### EXECUTIVE SUMMARY

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>Baystate Medical Center</th>
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<tbody>
<tr>
<td></td>
<td>759 Chestnut Street, Springfield, Massachusetts 01199</td>
</tr>
<tr>
<td></td>
<td>413-794-0000</td>
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<tr>
<td></td>
<td>baystatehealth.org</td>
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<tr>
<th>PRIMARY SERVICE AREA</th>
<th>Hampden County</th>
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<tr>
<th>FACILITY TYPE</th>
<th>Not-for-profit</th>
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<tr>
<th>TOTAL LICENSED BEDS</th>
<th>746</th>
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<thead>
<tr>
<th>NUMBER OF EMPLOYEES</th>
<th>6,331.95 FTEs*</th>
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<tr>
<th>YEAR ESTABLISHED</th>
<th>1883</th>
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<tr>
<th>ETHNIC MIX OF PATIENTS</th>
<th>Includes Inpatient &amp; Outpatient (Excludes Baystate Reference Laboratories)</th>
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<tbody>
<tr>
<td>52.8% White; 31.8% Hispanic; 10.3% Black; 1.4% Asian; 0.0% American Indian or Alaskan Native; 0.1% Native Hawaiian or Pacific Islander; 3.6% Other</td>
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<tr>
<th>PAYER MIX OF PATIENTS</th>
<th>42,736 Inpatient Discharges</th>
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<tr>
<td>45.21% Medicare; 27.31% Medicaid; 22.02% Managed Care; 1.44% Non-Managed Care; 4.02% Other</td>
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<tr>
<th>ANNUAL EMERGENCY SERVICES STATISTICS</th>
<th>61,662 Emergency Service Visits</th>
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<tbody>
<tr>
<td>33.14% Medicaid; 1.43% Free Care; 11.59% Healthnet; 0.35% Commonwealth Care; 53.50% Other</td>
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<tr>
<th>PRESIDENT/CEO</th>
<th>Nancy Shendell-Falik, RN, MA</th>
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<tbody>
<tr>
<td>President, Baystate Medical Center</td>
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<tr>
<td>Senior Vice President of Hospital Operations, Baystate Health</td>
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<tr>
<td>Baystate Health</td>
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<tr>
<td>759 Chestnut Street, Springfield, Massachusetts 01199</td>
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<tr>
<td>413-794-5516</td>
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<tr>
<td><a href="mailto:nancy.shendell-falik@baystatehealth.org">nancy.shendell-falik@baystatehealth.org</a></td>
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<thead>
<tr>
<th>COMMUNITY BENEFITS CONTACT</th>
<th>Annamarie Golden</th>
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<tbody>
<tr>
<td>Director, Government and Community Relations</td>
<td></td>
</tr>
<tr>
<td>280 Chestnut Street, 6th Floor, Springfield, Massachusetts 01199</td>
<td></td>
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<tr>
<td>413-794-7622</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:annamarie.golden@baystatehealth.org">annamarie.golden@baystatehealth.org</a></td>
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| HOSPITAL SERVICES | Baystate Medical Center is a 746-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. |

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<tr>
<th>DHCFP ID</th>
<th>2339</th>
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<tr>
<th>HEALTH SYSTEM</th>
<th>Baystate Health, Inc.</th>
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<tr>
<th>COMMUNITY HEALTH NETWORK AREA (CHNA)</th>
<th>#4 Community Health Connection (Springfield)</th>
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*Based on FY 2021 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 can 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 13,000 team members and community partners on related topics including cultural humility, health equity, social determinants of health, and implicit bias in health care. Since 2020, Baystate Health 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.

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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 and the Massachusetts Attorney General’s website.

KEY ACCOMPLISHMENTS OF REPORTING YEAR

The Baystate Medical Center Community Benefits Advisory Council (BMC CBAC) continued to diversify and expand its membership and guest list throughout FY 2021. The BMC CBAC continues to meet monthly (second Thursday) and is co-chaired by a hospital employee and two community representatives. Due to COVID-19, meetings were switched to Zoom and continues to have success with this meeting platform.

Baystate Health hosted its first annual community benefits forum at all four system hospitals in June 2021. Hospital leaders, CBAC members, and representatives from the local County Health Improvement Plan (CHIP) networks shared in the program to inform the community about local health initiatives and collaboration across partners to increase the well-being of the region. The goals of the forum were to:

- Increased the understanding of Baystate Health’s Community Benefit Program, its CB strategies and initiatives and how they align with/complement the CHIP process and other community efforts
- Provide input to Baystate Health around key questions impacting the community
- Gain awareness of ways to stay informed/engaged with Baystate Health

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. Each CHNA iteration builds on the previous assessment so BMC can better understand the health need trends of the communities served and meet its fiduciary requirement as a tax-exempt
hospital.

In preparation for the 2022 CHNA, Baystate Health began an early convening of its Regional Advisory Committee (RAC), a group composed of Coalition members, residents, community-based organizations and local officials that help co-create the guiding values, data collection, community engagement and design of the reports. In response to a desire from the RAC to start the CHNA design process earlier, members began convening in December 2020 to recruit and build diversity of members for the 2022 iteration. Members gave input into the organizational and power-sharing framework between the RAC community members and Coalition representatives. New additions this year included the development of a hospital and community dual co-chair model for the RAC, integrating community representatives into the Steering committee (previously exclusive to Coalition and consultant team) and the formal creation of guiding values that would help inform all aspects of the CHNA process and written report.

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.

Formerly referred to as the “DoN Grant Program,” Baystate’s system-wide **Better Together Grant** opportunity 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 (SDoH), will improve people’s overall well-being and make communities healthier places to live. Better Together is a system-wide grant program, yet each hospital entity convenes its own application process in partnership with the hospital CBAC and with support from the Office of Government and Community Relations.

In FY 2021, the BMC CBAC embarked on a new Request for Proposals (RFP) process that sought to address and improve Education outcomes in the Greater Springfield region. At the close of the RFP, five grant awards were made to the following organizations, totaling $515,000 in investments: Boys and Girls Club of Greater Holyoke, Girls Inc. of the Valley, Roca and The CARE Center. More details on these grantees can be found below.

**PHIWM** provides evaluation and program planning expertise to support all Better Together grantees in the development and implementation of their program evaluation. PHIWM continues to provide training and technical assistance to grantees, in addition to regularly attending the CBAC meetings and providing input into future RFP processes. Grantees share summaries of their grants and discuss what they would like from a Community of Practice, including learning from other grantees, sharing evaluation tools and databases being used, and learning about topics such as community engagement, cultural humility, and understanding policies affecting health equity. Other topics of interest expressed by grantees include technical assistance around sustainability and racial justice.

Following the 2019 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.

Because of the urgent healthcare needs and attention required of employees and volunteers to address COVID-19, the SIP documents were not updated to capture progress in data for the fiscal year. The aim of the Community Relations Office and CBACs is to revise these SIPs at the close of the next 2022 CHNA.

**Education**

**Baystate Springfield Educational Partnership (BSEP)**: The BSEP program engaged 203 (unique number of participants is smaller) high school students from all Springfield High Schools and several charter and private schools. Numbers were impacted by pandemic restrictions at the hospital.  
- Coordinated four pathology–based summer workshops for 53 students.
- Coordinated summer internships at Baystate Medical Center for 28 students. BSEP trained (4) students as certified nursing assistants, four (4) in phlebotomy two (2) Operating Room Assistants, and several other areas of the hospital. The number also includes 5 Summer Scholar students, which was a revival of the program cancelled in 2020.
- Placed 12 students in work experience throughout the year as part of the Workforce Innovation and Opportunity Act (WIOA) program and other funded workforce development initiatives. Baystate has already jumped to the top of the minimum wage scale which will impact the number of students that can have a work experience under the grant.
- Three rising BSEP seniors participated in breast cancer research at the Pioneer Valley Life Science Institute (PVLSI) during the summer.
- Coordinated the Baystate Summer Academy program virtually for 13 undergraduate students from the local area. It ran for 10 weeks once a week over the summer of 2021.
- Awarded 25 former BSEP participants $25,000 in scholarships to support their pursuit of undergraduate and graduate education. Total Baystate scholarships awarded to date now exceeds $775,000.
- The second level public health class created a public service announcement (PSA) on the COVID vaccine. Created in partnership with Focus Springfield (local public access television station). See link: [https://www.dropbox.com/s/w9ayy2v93ft94v2/BSEP%20-%20Get%20Your%20Vaccine%20Final%20Draft.mov?dl=0](https://www.dropbox.com/s/w9ayy2v93ft94v2/BSEP%20-%20Get%20Your%20Vaccine%20Final%20Draft.mov?dl=0)
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. As imagined, the role of the Specialist and their activities continues to be impacted by COVID-19. In addition to overseeing employee-patient precautions and visitor restrictions at the clinic, the specialist was Before the state-wide shut down, the Community Liaison & Outreach Specialist was able to assist patients with the knowledge of how to continue to receive equitable health care by connecting and teaching patients how to use their digital equipment such as cell phone to have telehealth appointments as well as accessing other services for themselves.

Below is a list of key initiatives coordinated in FY 2021:

**October 2020**
- **The Stone Soul 10th Annual Safe & Sane Halloween Event:** Donated to the Stone Soul 10th Annual Safe & Sane Halloween “Drive Through Party” for children ages 2 to 16, by donating 100 bags of candy and 100 gift bags on behalf of Baystate Mason Square NHC. The event was held on Saturday 10/31/2020 3pm to 5pm in the Panache Banquet Hall Parking lot. There were approximately 40 cars that drove through, and a few walk-ups totaling 200+ children.

**November 2020**
- **Thanksgiving Baskets:** Teamed up with the Black Men of Greater Springfield with identifying and providing 15 families of (4-8 family members) with a complete thanksgiving dinner including a turkey valued @ approximately $1,500.00+.

**December 2020:**
- **Holiday Gift:** Identified a family of 9 to be supported by The Black Men Of Greater Springfield with $250 in gift cards for the holidays. COVID supplies COVID-19 supplies (8 face masks; 1 disinfectant spray; 10 wipes; 1 roll paper towels; and 1 pulse oximeter) and BMSNHC bag clips and pens were also added to the gift.

**January 2021:**
- **Coat Give Away:** Teamed up with the Mason Square C-3 Policing and New North Citizen Council Deb Hunt Center in holding a coat drive at the Deb Hunt Center. Collected and gave out 450 new coats for children (325) and adults (125) on Saturday 1/16/21.

**February 2021**
- Advocated for patient and obtained one Space Heater valued at $149.00. for a patient whose furnace broke on Saturday February 13, 2021.
- Referred 13 people to become patients of Mason Square NHC. Assisted with booking 8 pediatric and 5 adult appointments.
- Participated in a COVID-19 Vaccination zoom meeting on 2/17/21 with 32 Winchester Square Golden Age Club Members. Served as a speaker and advocated for COVID-19 vaccinations. This resulted with 19 people saying they would definitely take the shot, 6 said they would have to talk with their doctor first because of existing health concerns, while 6 made no comment either way.
- As a member of the Springfield Black COVID-19 Coalition, assisted with reaching out to 26 people in Mason Square to invite them to drive up to pick-up personal protective equipment (PPE), information about the COVID-19 Vaccines and how to stay safe.
March 2021

- The Families Against Violence & The Old Hill Neighborhood Council, provided 500 children face masks, 500 small bottles of hand sanitizer for children ages 2-5 years and 15 rolls of paper towels for patients of Baystate Mason Square NHC and other families living in Mason Square community. The children needed the mask to participate in a physical exercise program in the park with mask and social distancing.

April 2021

- On Saturday April 3rd from 12pm-2pm, participated in the Mason Square C3 Policing Easter Bag Give Away Drive Thru in the Panache parking lot across the street from the BMSNHC. Distributed 200 gift bags to children ages 1-12 years old.

May 2021

- Springfield Black COVID Coalition PPE Drive hosted an event on Saturday May 8th where the Specialist participated in giving out more than 500 items of personal protective equipment to 245 people from 11am-2pm in the Panache parking lot.

June 2021

- The CAB presented the 8 Mason Square NHC Graduating Resident Doctors with a ceremony of appreciation for their four years of service on Friday June 4, 2021 4pm-5pm.

July 2021

- Due to the hardship caused by the COVID-19 Pandemic, people/patients were in need of basic household items that were met by local donations: a small freezer valued at approximately $185.00. (Donated by The Black Men of Greater Spfld.); two air conditioners valued at $200 each; four large fans valued at 120.00 each

Septmeber 2021

- The CAB: In recognition of National Emergency Preparedness Month, CAB members (15) received emergency preparedness kits @ $70 each totaling @ $1,050.00
- Adopt a Class: Assisted with collecting 4 large boxes of school supplies 500+ items

The Baystate Health Sciences Library’s Patient and Consumer Health Information Services concluded its second year of operations affected by the Covid-19 pandemic. This primarily resulted in switching to a virtual service model that should be only temporary until conditions improve in the future. The Library embarked on its fifth year since consolidating the service locations for consumer health information that in the past was for provided to walk-ins or other consumers contacting the library by email or phone from the previous satellite library location at the Tolosky Center. All inquiries instead continue to come in exclusively through the Health Sciences Library on the main campus. Walk-in information services to the general public, oftentimes on their way to visit friends or loved ones who are patients continued to be suspended and offered virtually only – by phone, email or postal mail. With the resumption of busy day surgery services located above the Health Sciences Library in the Chestnut building, a few related consumer health inquiries from patients and family members were submitted to the Library’s “Ask a Librarian” service. Some persons indicated that they were prompted to reach out after passing the library doors in the corridor. One of the major changes during 2021 was the inability to reopen our doors to walk-ins as the Library remains locked and accessible 24/7 by badge access only, and therefore physically inaccessible to the general public. The Library plans to address this in 2022 by installing a buzzer/intercom system for non-employee visitors. With a few Library staff on-site daily during business hours, health consumers should be able to ring for access and assistance once again. The number of visits throughout 2021 however continue to be on hold until a buzzer is installed. While there was an inevitable decline by 20 % in the total number of inquiries in FY21 – partly from a full year of inaccessibility on-site assistance, which was offered for almost half of the prior year, FY 2020, questions were still submitted every month, including during the holiday season. Moreover, the focus was still largely on Covid-19, and popular media and organizations provided the public with a huge amount of readily available information on the virus. This decline underscores that importance of access to in-person assistance as well as the clear correlation between scheduled medical procedures and consumer health
questions. With many consumers now coming in for screenings and elective procedures that were postponed the previous year, it is expected that 2022 information requests will show a corresponding increase. Over a dozen requests were made asking about books on loan, for which callers were referred to local public libraries. Examples were requests for information on coding and costs of procedures, diet and nutrition cookbooks and aspects of diabetes.

Consumer questions submitted: Virtual requests however slowed down only slightly during the 2021 fiscal year. and approximately 140 consumer health information questions were sent to the Library either by email or phone, or through the Library’s "Ask a Librarian” feature accessible from both the patient portal or the Library’s Consumer Health Information page on the Library website. The top 10 broad subject areas of interest over the past year with multiple questions in each category, in descending order were related to: 1. Covid-19 2. Cardiovascular 3. Cancer 4. Medications & drugs 5. Portal-related: test results and medical record 6. Postoperative care 7. Gastrointestinal 7. Orthopedics/sports medicine 8. Eyes/vision 10. Diet & nutrition.

Consumer Health Information space: A corner of the library where newsletters, popular health-related books, videos, and the library’s graphic medicine collection are all located is still dedicated to consumer health in hopes of eventual in-person assistance even with on-site services suspended. Consumer-friendly three-dimensional anatomical models or organs and body systems augment the consumer collection. Models have been placed in display cases or with special shelving throughout the library. Even though the general public was no longer able to drop in, approach the Service Desk or ask to be accompanied to appointment locations or to utilize the library computers, several consumers called the main Library number for directions or with computer related questions. These included “what does PDF stand for,” to “how do I send an email with something from my doctor?” to “IS there a way to avoid websites that have too many ads popping up?”

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, continues to be suspended with health related inquiries submitted to the Library virtually: via email, the patient portal’s “Ask a Librarian” feature, phone messaging or postal mail.

"Ask a Librarian” patient portal feature: 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 is still the most common way of contacting the Library's consumer health information services. Remote access has been the major means of access over the last two years – and similar to consumer health information services at other hospital and academic libraries. Nearly all the questions are handled by the Library Manager, to ensure quality, standardization and that information adheres to general guidelines of using only trusted, non-commercial sources for information. The curated lists provide general, non-controversial content and include a disclaimer that the service is limited to basic information and does not dispense medical advice.

Digital resources: With on-site consumer health information service suspended during FY21, the Library focused more on digital resources. The Library enhanced and expanded the Covid-19 Subject Guide for Health Consumers that was created back in 2020. Links to additional Web resources were added, along with a growing number of consumer health sections for licensed databases that the Library subscribes to. While the latter are not accessible to the general public away from a Baystate location or computer IP address, the Library is able to download the content and attach relevant PDFs to any email message that can then be opened from anywhere. The consumer page/subject guide itself reflected a high rate of use, with a total of 659 unique views over the latest 12-month period, with use peaking in May of 2021. Close to that number were over 300 views of the Library's Covid-19 subject guide, which added a section on where to find vaccination sites and available options, and other helpful information from our government agencies HHS, FDA, CDC, and the WHO – as well as state (Massachusetts Department of Public Health) and even local resources. Consumers continue to be interested in background information on Covid-19 and especially the new variants that emerged in 2021 with Delta and other emerging variants such as Omicron. Throughout the year, many people contacted the Library asking about where they could go to be tested for Covid-19. In light of the considerable amount of misinformation, the Library continues to promote services as a means of obtaining reliable information on the virus and related aspects. Some of the information requests were answered over the phone, while email responses typically include and attached bibliography with hyperlinks to content on the web or else PDFs of consumer information prepared by the producers of the Library's major subscription databases - most of which provide complete coverage in English and Spanish and selected content in many other languages. Common questions included, "what are the main symptoms of Covid?” or, “what are the most important ways to protect myself and my loved ones,” types of masks or common side effects.

Collaboration with Patient Relations: During the past year, there were naturally fewer procedures resulting in fewer requests for information about test results or medical procedures or other therapies. Previously, many information requests needing clinical expertise or that involved a problem or complaint were readily referred to Patient Relations – which had been staffed with two RNs. Together with a drop in elective procedures and staffing changes in Patient Relations, very few inquiries were referred to that service this past year. Going forward, the few that must be sent to Patient Relations are often directed by Patient Relations.
personnel to services in Medical Staff Offices. This trend is consistent with the consumer health information disclaimer that the Library does not dispense medical advice or replace a discussion with a health care provider. The disclaimer was edited and updated as follows: The "Ask a Librarian" service provides selected, background information related to your topic of interest. It does not substitute for a consultation with a qualified medical professional or their expert advice and does not include ALL available information in existence. It is important to consult first with a medical provider or physician for information on your given condition, test, medical procedure, or treatment. Your health care provider should be the source of medical advice related to your specific concerns.

Growing, ancillary professional/consumer collections. Over the past year, the Health Sciences Library has both established a growing collection of literature to combat racism and promote diversity, equity and inclusion — with popular books available for Baystate employees — and of potential use for consumers in the community in the future. Purchases have all been ordered from a local, minority-owned bookstore. Furthermore, the Library's growing collection of a growing genre called Graphic Medicine, with books aimed at both health professionals and those to support the concerns and subject interests of health consumers.

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 in FY21, PURCH students have been able to partner with community organizations such as the BeHealthy ACO Partnership, ReGreen Springfield, Martin Luther King Jr. Family Services and Square One.

A new initiative that blossomed in FY21 with the students was the PURCH Give Back Program. Over the years, students have recognized that local community-based organizations often require additional support in the form of funding, staffing, and resources (time, talent, and treasure). In order to respond to these identified needs, students recognized the value of being able to provide funding to social programs for priority populations, which address social determinants of health, health equity, and improve the overall well-being of communities that students learn from and work within. In partnership with Baystate Health’s Office of Government and Community Relations (OGCR), PURCH students have the opportunity to financially support eligible community-based organizations*, programs, or projects, using specific earmarked Baystate Health community benefits funding. Through this experience, students across all four years of the PURCH program will engage with specific community organizations and may identify an urgent, current, or emerging need. The PURCH students may then develop a proposal that addresses a specific organizational or programmatic need and addressing the social determinants of health. Students will have access to grant writing resources to assist in the development of funding proposals. Proposals will be submitted by students on behalf of the beneficiary organization. If determined by the Proposal Review Committee (PRC) to fund the proposal, after this time the beneficiary organization will be notified of the award by the student(s) whom submitted the proposal. The first Give Back Program project funded was an initiative entitled “Rainbow Kitchen” that looked to introduce healthy cooking classes to residents of a new LGBTQ+ residential living facility in Holyoke, MA, run by Tapestry Health.

Boys & Girls Club of Greater Holyoke received a three-year, $93,000 Better Together grant to support its Education and Resilience initiative. The club proposes to hire a social workers to build strategic, long-term organizational capacity in the area of social work in order to meet the growing mental, behavioral, emotional needs of our youth. The Social Worker will provide the Club with the tools needed to properly and thoroughly serve vulnerable youth and those in disadvantaged circumstances. The Social Worker will be a part-time year-round position, Monday – Friday. The key elements of positive youth development the Social Worker will focus on is responsibility, connectedness, and positive values. The
Social Worker will identify youth strengths and weaknesses, engage and motivate youth to support positive development, connect children with one another, and harness existing resources to build strong collaborations with other agencies. The Social Worker will be charged with facilitating professional development staff trainings in key areas of mental health and behavioral health trauma informed best practices. The Social Worker will also welcome opportunities for new partnerships with local colleges and be able to supervise graduate and undergraduate level social work interns, allowing them to conduct their field placement practicums at the Club and ultimately expanding our capacity to serve youth. In FY21, a key success was developing a strong partnership with River Valley Counseling and families that had a prior relationship with a River Valley counselor have begun to opt into having remote zoom and/or in-person social worker services occur at the Club. As a result, staff are now talking directly to the social workers and sharing behaviors patterns, challenges, and successes that are being witnessed thus creating a stronger relationship with the family. In interim as the Club works on hiring the social worker, staff is actively participating in online continuing education programs in the areas of trauma informed care and how to implement best practices within day to day operations. Staff are involved in learning how to become a Trauma-Informed Club by resisting re-traumatization and intentionally eliminating stressful toxic environments. The Staff and Club are learning how to prioritize the well-being of youth, families, and staff through relationships and building resilience. While they have yet to secure a permanent social worker, the culture change is actively occurring as they are minimizing the stigma associated with mental health for everyone who walks through our club doors.

Girls Inc. of the Valley received a three-year, $60,000 Better Together grant to support its Growing the Girls Inc. Experience initiative. The initiative will improve health outcomes by strengthening girls’ social emotional skills and increasing their educational attainment. Funding will go towards the 5-year Eureka! STEM program serving girls 13-18. In partnership with UMass and Bay Path University, Eureka! typically serves 120+ girls with science workshops, exposure to college campuses and academic/personal growth support to prepare girls to succeed in school and matriculate college. In addition, Girls Inc. groups will meet three times a week in virtual social emotional learning experiences for girls 5-18 and offer academic tutoring and homework help. An in-person full day Learning Pod for 13 Holyoke girls ages 6-11 to support their remote schooling at our Mariposa Center will also be supported by this funding. Lastly, Healthy Sexuality programming will be offered to middle school girls through school partnerships. Two units will be virtually delivered--Healthy Relationships and Media, Sex and Technology. Currently, programming is incorporated into the school day at 3 Springfield schools. Staff are conducting outreach and planning with schools in Holyoke, Springfield and Chicopee to re-build and expand partnerships to help us reach our goal of serving 1000 girls by year 3. In FY21, the biggest success was the number of school partnerships that Girls Inc. was able to quickly put in place for this school year, in the aftermath of the disruption caused by remote schooling. School administrators in Holyoke, Springfield and Chicopee clearly realize the value of Girls Inc.’s programming to help them address students’ need for learning recovery and social emotional support after experiencing the trauma of the Covid-19 pandemic. Girls Inc.’s focus on maintaining connections with the schools throughout the pandemic paved the way for swift reformation of partnerships with John J. Duggan Middle School, John F. Kennedy Middle School, M. Marcus Kiley Middle School, Chestnut Impact Middle School and Lyceum College Prep (formerly Chestnut Academy) in Springfield and Stefanik School in Chicopee. Girls Inc. also formed a new partnership with the Morgan School in Holyoke.

Project Coach received a three-year, $112,000 Better Together grant to support its youth program initiative. The vision of Project Coach is to improve health and educational outcomes for youth in Springfield by empowering teens to serve as mentors and coaches to younger children, thereby increasing opportunities for youth to be physically active and promote health, wellness, and social cohesion. Goals for
this initiative include fostering teen leadership in community through mentoring, academic support and coaching, helping Elementary Players develop healthy physical activity habits and Social Emotional Learning (SEL) skills, and refine and improve program evaluation. Full implementation of the Project Coach curriculum has been delayed due to COVID restrictions in schools. Nonetheless, a key success of this fiscal year was challenging the team of youth and the Smith College students to design a unique set of videos that would not only encourage young students to infuse their days with movement but also practice key academic skills as they moved. Project Coach called the project “Energizers” in recognition of the important connections between exercise (even small bursts or “exercise snacks”), academic achievement, and overall well-being. Energizers also introduced and reinforced social-emotional learning and key Project Coach values such as growth mindset (“bounce back”) and “practice makes possible.” The videos were geared toward children in Grades K-2. Project Coach also partnered with the Smith College Basketball Team to create 11 additional videos to support children in Grades 3-5 to practice multiplication facts, while also having a chance to move. In total, 17 videos were offered to the Springfield Public Schools to enhance learning and provide opportunities for movement during transitional times over the course of the day.

Roca received a three-year, $130,000 Better Together grant to support its Roca Educational Advancement Project (REAP) initiative. In order to move the needle on urban violence, Roca works directly with young people who are engaged in violence, either as perpetrators or victims. Roca recognizes that this group of young people cannot fully access new opportunities without regulating their emotions and dealing with their trauma. REAP is designed to help these young people learn to manage their own trauma and develop the academic skills they need to take advantage of new opportunities and create long-term, sustained behavior change. REAP will build on this work with the expansion of a trauma-informed educational programming that meets young people where they are and allows for mistakes and relapses. Roca will help them build emotional muscles, creating new neuropathways through practicing CBT repeatedly in everything they do. Roca creates a space for them to change, relapse, and change further—not before accessing opportunities, but within them. Roca provides a variety of life skills, employment, and educational programming, from Transitional Employment, Pre-vocational Training, Workforce Readiness, Basic Education, GED Prep, Parenting Education, and ESL. At Roca, these programs are offered in varying informal and formal structures (from repeat drop-in sessions to full certificate courses) to allow young people at varying stages of readiness to learn as they change and progress through the Intervention Model. In FY21, Roca Springfield served 61 young people in educational programming, 165 young people in employment programming, and served 194 young people in life skills. All of these numbers are unduplicated. This specific grant served 43 young people to date, with 38 receiving CBT and other employment and life skills.

The Care Center received a three-year, $120,000 Better Together grant to support its Bard Microcollege initiative. Located at The Care Center, Bard Microcollege Holyoke is modeled after the successful and long-running Bard Prison Initiative, which creates the opportunity for incarcerated men and women to earn a Bard College degree. In partnership with Bard College, The Care Center has tailored BMH to meet the unique needs and challenges of low-income women. The college is open to young mothers and other low-income women living in the Holyoke, Springfield, or Chicopee area who have a high school diploma or equivalency (GED/HISET). Scholarships and grants cover tuition and books—the degree is free. The core curriculum is designed to help students hone versatile skills (writing, analytical, mathematical) that will prepare them for a 4-year college and rewarding career. The rigorous curriculum focuses heavily on writing, close reading, and critical thinking through study in a variety of subject areas including history, literature, mathematics, anthropology, politics, philosophy, and science. Those who successfully complete the course requirements receive an Associate in Arts degree from Bard College.
Supports such as daycare, counseling, transportation, on-site medical care and meals help remove some of the major barriers that our students have traditionally faced in college. In FY21, 16 women graduated from Bard Microcollege Holyoke, becoming the program’s largest graduating class to date. These women succeeded in college despite the additional burdens presented by parenting and studying in a pandemic.

In the same month, Care Center saw the first Microcollege graduates earn Bachelor’s degrees. Both were employed within weeks of graduating. One student graduated from Smith College and is now working at a marketing firm. The other graduated from Mount Holyoke and received two job offers.

**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 1,900 doses of Narcan given.

Please also see description of **Hampden County Health Improvement Plan (CHIP)** below under “Activities that address other CHNA priorities.”

**Built Environment**

The **Alliance for Digital Equity (the Alliance)** emerged from a broad community engagement and conversation process led by Baystate Health’s Vice President for Community Health, Frank Robinson, in summer 2020. The conversations involved over 150 individuals from Hampden, Hampshire, and Franklin counties, gathering online during the course of three meetings. The focus of the project was to frame an understanding of the digital divide in Hampden, Hampshire, and Franklin counties of Western Massachusetts. In fall 2020, a group of approximately 30 individuals, representing a breadth of organizations, followed up with the goal of bringing attention and action to the digital equity issues that were highlighted from the summer conversations. The term “digital divide” refers to the gap between people who are able to benefit from digital technologies and those who cannot. The digital divide creates economic, educational, and social inequalities. The digital divide has impacts that cut across all aspects of life and our society. Digital equity is the ideal in which all people and communities have equal access to digital equipment and access to the internet via broadband or Wi-Fi—as well as digital proficiency. Digital equity ensures that all people have the opportunity and capacity to participate fully in our society, economy, and democracy. Digital equity is necessary for civic and cultural participation, employment, lifelong learning, and access to essential services. Up to date information about the Alliance activities can be found at [www.AllianceForDigitalEquity.com](http://www.AllianceForDigitalEquity.com).

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 2021, these community training sites for our Medical Residency Program provided continuity of care for 34,362 unduplicated patients and over 122,000 patient encounters/visits annually. Through the various sponsored programs
BM provides enhanced services such as HIV/STI/Hep 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 sees 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 2021, BRTP saw a total of 539 patients for physician visits and 85 patients for nurse visits. The pandemic hit greatly and the clinic had a decrease in the amount of patients that were seen during the year. BRTP started to have less in person contact with patients since the switch to telehealth visits. This was a difficult situation because some patients were not answering 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. Those patients started being referred to BRTP. Some of them had to drive 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. Luckily those patients that were put on treatment lived an hour away.

**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 2021 the MIGHTY program in Springfield had a very successful and busy year, enrolling and serving 70 children and their families, and continues to expand with several new programmatic options and increased staff for both exercise and nutrition.

**Financial Health**

BMC provides **financial counseling** services to its community and patients who have concerns about their health care costs. Financial Counselors are dedicated to: identifying and meeting their client’s health care needs; providing assistance to apply for health insurance; navigating the health care industry; as well as determining eligibility for the Baystate Financial Assistance Program. They can also assist in linking their
clients to other community health insurance resources. BMC Financial Counselors are Certified Application Counselors, which requires annual training and re-certification through the state to assist the community in applying for state and federal health care programs.

BMC continues to serve 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. In FY21, a decision was made to pilot a portion of funding for Union Capital Boston to come into the North End of Springfield. This initiative will introduce a mobile application to residents in order to incentivize community and civic engagement. Funding will be allocated next fiscal year.

**Violence and Trauma**

During this unprecedented COVID time in FY21, most **Injury Prevention** initiatives continued to be placed on hold. TIP was redeployed to co-assist, educate and support the new Adult Trauma Performance Improvement. TIP also resumed her previous role entering Trauma charts into our National Trauma One Data base to help prepare for our Trauma reverification.

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 results 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:** 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. Our team reformatted our program into a Virtual Balance Act. We added a Pharmacist to the lecture group resulting in rave reviews. Our program can be viewed on the Baystate YouTube channel.

- **Falls Prevention Initiative (FPI):** 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. Attendance continues to be low due to the 5th wave of COVID.

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. Programing continued as well as well correspondents. They continued to be done.
virtually using zoom platform or via phone. The summer of 2021 participants returned to ROCA and are presently still reporting in person to the youth workers. The youth and the employees are COVID tested weekly.

Other key accomplishments this fiscal year:

- TIP provided ED nurse education for Adult and Pediatric Trauma Bootcamps.
- TIP was on the planning committee for Hampden County Improvement Plan; Domain 5 Violence and Injury Prevention. We held our first Virtual Hampden County Mentoring Summit called Let’s Build a Mentoring Movement.
- TIP was on the planning committee and participated in our 31st annual Virtual Hampden County District Attorney Victim Rights Conference: Seek Justice-Ensure Victims’ Rights-Inspire Hope.
- TIP became a member of the Nonviolence Springfield community meetings.
- TIP was on the planning committee for our first Virtual Trauma Nurse Jeopardy education.
- TIP is the co-coordinator/organizer of the Hospital Based Violence Intervention Program core team along with Dr. Kramer and our community partner ROCA.
- TIP and team lectured at Nursing Grand Rounds Baystate Trauma Program the Path to Reverification.
- TIP collaborated with BH concussion experts to create a concussion card. This card was placed in exit writer in all 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.
- 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 participants. The grant provided funds to reimburse the Social Workers salary for their time away from BMC. Placed on hold due to COVID.
- Provision of education as a preceptor and collaborator along with Erin Jarosz, BMC Rehab Supervisor for Western New England OT Doctoral students on Falls Prevention.
- TIP provided nursing support in the Pediatric Surgery Office.
- TIP assisted in educating Emergency Room and Surgical Residents for Advance Trauma Life Support.
- 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. We were also able to distribute car seats to Holyoke, Springfield and Chicopee Fire Departments for their community car seat check. These programs educate parents on the proper installation of car seats & encourages safe use of them (replacing old or damaged items)
- TIP and team achieved a successful American College of Surgeons virtual Trauma reverification that is valid for the next three years.
- Stop the Bleed (STB) and Brains at Risk programs are still on hold due to COVID.

TIP Committees and Facilitation of events:

- Virtual Hampden County Healthy Improvement Plan (HCHIP)
- Child Fatality Team -On hold due to COVID
- Virtual MA Prevention Injuries Now Network

The **Baystate Family Advocacy Center (FAC)** of Baystate Children’s Hospital provides care to over 117 children and families for outpatient medical assessments and inpatient/emergency room consultations continue at about 73 visits per year. The FAC Mental Health Team continued to experience a very busy year and saw a total of 4059 visits in FY 2021. In total, 626 patients were seen, with 143 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 $1,250,000 in FY 2021 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. 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 began 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 its fourth and fifth Substance Abuse and Mental Health Services Administration / National Child Traumatic Stress Initiative grant in October 2021. The Building Resiliency in Young Children (BRYC) program (5 years 2 million dollars) allows the FAC to expand its infant and early childhood trauma-focused services, thus filling a huge gap in the community. The second award allows for the creation of the Child Advocacy Training and Support Center (5 years 3 million dollars), which will be a national training center supporting Children’s Advocacy Centers in building trauma informed multidisciplinary teams and training their mental health providers in evidence-based trauma-focused therapy.

**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 (Pioneer Valley Asthma Coalition and Springfield Healthy Homes Collaborative), 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 continues to build capacity through community based research and evaluation by using data to inform interventions and enhance impact.

FY 2021 accomplishments include:

- The Pioneer Valley Asthma Coalition had success with implementing an air sensor network - Pioneer Valley Healthy Air Network- funded by the MA Attorney General’s office and designed to increase awareness of air quality in partnership with Yale University, Cities of Holyoke and Springfield, Earthwatch and ReGreen Springfield.
- Springfield Healthy Homes Collaborative, funded by the City of Springfield and MA Dpt of Public Health brings awareness to healthy housing issues and, in partnership with Square One, lead poisoning awareness and lead paint abatement resources.
- 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 housing led to the PHIWM’s 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 Asthma program in partnership with Revitalize CDC took their project to scale serving families in the Greater Springfield area that had been flagged in the Baystate Health system for having asthma related visits or admittances. This program continues through the Be Healthy Partnership Flex Services program and other healthy homes programming implemented by Revitalize CDC with data management by PHIWM.
- 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 platform allows for anyone to search for resources and also for providers to do closed loop referrals as needed. PHIWM partnered with both the Human Service Forum and many community based organizations as well as healthcare entities. A local television station has
agreed to be the media sponsor. 413Cares set up partnerships with the Hampden County Community Health Improvement Plan Mentoring and Substance Use prevention campaigns to drive people to 413Cares for services.

- 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 EstoyAquí. Our Coalition worked 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.

Transgender Support Group: paused during FY21

As part of an annual tradition, in FY 2021 Baystate Health team members generously donate school supplies to local elementary schools located in each of our four hospital communities. This year, despite COVID-19, employees were able to participate in school supplies donation drives in person at our facilities. Each hospital uniquely selects which schools and/or non-profit to make the donations through. Baystate Medical Center and its community health centers were able to donate to six local elementary schools in Springfield. Beneficiary schools included: Brightwood Elementary School, William N. DeBerry Elementary School, Gerena Community School, Lincoln Elementary School, Margaret C. Ells Elementary School, and Milton Bradley Elementary School.

The COVID-19 pandemic and holiday surge may have prohibited our hospitals from hosting their annual in person holiday toy drives, but it did not stop our employees from generously donating new toys/gifts to benefit local children during the holiday season. Each Baystate hospital created a safe plan for employees to mail or deliver their toy donations. Baystate Medical team members donated over 300 toys, shipped directly by the Baystate Health Warehouse team to our three Springfield community health centers for staff and providers to gift to pediatrics patients. Baystate Health’s Community Benefits Program provided one-time holiday basic needs grants to New North Citizens’ Council and Martin Luther King, Jr. Family Services, both based in Springfield.

Baystate continued its funding of the Hampden County Healthy Improvement Plan (HCHIP) in FY 2021. Pioneer Valley Planning Commission (PVPC) and Public Health Institute of Western Massachusetts (PHIWM) are the backbone support organizations for the HCHIP. Over this year, $10,000 of Baystate funding was used to fund CHIP mini grants to advance various strategies under the domain groups (see below for domain descriptions). Awardees included Estoy Aquí LLC: Suicide Prevention and Social Justice Education; Let’s Move Holyoke: Farmers Market Coach; University of Massachusetts Amherst: STRIVE Youth Participatory Action Research. 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 and continues to share in statewide convenings with other recipients. For the past eight years, Hampden County has ranked 14th 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. The HCHIP continues to self-reflect and have intentional discussions on race, white dominant culture, inequities, and discrimination. Two full network trainings were hosted for members free of charge by facilitator Mo Barbosa: “Race, Racism and Racial Equity” and “Achieving Equity through Policy, Systems and Environment Change.”
Plans for Next Reporting Year

In FY 2022, 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.

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.

CHNA Community Engagement

The CBAC, in collaboration with the Coalition and RAC, plans on expanding in the area of community engagement for the 2022 CHNA. After taking into consideration limitations with COVID-19 safety regulations, all community engagement will be virtual until further noted. The status of the following strategies is as follows:

1. Community conversations – large gatherings where the Coalition invites community stakeholders to discuss community health and social needs over a meal. (POSTPONED)
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. (CONTINUED VIRTUALLY)
3. Community Listening Session – an open community meeting to share out on the CHNA and engage stakeholders around the process outcomes and share preliminary data (PENDING for next fiscal year)

The Office of Government and Community Relations will support the CHNA community engagement efforts starting fall of 2021, with a plan to train members of the RAC and Baystate employees on how to host community chats. PHIWM will assist with tracking and summarizing the qualitative data received.

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 2022. 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 CBAC also aims to host another CBAC retreat in FY 2022, as COVID-19 limited the group’s ability to do so this past fiscal year. Additionally, CBACs will work in partnership with the OGCR to plan the next Community Benefits Forum – an annual, open community meeting to share out on the community benefits program and engage residents about ways Baystate can enhance its community impact.

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 PHIWM whenever possible 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 that 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 BHER funding (community benefits, social impact, marketing, and event sponsorships) will be required to apply 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.

The BMC CBAC, with support from the Office of Government and Community Relations, will release another Better Together Request for Proposal (RFP) in FY 2022 and award funding to local community-based organizations and community health initiatives that address Education, the continued health priority of focus selected by the BMCCBAC.

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 (2-3 years) 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 other priority populations. A goal that came out of the Design Team that meant in summer 2021 was to restructure the RFP to move more upstream and challenge applicants to consider Policy, Systems and Environmental change in their proposals. This is in alignment with goals set forth by DPH.

Other Community Initiatives

Baystate Health Sciences Library’s Patient and Consumer Health Information Services 2022 Goals:

- **Goal I.** To the extent that space and staffing permit, and even with periodic suspension of visitor access to combat spikes in infection, the Library will continue to raise the profile of patient and consumer health information resources, enhance and expand possible means of virtual communication and be a source of reliable and useful information on Covid-19 and related topics.
- **Goal II.** The Library will promote trustworthy sources of information on major public health concerns and causes of illness within the region – all written at an appropriate grade level and in both English and Spanish - to assist the general public and health care consumers in the greater Springfield community.
- **Goal III.** The Library will explore possible interest of health consumers in our language learning programs and other available resources.
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 2021, 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.

BMC CBAC membership includes hospital team members and representatives from Hampden County constituencies and communities. CBAC members are responsible for reviewing community needs assessment data and using 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. Boys and Girls Club of Greater Holyoke
9. Caring Health Center
10. Center for Human Development (CHD)
11. Coalition of Western Massachusetts Hospitals/Insurer
12. Community Foundation of Western Massachusetts
13. Develop Springfield
14. Dress for Success Foot in the Door
15. Educare*
16. Embrace Race
17. Food Bank of Western Massachusetts
18. Gandara Mental Health Center
19. Gardening the Community
20. Girls Inc. of the Valley
21. Hampden County District Attorney’s Office
22. Hampden County Health Coalition
23. Healing Racism Institute of Pioneer Valley
24. Health New England (HNE) *
25. Link to Libraries
26. Local Boards of Health (Amherst, Chicopee, Holyoke, Northampton, Springfield, West Springfield*)
27. Massachusetts Department of Public Health (Massachusetts DPH)
28. Massachusetts Public Health Association (MPHA)
29. Martin Luther King, Jr. Family Services/Mason Square Health Task Force
30. Mass in Motion
31. Massachusetts Association of Community Health Workers
32. MassMutual Foundation
33. Medical Home Work Group for Children with Special Needs
34. Men of Color Health Awareness (MOCHA)
35. MetroCare of Springfield*
36. MotherWoman
37. New North Citizens’ Council (NNCC) *
38. Parent Villages
39. Perinatal Support Coalition of Hampden County
40. Pioneer Valley Asthma Coalition
41. Pioneer Valley Planning Commission (PVPC)
42. Project Baby Springfield
43. Project Coach*
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

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2 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.
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.

**CHNA Findings - NOTE:** This section is reflective of the 2019 report and may not include up to date figures in this current fiscal year.

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 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
Baystate Medical Center
Community Benefits Annual Report
FY 2021

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
- Caulton-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 746-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 daily. 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>
</tbody>
</table>

**Total Service Area** | **469,692**


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 the Greater Springfield area and has invested significant resources in its three community health centers and pediatric clinic located in Springfield’s low-income neighborhoods that have both Health Professional Shortage Area and Medically Underserved Area (MUA) / Medically Underserved Population (MUP) designation. BMC health centers are primary care first-contact sites for thousands of underserved, low-income people. In FY 2021, these community training sites for BMC’s Medical Residency Program provide continuity of care for 34,362 unduplicated patients with 122,025 patient encounters/visits annually, most of who reside in an MUA/MUP. 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; infrastructure and capacity to health centers; complex care management of high risk emergency department utilizers; supported referrals to needed social services; treatment to incarcerated and linkages to care upon release; food vouchers/gift cards to food insecure patients; emergency preparedness readiness to our staff, patients, and community residents; and office-based opiate treatment.

**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 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**

<table>
<thead>
<tr>
<th>Regions Served</th>
<th>County-Berkshire, County-Franklin, County-Hampden, County-Hampton</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>All</td>
</tr>
<tr>
<td>Environment Served</td>
<td>Rural; Suburban; Urban</td>
</tr>
</tbody>
</table>

**Health Need**

<table>
<thead>
<tr>
<th>DoN Health Priority</th>
<th>Built Environment; Social Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Issue</td>
<td>n/a</td>
</tr>
<tr>
<td>Health Issue</td>
<td>Health Behaviors/Mental Health – Bereavement, Depression; Social Determinants of Health – Domestic Violence, Violence and Trauma</td>
</tr>
</tbody>
</table>

**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 |
| Massachusetts Department of Children and Families - Western Regional Office | www.mass.gov |
| Massachusetts Children’s Alliance | www.machildrensalliance.org |
| National Children’s Alliance | 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 |
# 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**
Access/Coverage Supports  
Tags: n/a

**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**

**Goal 1**  
**Description:** Provide financial counseling services and secure insurance sponsorship for uninsured or underinsured individuals requesting our support.  
**Status:** In progress

**Goal 2**  
**Description:** Screen all individuals and provide assistance in completing and submitting applicable applications.  
**Status:** In progress

**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)
### BAYSTATE MASON SQUARE COMMUNITY OUTREACH AND EDUCATION

<table>
<thead>
<tr>
<th>Brief Description or Objective</th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Type</td>
<td>Total Population or Community-Wide Intervention</td>
</tr>
<tr>
<td></td>
<td><strong>Tags:</strong> Community Education; Community Health Center Partnership; Prevention</td>
</tr>
<tr>
<td>Target Population</td>
<td><strong>Regions Served:</strong> Springfield</td>
</tr>
<tr>
<td></td>
<td><strong>Gender:</strong> All</td>
</tr>
<tr>
<td></td>
<td><strong>Age Group:</strong> All</td>
</tr>
<tr>
<td></td>
<td><strong>Ethnic/Racial Group:</strong> All, Black/African American, Hispanic/Latino</td>
</tr>
<tr>
<td></td>
<td><strong>Language:</strong> All, English, Spanish</td>
</tr>
<tr>
<td></td>
<td><strong>Environment Served:</strong> Urban</td>
</tr>
<tr>
<td>Health Need</td>
<td><strong>DoN Health Priority:</strong> Built Environment; Education</td>
</tr>
<tr>
<td></td>
<td><strong>Focus Issue:</strong> All</td>
</tr>
<tr>
<td></td>
<td><strong>Health Issue:</strong> All</td>
</tr>
<tr>
<td>Goals</td>
<td><strong>Goal 1</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Description:</strong> To increase overall health in the Mason Square community.</td>
</tr>
<tr>
<td></td>
<td><strong>Status:</strong> In progress</td>
</tr>
<tr>
<td></td>
<td><strong>Goal 2</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Description:</strong> Educate Mason Square residents so they can advocate for their own health care needs.</td>
</tr>
<tr>
<td></td>
<td><strong>Status:</strong> In progress</td>
</tr>
<tr>
<td>Partners</td>
<td>Springfield Girls' Club Family Center</td>
</tr>
<tr>
<td></td>
<td>Springfield Department of Health &amp; Human Services</td>
</tr>
<tr>
<td></td>
<td>HCS Headstart</td>
</tr>
<tr>
<td></td>
<td>Massachusetts Association of Community Health Workers</td>
</tr>
<tr>
<td></td>
<td>Martin Luther King, Jr. Family Services</td>
</tr>
</tbody>
</table>

| 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 Medical Center
Community Benefits Annual Report

Urban League of Greater Springfield  www.ulspringfield.org
Springfield Partners for Community Action  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.

BAYSTATE REGIONAL TUBERCULOSIS PROGRAM

Brief Description or Objective
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

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.

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

**Tags:** Community Education; Mentorship Career Training/Internship

**Target Population**

<table>
<thead>
<tr>
<th>Regions Served</th>
<th>Hampden County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>All</td>
</tr>
<tr>
<td>Age Group</td>
<td>Adult-Young, Child-Teen</td>
</tr>
<tr>
<td>Ethnic/Racial Group</td>
<td>All</td>
</tr>
<tr>
<td>Language</td>
<td>All</td>
</tr>
<tr>
<td>Environment Served</td>
<td>Urban</td>
</tr>
</tbody>
</table>

**Health Need**

<table>
<thead>
<tr>
<th>DoN Health Priority</th>
<th>Education; Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus Issue</td>
<td>n/a</td>
</tr>
<tr>
<td>Health Issue</td>
<td>Social Determinants of Health – Education/Learning</td>
</tr>
</tbody>
</table>

**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**

<table>
<thead>
<tr>
<th>Partner</th>
<th>Website</th>
</tr>
</thead>
<tbody>
<tr>
<td>Springfield Public Schools</td>
<td><a href="https://www.sps.springfield.ma.us">www.sps.springfield.ma.us</a></td>
</tr>
<tr>
<td>Springfield Technical Community College (STCC)</td>
<td><a href="https://www.stcc.edu">www.stcc.edu</a></td>
</tr>
<tr>
<td>Holyoke Community College (HCC)</td>
<td><a href="https://www.hcc.edu">www.hcc.edu</a></td>
</tr>
<tr>
<td>Pioneer Valley Life Sciences Institute</td>
<td><a href="https://www.pvlsi.org">www.pvlsi.org</a></td>
</tr>
<tr>
<td>MassHire of Hampden County</td>
<td><a href="https://www.rebhc.org">www.rebhc.org</a></td>
</tr>
<tr>
<td>Tufts University School of Medicine</td>
<td><a href="https://www.medicine.tufts.edu">www.medicine.tufts.edu</a></td>
</tr>
<tr>
<td>Focus Springfield</td>
<td><a href="https://www.focusspringfield.com">www.focusspringfield.com</a></td>
</tr>
</tbody>
</table>
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Contact Information
Peter Blain, Manager, Baystate Springfield Educational Partnership, 55 Pratt Street, Springfield MA. 413-794-1671. peter.blain@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
Regions Served: County-Franklin, County-Hampden, County-Hampshire
Gender: All
Age Group: All
Ethnic/Racial Group: All
Language: English
Built Environment: Rural; Suburban; Urban

Health Need
DoN Health Priority: Education; Violence
Focus Issue: n/a
Health Issue: Social Determinants of Health – Violence and Trauma

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
Brain Injury Association of MA
Health New England
Baystate Child Protection Team
MA Prevent Injuries Now Network
ROCA/SSYI
Springfield Police Department
Hampden County District Attorney

www.baystatehealth.org
www.biama.org
www.hne.org
www.masspinn.org
www.rocainc.org
www.springfieldpolice.net
www.hampdenda.com
**Baystate Medical Center**  
**Community Benefits Annual Report**

**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.

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**BETTER TOGETHER GRANTS**

**Brief Description or Objective**  
Formerly referred to as the "DoN Grant Program," Baystate’s system-wide Better Together Grant opportunity 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 (SDoH), will improve people’s overall well-being and make communities healthier places to live. Better Together is a system-wide grant program, yet each hospital entity convenes its own application process in partnership with the hospital CBAC and with support from the Office of Government and Community Relations. Better Together Grants projects must:

- be evidence-based, promising or best practices as the basis for projects,
- apply a social determinants of health framework,
- align with hospital’s triennial community health need assessment priorities, and/or an existing community health improvement plan, and
- include routine performance reporting and program evaluation.

PHIWM provides evaluation and program planning expertise to support all Better Together grantees in the development and implementation of their program evaluation. PHIWM continues to provide training and technical assistance to grantees, in addition to regularly attending the CBAC meetings and providing input into future RFP processes. Grantees share summaries of their grants and discuss what they would like from a Community of Practice, including learning from other grantees, sharing evaluation tools and databases being used, and learning about topics such as community engagement, cultural humility, and understanding policies affecting health equity. Other topics of interest expressed by grantees include technical assistance around sustainability and racial justice.

**Program Type**  
Total Population of Community-Wide Interventions  
**Tags:** N/A

**Target Population**  
**Regions Served:** County-Hampden, County-Hampshire; County-Franklin  
**Gender:** All  
**Age Group:** All  
**Ethnic/Racial Group:** All  
**Language:** English, Spanish  
**Environment Served:** Rural (BFMC, BNH, BWH); Suburban (BMC, BNH, BWH); Urban (BMC)

**Health Need**  
**DoN Health Priority:** Built Environment; Education; Social Environment  
**Focus Issue:** All  
**Health Issue:** All Social Determinants of Health
### Community Benefits Investments Sponsorships

**Brief Description or Objective**
Community Benefits Investments are awarded to organizations for initiatives that intend to generate a measurable impact. Funding will be awarded based on how well the initiative intends to strengthen social, health, economic, and environmental conditions to improve the health of our community. The initiative must also address one or more priority health needs identified in Baystate Health’s community health needs assessment and will require annual performance and impact reporting. Community Benefit Investments are typically for one year and do not exceed $5,000.

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Total Population of Community-Wide Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tags</td>
<td>N/A</td>
</tr>
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</table>

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

<table>
<thead>
<tr>
<th>Health Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>DoN Health Priority: Built Environment; Education; Employment; Housing; Social Environment; Violence</td>
</tr>
<tr>
<td>Focus Issue: Chronic Disease; Housing Stability; Mental Health; Substance Use Disorders</td>
</tr>
<tr>
<td>Health Issue: Any aligned with CHNA</td>
</tr>
</tbody>
</table>

### Goals

**Goal 1**
*Description:* To strengthen social, health, economic, and environmental conditions to improve the health of our community through community grant making  
*Status:* Request for Proposals process completed in FY21

**Partners**
Public Health Institute of Western MA  
https://www.publichealthwm.org/  
See list of grantees in narrative above

### Community Health Needs Assessment

**Brief Description or Objective**
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. Each CHNA iteration builds on the previous assessment so BMC can better understand the health need trends of the communities served and meet its fiduciary requirement as a tax-exempt hospital.

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Infrastructure to Support CB Collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tags:</td>
<td>N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regions Served:</td>
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<tr>
<td>Gender:</td>
</tr>
<tr>
<td>Age Group:</td>
</tr>
<tr>
<td>Ethnic/Racial Group:</td>
</tr>
<tr>
<td>Language:</td>
</tr>
<tr>
<td>Environment Served:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON Health Priority:</td>
</tr>
<tr>
<td>Focus Issue:</td>
</tr>
<tr>
<td>Health Issue:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1</td>
</tr>
<tr>
<td>Description:</td>
</tr>
<tr>
<td>Status:</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Institute of Western MA</td>
</tr>
<tr>
<td>Franklin County Regional Council of Governments</td>
</tr>
<tr>
<td>Collaborative for Educational Services</td>
</tr>
<tr>
<td>Cooley-Dickinson Hospital</td>
</tr>
<tr>
<td>Health New England</td>
</tr>
<tr>
<td>Mercy Medical Center</td>
</tr>
<tr>
<td>Shriners Hospital for Children</td>
</tr>
</tbody>
</table>
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**
Chrystal Wittcopp, MD, Baystate General Pediatrics, 140 High Street, Springfield,
### 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

Information
Massachusetts. 413-794-7455. chrystal.wittcopp@baystatehealth.org.
## COMMUNITY BENEFITS EXPENDITURES

<table>
<thead>
<tr>
<th>PROGRAM TYPE</th>
<th>ESTIMATED TOTAL EXPENDITURES FOR FY 2021</th>
<th>APPROVED PROGRAM BUDGET FOR FY 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNITY BENEFITS PROGRAMS</td>
<td></td>
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</tr>
<tr>
<td>Direct Expenses</td>
<td>$7,125,693</td>
<td>$200,000</td>
</tr>
<tr>
<td>Other Leveraged Resources</td>
<td>$5,640,501</td>
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<tr>
<td><strong>Total CB Programs</strong></td>
<td><strong>$7,125,693</strong></td>
<td></td>
</tr>
<tr>
<td>NET CHARITY CARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HSN Assessment</td>
<td>$6,446,849</td>
<td></td>
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<tr>
<td>HSN Denied Claims</td>
<td>$0</td>
<td></td>
</tr>
<tr>
<td>Free/Discount Care</td>
<td>$823,424</td>
<td></td>
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<tr>
<td><strong>Total Net Charity Care</strong></td>
<td><strong>$7,270,273</strong></td>
<td></td>
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<tr>
<td>TOTAL EXPENDITURES</td>
<td>$20,036,467</td>
<td>$1,430,440,077</td>
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<tr>
<td>Net Patient Service Revenues for FY 2021</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Patient Care Related Expenses for FY 2021</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### OPTIONAL INFORMATION

- **Bad Debt**: $17,829,101
  - Certified: YES
- **IRS 990 Schedule H**: $111,052,608
  - 2019 Tax Return (FY 2020)