copy of the CHNA please contact the Office of Government and Community Relations at 413-794-1016.
## COMMUNITY BENEFITS PROGRAM PROFILES

### BAYSTATE COMMUNITY HEALTH CENTERS

| Brief Description or Objective | BMC is committed to reducing health disparities in Springfield and has invested significant resources in its **three community-based health centers** and a pediatric clinic located in Springfield’s low-income neighborhoods that have both HPSA and MUA/MUP designation. BMC health centers are primary care first-contact sites for thousands of underserved, low-income people. In FY 2020, these community training sites for our Medical Residency Program provided continuity of care for 30,946 unduplicated patients and over 98,122 patient encounters/visits annually. Through the various sponsored programs (grants), BMC is able to provide enhanced services such as HIV/STI/Hep C screening and treatment to high risk, vulnerable populations who share a disproportionate burden of certain diseases. |
| Program Type | Direct Clinical Services |
| Tags | Community Health Center Partnership; Prevention |
| Target Population | **Regions Served:** County-Hampden  
**Gender:** All  
**Age Group:** All  
**Ethnic/Racial Group:** All  
**Language:** All  
**Environment Served:** Suburban; Urban |
| Health Need | **DoN Health Priority:** Built Environment  
**Focus Issue:** All  
**Health Issue:** All |
| Goals | **Goal 1**  
**Description:** Increase access to primary care for the underserved residents of Springfield.  
**Status:** In progress |
| Partners | New North Citizens’ Council  
River Valley Counseling Center [www.rvcc-inc.org](http://www.rvcc-inc.org)  
Holyoke Health Center [www.hhcinc.org](http://www.hhcinc.org)  
Gandara [www.gandaracenter.org](http://www.gandaracenter.org) |
| Contact Information | Thomas Lombardo, Administrative Director, Baystate Health Community Health and Geriatric/Palliative Acute Care. Main office is located at 11 Wilbraham Road, Springfield, MA 01109. 413-794-2693/2860. [thomas.lombardo@baystatehealth.org](mailto:thomas.lombardo@baystatehealth.org) |

### BAYSTATE FAMILY ADVOCACY CENTER

| Brief Description or Objective | The Baystate Family Advocacy Center provides assessment, treatment and crisis support to child abuse victims and their non-offending caretakers affected by child |

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Document prepared by the Office of Government and Community Relations  
Submitted to the Office of Massachusetts Attorney General on June 30, 2021
### Objective
abuse, sexual assault or exploitation, exposure to violence and/or homicide or impacted by suicide in western Massachusetts.

### Program Type
Direct Clinical Services

**Tags:** Health Professional/Staff Training; Support Group

### Target Population

**Regions Served:** County-Berkshire, County-Franklin, County-Hampden, County-Hampshire

**Gender:** All

**Age Group:** All

**Ethnic/Racial Group:** All

**Language:** All

**Environment Served:** Rural; Suburban; Urban

### Health Need

**DoN Health Priority:** Built Environment; Social Environment

**Focus Issue:** n/a

**Health Issue:** Health Behaviors/Mental Health – Bereavement, Depression; Social Determinants of Health – Domestic Violence, Violence and Trauma

### Goals

**Goal 1**

**Description:** To provide immediate and ongoing mental health assessment, treatment and crisis support to victims and non-offending caretakers of child sexual and physical abuse, witnesses to domestic violence, as well as co-victims of homicide and children impacted by suicide.

**Status:** In progress

**Goal 2**

**Description:** To provide immediate assessment and support services for victims of child abuse and their non-offending caretakers who are involved in a multidisciplinary forensic interview process.

**Status:** In progress

### Partners

- Hampden County District Attorney’s Office [www.mass.gov](http://www.mass.gov)
- Massachusetts Department of Children and Families - Western Regional Office [www.mass.gov](http://www.mass.gov)
- Massachusetts Children’s Alliance [www.machildrensalliance.org](http://www.machildrensalliance.org)
- National Children’s Alliance [www.nationalchildrensalliance.org](http://www.nationalchildrensalliance.org)

### Contact Information

Stephen Boos, MD, Medical Director Family Advocacy Center 50 Maple Street, 3rd Floor, Springfield, MA 01199. 413-794-6626. stephen.boosMD@baystatehealth.org

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**BAYSTATE REGIONAL TUBERCULOSIS PROGRAM**

**Brief Description**
The Tuberculosis Clinic provides TB diagnosis and treatment to patients throughout western Massachusetts. It has been providing services for over 25 years. The majority of
patients served are non-English speaking immigrants who have been referred for examination and treatment after receiving a positive PPD test, positive blood lab test (T-spot or QuantiFERON) or with a history of TB exposure in their native country. The clinic also see patients who are US born or from other countries that have a Positive T-Spot and QuantiFERON lab tests, abnormal chest x-rays and abnormal CAT scans findings. The TB Clinic serves both adult and pediatric patients.

Program Type
Direct Clinical Service

Tags:
Health Screening

Target Population
Regions Served: County-Franklin, County-Hampden, County-Hampshire

Gender: All

Age Group: All

Ethnic/Racial Group: All

Language: All

Environment Served: Rural; Suburban; Urban

Health Need
DoN Health Priority: Built Environment

Focus Issue: n/a

Health Issue: Chronic Disease –Pulmonary Disease; Infectious Disease –Tuberculosis

Goals
Goal 1
Description: To screen for and assist in the treatment and prevention of tuberculosis in western Massachusetts.

Status: In progress

Partners
Massachusetts Dept. of Public Health - TB Division

www.mass.gov

Local Boards of Health (Agawam, Amherst, Belchertown, Chicopee, Easthampton, East Longmeadow, Holyoke, Springfield, West Springfield, Northampton, South Hadley, Ludlow, Longmeadow, and Wilbraham)

Healthcare for the Homeless

www.mercycares.com

Springfield Dept. of Health and Human Services

www.springfield-ma.gov/hhs

Lutheran Services

www.lssne.org

Contact Information
Bethzaida Marrero, Administrative Coordinator, TB Clinic, Baystate Mason Square Health Center. 11 Wilbraham Road, Springfield, MA 01109. 413-794-9188.

Bethzaida.Marrero@baystatehealth.org
# BAYSTATE SPRINGFIELD EDUCATIONAL PARTNERSHIP (BSEP)

**Brief Description or Objective**
Baystate Springfield Educational Partnership (BSEP) is a community benefits initiative of Baystate Medical Center that provides career pathway programming to Springfield students with an expressed interest in the health care professions. BSEP courses and activities are available to high school students during the fall, spring and summer semesters. Fall and winter semesters are eight weeks in duration each and are scheduled during after-school hours. Summer semester workshops are offered throughout the summer in two or three day long sessions.

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Total Population or Community-Wide Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tags:</strong></td>
<td>Community Education; Mentorship Career Training/Internship</td>
</tr>
</tbody>
</table>

**Target Population**
- **Regions Served:** County-Hampden
- **Gender:** All
- **Age Group:** Adult-Young, Child-Teen
- **Ethnic/Racial Group:** All
- **Language:** All
- **Environment Served:** Urban

**Health Need**
- **DoN Health Priority:** Education; Employment
- **Focus Issue:** n/a
- **Health Issue:** Social Determinants of Health – Education/Learning

**Goals**
- **Goal 1**
  - **Description:** Increase the enrollment of Springfield students in the BSEP program.
  - **Status:** Complete
- **Goal 2**
  - **Description:** Increase the number of BSEP students that are accepted to college programs and graduate from college programs.
  - **Status:** Complete

**Partners**
- **Springfield Public Schools** [www.sps.springfield.ma.us](http://www.sps.springfield.ma.us)
- **Springfield Technical Community College (STCC)** [www.stcc.edu](http://www.stcc.edu)
- **Holyoke Community College (HCC)** [www.hcc.edu](http://www.hcc.edu)
- **Pioneer Valley Life Sciences Institute** [www.pvlsi.org](http://www.pvlsi.org)
- **MassHire of Hampden County** [www.rebhc.org](http://www.rebhc.org)
- **Tufts University School of Medicine** [wwwmedicine.tufts.edu](http://wwwmedicine.tufts.edu)
- **Focus Springfield** [www.focusspringfield.com](http://www.focusspringfield.com)
Contact Information

Peter Blain, Manager, Baystate Springfield Educational Partnership, 55 Pratt Street, Springfield MA. 413-794-1671. peter.blain@baystatehealth.org.
# BAYSTATE FINANCIAL ASSISTANCE & COUNSELING

**Brief Description or Objective**

Baystate Health provides financial counseling services to inpatient and outpatient individuals who have concerns about how to pay for their healthcare. Financial Counselors are dedicated to identifying and assisting patients who are unable to pay their estimated care prior to treatments or who have large existing balances. This assistance includes linking patients to available funding sources such as Medicaid and Medicare and determining whether they are eligible for Health Safety Net or Baystate’s Financial Assistance Program. Baystate Health Financial Counselors have all been trained and certified by the state as Certified Account Counselors to assist patients in applying for available state and federal programs.

**Program Type**

<table>
<thead>
<tr>
<th>Access/Coverage Supports</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tags: n/a</td>
</tr>
</tbody>
</table>

**Target Population**

- **Regions Served:** County-Hampden
- **Gender:** All
- **Age Group:** All
- **Ethnic/Racial Group:** All
- **Language:** All, English, Spanish
- **Environment Served:** Suburban; Urban

**Health Need**

- **DoN Health Priority:** Built Environment
- **Focus Issue:** n/a
- **Health Issue:** Social Determinants of Health – Access to Health Care, Uninsured/Underinsured

**Goals**

1. **Goal 1**
   - **Description:** Provide financial counseling services and secure insurance sponsorship for uninsured or underinsured individuals requesting our support.
   - **Status:** In progress
2. **Goal 2**
   - **Description:** Screen all individuals and provide assistance in completing and submitting applicable applications.
   - **Status:** In progress
3. **Goal 3**
   - **Description:** Utilize the Massachusetts Health Connector for online application submission in an effort to obtain real time application approvals.
   - **Status:** In progress

**Partners**

- Community Outreach Worker
- Networking Organization
- Massachusetts Association of Community Health Workers [www.machw.org](http://www.machw.org)
- Greater Springfield Senior Services [www.gsssi.org](http://www.gsssi.org)
- University of Massachusetts Medical School (UMMS) [www.umassmed.edu](http://www.umassmed.edu)
Supplemental Nutrition Application Program (SNAP)  www.fns.usda.gov/snap
Live Well Springfield  www.partnersforahealthiercommunity.org
Massachusetts Health & Hospital Association (MHA)  www.mhalink.org
Social Security Administration  www.ssa.gov

Contact Information
Cheryl St. John, Manager, Financial Counseling, Baystate Medical Center, 759 Chestnut St, Springfield, MA 01199. 413-794-3336. Cheryl.Stjohn@baystatehealth.org
# Baystate Mason Square Community Outreach and Education

**Brief Description or Objective**
Identify unmet community health needs and provide outreach to underserved residents of the Mason Square community via the coordination of health education focus groups, community advisory board, community health forums, and fairs.

**Program Type**
Total Population or Community-Wide Intervention  
**Tags:** Community Education; Community Health Center Partnership; Prevention

**Target Population**
- **Regions Served:** Springfield  
- **Gender:** All  
- **Age Group:** All  
- **Ethnic/Racial Group:** All, Black/African American, Hispanic/Latino  
- **Language:** All, English, Spanish  
- **Environment Served:** Urban

**Health Need**
- **DoN Health Priority:** Built Environment; Education  
- **Focus Issue:** All  
- **Health Issue:** All

**Goals**
- **Goal 1**  
  **Description:** To increase overall health in the Mason Square community.  
  **Status:** In progress  
- **Goal 2**  
  **Description:** Educate Mason Square residents so they can advocate for their own health care needs.  
  **Status:** In progress

**Partners**
- Springfield Girls’ Club Family Center  
  [www.springfieldgirlsclub.org](http://www.springfieldgirlsclub.org)  
- Springfield Department of Health & Human Services  
  [www.springfield-ma.gov/hhs/](http://www.springfield-ma.gov/hhs/)  
- HCS Headstart  
  [www.hcsheadstart.org](http://www.hcsheadstart.org)  
- Massachusetts Association of Community Health Workers  
  [www.machw.org](http://www.machw.org)  
- Martin Luther King, Jr. Family Services  
  [www.mlkrfamilyservices.org](http://www.mlkrfamilyservices.org)  
- Urban League of Greater Springfield  
  [www.ulspringfield.org](http://www.ulspringfield.org)  
- Springfield Partners for Community Action  
  [www.springfieldpartnersinc.com](http://www.springfieldpartnersinc.com)  
- New North Citizens’ Council  
- Patient Experience Committee

**Contact Information**
Mable Sharif, Community Liaison/Outreach Specialist, Baystate Mason Square Neighborhood Health Center, 11 Wilbraham Road, Springfield, MA 01109.  
413-794-9663. [mable.sharif@baystatehealth.org](mailto:mable.sharif@baystatehealth.org).
### MIGHTY (MOVING, IMPROVING AND GAINING HEALTH TOGETHER AT THE Y)

**Brief Description or Objective**

MIGHTY is a community-based, multi-disciplinary, pediatric, obesity treatment program. It is held at multiple locations including the YMCA of Greater Springfield, YMCA of Greater Westfield, YMCA in Greenfield, and most recently, the Scantic Valley YMCA located in Wilbraham. MIGHTY includes 14 two hour sessions of physical activity, nutrition, and behavior modification, over a one year period. It targets children and adolescents age 5-21. Sessions are augmented by individual exercise training, weekly phone calls, monthly group activities, cooking classes, free swimming lessons, behavioral health consults, and gardening experience. In addition, participants and their families are given a free six-month membership to their local YMCA. Ongoing monthly maintenance groups are available to all previous program participants. The Springfield program enrolls over 200 obese children and their families per year.

**Program Type**

Community-Clinical Linkages

**Tags:** Community Education; Prevention

**Target Population**

**Regions Served:** County-Hampden, County-Hampshire; County-Franklin

**Gender:** All

**Age Group:** All Children

**Ethnic/Racial Group:** All

**Language:** All, English, Spanish, ASL, Vietnamese

**Environment Served:** Rural; Suburban; Urban

**Health Need**

**DoN Health Priority:** Built Environment; Education; Social Environment

**Focus Issue:** Chronic Disease

**Health Issue:** Chronic Disease – Overweight, Obesity; Social Determinants of Health –Nutrition

**Goals**

**Goal 1**

**Description:** Serve children age two years to twenty-one years with a diagnosis of obesity (BMI > 95% for age) and offer them and their family resources aimed at promoting healthy nutrition, healthy activity and a healthy lifestyle.

**Status:** In progress

**Partners**

- YMCA of Greater Springfield [www.springfieldy.org](http://www.springfieldy.org)
- Springfield College [www.springfield.edu](http://www.springfield.edu)
- University of Mass, Amherst campus [www.umass.edu](http://www.umass.edu)
- Live Well Springfield [www.livewellspringfield.org](http://www.livewellspringfield.org)
- Westfield YMCA [www.westfieldy.org](http://www.westfieldy.org)
- Area schools and school nurses
- Pediatricians in Hampden, Franklin, & Hampshire County
- Mass In Motion

**Contact Information**

Chrystal Wittcopp, MD, Baystate General Pediatrics, 140 High Street, Springfield, Massachusetts. 413-794-7455. [chrystal.wittcopp@baystatehealth.org](mailto:chrystal.wittcopp@baystatehealth.org).
**PUBLIC HEALTH INSTITUTE OF WESTERN MASSACHUSETTS (PHIWM)**

**Brief Description or Objective**

Founded as a not-for-profit organization in 1996 by Baystate Health, the City of Springfield and other key local stakeholders, PHIWM has partnered with over 100 organizations in various community benefits projects since its creation. BMC supports the core infrastructure of the PHIWM by donating $250,000 annually plus additional in-kind services. PHIWM’s mission is to build measurably healthy communities for all with equitable opportunities and resources through civic leadership, collaborative partnerships, and policy advocacy. PHIWM does not provide direct services; rather it takes the role of neutral facilitator to promote community collaborations. In this role, PHIWM provides multipurpose support including convening and partnering, health policy development, population based health program delivery, and research and evaluation.

**Program Type**

Infrastructure to Support Community Benefits Collaboration  
**Tags:** Community Education; Health Professional/Staff Training; Prevention

**Target Population**

**Regions Served:** County-Hampden; County-Hampshire; County-Franklin; County-Berkshires  
**Gender:** All  
**Age Group:** All  
**Ethnic/Racial Group:** All  
**Language:** All  
**Environment Served:** Rural; Suburban; Urban

**Health Need**

**DoN Health Priority:** All  
**Focus Issue:** All  
**Health Issue:** All

**Goals**

**Goal 1**  
**Description:** Health Access/Public Policy: Ensure that all Springfield families and children have equal access to quality medical, dental, and mental health services.  
**Status:** In progress

**Goal 2**  
**Description:** Public Education for a Healthier Community: Increase public understanding about the impact of health inequities and shared community responsibility for reducing health disparities.  
**Status:** In progress

**Partners**

Residents, non-profit agencies, schools, preschools, housing agencies, state associations and departments, city government, behavioral health and healthcare professionals, healthcare institutions, and higher education

**Contact Information**

Jessica Collins, MS, Executive Director, PO Box 4895, Springfield Massachusetts, 01101-4895. 413-794-2520. jcollins@publichealthwm.org
## TRANSGENDER SUPPORT GROUP

**Brief Description or Objective**
In partnership with UniTy of Pioneer Valley, this peer lead support group is a psychosocial support group for transgender individuals, their allies and all LGBTs. The confidentiality and location of the meeting at a Baystate facility provides a safe environment in which to address issues related to transition, such as relationships, family, spirituality, and the workplace.

**Program Type**
Total Population or Community-Wide Intervention

**Tags:** Support Group

**Target Population**
- **Regions Served:** County-Hampden
- **Gender:** Transgender
- **Age Group:** Adult
- **Ethnic/Racial Group:** All
- **Language:** All, Spanish
- **Environment Served:** Suburban; Urban

**Health Need**
- **DoN Health Priority:** Social Environment
- **Focus Issue:** Mental Health and Mental Illness
- **Health Issue:** n/a

**Goals**
**Goal 1**
- **Description:** To be a resource and support for transgender individuals and the broader community.
- **Status:** In progress

**Goal 2**
- **Description:** To provide a safe space for transgender individuals and their partners to meet and provide support to each other.
- **Status:** In progress

**Partners**
UniTy of Pioneer Valley

**Contact Information**
Annamarie Golden, Director, Government and Community Relations, Baystate Health, 280 Chestnut Street, Springfield, Massachusetts 01199. 413-794-7622. annamarie.golden@baystatehealth.org.
BAYSTATE TRAUMA AND INJURY PREVENTION (TIP)

**Brief Description or Objective**
Trauma centers have an important role in reducing the impact of injury by participating in prevention efforts. These efforts are based on identification of specific injuries and risk factors in patients, families, and the community. For many injuries, prevention is often the only, if not the best, means of dealing with this health care problem. Examples of our programs include; Brains at Risk, The Balancing Act, Falls Prevention Initiative, former state Governor Patrick’s Safe and Successful Youth Initiative Youth Advisory Board, AARP Senior Driving Class, Don’t Hit the Street with Proper Car, Stop the Bleed, High School Distracted Driving, Hampden County DA/Springfield Police Gun Buy Back, and BSEP education. Currently there are several programs that are in development.

**Program Type**
Community-Clinical Linkages

**Tags:** Community Education; Health Professional/Staff Training; Prevention

**Target Population**

<table>
<thead>
<tr>
<th>Regions Served:</th>
<th>County-Franklin, County-Hampden, County-Hampshire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender:</td>
<td>All</td>
</tr>
<tr>
<td>Age Group:</td>
<td>All</td>
</tr>
<tr>
<td>Ethnic/Racial Group:</td>
<td>All</td>
</tr>
<tr>
<td>Language:</td>
<td>English</td>
</tr>
<tr>
<td>Built Environment:</td>
<td>Rural; Suburban; Urban</td>
</tr>
</tbody>
</table>

**Health Need**

<table>
<thead>
<tr>
<th>DoN Health Priority:</th>
<th>Education; Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Issue:</td>
<td>n/a</td>
</tr>
<tr>
<td>Health Issue:</td>
<td>Social Determinants of Health – Violence and Trauma</td>
</tr>
</tbody>
</table>

**Goals**

**Goal 1**

Description: Develop and implement prevention programs that are based on trauma registry (local) data, which is local data to identify the pattern, frequency, and risk for injury within the community.

Status: In progress

**Partners**

- Baystate Medical Center Behavior Health/Neuropsychology Department [www.baystatehealth.org](http://www.baystatehealth.org)
- Brain Injury Association of MA [www.biama.org](http://www.biama.org)
- Health New England [www.hne.org](http://www.hne.org)
- Baystate Child Protection Team
- MA Prevent Injuries Now Network [www.masspinn.org](http://www.masspinn.org)
- ROCA/SSYI [www.rocainc.org](http://www.rocainc.org)
- Springfield Police Department [www.springfieldpolice.net](http://www.springfieldpolice.net)
- Hampden County District Attorney [www.hampdenda.com](http://www.hampdenda.com)
- Baystate Health Senior Class
Contact Information

Ida Konderwicz, RN, BSN, CEN, Department of Surgery, Pediatric Trauma/Injury Prevention Coordinator, 759 Chestnut Street, Springfield, Massachusetts 01199. 413-794-8982. Ida.Konderwicz@baystatehealth.org.
## COMMUNITY BENEFITS EXPENDITURES

<table>
<thead>
<tr>
<th>PROGRAM TYPE</th>
<th>ESTIMATED TOTAL EXPENDITURES FOR FY 2020</th>
<th>APPROVED PROGRAM BUDGET FOR FY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNITY BENEFITS PROGRAMS</td>
<td>Direct Expenses $7,895,866</td>
<td>$200,000</td>
</tr>
<tr>
<td></td>
<td>Other Leveraged Resources $5,609,237</td>
<td>*Excluding expenditures that cannot be projected at the time of the report.</td>
</tr>
<tr>
<td></td>
<td><strong>Total CB Programs $13,505,103</strong></td>
<td></td>
</tr>
<tr>
<td>NET CHARITY CARE</td>
<td>HSN Assessment $6,094,834</td>
<td></td>
</tr>
<tr>
<td></td>
<td>HSN Denied Claims $0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Free/Discount Care (BMC Financial Assistance Program) $1,688,723</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Total Net Charity Care $8,329,651</strong></td>
<td></td>
</tr>
<tr>
<td>CORPORATE SPONSORSHIPS</td>
<td>$133,335*</td>
<td></td>
</tr>
<tr>
<td>TOTAL EXPENDITURES</td>
<td><strong>$21,421,995</strong></td>
<td></td>
</tr>
<tr>
<td>Net Patient Service Revenues for FY 2020</td>
<td>$1,255,969,784</td>
<td></td>
</tr>
<tr>
<td>Total Patient Care Related Expenses for FY 2020</td>
<td>$1,124,648,324</td>
<td></td>
</tr>
</tbody>
</table>

### OPTIONAL INFORMATION

- **Bad Debt**: $25,296,536  
  *Certified: YES*
- **IRS 990 Schedule H**: $100,027,213  
  *2018 Tax Return (FY 2019)*

*In the Office of Massachusetts Attorney General FY 2020 community benefits filing, corporate sponsorships are captured under the “Community Benefits Sponsorships” program.*