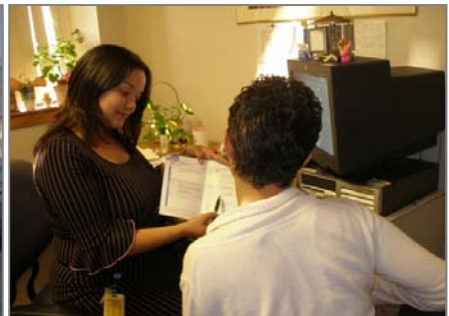




MASSACHUSETTS
GENERAL HOSPITAL

CENTER FOR COMMUNITY HEALTH IMPROVEMENT

2014 Progress Report



...partnering to improve the health and wellbeing of the communities we serve

MGH Center for Community Health Improvement

The MGH Center for Community Health Improvement (CCHI) was founded in 1995 to partner with low-income communities to address the social and economic determinants of health, and to reduce barriers to care for vulnerable populations. We recognize that quality care is necessary but by no means sufficient to creating healthy people and communities. Health is largely determined by social, economic and environmental factors where people live, work, attend school, etc.

MGH engages with the communities it serves – Charlestown, Chelsea, and Revere and special populations – to conduct community health needs assessments to determine priorities. In the 2012 assessment, CCHI and local communities examined public health data and gathered community input through the following:

- **Community Forums** reaching approximately 300 people
- **Quality of Life Surveys** translated into four languages with more than 2,200 responses
- **35 Focus Groups** reaching more than 350 residents and

As a result of this assessment, CCHI has the following three strategies.

Our Strategies

Tackling Substance Use and Obesity by Building and Sustaining Multi-Sector Coalitions

CCHI is the “backbone organization” using a “collective impact” (Stanford Social Innovation

Review) framework for four multi-sector coalitions that seek to prevent and reduce substance use and obesity. This means we act as convener and provide staff, best practices, evaluation support and access to a range of additional resources in all three communities. As an example, our Revere CARES Coalition, founded in 1997, engages city leaders, police, schools, parents, health and human service providers, youth, and many more in advocating for policies and systems that build protective factors and reduce risk

factors for unhealthy behaviors, including underage drinking and substance use. Revere



CARES employs multiple strategies in multiple domains to change social norms and attitudes.

Coalitions in Chelsea and Revere use similar approaches to improving the physical and food environments by successfully advocating for artificial trans fat bans, walking and bike trails, community gardens, farmers' markets, Safe Routes to Schools and more.

Developing the Assets of Youth through STEM

Educational attainment is highly correlated with economic status and is a significant predictor of health status. Every year for the past two decades Mass General has provided educational and career opportunities to hundreds of Boston youth interested in health and science careers. MGH is committed to expanding the horizons of these young people as a health improvement strategy as well as a workforce development strategy. The MGH Center for Community Health Improvement provides approximately 650 youth (grades 3 through college) with academic, life, and career skills through activities related to science, technology, engineering and math (STEM). These activities range from weekly STEM Clubs for younger children through a partnership with the Boys & Girls Clubs of Boston, to paid employment and college readiness for high school students, to scholarships and mentorships to support college graduation.

Improving Access to Care for Vulnerable Populations

Even when financial barriers to care are removed, social, cultural, linguistic, racial and socioeconomic barriers can prevent people from seeking care and contribute to inequities in morbidity and mortality. MGH CCHI supports a range of programs that reduce these barriers for vulnerable patients, including community health workers, navigators and outreach programs. For example, our cancer navigators at MGH Chelsea are trained to identify barriers to screening and follow up and “do whatever it takes” to help the patient overcome those barriers. Navigators are often from a similar ethnic background as the patients they serve.



With the help of navigators, colon cancer screening rates improved for all patients at MGH Chelsea, and a disparity in screening between non-Hispanic Whites and Hispanics was eliminated.

Evaluation at the MGH Center for Community Health Improvement

The MGH CCHI is committed to measuring outcomes for continuous quality improvement, program development, and community-wide impact. Evaluation methods are guided by principles of community-based participatory research (CBPR). These principles are founded on the belief that the people who live in communities have the right to participate

in the process of defining community problems, designing and implementing interventions and solutions, and evaluating outcomes. The process is interactive, and the information benefits the community by leading to program quality improvements and policy, systems and environmental changes.

CCHI Evaluation Mission: To collaborate with community partners and hospital staff to assess community health needs, research best practices for serving vulnerable populations and continually evaluate new and existing health initiatives for quality improvement, sustainability, development, and impact.

Each initiative has a theory of change and key outcome measures. In order to align efforts with national priorities, these measures are derived from Healthy People 2020, where appropriate. Healthy People 2020 is a set of goals and objectives from the U.S. Department of Health and Human Services designed to guide national health promotion and disease prevention efforts to improve the health of all people in the United States.

The Evaluation and Assessment Team has expertise in many areas including: community health needs assessments, program design, logic model development, capacity building, data collection and analysis, and proposal writing and reporting.

About this report

This report highlights accomplishments on the three key strategies, encompassing 30+ programs, of the MGH Center for Community Health Improvement in FY14 (October 1, 2013 – September 30, 2014). It is important to note that this is a snapshot of the Center's work, and not meant to be comprehensive. Where appropriate, community data has been included to give context. Evaluating these strategies is a challenge. Each community and initiative is implemented slightly differently, according to the needs of the population and readiness to tackle the work. Thus, each initiative may have slightly different outcomes and methods for measuring these outcomes. Additionally, frequently the communities collect and report data at different time intervals and with various methods, which can make it difficult to make general statements about progress and impact as a whole.



Green highlighted numbers in this report indicate that MGH CCHI has hit a stated goal in that strategic area.

Building and Sustaining Multi-Sector Coalitions: *Substance Use Prevention*

26%

Reduction in Revere High
School students' past 30-day
alcohol consumption since
2007

48%

Reduction in Charlestown
Middle School students' past
30-day tobacco use since
2007

330

People trained in Narcan and
overdose awareness and
prevention

1000

Students participated in
prevention curriculum in all 3
communities

750

Expired and unneeded
prescriptions were collected
at a Drug Take Back event in
Charlestown.

Goal

Reduce key substance use indicators by 5% to protect the health, safety and quality of life for all, especially children and youth.

Approach

CCHI and local communities employ multiple strategies to move the dial on substance use. Charlestown, Chelsea, and Revere host vibrant coalitions that are making a real difference. Together we have modified or enhanced police, school and court policies and practices; changed community attitudes and norms through social marketing; and developed positive after-school and summer activities for youth.

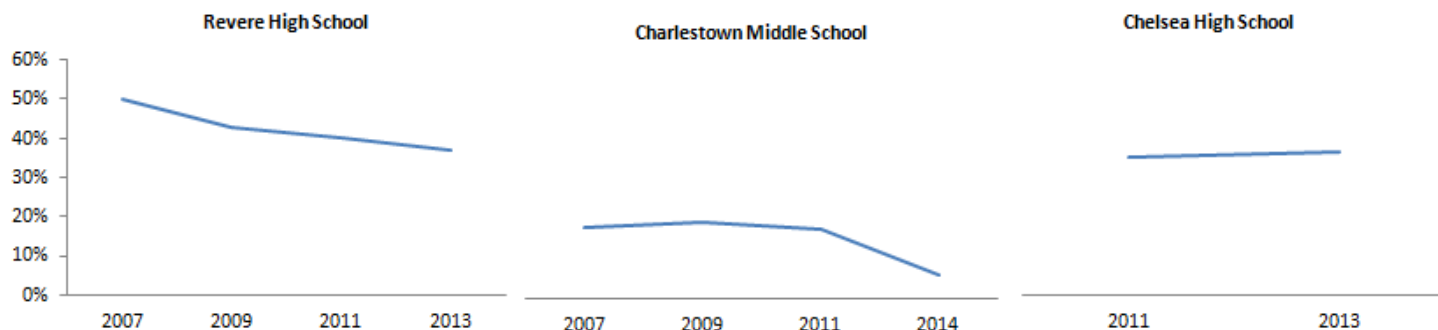
Key Community Accomplishments

- ✓ 80 pounds of expired and unneeded prescription medication were collected at the Prescription Drug Take Back event in Revere.
- ✓ 375 Tobacco cessation kits were given to patients at 6 health center sites.
- ✓ 854 Revere parents pledged to talk to their children about the dangers of substance use.
- ✓ There are 16 active Drug Court Clients in Charlestown; 3 have graduated.
- ✓ A new program, The Family Support Circle, launched in Charlestown and provided 10 families with supportive case management services in its first 2 months.
- ✓ A new smoking cessation referral system has been incorporated into the electronic medical record, making it easier for providers to refer patients to resources.
- ✓ The City of Chelsea allocated funds to hire 2 community navigators to help those struggling with addiction as a direct result of CCHI's community health needs assessment process.
- ✓ 20 total new policies, programs, systems, or environmental changes enacted in FY14.



Substance Use Disorder Community Indicators

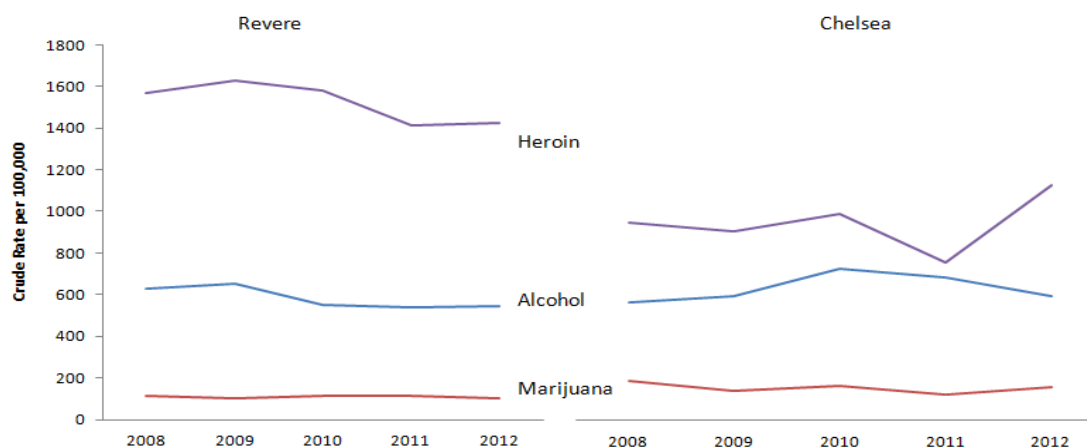
Past 30-day Alcohol Use Among Youth



Source: Youth Risk Behavior Survey, Revere, Chelsea, Charlestown

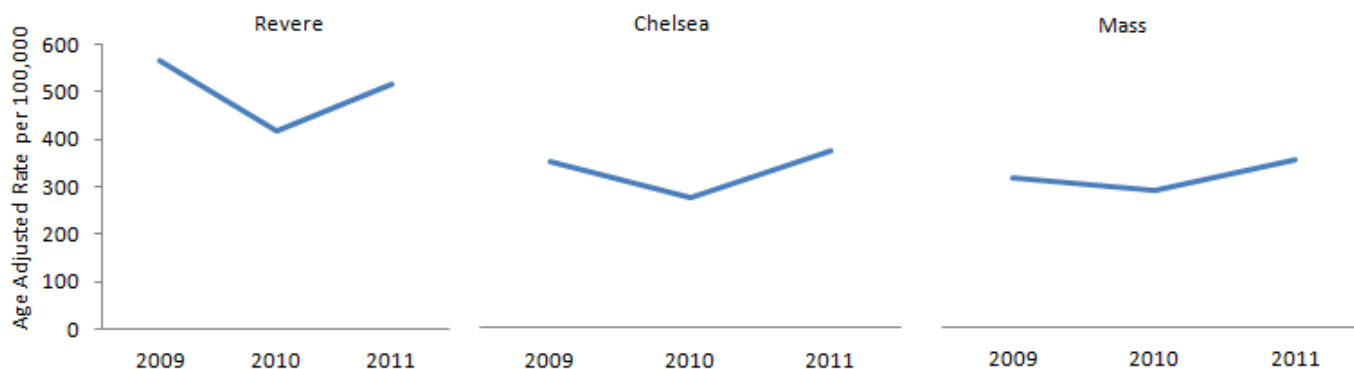
Note: We have not begun youth work in Chelsea

Substance Abuse Admissions by Primary Substance Over Time



Source: Mass Dept. of Public Health MassCHIP

Opioid Related Hospital Discharges



Source: Mass Dept. of Public Health MassCHIP

Building and Sustaining Multi-Sector Coalitions: *Healthy Eating & Active Living*

5%

Average increase in reported physical activity among high school students in Chelsea and Revere since 2011

3,100

Chelsea pre-K to 4th grade students engaged in an extra 15 minutes of physical activity every day

10

Corner stores are considered Healthy Markets in Revere and Chelsea

125

Students participated in Stay in Shape, a school-based physical activity program

17,438

Pounds of food distributed to families in need at the MGH Chelsea Food Pantry

Goal

Promote and improve health, fitness and quality of life and reduce chronic disease risk through a 5% increase of consumption of healthful diets and daily physical activity, and a 5% decrease in body weight of youth.

Approach

Our goal is to increase physical activity and consumption of healthy foods through improving the built environment and increasing access to affordable healthy food. Our key initiatives include multi-sector coalitions serve Chelsea and Revere, MGH Chelsea's food insecurity program, and Stay in Shape, a program aimed at youth focusing on healthy eating and active living, which operates in Chelsea, Charlestown, and Revere.

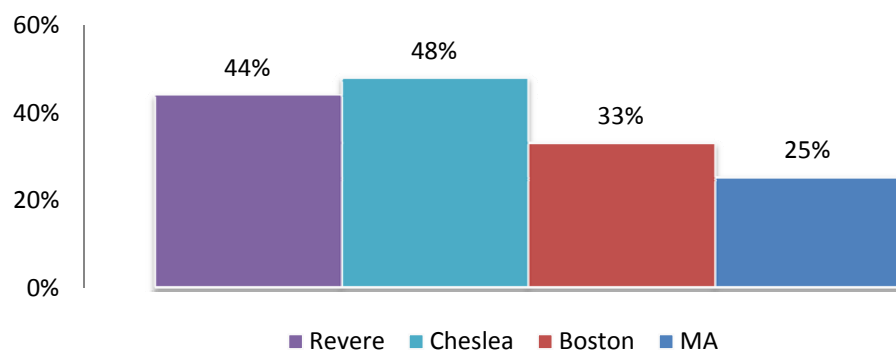
Key Community Accomplishments

- ✓ 3 parks were renovated in Chelsea and Revere.
- ✓ 113 people were served through MGH Chelsea's food pantry.
- ✓ 1,120 elementary students in Chelsea received a fresh fruit or vegetable snack in school 3 days per week.
- ✓ Staff from Healthy Chelsea and Revere on the Move co-chair the Wellness Committees for their respective school districts.
- ✓ 13 Restaurants in Revere participated in the Healthy Dining program.
- ✓ Both Chelsea and Revere distributed walking maps, with official and unofficial trails marked.
- ✓ Healthy Chelsea worked with the Chelsea Public School food provider to eliminate fruit juice from the menu and add a fresh fruit cup daily.
- ✓ 17 total new policies, programs, systems, or environmental changes enacted in FY14.



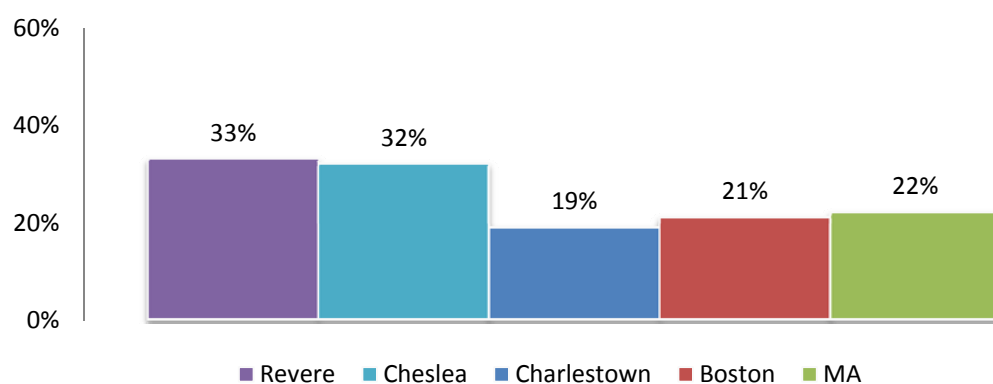
Healthy Eating & Active Living Community Indicators

Overweight or Obese Students, 2010



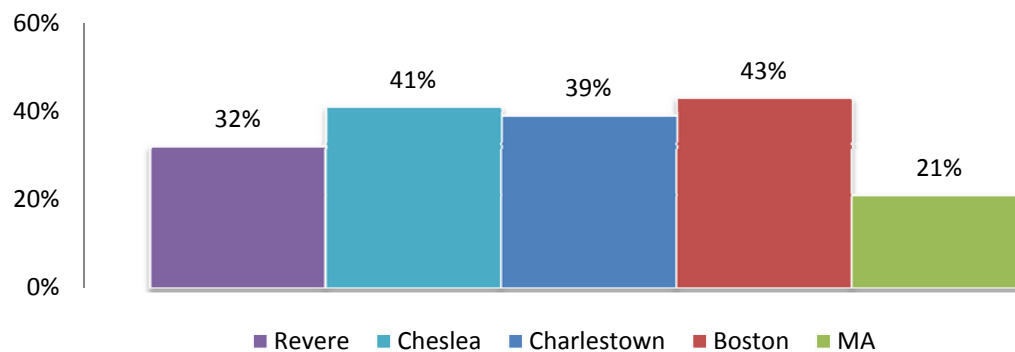
Source: Revere and Chelsea Public School Systems; Calculated from BMI measured on 1st, 4th, 7th, and 10th graders Boston BMI calculated from self report on YRBS

Obese Adults, 2008-2010



Source: Boston Behavioral Risk Factor Survey 2008, 2010; Massachusetts Behavioral Risk Factor Surveillance System, 2009 (BBRFSS)

No Physical Activity in Past 30 Days, Adults, 2008-2010



Source: Boston Behavioral Risk Factor Survey 2008, 2010; Massachusetts Behavioral Risk Factor Surveillance System, 2009 (BBRFSS)



Developing the Assets of Youth

82%

of MGH Youth Programs alumni are persisting in college (compared to 49% of BPS graduates after 6 years)

659

Total number of students served through MGH Youth Programs (a 42% increase since FY12)

188

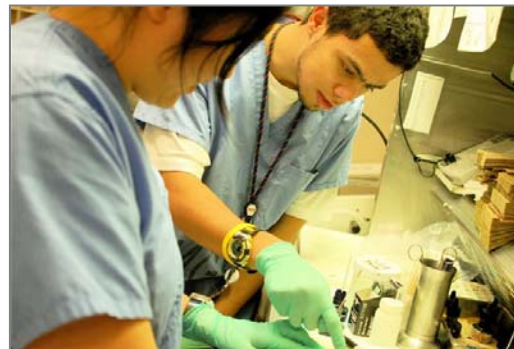
High school and college students had summer jobs at MGH, making us the second largest summer employer of Boston youth

438

MGH staff volunteered with the Youth Programs

Goal

Improve the healthy development, health, safety and well-being of adolescents and young adults.



Approach

The MGH Center for Community Health Improvement provides youth from grades 3 through college with academic and career skills that expand and enhance their educational and career options through activities related to science, technology, engineering and math (STEM), service learning, life skills, and advocacy in Boston, Chelsea, Charlestown, and Revere.

Key Program Accomplishments

- ✓ 36 college students from the MGH Youth Programs were awarded full-time, paid summer internships at MGH; 5 of these students were offered per-diem positions in their departments once their internship ended.
- ✓ 35 Revere middle school students participated in the Power of Action, an after school club focused on making positive choices.
- ✓ 20 Charlestown youth participated in the Turn it Around Charlestown campaign, aimed at educating youth on the dangers of prescription drug misuse.
- ✓ The 35 Chelsea Youth Food Movement members successfully advocated positive changes to the high school food menu, which included fresh smoothies, less fried potatoes, and more baked chicken.



Improving Access to Care for Vulnerable Populations

6,609

Patients were served by the MGH Chelsea Medical Interpreting and Community Health Worker Team

2,516

Breast, colorectal or cervical cancer screening or follow-up appointments completed as a result of navigation

136

Families received help with housing and benefits through LINC, a medical-legal partnership at MGH Chelsea

500

New immigrant children from Central America served by the Immigrant and Refugee Health Program

4,912

Number of contacts with 588 women and men experiencing intimate partner violence provided by HAVEN advocates

Goal

Improve access to comprehensive, quality health care services

Approach

Even when financial barriers to care are removed, social, cultural, linguistic, racial and socioeconomic barriers can prevent people from seeking care and contribute to inequities in morbidity and mortality. MGH CCHI supports a range of programs that reduce these barriers for vulnerable patients, including community health workers, navigators and outreach programs.

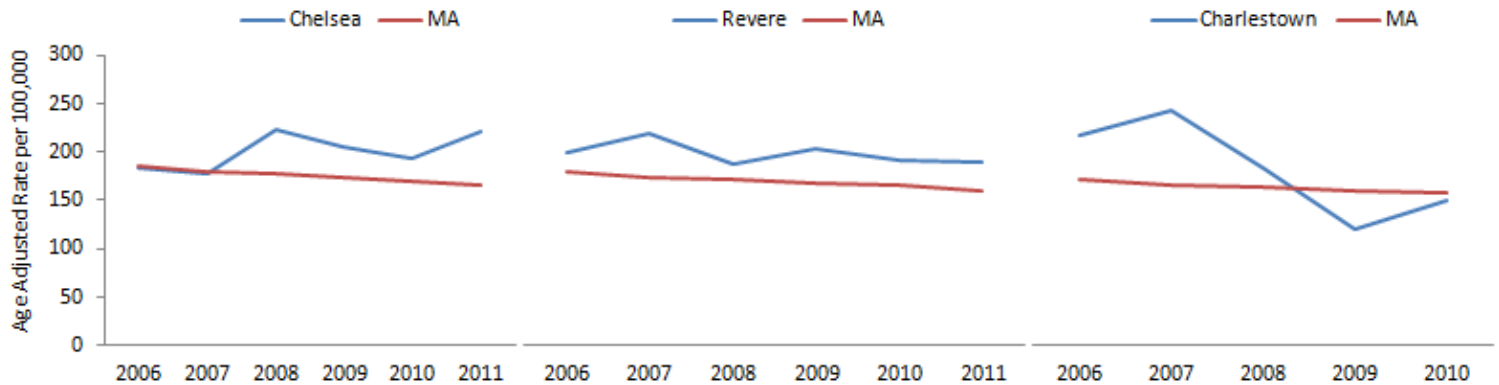
Key Accomplishments

- ✓ 74 New, very high-risk moms received intensive home visiting to assist in parent-child bonding, reduce depression, and ensure proper childhood development.
- ✓ The Medical Interpreting/CHW Team reported: 19,412 Medical Interpreting encounters; 13,119 Community Health Work encounters (increase from 11,523 in FY13); 554 On-call encounters.
- ✓ 286 new moms received extra support at the child wellness visit through the MGH Chelsea Healthy Steps program.
- ✓ 70 newly arrived refugees completed Refugee Health Assessment appointments at MGH Chelsea.



Cancer Mortality Rate & Community Demographics

Cancer Mortality Rate, 2006-2011



Data Source: Mass Dept. of Public Health MassCHIP; BPHC Health of Boston 2012-2013

	Revere	Chelsea	Charlestown	Boston
Population	53,179 24% Latino	36,828 62% Latino	16,439 76% White	636,479 18% Latino
Median Income	\$49,933	\$43,919	\$76,898	\$53,136
Below poverty	16%	25%	17% (37% Children)	21%
Less than a High School Education	20%	37%	13%	15%
Bachelors Degree or higher	17%	14%	<ul style="list-style-type: none"> • 36% Associates or Bachelor's degree • 25% Graduate degree 	43%
Language other than English	46%	69%	19%	36%

Source U.S. Census Bureau: State and County QuickFacts. 27-Mar-2014





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