

Community Benefits

STRATEGIC IMPLEMENTATION PLAN (SIP) 2023-2025

An action plan in response to 2022 Community Health Needs Assessment (CHNA)

Adopted by the Baystate Health Board of Trustees on January 10, 2023



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Introduction

2022 Community Health Needs Assessment

In 2022 **Baystate Medical Center** (Baystate Medical) completed a comprehensive **Community Health Needs Assessment** (CHNA) in support of its mission *to improve the health of the people in our community* by identifying significant health needs in the geographic area served by the hospital and prioritizing the allocation of hospital resources to meet identified needs. This assessment was created in collaboration with the **Coalition of Western Massachusetts Hospitals/Insurer** (Coalition), a partnership between eight non-profit hospitals, clinics, and insurers in the region, along with a diverse consultant team including Public Health Institute of Western Massachusetts, Franklin Regional Council of Governments, Collaborative for Educational Services and Pioneer Valley Planning Commission. Baystate Medical's 2022 CHNA included a comprehensive review of secondary data analysis of patient outcomes, community health status, and social determinants of health, as well as primary data collection including input from the public health experts, community stakeholders, and community members with lived experience. The complete report is available electronically at www.baystatehealth.org/communitybenefits.

2022-2025 Strategic Implementation Plan Overview

This **Strategic Implementation Plan** (SIP) serves as an accompaniment to the 2022 CHNA by identifying specific strategies to address significant health needs identified in the CHNA. These strategies include things such as community benefit programs, Baystate Health *system* strategy plans, community grant investments, coalition participation, and regional collaborations. In short, the SIP is an action plan that answers the question of how the hospital plans to advance the health of its community given the CHNA findings. Baystate Medical anticipates significant health needs, priority populations, and available resources may change over time. Therefore, a flexible approach was applied in the development of the SIP. The hospital views the SIP as a **"LIVING"** document. Due to the evolving climate in health care, each hospital's financial health year to year remains unknown; therefore hospital resources and inputs may increase, decrease, or need to be modified. In addition, community context can be a driver for change in the SIP. The work plans included in the SIP provides an opportunity for Baystate Medical to be strategic and focused, yet flexible in its community health improvement planning efforts.

Baystate Medical's SIP documents the intentional efforts and actions of the hospital, in partnership with its **Community Benefits Advisory Council** (CBAC), and with support from the Baystate Health Strategy team, to prioritize and identify the means through which the hospital will address (or not address) significant health needs identified in the 2022 CHNA, over a three year period, fiscal years 2023 through 2025.

The completion of the 2022 CHNA and SIP, and subsequent approval and adoption by the Baystate Health Board of Trustees on September 13, 2022 and January 10, 2023, respectively, complies with federal and state requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and pursuant to the requirements of Section 501(r) of the Internal Revenue Code by the Internal Revenue Service (IRS), as well as the Massachusetts Office of the Attorney General (AG).

INTERNAL REVENUE SERVICE (IRS)	HOSPITAL (BAYSTATE MEDICAL)
Implementation Strategy (IS)	Strategic Implementation Plan (SIP)
Significant Health Needs to be Addressed By Hospital	Priority Focus Areas
Target or Vulnerable Populations	Priority Populations
Action(s) the Hospital Facility Intends to Take to Address the Health Needs	Strategy(ies)

Strategic Implementation Plan

Selection of Priority Focus Areas

The Baystate Medical CBAC, with oversight from the Office of Government and Community Relations, was the key decision-making body when selecting the focus areas of the 2022 CHNA and current SIP. New to the CHNA process this year was an aim to narrow in on key social determinants of health and/or health conditions in order to streamline the report and go deeper on certain topics. Before the qualitative research began, the CBAC had identified a set of “deep dive” focus areas. A facilitated dialogue was held where members nominated the focus areas they felt most warranted a deeper research lens in their region. In addition to considering the 2019 CHNA priorities, CBACs were encouraged to think about the criteria highlighted in Table 1: Context, Relevance, Impact and Feasibility. The CBAC determined to carry over the same 2022 CHNA focus areas into the SIP.

As Baystate Medical learns and grows through each CHNA and SIP cycle, it strives to achieve greater alignment with Baystate Health’s strategic plan and system-level initiatives that are a response to community health needs. This iteration of the SIP engaged the Baystate Health Strategy Team given Baystate Health’s unique position to respond to community health needs by leveraging its **regional** health system’s resources. Baystate Medical’s resources and overall alignment with the health system’s mission, goals, and strategic priorities were taken into consideration.

Table 1. Criteria Considered for Selection of Baystate Medical’s Priority Focus Areas

CONTEXT	RELEVANCE	IMPACT	FEASIBILITY
<i>What is the current landscape?</i>	<i>How important is it?</i>	<i>What will we get out of it?</i>	<i>Can we do it?</i>
<ul style="list-style-type: none"> • 2019 CHNA & IS priorities • Hampden County Health Improvement Planning (CHIPs) efforts • Community-based efforts (asset map) • Hospital operational programs and services • Hospital Community Benefits programs and activities • Hospital external investments of time, talent, and treasure 	<ul style="list-style-type: none"> • Burden of the problem: <ul style="list-style-type: none"> – Economic Cost – Magnitude – Severity – Urgency • Focus on Equity and Accessibility • <i>Community Voice</i> (gathered through 2022 CHNA community engagement qualitative data collection) 	<ul style="list-style-type: none"> • Lives touched • Bucket of prevention • Builds upon or enhances current efforts • Can move the needle and demonstrate measurable outcomes • Proven/effective strategies to address multiple wins 	<ul style="list-style-type: none"> • Operational (hospital) capacity • Community capacity • Technical capacity • Economic capacity • Socio-cultural aspects • Can identify easy short-term wins

Summary of Priority Focus Areas

Mental Health & Substance Use

PRIORITY 1: MENTAL HEALTH & SUBSTANCE USE

Priority Populations: Youth (primary), **

In addition to the already complicated needs around mental health and substance use for adults, the Coalition of Western MA Hospitals and Insurers have selected Youth Mental Health as a regional priority for all entities. A goal in 2023 will be to adopt a Coalition wide strategy to address this need through community collaboration.

***Goal:** Increase access to prevention, treatment, and recovery support for all individuals with mental and/or substance use diagnosis, with a specialized focus on youth.*

Objective 1.1: Enhance community and provider capacity to advocate for mental health and substance use disorder treatment and prevention through education, training and coalition building.

Current Strategies:

- Serve on the Hampden County Health Improvement Plan – Behavioral Health Community Team
- Participate as a member of the Hampden County Addiction Taskforce
- Promote Words Matter Campaign internally and in community

New Strategies:

- Collaborate with the Springfield Youth Mental Health Coalition

Objective 1.2 Increase access to equitable mental health and substance use treatment.

Current Strategies:

- Construction of Behavioral Health Hospital
- Distribute harm reduction kits in the emergency department
- Convene and promote the Hampden County Municipal First Responder Narcan Initiative
- Increase enrollment of participants into Rooming In Program, especially women of color
- Promote utilization of 413Cares
- Expand integration of care in primary care settings through BeHealthy Accountable Care Organization

Objective 1.3 Increase access to prevention-based and/or peer-support initiatives.

Current Strategies:

- Better Together Grant: Boys & Girls Club of Greater Holyoke Education & Resilience Initiative
- Better Together Grant: Growing the Girls Inc. Experience
- Promote utilization of medication and sharps disposal kiosks
- Promote utilization of 413Cares

Violence and Trauma

PRIORITY 2: VIOLENCE & TRAUMA
Priority Populations:
Interpersonal and collective violence affect health directly, via death and injury, as well as indirectly through the trauma that affects mental health and healthy relationships. Baystate Medical prioritized an analysis of intimate partner or domestic violence and gun violence.

Goal: Decrease the prevalence of violent incidents and increase trauma informed care ability among community residents and providers.

Objective 2.1: Increase access to violence prevention-based initiatives

Current Strategies:

- Better Together Grant: Roca’s Educational Advancement Project
- Promote the Hampden County Health Improvement Plan – Public Safety, Violence and Injury Prevention Community Team Strategies
- Enhance knowledge and enrollment of Safe and Successful Youth Initiative

New Strategies:

- Implement the new Hospital-based Violence Intervention Program
- Promote utilization of “A Call for Change” Helpline for intimate partner violence

Objective 2.2 Increase community and provider capacity to advocate for violence prevention/trauma informed care through training and coalition building

Current Strategies:

- Promote the services offered by Baystate Family Advocacy Center
- Inform community and local hospitals on the Hospital-based Violence Intervention Program
- Serve on the Hampden County Health Improvement Plan – Public Safety, Violence and Injury Prevention Community Team

New Strategies:

- Provide seed funding and promote new organization: Breaking Oppression

Objective 2.3 Promote injury prevention through campaigns and community-based services

Current Strategies:

- Increase regional Stop the Bleed training

Access to Basic Needs

PRIORITY 3: ACCESS TO BASIC NEEDS

**As defined as housing, food, transportation, digital access, other*

Priority Populations:

Communities in Hampden County differ in terms of population density and infrastructure. Access to and availability of basic needs varies from rural communities to the urban core. Average income and wealth also vary tremendously across the communities served by Baystate Medical, and even within the same municipality, affecting residents' ability to access and afford housing, food, and transportation.

Goal: For all priority populations to have stable access to basic needs and/or emergency assistance as needed.

Objective 3.1: Enhance knowledge of, and access to, community resources and referrals

Current Strategies:

- Promote utilization of 413Cares
- Fund the Live Mutual Project – North End Connects
- Strengthen the Behavioral Health Community Partner program through the BeHealthy Accountable Care Organization (ACO)

Objective 3.2 Increase employee and student community giving opportunities

Current Strategies:

- Facilitate Toy Drive
- Facilitate Back to School Giving
- Fund and promote PURCH Give Back program
- Donate to the Springfield Diaper Bank

Objective 3.3 Increase Baystate Health's presence and support in the local housing sector

- Fund and partner on the Springfield City of Homes Project
- Strengthen and promote BeHealthy ACO community-based partnerships with Mental Health Association and Revitalize Community Development Corporation (Revitalize CDC)

Objective 3.4 Invest in digital equity for local region

- Fund and promote the Alliance for Digital Equity
- Baystate's Virtual Care Committee to develop a 3-year regional telehealth strategy

Objective 3.5 Increase investment into local food access initiatives

- Continue grant investments for food pantries/mobile markets
- Strengthen BeHealthy ACO community-based partnership with Revitalize CDC food delivery service
- Continue training of community health workers to educate patients on maximizing HIP benefits
- Food / cooking demonstrations at health centers?

Workforce Development

PRIORITY 4: WORKFORCE DEVELOPMENT

Priority Populations:

Workforce development aims to improve economic stability by improving access to adequate employment and skill-building opportunities for individuals to support their economic security and meet industry needs, thus benefiting their health and well-being. We must contextualize trends within the evolution of racial and gendered discrimination to understand why present workforce development challenges affect subsets of the population disproportionately.

See section ___ in CHNA

Goal: For community members to have equitable opportunities for workforce development, with a focus on the healthcare sector

Objective 4.1: Increase local hiring and upward promotion at Baystate Health

Current Strategies:

- Locally promote the UMASS Chan Medical School PURCH program to high school and college students
- [insert BH Workforce strategy]

Objective 4.2 Promote community-based education and training experiences for workforce development

Current Strategies:

- Fund the Live Mutual Project – North End Connects initiative
- Increase enrollment of students into the Baystate Springfield Educational Partnership (BSEP)
- Enhance local population-health clerkship experiences for PURCH students
- Provide discretionary grants to local organizations (such as Dress for Success Foot in Door program)

Objective 4.3 Increase financial support to local educational institutions that offer education to employment tracks

- Better Together Grant: Springfield Technical Community College (STCC)/Westfield State University Pathways for New Healthcare Professionals
- Better Together Grant : The Care Center Bard Microcollege Holyoke
- Better Together Grant : The Care Center Cabot Street College
- STCC Endowed Scholarship
- Holyoke Community College: Endowed Scholarship
- Elms College Endowed Scholarship
- Westfield State Endowed Scholarship (Nursing & Physician Assistant Program)

Monitoring and Evaluation

Monitoring and evaluation of the SIP will take place annually in collaboration between the Baystate Health Office of Government and Community Relations and Baystate Medical CBAC. Twice a year the SIP will be presented to the Baystate Board Governance Committee to report back on progress and evaluation. The SIP narrative and work plan are posted on the Baystate Health website and will be updated as revisions are made.

Partnerships

As part of the monitoring plan for this document, Baystate Medical is committed to keeping a door open for new partnerships and collaborations. The appendix lists many of our current partners engaged with the SIP strategies. Should your organization be interested in a potential partnership related to a SIP focus area, please reach out the Office of Government and Community Relations at governmentcommunity@baystatehealth.org.

Significant Health Needs Not To Be Addressed

No health care system or hospital facility, including Baystate Health and Baystate Medical, can address all the significant health needs identified in its CHNA. Table 2 lists the significant health needs identified in the 2022 CHNA that were not selected as priority focus areas by Baystate Medical for the SIP. It's important to note that although Baystate Medical has decided not to take direct action in the SIP on the other significant health needs due to limited resources (time, talent, and treasure), this is not to say that the hospital is not addressing the needs in other ways through clinical service lines or as a community partner. The table includes examples of clinical and operational efforts to address these needs. To learn more about Baystate Medical's direct and indirect efforts to address these needs, please contact the Baystate Health Office of Government and Community Relations and/or view our annual Community Benefits Report, as filed with the MA Attorney General, and available on our website at www.baystatehealth.org/communitybenefits.

There are various organizations in the local area that are leaders and/or key collaborators in addressing these health needs at the community level. In order to learn more about these initiatives and programs, please visit the 413Cares community resource database linked [here](#).

TABLE 2. Significant Health Needs Not Being Addressed

Significant Health Need	Hospital Efforts
Environmental Exposure and Climate Crisis	<p>Asthma Care: https://www.baystatehealth.org/services/pulmonary/asthma</p> <p>Environmental Sustainability: https://www.baystatehealth.org/news/2022/04/environmental-sustainability-in-healthcare</p>
Availability of Providers and Telehealth	<p>Dispatch Health: https://www.dispatchhealth.com/locations/ma/springfield/</p>

	<p>Primary Care and Family Medicine: https://www.baystatehealth.org/services/primary-care</p> <p>UMass Chan Medical School-Baystate Population-Based Urban & Rural Health (PURCH): https://www.baystatehealth.org/education-research/education/umms-baystate-campus/purch</p> <p>Virtual Care: https://www.baystatehealth.org/services/telehealth</p>
Chronic Conditions	<p>Asthma Care: https://www.baystatehealth.org/services/pulmonary/asthma</p> <p>Cancer Program: https://www.baystatehealth.org/services/cancer</p> <p>Diabetes Care: https://www.baystatehealth.org/services/endocrinology/diabetes</p> <p>Heart and Vascular Program: https://www.baystatehealth.org/services/heart</p>
Infant and Perinatal Health	<p>Pregnancy and Childbirth: https://www.baystatehealth.org/services/obgyn/pregnancy</p>
Sexual Health	<p>Family Planning and Birth Control: https://www.baystatehealth.org/services/obgyn/gynecology/family-planning</p>

Regional Health System Initiatives

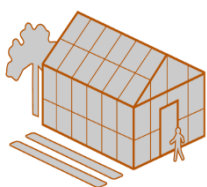
Because of Baystate Health’s position as a four-hospital health system and its commitment to health equity, it is important whenever possible to develop regional strategies that address common needs across our communities served. Given each hospital’s unique community context, the health system is challenged to think strategically in maintaining an equitable distribution of system resources that are not one-size fits all solutions. Serving urban, suburban and rural areas, the initiatives described below demonstrate Baystate Health’s commitment to applying a regional lens to its community work. The aim is for these initiatives to broadly impact the goals and objectives described in the SIP.

Baystate Health Anchor Mission

Baystate is an “anchor institution.” By definition, an anchor institution is a place-based organization tied by its mission to the long-term well-being of the communities it serves, particularly the communities in which its facilities and programs reside. Baystate’s Board of Trustees and leadership have consistently validated this role through historic practice and through current partnerships with other civic, business, and community partners to address social and economic root causes that influence health.

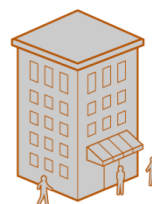
As an anchor institution, Baystate leverages its economic output through three pillars: **local hiring**, **local sourcing** and **place-based investing**; simultaneously addressing Baystate’s operational needs and social determinants of health in its communities. Baystate’s anchor institution role takes many forms, including, creating new vehicles for community engagement, purchasing from local businesses, developing high quality educational and health services, local hiring and contracting, and catalyzing community economic development. It is through prioritizing and targeting these investments that Baystate also aims to address social and economic root causes and improve health.

Baystate’s Community Benefits Program falls under the pillar of place-based investing. By allocating discretionary operating dollars to address community health needs, Baystate aims to support sustainable solutions that address economic, racial, social, and environmental resource disparities. Baystate’s anchor mission is realized through community health improvement efforts in which it makes direct community investments through sponsorships, community benefits grants, social impact investments, and underwriting for community building and direct support to community-based non-profits. Investments and grant making through episodic **Determination of Need (DoN) Community Health Initiative (CHI)** funding and the establishing of the **Baystate Charter Academy School** are a few examples of how Baystate’s anchor mission is realized.



PLACE-BASED INVESTMENT

Designate a percentage of investible assets to make local investments.



UPSTREAM COMMUNITY BENEFITS

Address community health needs by allocating discretionary operating dollars to sustainable solutions that address economic, racial or environmental resource disparities.

Baystate Health Behavioral Health Hospital

Baystate Health and Kindred Behavioral Health plan to open the Baystate Behavioral Health Hospital in the Fall 2023 in Holyoke. The 150-bed facility aims to help meet the growing community need for mental health services and treatment and will include 24 pediatric and adolescent beds, 120 semi-private rooms and 30 private rooms for the Commonwealth of Massachusetts Department of Mental Health. The new hospital aims to increase patient access to Baystate Health's specialty inpatient behavioral healthcare by more than 50%. More information on the facility can be read [here](#).

Health Equity and REaLLD and SOGI Data

Baystate signed the American Hospital Association (AHA) #123forEquity Pledge Campaign in 2015. Health Equity can be defined as the attainment of the highest level of health for all people, where everyone has a fair and just opportunity to attain their optimal health regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, and other factors that affect access to care and health outcomes. Baystate's goal is to imbed health equity within the organization and to guide standard reoccurring health care practices and fundamental health policy decisions so that equity becomes the accepted mindset for how it serves patients and the community.

As part of its commitment, one of Baystate's health equity goals is to increase the collection and use of race, ethnicity, language preference, location, disability and other socio-demographic (REaLLD) data, as well as Sexual Orientation and Gender Identity (SOGI) data. Research has shown that racial and ethnic disparities in health care have an impact on quality, safety, cost, and risk management. These impacts have been known for some time as documented and acknowledged by the Agency for Healthcare Research and Quality (AHRQ), Institute of Medicine (IOM), National Quality Forum, and the Joint Commission. There are established methods that can be adapted locally for increasing collection and utilization of REaLLD and SOGI data.

Initiative Goals:

- Conduct the initial discovery to identify the challenges to collect the REaLLD and SOGI data consistently across all BH systems and close gaps.
- Review and update enterprise wide polices & procedures, training documentation and workflows related to REaLLD and SOGI
- Establish the reports & metrics related to Clinical Health Equity. An Equity Dashboard allows us to see, at a glance, possible racial/ethnic disparities for further inquiry and integrates equity into quality efforts.

The Alliance for Digital Equity

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. This community engagement has culminated in a robust list of initiatives including but not limited to: the Library Digital Equity Network, Older Adults Digital Communities Network, Affordable Connectivity Program Outreach and Enrollment mini grant process and the future development of a Virtual Regional Digital Resource Center. Up to date information about the Alliance activities can be found at www.AllianceForDigitalEquity.com.

Conclusion

Baystate Health's Office of Government and Community Relations, in partnership with the four CBACs, would like all readers to know that this document is not exhaustive. All staff and contributors have captured Baystate's key activities to the best of our ability at this time, recognizing that there are many initiatives under community benefits, operations, and clinical services lines that also may be addressing the focus areas and other community needs. The goal is to build on this document annually as a way of maintaining accountability and transparency with our community.

If you are interested in reading more about Baystate Health's impactful work, we encourage you to review the resources linked below.

BAYSTATE HEALTH ANNUAL REPORT

<https://2021.bhannualreport.org/>

BAYSTATE HEALTH'S COMMUNITY BENEFITS ATTORNEY GENERAL REPORTS

<https://www.baystatehealth.org/about-us/community-programs/community-benefits/community-health-needs-assessment>

BAYSTATE HEALTH FOUNDATION ANNUAL REPORT

<https://www.baystatehealth.org/giving/annual-report>

BAYSTATE HEALTH PATIENT AND FAMILY ADVISORY COUNCIL (PFAC) ANNUAL REPORTS

<https://www.baystatehealth.org/about-us/community-programs/health-initiatives/patient-family-advisory-council>

BAYSTATE MEDICAL CENTER NURSING REPORT

<https://www.baystatehealth.org/about-us/annual-reports>

BAYSTATE MEDICAL PRACTICES ANNUAL REPORT

<https://www.baystatehealth.org/about-us/annual-reports>

Appendices

SIP Work Plan Development Partners

In developing the SIP and Work Plans, Baystate Medical partnered with its CBAC; which included the following internal and external stakeholders:

- American International College (AIC)
- Baystate Community Health Centers (CHC)
- Baystate Family Advocacy Center (BFAC)
- Baystate Interpreter and Translation Services
- Baystate Mason Square Neighborhood Health Center Community Advisory Board (MS CAB)
- Baystate Medical Center Administration
- Baystate Office of Diversity and Inclusion (D&I)
- Baystate Patient Experience
- Baystate Spiritual Services
- Baystate Springfield Educational Partnership (BSEP)
- Baystate Trauma and Injury and Prevention (TIP)
- Educare Springfield
- Hampden County Health Coalition (HCHC)
- Health New England (HNE)
- Massachusetts Department of Public Health (MDPH)
- MetroCare of Springfield
- New North Citizens' Council (NNCC)
- Project Coach
- Public Health Institute of Western Massachusetts (PHIWM)
- Revitalize Community Development Corporation (Revitalize CDC)
- Square One
- Tapestry Health
- Town of West Springfield
- University of Massachusetts Chan Medical School (UMMS) – Baystate Population-based Urban Rural Community Health (PURCH)
- Way Finders

Detailed Work Plan Strategy Tables

PRIORITY FOCUS AREA	1	MENTAL HEALTH AND SUBSTANCE USE	
PRIORITY POPULATION	Youth (primary), Older adultsfamily		
GOAL	Increase access to prevention, treatment, and recovery support for all individuals with mental and/or substance use diagnosis, with a specialized focus on youth.		
OBJECTIVE	1.1	Enhance community and provider capacity to advocate for mental health and substance use disorder treatment and prevention through education, training and coalition building.	
STRATEGIES	INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
1.1.1 Serve on the Hampden County Health Improvement Plan (HCHIP) – Behavioral Health Community Team	Active and consistent meeting participation and sharing of content Visit website to learn more about specific metrics: https://www.pvpc.org/HCHIP	In-kind	Pioneer Valley Planning Commission, Public Health Institute of Western MA and HCHIP Network Members MA DPH System-wide CHI
1.1.2 Participate as a member of the Hampden County Addiction Taskforce	Active and consistent meeting participation and sharing of content Visit website to learn more about progress on objectives: https://hampdenda.com/community-safety-and-outreach-unit/hampdenda-com-addictionhelp/	In-kind	Hampden County DA’s Office
1.1.3 Promote Words Matter Campaign internally and in community	Enhance community knowledge and commitment to anti-stigma Increase # of Words Matter pledges	Hospital-Based Community Benefits Activity	Opioid State Earmark

OBJECTIVE	1.2	Increase access to equitable mental health and substance use treatment.
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STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
1.2.1	Construction of Behavioral Health Hospital	Completion and addition of 150 beds Community voice/feedback on impact of care quality	Other Hospital Activities	Kindred Behavioral Health
1.2.2	Distribute harm reduction kits in the emergency department	# of harm reduction kits distributed	Hospital-Based Community Benefits Activity	
1.2.3	Convene and promote the Hampden County Municipal First Responder Narcan Initiative	# of municipalities enrolled in initiative # of Narcan utilized by municipalities	Hospital-Based Community Benefits Activity	
1.2.4	Increase enrollment of participants into the Empower Program (Rooming In), especially women of color	Patients report trusting, culturally humble and patient-centered treatment and care # of participants served	Other Hospital Activities External Funding	Behavioral Health Network
1.2.5	Promote utilization of 413Cares	Increased searches and website engagement Successful community member engagement with program/services	Determination of Need (DoN) Community Health Initiatives (CHI) Funding	Public Health Institute of Western MA
1.2.6	Expand integration of care in primary care settings through BeHealthy Accountable Care Organization (NEW)	TBD	Other Hospital Activities	

OBJECTIVE

1.3

Increase access to prevention-based and/or peer-support initiatives.

STRATEGIES	INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
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1.3.1	Better Together Grant: Boys & Girls Club of Greater Holyoke Education & Resilience Initiative	Grantees to report to CBAC on grant activities once a year. Please reach out to Office of G&CR to learn about grantee evaluation plan	Determination of Need (DoN) Community Health Initiatives (CHI) Funding	Boys & Girls Club of Greater Holyoke
1.3.2	Better Together Grant: Growing the Girls Inc. Experience	Grantees to report to CBAC on grant activities once a year. Please reach out to Office of G&CR to learn about grantee evaluation plan	DoN CHI	Girls Inc. of the Valley
1.3.3	Promote utilization of medication and sharps disposal kiosks	Weight of medication and sharps collected	Other Hospital Activities	
1.3.4	Fund and Promote utilization of 413Cares	Increased searches and website engagement Successful community member engagement with program/services	DoN CHI	Public Health Institute of Western MA

PRIORITY FOCUS AREA

2

VIOLENCE & TRAUMA

PRIORITY POPULATION

Youth

GOAL

Decrease the prevalence of violent incidents and increase trauma informed care ability among community residents and providers.

OBJECTIVE

2.1

Increase access to violence prevention-based initiatives

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
2.1.1	Better Together Grant: Roca’s Educational Advancement Project	Grantees to report to CBAC on grant activities once a year. Please reach out to Office of G&CR to learn about grantee evaluation plan	Determination of Need (DoN) Community Health Initiatives (CHI) Funding	Roca
2.1.2	Promote the Hampden County Health Improvement Plan – Public Safety, Violence and Injury Prevention Community Team Strategies	Active and consistent meeting participation and sharing of content Visit website to learn more about specific metrics: https://www.pvpc.org/HCHIP	Hospital-Based Community Benefits Activity In-kind	Pioneer Valley Planning Commission, Public Health Institute of Western MA and HCHIP Network Members MA DPH System-wide CHI
2.1.3	Enhance knowledge and enrollment of Safe and Successful Youth Initiative	Participants successful engagement with social-emotional support and violence prevention strategies	Hospital-Based Community Benefits Activity	Roca
2.1.4	Implement the new Hospital-based Violence Intervention Program (NEW)	Engage people impacted by violence with wraparound support services Decrease incidence of violence-related incidents in the ED	External Grant	BMC Emergency Department, Department of Injury Prevention & Roca
2.1.5	Promote utilization of “A Call for Change” Helpline for intimate partner violence (NEW)	Increased community awareness and utilization of helpline	In-kind	A Call for Change Helpline https://acallforchangehelpline.org/

OBJECTIVE

2.2

Increase community and provider capacity to advocate for violence prevention/trauma informed care through training and coalition building

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
2.2.1	Promote the services offered by Baystate Family Advocacy Center	TBD	Hospital-Based Community Benefits Activity	
2.2.2	Inform community and local hospitals on the Hospital-based Violence Intervention Program (NEW)	Enhance community knowledge of HVIP	External Grant	Roca
2.2.3	Serve on the Hampden County Health Improvement Plan – Public Safety, Violence and Injury Prevention Community Team	Active and consistent meeting participation and sharing of content Visit website to learn more about specific metrics: https://www.pvpc.org/HCHIP		
2.2.4	Provide seed funding and promote new organization: Breaking Oppression (NEW)	TBD	Community Benefits Discretionary Grant	

OBJECTIVE

2.3

Promote injury prevention through campaigns and community-based services

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
2.3.1	Increase regional Stop the Bleed trainings	# of people trained	Hospital-Based Community Benefits Activity	

PRIORITY FOCUS AREA 3 **ACCESS TO BASIC NEEDS***
 *As defined: housing, food, transportation, digital access, other

PRIORITY POPULATION Youth

GOAL For all priority populations to have stable access to basic needs and/or emergency assistance as needed.

OBJECTIVE 3.1 Enhance knowledge of, and access to, community resources and referrals

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
3.1.1	Promote utilization of 413Cares	Increased searches and website engagement Successful community member engagement with program/services	Determination of Need (DoN) Community Health Initiatives (CHI) Funding	Public Health Institute of Western MA
3.1.2	Fund the Live Mutual Project – North End Connects	North End community reports more connectedness to services Enrollment of community members on Union Capital mobile application	DoN CHI	New North Citizens Council Union Capital Boston
3.1.3	Strengthen the Behavioral Health Community Partner program through the BeHealthy Accountable Care Organization (ACO)	TBD	Other Hospital Activities	

OBJECTIVE 3.2 Increase employee and student community giving opportunities

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	COMMUNITY PARTNERS
3.2.1	Facilitate Toy Drive	Employee engagement # of children served	Hospital-Based Community Benefits Activity	Martin Luther King Jr. Family Services New North Citizens Council
3.2.2	Facilitate Back to School Giving	Employee engagement	Hospital-Based Community	Local elementary schools

		# of students served	Benefits Activity	
3.2.3	Fund and promote PURCH Give Back program	# of organizations served	Hospital-Based Community Benefits Activity	
3.2.4	Donate to the Springfield Diaper Bank	# of diapers/wipes donated	Community Benefits Discretionary Grants	Square One WIC

OBJECTIVE

3.3

Increase Baystate Health’s presence and support in the local housing sector

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	PARTNERS
3.3.1	Fund and partner on the Springfield City of Homes Project (NEW)	24 months, to identify, rehabilitate, and sell approximately 20 properties affordably to first-time homebuyers	DoN CHI	City of Springfield Judge Dina Fein Mass Mutual Foundation New North Citizens Council Way Finders
3.3.2	Strengthen and promote BeHealthy ACO community-based partnerships with Mental Health Association and Revitalize Community Development Corporation (Revitalize CDC) (NEW)	TBD	Other Hospital Activities	

OBJECTIVE

3.4

Invest in digital equity for local region

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	PARTNERS
3.4.1	Fund and promote the Alliance for Digital Equity	Community reports improved connectivity to internet	DoN CHI	Visit website for full list of network members:

		Community reports enhanced comfort in utilization of digital equipment		https://sites.google.com/view/alliancefordigitalequity/home
3.4.2	Baystate’s Virtual Care Committee to develop a 3-year regional telehealth strategy	TBD	Other Hospital Activities	

OBJECTIVE

3.5

Increase investment into local food access initiatives

STRATEGIES	INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	PARTNERS
3.5.1 Continue grant investments for food pantries/mobile markets	Grantees report greater community connection to food resources	Community Benefits Discretionary Grants	
3.5.2 Strengthen BeHealthy ACO community-based partnership with Revitalize CDC food delivery service (NEW)	TBD	Other Hospital Activities	
3.5.3 Continue training of community health workers to educate patients on maximizing HIP benefits (NEW)	TBD	Other Hospital Activities	

PRIORITY FOCUS AREA

4

WORKFORCE DEVELOPMENT

PRIORITY POPULATION

Youth

GOAL

For community members to have equitable opportunities for workforce development, with a focus on the healthcare sector

OBJECTIVE

4.1

Increase local hiring and upward promotion at Baystate Health

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	PARTNERS
4.1.1	Locally promote the UMASS Chan Medical School PURCH program to high school and college students	# of students from local area admitted	Other Hospital Activities	
4.1.2	Cohort Based Hiring for Workforce Programs internally and externally (Student Nurse Apprenticeship Programs, Baystate Educational Partnership Program (BSEP)) (NEW)	Increase amount of new hires in Baystate Health system through cohort hiring pathway	Other Hospital Activities	
4.1.3	Optimizing Leadership Development – cohort-based promotions (NEW)	Employees report enhanced opportunities for promotions Decrease employee turnover	Other Hospital Activities	

OBJECTIVE

4.2

Promote community-based education and training experiences for workforce development

STRATEGIES		INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	PARTNERS
4.2.1	Fund the Live Mutual Project – North End Connects initiative	North End community reports more connectedness to	DoN CHI	New North Citizens Council Way Finders

		workforce development organizations		Springfield Libraries
4.2.2	Increase enrollment of students into the Baystate Springfield Educational Partnership (BSEP)	# of BSEP Students Enrolled	Hospital-Based Community Benefits Activity	Springfield Public Schools
4.2.3	Enhance local population-health clerkship experiences for PURCH students	Sustain strong diversity of partnerships in service area	Other Hospital Activities	
4.2.4	Provide discretionary grants to local organizations (such as Dress for Success Foot in Door program)	Grantees report participant success in connecting with employment and/or job training	Community Benefits Discretionary Grants	
4.2.5	Enhancing and Expanding Pipeline training programs (NEW)	# of pipeline training programs utilized by Baystate Health	Other Hospital Activities	
4.2.6	Supporting educational readiness assistance (English for Speakers of another Language (ESOL), High School Equivalency, Mathematics/Reading Preparedness) (NEW)	TBD	Other Hospital Activities	

OBJECTIVE

4.3

Increase financial support to local educational institutions that offer education to employment tracks

STRATEGIES	INDICATOR OR MEASURE OF SUCCESS	HOSPITAL RESOURCE INPUT(S)	PARTNERS
4.3.1 Better Together Grant: Springfield Technical Community College (STCC)/Westfield State University Pathways for New Healthcare Professionals	Grantees to report to CBAC on grant activities once a year. Please reach out to Office of G&CR to learn about grantee evaluation plan	DoN CHI	STCC Westfield State University

4.3.2	Better Together Grant : The Care Center Bard Microcollege Holyoke	Grantees to report to CBAC on grant activities once a year. Please reach out to Office of G&CR to learn about grantee evaluation plan	DoN CHI	The CARE Center
4.3.3	Better Together Grant : The Care Center Cabot Street College	Grantees to report to CBAC on grant activities once a year. Please reach out to Office of G&CR to learn about grantee evaluation plan	DoN CHI	The CARE Center Greenfield Community College
4.3.4	STCC Endowed Scholarship	Local students connected to financial support	Community Benefits Discretionary Grants	
4.3.5	Holyoke Community College: Endowed Scholarship	Local students connected to financial support	Community Benefits Discretionary Grants	
4.3.6	Elms College Endowed Scholarship	Local students connected to financial support	Community Benefits Discretionary Grants	
4.3.7	Westfield State Endowed Scholarship (Nursing & Physician Assistant Program)	Local students connected to financial support	Community Benefits Discretionary Grants	

Hospital Resource Inputs

Table 3 describes the various types of hospital resources that serve as potential inputs to inform, support, and implement strategies aligned with the five priority focus areas.

Table 3. Hospital Resource Inputs

HOSPITAL RESOURCE INPUT	DESCRIPTION
Community Benefits Discretionary Grants	Funded through hospital operations. Support in the form of mini-grants for community-based programs; short-term initiatives that address health needs identified in the hospital's 2019 CHNA and with a focus on priority populations. Budget and reporting requirements.
Community Education and Training	Funded through hospital operations, DoN CHI funding, or in-kind capacity building through content knowledge and expertise in the specific areas of chronic disease, mental health, health promotion, health education, behavior change, and systems and policy change to assist grantees (and broader community) in the development and implementation of evaluation plans to foster capacity-building, as well as diversify resource development.
Community Relations Investments	Funded through hospital operations. Sponsorship support of community-based organizations and events that promote health and wellness, and improve the quality of life for residents.
Determination of Need (DoN) Community Health Initiatives (CHI) Funding	Funded through hospital operations. Episodic funding that is triggered by hospital capital projects that require a DoN application and approval by MDPH. Five percent of the total value of the project is invested over a 3-5 year period through a transparent Request for Proposal (RFP) process that is overseen by the CBAC. Routine reporting and program evaluation requirements.
External Grant	A third-party (private, state, federal) grant awarded to the hospital or community-based organization.
Grant Writing	Hospital funded and/or sponsored grant writer(s) services for community-based organizations, grantees and non-grantees, and other community partners. Services may include one or more of a combination of the following: prospecting research for viable grant opportunities, proposal development (critique, edit, and revise proposals), and additional advisory/consulting support.
Hospital-Based Community Benefits Activity	Existing hospital-based, staff driven activities that meet IRS and AG community benefits criteria; address unmet needs, work with priority populations, address CHNA significant health needs and SIP priority focus areas, and are not for marketing purposes.
In-kind	Support in the form of hospital staff and time, meeting space, materials, food, printing, and/or other needs.
Other Hospital Activities	Hospital operational activities that are part of the hospital's day-to-day business, but also contribute to addressing significant health needs, directly or indirectly.