

## BRIGHAM AND WOMEN’S HOSPITAL COMMUNITY BENEFIT ANNUAL REPORT FY2012



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### Organization Information

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#### Organization Address and Contact Information

**Organization Name:** Brigham and Women's Hospital  
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#### Organization Type and Additional Attributes

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**Organization Type:** Hospital  
**For-Profit Status:** Not-For-Profit  
**DHCFP ID:** Not Specified  
**Health System:** Partners HealthCare  
**Community Health Network Area (CHNA):** Alliance for Community Health (Boston/Chelsea/Revere/Winthrop)(CHNA 19)  
**Regional Center for Healthy Communities (RCHC):** 6  
**Regions Served:** Boston

## Community Benefits Mission Statement

***Brigham and Women’s Hospital (BWH) is committed to serving the health care needs of persons from diverse communities. The hospital, however, makes a unique commitment to the neighboring residents of Jamaica Plain and Mission Hill, who have some of the most pressing health problems in the state. The hospital, along with its two licensed community health centers, is committed to developing integrated care networks to provide and assure appropriate access to high quality, cost-effective primary care to members of these communities regardless of their insurance status. The hospital also commits to meeting the needs of low-income pregnant women and their families from the communities of Roxbury and Dorchester.***

***In order to address the health needs of its target communities, the hospital must look beyond its walls and seek guidance from the community to implement programs that recognize and address the relationships between health and social problems, including economic and educational issues. The hospital is committed to collaborating with community groups and organizations to develop comprehensive programs that respond to the needs of the communities, as identified by the communities themselves, and as suggested by public health and other data. The hospital seeks to improve the health status of residents of the communities by offering health services, continuing and expanding innovative community and school-based programs, and by serving as a resource to the community as a liaison to health careers education and as a possible employer of community residents.***

**Target Populations:** Boston residents experiencing health disparities; medically underserved and/or low income women in BWH priority communities; medically underserved and/or low-income residents of Mission Hill, Roxbury, Jamaica Plain, Dorchester and Mattapan; residents with disproportionately lower rates of colorectal cancer screening; residents at greatest risk of and those living with heart disease; victims of domestic violence; young people and youth; individuals who are HIV+ (or at risk of HIV); Native Americans; and victims of international violence.

**Basis for Selection:**

- Evidence of racial and ethnic health disparities in birth outcomes, cardiovascular disease, cancer and chronic conditions
- Evidence of persistent health disparities in rates of infant mortality and chronic disease for communities of color and need by low income women to meet the costs of breast cancer treatment that are not covered by health insurance
- Evidence of pressing and persistent health and social needs
- Capacity to increase colorectal cancer screening and reduce the health disparity in colon cancer through a community navigator model
- Rates of heart disease and mortality related to heart disease in our priority communities, particularly within communities of color
- Domestic Violence is a public health issue that impacts 25% of women and a health care setting provides an excellent point of intervention to provide safety planning and support to survivors
- Large youth population in priority communities combined with high rates of family poverty provide the opportunity to impact the long term health and economic status of those communities by providing educational and employment opportunities provided by BWH in the health, science and medical field
- Capacity to support high risk individuals to manage their condition as well as reduce rate of transmission within communities with disproportionately high rates of HIV
- Significantly poorer health outcomes and health access for Native Americans
- A growing body of science is consistently linking violence (the experience with and/or fear of) with risk for and incidence of a range of serious physical health problems. The effects of violence on health are a consequence of the physical, biological, environmental, social, behavioral, and emotional changes that violence imposes on individuals and the community.

**Key Accomplishments of Reporting Year**

- The Passageway domestic violence program provided 7,159 service contacts to or on behalf of 1,258 clients of the BW/F
- 67% of patients enrolled in the PACT program for at least 6 months demonstrated maintained suppressed or achieved suppressed HIV-1 viral loads at 12 months  
96% of Student Success Jobs Program alumni entered college after completion of the high school program
- The Cardiovascular Wellness Service screened over 9,500 people
- 389 patients were referred to a patient navigator for colorectal cancer screening and 75% of navigated patents completed colonoscopies
- 135 low income women with breast cancer were provided financial assistance to cover expenses associated with their diagnosis that were not covered by insurance
- Over 21,000 patients received care at our two BWH licensed health centers in Jamaica Plain (Southern Jamaica Plain and Brookside)

- 576 women received pregnancy and parenting services from health center based case managers through the perinatal case management program
- Over 500 young people received educational support and mentoring from nearly 300 Brigham and Women’s employees

### Plans for Next Reporting Year

- Continued expansion of effective programs to increase educational and employment opportunities for young people in the community
- With the main elements of our Birth Equity Initiative firmly in place, we plan to continue to develop interventions to promote healthy birth outcomes through a focus on social determinants of health, increased social support and innovative approaches within our health system.
- Continue to serve all victims of intentional violence through our Passageway, Violence Prevention and Violence Recovery programs.

### Community Benefits Leadership/Team

The vice president and five program directors of the CCHHE comprise the community benefits leadership team of BWH.

### Community Benefits Team Meetings

The CCHHE leadership team described above meets twice monthly throughout the year and with the CCHHE staff on a monthly basis.

### Community Partners

ABCD	Children’s Hospital
AIDS Action Committee of MA	Children’s Trust Fund (Massachusetts)
Alice H. Taylor Tenant Task Force	City Life/Vida Urbana
AllCare Pharmacy	Codman Square Health Center
Bay State Banner	Community Academy of Science and Health
Beth Israel Deaconess Hospital Medical Center	Community Conversations
Black Women’s Health Institute	Community Servings
Body By Brandy 4 Kidz/ Body by Brandy	Conference of Boston Teaching Hospitals
Wellness Center	Dana Farber Cancer Institute
Boston Alliance for Community Health -	DCF - Department of Children &
CHNA 19	Families/Hall Community Center
Boston Centers for Youth and Families	Dimock Center
Boston Conference of Community Health	East Boston Neighborhood Health Center
Centers	Edward M. Kennedy Academy for Health
Boston Health Care for the Homeless	Careers
Program, Inc.	El Planeta
Boston Latin Academy	ESAC (Boston Asthma Initiative)
Boston Medical Center	Everybody Wins
Boston Private Industry Council	Fenway Health
Boston Public Health Commission	Foxboro Human Services & COA
Boston REACH Coalition	Foxboro Jaycees
Camp Harborview	Greater Boston Food Bank
Center for Community Health Education	Harvard Vanguard Medical Associates
Research and Service (CCHERS)	Health Career Connections

Health and Social Services Consortium  
 (HESSCO) Elder Services  
 HUGS - Foxboro  
 Hyde Square Task Force  
 Indian Health Service (sites at Gallup  
 Indian Medical Center and Northern Navajo  
 Medical Center)  
 Inquilinos Boricuas en Accion  
 Jamaica Plain Neighborhood  
 Development Corporation  
 Jamaica Plain Health Planning Committee  
 Jamaica Plain Tree of Life/Arbol de Vida  
 Jamaica Plain Neighborhood  
 Development Corporation  
 Jamaica Plain Unidos/United  
 Jamaica Plain VIP and Trauma Response Team  
 Jamaica Plain Youth Health Equity Collaborative  
 Jane Doe, Inc.  
 John D. O'Bryant High School  
 Louis D. Brown Peace Institute  
 Madison Park Technical and Vocational  
 High School  
 Martha Eliot Health Center  
 Massachusetts General Hospital  
 Massachusetts League of Community  
 Health Centers  
 MASCO  
 Mattapan Community Health Center  
 Maurice J. Tobin K-8 School  
 Mission Church Grammar School  
 Mission Hill Crime Committee  
 Mission Hill Harmony on the Hill  
 Mission Hill Health Movement  
 Mission Hill Little League  
 Mission Hill Men Softball League  
 Mission Hill Main Streets  
 Mission Hill Neighborhood Housing Services  
 Mission Hill Youth Collaborative  
 Mission Main Tenants Task Force  
 Mission SAFE

Neponset Health Center  
 Neponset Valley Chamber – Elder Alliance  
 New Mission High School  
 Northeastern University  
 Parker Hill/Fenway ABCD  
 Project HOPE  
 PureWellness  
 REACH US Coalition  
 Renewal House  
 Roxbury Community Alliance for Health  
 Roxbury Community College  
 Roxbury Preparatory Charter School  
 Roxbury Tenants of Harvard  
 Roxbury YMCA  
 SAFE-Foxboro  
 SAGE (Stop Abuse Gain Empowerment) –  
 Boston  
 School –to–Career Partnership  
 Shattuck Hospital  
 Sister to Sister: Women’s Heart  
 Health Foundation  
 Sociedad Latina  
 Somerville Primary Care  
 South End Community Health Center  
 South Street Youth Center  
 Spontaneous Celebrations  
 Sportsmen’s Tennis and Enrichment Center  
 St. Elizabeth's Medical Center  
 Tri-Town Chamber of Commerce  
 Thrive in 5  
 Tobin Community Center  
 Tufts Medical Center  
 United Way  
 Urban Edge  
 Urban Science Academy  
 Whittier Street Health Center  
 WilmerHale Legal Services  
 Zinberg Clinic

### Community Health Needs Assessment

#### Date Last Assessment Completed and Current Status

The CCHHE conducted a comprehensive community assessment effort in 2010/11 focused on the Boston neighborhoods of Roxbury, Mission Hill, Dorchester, Mattapan, and Jamaica Plain. These neighborhoods collectively comprise nearly 37 percent of Boston’s overall population and are priority neighborhoods of the hospital. The data analysis for the assessment was completed in July 2011 with analysis of the 2010

census data. Three community meetings were held in FY12 to share the assessment results and to get community feedback on priorities and possible responses.

### Consultants/Other Organizations

The research and evaluation team of Health Resources in Action (HRIA) were commissioned as consultants for the BWH community assessment and played an instrumental role in quantitative and qualitative data collection and analysis. Additionally, the Roxbury Community Alliance for Health and HRIA consulted on the initial Birth Equity Initiative community dialogue.

### Data Sources

Community Focus Groups, Interviews, MassCHIP, Public Health Personnel, Surveys, Other - U.S. Census data, U.S. Bureau of Labor Statistics, Boston Police Department, Massachusetts Department of Public Health, Boston Public Health Commission, including the Boston Behavioral Risk Surveillance Survey (BRFSS) and the Boston Youth Risk Behavioral Survey (BYRBS). Individual interviews were conducted with external and internal stakeholders and focus groups involving 113 residents and stakeholders were also conducted to better understand perceptions of neighborhood health concerns and strengths and opportunities for BWH. We convened focus groups with a diverse cross-section of the community, including adults and young people, and two groups were conducted in Spanish and Haitian Creole.

## Community Benefits Programs

<b>Student Success Jobs Program (SSJP)</b>	
<b>Program Type</b>	Mentorship/Career Training/Internship, Outreach to Underserved, School/Health Center Partnership
<b>Brief Description or Objective</b>	SSJP is an intensive year-round employment and mentoring program for students of Boston public high schools. With the goal of addressing the underrepresentation of young people of color in health and science careers, SSJP targets 10th through 12th grade students providing the opportunity to build skills and a career pathway in the health and science field. Brigham and Women's Hospital (BWH) employees provide intensive mentoring to students in a dynamic and professional hospital environment. Tutoring support is also provided to ensure the academic success of students in their science and mathematics subjects. Individualized assistance enables students to identify their options for higher education and prepare college and financial aid applications. Since inception in FY2001, SSJP has served 379 students (75 in FY2012).
<b>Target Population</b>	<p><b>Regions Served:</b> Boston</p> <p><b>Health Indicator:</b> Other: Education/Learning Issues</p> <p><b>Sex:</b> All</p> <p><b>Age Group:</b> Adult-Young, Child-Teen</p> <p><b>Ethnic Group:</b> All</p> <p><b>Language:</b> All</p>
<b>Statewide Priority:</b> Promoting Wellness of Vulnerable Populations, Reducing Health Disparity	
<b>Goal Description</b>	<b>Goal Status</b>
To address the need for proficient and traditionally underrepresented	Ninety-six percent of alumni entered college after SSJP or have graduated college, and 48% of those students majored

populations in health, science, and medical careers	in a health or science field. Seventy percent of alumni are employed and 55% of those alumni are employed in a health care setting.
To enhance high school students’ interest in health careers through mentorship by health care professionals	Recruited five new BWH health professionals to serve as mentors to SSJP, to join the other 50+ BWH departments and mentors already involved with SSJP.
To support academic progress and post-secondary education of participants	Maintained 100% college matriculation; Graduates were accepted into many top universities including: Harvard University, Stanford University, Wellesley College, Tufts University, Boston College, and Boston University.
To foster networking opportunities for emerging and underrepresented health care professionals with peers and the hospital community	Provided seminars and an overnight retreat to increase communication, team building as well as foster friendships among SSJP student participants

**Partner Name, Description**

**Partner Web Address**

Boston Latin Academy

<http://latinacademy.org/>

John D. O'Bryant High School

<http://www.obryant.us/>

Madison Park High School

<http://www.madisonparkhs.org/>

New Mission High School

<http://www.bostonpublicschools.org/node/497>

Community Academy of Science and Health

<http://www.bostonpublicschools.org/node/416>

Boston Private Industry Council

<http://www.bostonpic.org/>

Edward M. Kennedy Academy for Health Careers

<http://www.kennedyacademy.org/>

Urban Science Academy

<http://www.urbansci.com/>

**Contact Information**

Michelle Keenan, Director of Community Programs, Center for Community Health and Health Equity, Brigham and Women’s Hospital , [keenan@partners.org](mailto:keenan@partners.org)

**The Passageway Domestic Violence Program**

**Program Type**

Community Education, Direct Services, Prevention

**Brief Description or Objective**

Passageway provides free, voluntary, and confidential services to patients, employees and community members who are experiencing domestic violence (DV). This intervention is based on a multidisciplinary and tailored response model that includes domestic violence advocates, nurses, physicians, social workers, mental health providers, security, and other health care providers. The team provides tailored interventions based on the needs of the individual. Passageway advocates come from diverse backgrounds reflecting the populations served. Advocates offer services in English and Spanish and use hospital interpreters for all other languages.

Advocates are on-site at the BWH campus, Faulkner Hospital (FH), Southern Jamaica Plain Health Center (SJPHC), Brookside Community Health Center, Whittier Street Health Center and the Mission Hill community. . In FY2012, Passageway provided services to 1,258 clients and since inception, 11,476 people have been served.

<b>Target Population</b>	<b>Regions Served:</b> Boston <b>Health Indicator:</b> Injury and Violence, Other: Domestic Violence <b>Sex:</b> All <b>Age Group:</b> All Adults <b>Ethnic Group:</b> All <b>Language:</b> All
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**Statewide Priority:** Promoting Wellness of Vulnerable Populations

Goal Description	Goal Status
Provide free, voluntary, and confidential services to patients, employees and community members who are experiencing domestic violence (DV).	In FY2012: 1,258; Since inception (1997) 11,476 people.
Continue to increase safety, health and well-being of patients, employees and community members by providing comprehensive services to those experiencing domestic violence.	Provided 7,159 direct service contacts to or on behalf of 1,258 patients/employees of the BWHC, supported health centers and community.
Increase access to services for patients and employees by increasing education and consultation services to health care providers, staff and community members.	Provided 47 education/training sessions to over 819 health care providers and community members on the impact of DV and health.
Increase access to services for patients and employees by increasing education and consultation services to health care providers and staff.	Provided 3,873 individual consultations with providers regarding domestic violence cases.

Partner Name, Description	Partner Web Address
SAGE-Boston (Stop Abuse Gain Empowerment) Renewal House	<a href="http://renewalhouse.org/">http://renewalhouse.org/</a>
Jane Doe, Inc.	<a href="http://www.janedoe.org/">http://www.janedoe.org/</a>
Conference of Boston Teaching Hospitals	<a href="http://www.cobth.org/">http://www.cobth.org/</a>
WilmerHale Legal Services	<a href="http://www.law.harvard.edu/academics/clinical/lsc/index.htm">http://www.law.harvard.edu/academics/clinical/lsc/index.htm</a>
ABCD	<a href="http://www.bostonabcd.org/">http://www.bostonabcd.org/</a>
Whittier Street Health Center	<a href="http://www.wshc.org">http://www.wshc.org</a>



**Contact Information**      Mardi Chadwick, J.D. Director Violence Intervention and Prevention Programs, 41 Avenue Louis Pasteur, Boston, MA 02115 617-264-8751, [mchadwick@partners.org](mailto:mchadwick@partners.org)

**The Prevention and Access to Care and Treatment (PACT) Project**

**Program Type**                      Direct Services, Health Screening, Outreach to Underserved, Prevention, Support Group

**Brief Description or Objective**      The PACT Project offers home HIV health promotion, and directly observed therapy (DOT) services to poor and marginalized residents of Boston’s inner city. Based on the “accompagneur” model developed by Paul Farmer’s team in Haiti, PACT health promoters are trained to educate, counsel, and accompany individuals who are HIV-positive or at risk for HIV as they negotiate life and seek to improve their health. PACT is a complementary community-based health care delivery model that assists high-risk individuals in managing their disease and risks for disease more effectively. Dr. Heidi Behforouz heads a staff of 25 employees and is spearheading new initiatives to expand the application of community health worker interventions to new settings and to more generally address chronic diseases which disproportionately affect the poor. In FY2012, 107 patients were served, and since inception, 390 patients have been served.

**Target Population**                      **Regions Served:** Boston  
**Health Indicator:** Other: HIV/AIDS  
**Sex:** All  
**Age Group:** All Adults  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Address Unmet Health Needs of the Uninsured, Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Increased outcomes in patient health improvement	67% of patients enrolled for at least 6 months maintained suppressed or achieved suppressed HIV-1 VLs at 12 months
Increased outcomes in patient health improvement	After 1 year in the program, the patients' median CD4 rose from 148 cells/uL at baseline to 268 cells/uL at 12 months
Increased outcomes in patient health improvement	56% of participants achieved or sustained undetectable viral load (<75 VL) 1 year after participation in PACT
Increased patient engagement in existing primary care	Patients active within the last year went to provider appointments on average once (0.9) per quarter.
Offer home and HIV prevention, health promotion, and directly observed therapy (DOT) services to poor and marginalized residents of Boston’s inner city.	In FY2012: 107 patients served; Since Inception: 390 patients served

<b>Partner Name, Description</b>	<b>Partner Web Address</b>
AIDS Action Committee	<a href="http://www.aac.org/">http://www.aac.org/</a>
Codman Square Health Center	<a href="http://www.codman.org/">http://www.codman.org/</a>

Somerville Primary Care	<a href="http://www.challiance.org/locations/som_hosp_primary_care.shtml">http://www.challiance.org/locations/som_hosp_primary_care.shtml</a>
Zinberg Clinic (Cambridge)	<a href="http://www.challiance.org/locations/zinberg.shtml">http://www.challiance.org/locations/zinberg.shtml</a>
AllCare Pharmacy	<a href="http://www.allcarepharmacy.com/">http://www.allcarepharmacy.com/</a>
Boston Medical Center	<a href="http://www.bmc.org">http://www.bmc.org</a>
Boston Healthcare for the Homeless	<a href="http://www.bhchp.org">http://www.bhchp.org</a>
Beth Israel Deaconess	<a href="http://www.bidmc.org">http://www.bidmc.org</a>
Shattuck Hospital	<a href="http://www.mass.gov/shattuckhospital">http://www.mass.gov/shattuckhospital</a>
Children's Hospital	<a href="http://www.childrenshospital.org">http://www.childrenshospital.org</a>
Dimock Center	<a href="http://www.dimockcenter.org">http://www.dimockcenter.org</a>
East Boston Neighborhood Health Center	<a href="http://www.ebnhc.org">http://www.ebnhc.org</a>
Fenway Health	<a href="http://www.fenwayhealth.org">http://www.fenwayhealth.org</a>
Harvard Vanguard Medical Associates	<a href="http://www.harvardvanguard.org">http://www.harvardvanguard.org</a>
Neponset Health Center	<a href="http://www.hhsi.us/metro-boston/neponset-health-center/">http://www.hhsi.us/metro-boston/neponset-health-center/</a>
Somerville Primary Care	<a href="http://www.challiance.org/locations/som_hosp_primary_care.shtml">http://www.challiance.org/locations/som_hosp_primary_care.shtml</a>
St. Elizabeth's Medical Center	<a href="http://steward.org/St-Elizabeths">http://steward.org/St-Elizabeths</a>
Tufts-NEMC	<a href="http://www.tuftsmedicalcenter.org">http://www.tuftsmedicalcenter.org</a>
Zinberg Clinic	<a href="http://www.challiance.org/locations/zinberg.shtml">http://www.challiance.org/locations/zinberg.shtml</a>

**Contact Information** Heidi Behforouz, MD Director PACT Project Division of Social Medicine and Health Inequities Brigham and Women's Hospital 622 Washington Street Dorchester, MA 02124 617-474-8500, [hbehforouz@partners.org](mailto:hbehforouz@partners.org)

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**Connecting Hope, Assistance, and Treatment Program (CHAT)**

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<b>Program Type</b>	Community Health Needs Assessment
<b>Brief Description or Objective</b>	The Connecting Hope, Assistance, and Treatment (CHAT) program provides financial assistance to low income, uninsured and underinsured women with breast cancer to pay for necessary services related to their breast cancer diagnosis. In the absence of the CHAT program, many women are forced to forego the items related to their breast cancer treatment in order to pay for rent, utilities, food, and other basic necessities. In the face of many competing survival priorities, the CHAT program is able to assist in providing the resources necessary to ensure the emotional and physical

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wellbeing of breast cancer patients. In FY2012 there were 135 women served by the CHAT program with over 50% of participating women requesting more than one resource. The majority of resources provided to women were breast prostheses/bras and transportation to treatment appointments. The CHAT program provided grocery cards to 20% of participating clients in an effort to address the issues of food insecurity. Since inception in 2002, the CHAT program has provided services to over 700 women.

<b>Target Population</b>	<p><b>Regions Served:</b> Boston-Greater</p> <p><b>Health Indicator:</b> Access to Health Care, Other: Cancer - Breast</p> <p><b>Sex:</b> Female</p> <p><b>Age Group :</b>Adult</p> <p><b>Ethnic Group:</b> All</p> <p><b>Language:</b> All</p>
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**Statewide Priority:** Address Unmet Health Needs of the Uninsured, Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Provide financial assistance to low income, uninsured and underinsured women with breast cancer to pay for necessary services related to their breast cancer diagnosis.	In FY2012 there were 135 women served by the CHAT program with over 50% of participating women requesting more than one resource.
Provide the resources necessary to ensure the emotional and physical well-being of breast cancer patients	Provided grocery cards to 20% of participating clients in an effort to address the issues of food insecurity.
In FY2012: To provide resources to at least 100 women through the CHAT program	155 CHAT applications were processed and resources provided to 135 approved CHAT clients (87%)

<b>Partner Name, Description</b> Community Servings	<b>Partner Web Address</b> <a href="http://www.servings.org">http://www.servings.org</a>
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**Contact Information** Maisha Douyon Cover, Manager, Family and Community Health, Center for Community Health and Health Equity Brigham and Women's Hospital 41 Avenue Louis Pasteur, Boston, MA 02115 617-582-0188, [mdouyon@partners.org](mailto:mdouyon@partners.org)

**Open Doors to Health Colorectal Cancer Screening Initiative**

<b>Program Type</b>	Direct Services, Health Screening, Prevention
<b>Brief Description or Objective</b>	The Dana Farber/Brigham and Women's Cancer Center (DF/BWCC) Open Doors to Health (ODH) Cancer Screening Initiative is designed to bring together community based peer leaders/health educators and a patient navigator to: increase awareness of the need for colorectal cancer screening among patients who receive care at two community health centers; increase physician recommendations for screening among patients aged 50 and older seeking care at BWH licensed and affiliated community health centers; decrease no-show rates for screening colonoscopy; increase adequate test preparation; and address barriers to screening through

patient navigation, resource referral, and education. In FY2012, 389 patients were referred to patient navigator. Since program inception in August 2009, 1,275 patients have been referred to the patient navigator.

**Target Population**  
**Regions Served:** Boston-Jamaica Plain  
**Health Indicator:** Access to Health Care, Other: Cancer - Colo-rectal  
**Sex:** All  
**Age Group:** Adult  
**Ethnic Group:** Hispanic/Latino  
**Language:** English , Spanish

**Statewide Priority:** Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Increase colon cancer screening rates for individuals above age 50	75% of navigated patients completed colonoscopies. This is a significant increase from the period prior to patient navigator implementation when completion rates were 48.5%
Reduce no-show rates for colonoscopy screening among health center patients	18% of navigated patients did not show for an appointment, which is comparable to national studies and a significant improvement to no-show rates that exceeded 50% prior to patient navigator implementation
Address barriers associated with colonoscopy through patient navigation	389 patients were referred to the patient navigator in FY2012 and were provide with a range of services including transportation assistance, medical escort, co-pay assistance, and health education.

**Partner Name, Description**

**Partner Web Address**

Not Specified

**Contact Information**

Swapnil Maniar, PhD, MPH Director, Health Equity Programs Center for Community Health and Health Equity, Brigham and Women’s Hospital, Boston, MA 02115; 617-264-8752, [smaniar1@partners.org](mailto:smaniar1@partners.org)

**Birth Equity Initiative (BEI)**

**Program Type** Community Education, Community Participation/Capacity Building Initiative, Direct Services, Outreach to Underserved, Prevention, Support Group

**Brief Description or Objective** The Birth Equity Initiative (BEI) is a comprehensive effort to address persistent disparities in infant mortality and low birthweight, particularly among infants born to Black women, through the engagement and empowerment of women, their families, and their communities. The concept of birth equity is grounded in the belief that a lifetime of health equity begins at birth. The guiding framework for the BEI is the lifecourse approach, which extends across the preconception, postnatal, and inter-conception periods and is essential in order to help women achieve health before, during, and between pregnancies. This model links to and supports primary and pediatric care, safety in the home and community, nutritional assistance, and later risks to health such as teen pregnancy, interpersonal violence, and school dropout in a dynamic and full-circle intervention. In

FY2012 the Birth Equity Initiative continued community outreach efforts, particularly those supporting adolescent and young adult parents, expanded efforts related to Centering Pregnancy, developed a new prenatal yoga program, and enhanced its social media activities. In FY2012, the BEI engaged a total of 309 individuals. Since inception in 2010, this effort has engaged over 1,100 individuals.

**Target Population**

**Regions Served:** Boston  
**Health Indicator:** Other: Family Planning, Other: Pregnancy  
**Sex:** Female  
**Age Group:** Adult-Young  
**Ethnic Group:** Black/African American, Hispanic/Latino  
**Language:** All

**Goals**

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
To identify facilitators and barriers for breastfeeding within our system and identify opportunities to increase community-based outpatient lactation support.	Conducted survey of 125 patients in BWH outpatient clinics. Survey identified a need for increased patient education materials during the prenatal period and the need to increase consistency of education received.
To provide stress reduction and relaxation tools to pregnant teens through the provision of prenatal yoga	Began a series of prenatal and postpartum yoga classes for pregnant and postpartum young women aimed at stress reduction and improving mental health. In FY2012, over 30 young women and their partners participated in the prenatal yoga program.
To lead a consortium and organize a city-wide summit for Pregnant and Parenting Young Adults	Led consortium of providers and community organizations for pregnant and parenting young adults.
To lead a consortium and organize a city-wide summit for Pregnant and Parenting Young Adults	Hosted the Summit for Teen Empowerment and Parenting Success (STEPPS) and convened over 100 pregnant and parenting teens in the Boston area. Recruited 10 young parents to serve as Young Parent Ambassadors to inform summit content and assist with outreach
Become a Centering Healthcare Institute, Certified Centering Pregnancy site (A group model of care that integrates health assessment, education, and support, into a unified program within a group setting)	In September 2012, achieved Centering Site Certification by Centering Healthcare Institute
assist with outreach delete Become a Centering Healthcare Institute, Certified Centering Pregnancy site (A group model of care that integrates health assessment, education, and support, into a unified program within a group setting)	In FY2012, 29 patients enrolled in Centering Pregnancy groups. Since its inception in 2010, 86 women have enrolled in Centering Pregnancy groups within the BWH Adolescent Reproductive Health Service
Centering Pregnancy participants will achieve Healthy People 2010 goals of 5%	96% of Centering Pregnancy patients delivered a normal birthweight infant >5.5 lbs, thus exceeding the

low birth weight births	HP 2010 goals of 5% low birthweight. Mean birthweight for Centering Pregnancy participants was 7lbs.
50% of women participating in Centering Pregnancy will continue with breastfeeding at 6 week postpartum visit	As of July 2012, 60.5% of women participating in Centering Pregnancy were breastfeeding at their six-week postpartum visit.

**Partner Name, Description**

Roxbury YMCA

Children's Hospital Boston - Young Parents Program (YPP)

Boston Public Health Commission, Healthy Mother, Healthy Baby Program  
March of Dimes

Healthy Families

**Partner Web Address**

<http://www.ymcaboston.org/roxbury/>

<http://www.childrenshospital.org/clinicalservices/Site2277/mainpageS2277P0.html>

[www.bphc.org](http://www.bphc.org)

[www.marchofdimes.com](http://www.marchofdimes.com)

[www.mctf.org](http://www.mctf.org)

**Contact Information**

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**Brigham and Women’s Hospital - Maurice J. Tobin School Partnership**

**Program Type**

Community Education, Direct Services, Outreach to Underserved, School/Health Center Partnership

**Brief Description or Objective**

For 20 years, BWH and the Maurice J. Tobin School in Mission Hill have partnered to support the school’s academic mission by increasing parent, family, community, and hospital involvement in students’ learning. With the established link between educational attainment and health status, this partnership was created to support the hospital’s mission of improving the health status of the Mission Hill community. Elements of the program are designed to engage hospital employees in students’ education. Further, in FY2012, efforts were made to support students and teachers directly in the classroom in order to improve educational outcomes and achievement. In FY2012: 453 children and their families participated. Since inception in 1991, approximately 8,500 students and their families have had access to services provided by the Brigham and Women’s Hospital-Maurice J. Tobin Partnership.

**Target Population**

**Regions Served:** Boston, Boston-Mission Hill  
**Health Indicator:** Access to Health Care, Other: Education/Learning Issues, Other: Language/Literacy, Other: Nutrition, Other: Parenting Skills  
**Sex:** All  
**Age Group:** Child-Preschool, Child-Primary School  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Support the school’s academic mission by increasing parent, family, community and hospital involvement in students’ learning	In FY2012: 453 children and their families served; Since inception (1991), approximately 8,500 students and their families.
Support the school’s academic mission by increasing BWH employee involvement	In FY2012, 37 BWH employees volunteered to be matched with a struggling Tobin student, as identified by school faculty, to read to once a week for an hour for the entire school year through the non-profit, Everybody Wins.
Create a continuum of services to students and families to support their emotional, social and academic needs.	A Full Service School Director was hired to coordinate supplemental student services (afterschool programs, etc) and interventions and family support programs to address learning and service gaps for students and families
Create a continuum of services to students and families to support their emotional, social and academic needs.	All grade 3-8 teachers (18) received instructional support through the Achievement Network which provided real time individualized student assessment (for 308 students) enabling teachers to use data to drive and improve instructional practices
Create a continuum of services to students and families to support their emotional, social and academic needs.	Mathematics tutoring was provided by ‘Tutors for All’ - 25 academically low performing 6th and 7th received academic intervention to improve mathematics performance. Weekly each student received 2.5 hours of individual tutoring in mathematics for 20weeks
Create a continuum of services to students and families to support their emotional, social and academic needs.	In FY2012, BWH partially funded 2 clinical social workers housed at the school through Children’s Hospital Neighborhood Partnership to address the mental health needs of 70 students

**Partner Name, Description**

Maurice J. Tobin K-8 School

**Partner Web Address**

<http://www.bostonpublicschools.org/node/524>

Children’s Hospital

<http://www.childrenshospital.org/>

Greater Boston Food Bank

<http://www.gbfb.org/>

Everybody Wins

<http://www.ewmb.org/>

Achievement Network

<http://www.achievementnetwork.org/>

Tutors for All

<http://www.tutorsforall.org/>

**Contact Information**

Pamela Audeh, Center for Community Health and Health Equity, Brigham and Women's Hospital, 41 Avenue Louis Pasteur, Boston, MA 02115, 617-264-8740, [paudeh@partners.org](mailto:paudeh@partners.org)

**BWH - Mission Hill Community Activities**

<b>Program Type</b>	Community Education, Community Participation/Capacity Building Initiative, Grant/Donation/Foundation/Scholarship, Health Screening
<b>Brief Description or Objective</b>	Brigham and Women’s Hospital (BWH) has a long-standing commitment to improving the health status of Boston residents, with a focus on Boston neighborhoods surrounding the hospital with disproportionately poor health and social outcomes, and documented need for comprehensive health and social services. BWH makes a unique commitment to the neighboring residents of Mission Hill. We take a broad approach to community health which includes supporting neighborhood schools, youth serving organizations, anti-poverty programs, housing and public health initiatives, and employment and business development throughout Mission Hill. In FY12 over 2,000 people received support from the resources that were provided to Mission Hill organizations. The majority of people were Mission Hill residents but other Boston neighborhoods were also served by the Parker Hill/Fenway ABCD Emergency Food Pantry.
<b>Target Population</b>	<b>Regions Served:</b> Boston-Mission Hill <b>Health Indicator:</b> Access to Health Care <b>Sex:</b> All <b>Age Group:</b> All <b>Ethnic Group:</b> All <b>Language:</b> All

**Goals**

**Statewide Priority:** Promoting Wellness of Vulnerable Populations

<b>Goal Description</b>	<b>Goal Status</b>
Support neighborhood schools, youth serving organizations, anti-poverty programs, housing and public health initiatives, and employment and business development throughout Mission Hill	In FY12 over 2,000 people received support from the resources and that were provided to Mission Hill organizations.
Increase capacity building efforts, economic development opportunities and education and training for youth in Mission Hill	In FY12, approximately \$20,000 was allocated to two organizations that serve youth in Mission Hill creating 20 summer jobs for neighborhood youth.
Maintain community partnerships as part of our efforts to the underserved populations in Mission Hill	In FY12, BWH worked in close partnership with the Parker Hill/Fenway ABCD Emergency Food Pantry. The food pantry served over 500 families and over 2,000 individuals in FY12.
Facilitate access to BWH healthcare facilities/services for the Mission Hill community	Collaboration with three, Mission Hill organizations to provide one free flu clinic, which served approx. 50 Mission Hill seniors, several neighborhood health fairs and several neighborhood health education presentations

**Partner Name, Description**

Mission Hill Men’s Softball League  
Mission Main Tenants Task Force  
Mission Hill Main Streets

**Partner Web Address**

<http://www.missionhillmainstreets.org/>



Mission Hill Health Movement	<a href="http://www.mhbm.org/">http://www.mhbm.org/</a>
Mission Hill Crime Committee Roxbury Tenants of Harvard	<a href="http://www.roxburytenants.org/">http://www.roxburytenants.org/</a>
Alice H. Taylor Tenants Task Force Mission Church Grammar School	<a href="http://www.missiongrammar.org/">http://www.missiongrammar.org/</a>
Mission SAFE	<a href="http://www.missionsafe.org/home.asp">http://www.missionsafe.org/home.asp</a>
ABCD Parker Hill/Fenway NSC	<a href="http://www.bostonabcd.org/centers/parker-hill-fenway/">http://www.bostonabcd.org/centers/parker-hill-fenway/</a>
Tobin Community Center Mission Hill Neighborhood Housing Services Sociedad Latina	<a href="http://missionhillnhs.org/">http://missionhillnhs.org/</a>  <a href="http://www.sociedadlatina.org/">http://www.sociedadlatina.org/</a>
Mission Hill "Harmony on the Hill"	<a href="http://www.facebook.com/group.php?gid=243790234464&amp;v=wall">http://www.facebook.com/group.php?gid=243790234464&amp;v=wall</a>
Mission Hill Youth Collaborative	<a href="http://www.mhycboston.org">http://www.mhycboston.org</a>
Mission Hill Little League	<a href="http://www.eteamz.com/missionhill">http://www.eteamz.com/missionhill</a>

**Contact Information** John McGonagle, Director of Community Relations, Center for Community Health and Health Equity, Brigham and Women's Hospital, 41 Avenue Louis Pasteur, Boston, MA 02115, 617-264-8735, [jmccgonagle@partners.org](mailto:jmccgonagle@partners.org)

**Cardiovascular Wellness Service**

<b>Program Type</b>	Direct Services, Health Screening, Prevention
<b>Brief Description or Objective</b>	Cardiovascular Wellness Service is a multidisciplinary effort of Brigham and Women's Hospital, dedicated to preventing heart disease and promoting heart health. We accomplish this in a number of ways through the following programs: •Community Outreach Program, providing free screenings and educational presentations throughout local Boston communities. •Linda Joy Pollin Cardiovascular Wellness Program, dedicated to preventing heart disease in women. •Online Cardiovascular Wellness Program, a comprehensive internet-based program that guides users in building a healthy heart. •Employee Wellness Program, providing screenings, classes, and activities to help promote heart health among BWH employees. •Heart Disease Prevention Research Program, conducting research studies to further knowledge of heart disease prevention and intervention. •Clinical Cardiology Program at the Watkins Cardiovascular Clinic, focusing on the primary and secondary prevention of heart disease. In FY2012: approximately 9,500 people were served.
<b>Target Population</b>	<b>Regions Served:</b> Boston

**Health Indicator:** Other: Cardiac Disease

**Sex:** All

**Age Group:** Adult

**Ethnic Group:** All

**Language:** All

**Statewide Priority:** Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
To screen over 1,000 individuals as part of “5,000 in 5” initiative	In 2012, the Cardiovascular Wellness Service provided biometric screening for 1,000 people
To contribute to preventive cardiology research through the implementation and evaluation of interventional pilot programs in reducing heart disease	Multiple publications in medical journals throughout the year, including the Journal of the American College of Cardiology, American Heart Association, and the Journal of Women’s Health
Prevention of heart disease and promotion of heart health	In FY2012: 9,500 people served (1,000 screened, 500 attended wellness fairs, seminars, and/or classes, 8,000 participants in online wellness program).
To improve the heart health of the Boston community, through exercise, wellness, online, screening, and educational programming.	Through screenings and surveys, we not only captured data regarding weight loss/maintenance, but also recorded changes in detailed risk factors for heart disease, including cholesterol, blood pressure, and glucose.
To improve the heart health of the Boston community, through exercise, wellness, online, screening, and educational programming.	Surveys also provided measurements of lifestyle changes

**Partner Name, Description**

**Partner Web Address**

Banner Magazine

<http://www.baystatebanner.com/>

Black Women’s Health Institute

<http://www.rootcause.org/performance-measurement/profiles/boston-black-womens-health-institute>

El Planeta

<http://npaper-wehaa.com/elplaneta>

PureWellness

<http://www.purewellness.com/purewellness/default.html#>

Roxbury Community College

<http://www.rcc.mass.edu/>

Sister to Sister: Women’s Heart Health Foundation

<http://www.sistertosister.org/>

Body by Brandy Wellness Center

[www.bodybybrandy.com](http://www.bodybybrandy.com)

Sportsmen’s Tennis and Enrichment Center

<http://www.sportsmenstennisclub.org/>

Roxbury Tenants of Harvard

<http://www.roxburytenants.org/>

**Contact Information** Caitlin Johnson, Brigham and Women's Hospital, [cjohnson26@partners.org](mailto:cjohnson26@partners.org)

**Brigham and Women’s Hospital – Elementary School Literacy Initiative**

<b>Program Type</b>	Community Education, Outreach to Underserved, School/Health Center Partnership
<b>Brief Description or Objective</b>	The Elementary School Literacy Initiative is designed to help strengthen reading, comprehension, listening and writing skills in kindergarten to fifth grade students in select Mission Hill schools. Literacy skills are vital for the healthy development of children and a crucial building block for future academic success. Educational attainment is a key determinant of health. The program provides an opportunity for BWH employees to volunteer directly in the schools as pen pals or Brigham Book Buddies. Pen pals develop a relationship with a child through the exchange of letters. Students are able to practice their literacy skills by receiving and responding to letters and increase their exposure to health care careers and BWH. Book Buddies read aloud to an entire classroom once a month for the school year, and then the book is donated to the classroom. In FY2012: 104 Pen Pal students were served and 120 Brigham Book Buddy students were served. Since inception of the Book Buddy program in 1994, numerous students have been served, with 908 students served since 2006. Since inception of the Pen Pal program in 2006, 563 students have been served.
<b>Target Population</b>	<b>Regions Served:</b> Boston, Boston-Mission Hill <b>Health Indicator:</b> Other: Language/Literacy <b>Sex:</b> All <b>Age Group:</b> Child-Preschool, Child-Primary School <b>Ethnic Group:</b> All <b>Language:</b> All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Strengthen reading, comprehension, listening and writing skills in kindergarten to fifth grade students	In FY2012: 104 Pen pal students were served and 120 Brigham Book Buddy students were served.
Partner with Mission Hill elementary schools to enhance students’ academic success	Out of all participating teachers, 95% of teachers reported excellent benefits of the program on their students’ literacy skills. Teachers also reported increased writing proficiency and listening skills among participating students.
To create enthusiasm around literacy in elementary school students	100% of teachers involved with the Pen Pal and Brigham Book Buddy Program reported increased enthusiasm for reading and writing among their students

Partner Name, Description	Partner Web Address
Mission Grammar School	<a href="http://www.missiongrammar.org/">http://www.missiongrammar.org/</a>
Maurice J. Tobin School	<a href="http://www.bostonpublicschools.org/node/524">http://www.bostonpublicschools.org/node/524</a>

**Contact Information** Pamela Audeh, Center for Community Health and Health Equity, Brigham and Women's Hospital, 41 Avenue Louis Pasteur, Boston, MA 02115; 617-

264-8740, [paudeh@partners.org](mailto:paudeh@partners.org)

**BWH Health and Science Club Program**

<b>Program Type</b>	Community Education, Direct Services, Outreach to Underserved, School/Health Center Partnership
<b>Brief Description or Objective</b>	The Health and Science Club provides an informal learning environment in which elementary school students work together on science experiments in small groups led by hospital employees and listen to presentations by BWH staff guest speakers. The relaxed yet structured atmosphere of the Health and Science Club promotes teamwork and produces cooperative learning experiences that increase science knowledge. The Health and Science Club curriculum is aligned to the Massachusetts state science curriculum frameworks and standards. The Health and Science Club also exposes students to new health careers and introduces them to the types of education and training that are necessary to pursue specific health career paths. Since inception in 2006, 574 students have been served in the Health and Science Club Program (81 in FY12).
<b>Target Population</b>	<b>Regions Served:</b> Boston, Boston-Mission Hill <b>Health Indicator:</b> Other: Education/Learning Issues <b>Sex:</b> All <b>Age Group:</b> Child-Primary School <b>Ethnic Group:</b> All <b>Language:</b> All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Promote teamwork and produces cooperative learning experiences that increase science knowledge.	In FY2012: 81 students from four classrooms were served; Since Inception (2006), 574 students have been served in the Health and Science Club Program.
To provide science exploration opportunities for grades four and five students in Mission Hill participating schools.	Students participated in seven “hands on” science experiments and projects over the academic year. These projects are imbedded in the schools’ science curriculum and comprise a large amount of the grade level science teaching.
To increase science knowledge of fourth and fifth grade students by working on science topics selected by the participating schools each academic year.	Students are given a pre-test before science instruction and a post-test after science instruction to measure increase in knowledge. The average percentage increase in scores, from the pre-test to the post test, was 53%.
To provide health career exploration opportunities to fourth and fifth grade students.	Eleven BWH employees volunteered in the Health and Science Club Program. Students learned about various careers in the hospital and the education needed to enter the healthcare field.

**Partner Name, Description**

Maurice J. Tobin School

**Partner Web Address**

<http://www.bostonpublicschools.org/node/524>

Mission Grammar School

<http://www.missiongrammar.org/>

**Contact Information** Pamela Audeh, Center for Community Health and Health Equity, Brigham and Women's Hospital, 41 Avenue Louis Pasteur, Boston, MA 02115, 617-264-8740, [paudeh@partners.org](mailto:paudeh@partners.org)

**Health Careers Ambassadors Program (HCAP)**

**Program Type** Community Education, Community Health Needs Assessment, Community Participation/Capacity Building Initiative, Direct Services, Healthy Communities Partnership, Mentorship/Career Training/Internship, Outreach to Underserved, Prevention, School/Health Center Partnership

**Brief Description or Objective** HCAP is a partnership between the Hyde Square Task Force (HSTF) and Southern Jamaica Plain Health Center (SJPHC) that supports youth to develop community health leadership skills. The HCAP peer leaders are between the ages of 14 and 18 and attend Boston Public Schools. They conduct peer-led community health improvement initiatives providing interactive, health education workshops and engage in youth-led health equity organizing. They receive extensive training on a number of topics such as sexual health, emotional wellness, nutrition, asthma, violence prevention techniques, environmental justice, and community organizing. The youth are trained using the lens of health equity and racial justice to understand the social determinants of health in urban communities of color. In FY2012: a total of 111 young people participated in training sessions provided by the 13 trained HCAP peer leader. Since inception in December of 2003, 74 youth have worked as peer leaders in HCAP and Team Mita (which was combined with HCAP in 2010). The peers have conducted over 112 workshops and trained over 718 youth since 2003.

**Target Population** **Regions Served:** Boston-Jamaica Plain  
**Health Indicator:** Access to Health Care, Injury and Violence, Mental Health, Other: Alcohol and Substance Abuse, Other: Education/Learning Issues, Other: Family Planning, Other: HIV/AIDS, Other: Pregnancy, Other: Sexually Transmitted Diseases, Other: Smoking/Tobacco, Overweight and Obesity, Physical Activity, Responsible Sexual Behavior, Tobacco Use  
**Sex:** All  
**Age Group:** Child-Teen  
**Ethnic Group:** All  
**Language:** English

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Develop youth leadership skills through peer-led community health improvement initiatives providing interactive, health education workshops, while also engaging in youth-led health equity organizing	In FY2012: a total of 51 young people participated in training sessions provided by the 13 trained HCAP peer leaders
Develop youth leadership skills through peer-led community health improvement initiatives providing interactive, health education workshops, while also engaging in youth-led health equity organizing	Since combining Team Mita with HCAP in 2010, 74 youth have participated in the peer leadership program

Develop youth leadership skills through peer-led community health improvement initiatives providing interactive, health education workshops, while also engaging in youth-led health equity organizing	The peers have conducted over 112 workshops and trained over 718 youth since 2003. HCAP peers initiated an anti-tobacco campaign targeting the sale of flavored tobacco products in local convenience stores.
Outreach by youth team to a minimum of 12 other peer leadership groups	17 trainings offered to a total of 51 youth, 15 adults representing 12 different youth groups (adults were medical providers).
Develop Standard Patient training on how to take a history for providers who work with the teen population	4 trainings offered to 15 adult providers in the Jamaica Plain community
Train youth participants in sexuality, health equity, community organizing, a variety of other health education topics	16 youth trained and able to facilitate health education workshops

**Partner Name, Description**

Boston Public Health Commission

**Partner Web Address**

<http://www.bphc.org/>

Hyde Square Task Force

<http://www.hydesquare.org/>

Various youth serving organizations in Jamaica Plain: Teen Empowerment, Spontaneous Celebrations, City Youth AIM

**Contact Information**

Abigail Ortiz, MSW, MPH, Southern Jamaica Plain Health Center, 640 Centre Street, Jamaica Plain, MA 02130; 617-983-4100, [aortiz3@partners.org](mailto:aortiz3@partners.org)

**Health Equity Research and Intervention (HERI)**

**Program Type**

Community Education, Community Health Needs Assessment, Community Participation/Capacity Building Initiative, Outreach to Underserved

**Brief Description or Objective**

The Health Equity Research and Intervention team performs social determinants of health research and collaborates with individuals, institutions and communities to contribute the best science, evidence, and resources toward eliminating inequities in health status for diverse groups. We participate in dissemination of research findings to ensure that individuals, institutions, and communities have information resources that support their work in promoting health equity. We provide support and assistance to build the capacity of colleagues and collaborators in health equity research and practice. This includes collaborative fundraising, providing networking opportunities, and participating in training of interested parties in the conduct of health equity research.

**Target Population**

**Regions Served:** Boston

**Health Indicator:** Other: Cancer, Other: Cardiac Disease, Other: Pregnancy

**Sex:** All

**Age Group:** All

**Ethnic Group:** All

**Language:** All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity, Supporting Healthcare Reform

Goal Description	Goal Status
Advance the goal of reducing health disparities through scientific publication on health equity topics	Manuscripts for scientific journals highlight the role of place as a determinant of heart disease risk among women, published in BMC Public Health and PLoS One Journals. Manuscript documenting how neighborhood safety influences the cardiometabolic health
Building new partnerships for community engagement	Current partnerships maintained within Boston Public Health Commission and Community Conversations. New partnerships developed with Center for Community Health Research and Service, and Roxbury Community Alliance for Health.
Supporting dissemination of health equity research and best practices	Support was provided to complete assessment of needs for information on cancer prevention regarding Human Papilloma Virus (HPV) for Black women in Boston with the Boston Public Health Commission. Our team also created the “BWH Community Learning Network”

**Partner Name, Description**

**Partner Web Address**

Community Conversations  
Boston Public Health Commission

<http://www.bphc.org/>

Boston REACH Coalition

<http://www.bphc.org/programs/healthequitysocialjustice/bostonreach/Pages/Home.aspx>

Center for Community Health  
Research, Education and Service

<http://cchers.org/>

**Contact Information**

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[mommerborn@partners.org](mailto:mommerborn@partners.org)

**Indian Health Service**

**Program Type**

Community Education, Direct Services, Health Screening, Outreach to Underserved

**Brief Description or Objective**

The BWH Physicians' Council, through its Brigham and Women’s Outreach Programs (BWOP) is committed to supporting BWH physicians in contributing their skills and time through volunteerism. The goals of the Outreach Program include the development of a program that enables BWH physicians to directly support and enhance patient care delivered at a selected program site, while providing a sustainable, ongoing contribution to supporting an underserved community. In April of 2008, the BWH Physicians’ Council selected the Indian Health Service (IHS) as the site for its outreach program. The program focuses on creating volunteer opportunities for BWH physicians at the IHS hospitals in Gallup and Shiprock, New Mexico. Both sites serve American Indian communities in remote rural locations. The hospital in Shiprock is physically located on the Navajo reservation. Both the 55-bed facility at Shiprock and the 99-bed hospital at Gallup have adequate equipment, medication and supplies, but they are challenged by a shortage of staffing. The Indian Health Service reports a nearly 15 percent vacancy rate in essential clinical positions,

including access to specialty services and consultations. The Brigham and Women’s Outreach Program physician volunteers are working to address this challenge. In 2012, in addition to health professionals volunteering on-site in New Mexico, physicians led educational and teaching video conferences broadcast to our IHS clinical colleagues at these sites and HIS clinicians were hosted at BWH. Since the program’s inception in 2008, 59 volunteer physicians have made 68 on-site visits, led 18 video conferences and hosted 7 IHS clinicians at BWH.

<b>Target Population</b>	<p><b>Regions Served:</b> Not Specified</p> <p><b>Health Indicator:</b> Access to Health Care</p> <p><b>Sex:</b> All</p> <p><b>Age Group:</b> All</p> <p><b>Ethnic Group:</b> American Indian/Alaskan Native</p> <p><b>Language:</b> Not Specified</p>
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**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Create volunteer opportunities for BWH physicians at the IHS hospitals in Gallup and Shiprock, New Mexico	Inception: Since 2008, there have been 68 volunteer visits.
Create volunteer opportunities for BWH physicians at the IHS hospitals in Gallup and Shiprock, New Mexico	In FY2012: 16 volunteers (15 physicians and 1 nurse volunteered at the IHS hospitals in New Mexico
Create volunteer opportunities for BWH physicians to lead Boston- based educational and teaching video conferences to IHS clinician colleagues to expand their capacity to treat a range of conditions.	15 physician volunteers led educational video conferences
Create volunteer opportunities for BWH physicians to host IHS clinicians here in Boston to experience cutting edge medicine and training within our own hospital	3 BWH clinical services with multiple clinicians and allied health professionals hosted three IHS clinicians (a Cardiac Service Pharmacist, a Emergency Medicine Physician, and a Dermatologist).

Partner Name, Description	Partner Web Address
Gallup Indian Medical Center	<a href="http://www.ihs.gov/navajo/index.cfm?module=nao_hcc_gallup">http://www.ihs.gov/navajo/index.cfm?module=nao_hcc_gallup</a>
Northern Navajo Medical Center	<a href="http://www.ihs.gov/navajo/index.cfm?module=nao_hcc_shiprock">http://www.ihs.gov/navajo/index.cfm?module=nao_hcc_shiprock</a>
<b>Contact Information</b>	Thomas Sequist, MD, Brigham & Women's Hospital, 617-525-7509, <a href="mailto:tsequist@partners.org">tsequist@partners.org</a>

**Partnership with Kennedy Academy for Health Careers (formerly Health Careers Academy)**

<b>Program Type</b>	Mentorship/Career Training/Internship, School/Health Center Partnership
<b>Brief Description or Objective</b>	In FY12, the CCHHE provided grant support to the Health Careers Engagement project at Edward M. Kennedy Academy for Health Careers (formerly Health Careers Academy), a Horace Mann Charter School that



prepares students in the ninth through twelfth grades for careers in the health sciences. The goals of the Health Careers Engagement project are to promote student knowledge of health care professions, increase the number of students who enter college programs designed to prepare them for health careers, and expand the number and variety of internships and other workplace learning experiences that are available to Kennedy Academy students. In FY2012: 225 youth participated. Since Inception, 400 youth have participated.

**Target Population**

**Regions Served:** Boston, Boston-Allston, Boston-Back Bay, Boston-Beacon Hill, Boston-Brighton, Boston-Charlestown, Boston-Chinatown, Boston-Dorchester, Boston-Downtown, Boston-East Boston, Boston-Fenway Kenmore, Boston-Greater, Boston-Hyde Park, Boston-Jamaica Plain, Boston-Mattapan, Boston-Mission Hill, Boston-North End, Boston-Roslindale, Boston-Roxbury, Boston-South Boston, Boston-South End, Boston-West Roxbury  
**Health Indicator:** Other: Education/Learning Issues  
**Sex:** All  
**Age Group:** Child-Teen  
**Ethnic Group:** All  
**Language:** Cape Verdean Creole , Chinese , English , Haitian Creole , Spanish , Vietnamese

**Statewide Priority:** Reducing Health Disparity

Goal Description	Goal Status
The primary goal of the Health Careers Engagement work is to support the engagement of Kennedy Academy students in a variety of mission-related internships, enrichment programs and paid work experiences both within and outside of school.	During the 2011-2012 school year 187 (85%) Kennedy Academy students participated in academic or health-related enrichment programming outside of school – including internships, school year programs, and paid summer work experiences.
The primary goal of the Health Careers Engagement work is to support the engagement of Kennedy Academy students in a variety of mission-related internships, enrichment programs and paid work experiences both within and outside of school.	185 Kennedy Academy students in grades 9, 10 and 12 were visited by eighteen classroom guest speaker groups during the 2011/12 school year to share information and experiences from their health careers field
The primary goal of the Health Careers Engagement work is to support the engagement of Kennedy Academy students in a variety of mission-related internships, enrichment programs and paid work experiences both within and outside of school.	225 Kennedy Academy students in grades nine through twelve participated in fifteen health-related site visits during the 2011-12 school year to observe and experience varied health professions first hand
The primary goal of the Health Careers Engagement work is to support the engagement of Kennedy Academy students in a variety of mission-related internships, enrichment programs and paid work experiences both within and outside of school.	In FY2012, 60 ninth grade students worked with 52 Northeastern University undergraduate and graduate mentors on a college and career focused curriculum.

The primary goal of the Health Careers Engagement work is to support the engagement of Kennedy Academy students in a variety of mission-related internships, enrichment programs and paid work experiences both within and outside of school.	In FY2012: 225 students; Since Inception: 400 students
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**Partner Name, Description**

**Partner Web Address**

Northeastern University

<http://www.northeastern.edu/>

Bouve College of Health Science

<http://www.northeastern.edu/bouve/>

Boston Private Industry Council

<http://www.bostonpic.org/>

Center for Community Health Education Research and Service (CCHERS)

<http://www.cchers.org/>

Bunker Hill Community College

<http://www.bhcc.mass.edu/>

Boston University School of Public Health

<http://sph.bu.edu/>

Harvard Medical School

<http://www.hms.harvard.edu/>

**Contact Information**

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**Perinatal Case Manager Program (PCMP)**

**Program Type**

Direct Services, Outreach to Underserved, Prevention

**Brief Description or Objective**

Brief Description or Objective The Perinatal Case Manager Program (PCMP) seeks to improve birth outcomes by addressing the social and medical needs of pregnant women. The CCHHE provides technical assistance and training for case managers at each of six of the hospital’s licensed or affiliated health centers. In FY2012, there were 576 women served by case managers through the perinatal case management program. Since inception in 1991, the case managers in the Perinatal case management program have served over 15,000 women and families.

**Target Population**

**Regions Served:** Boston-Jamaica Plain, Boston-Mattapan, Boston-Roxbury, Boston-South End  
**Health Indicator:** Access to Health Care, Other: Pregnancy  
**Sex:** Female  
**Age Group:** All  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

<b>Goal Description</b>	<b>Goal Status</b>
To identify clients in need of case	576 clients completed a client assessment with the case

management services, conduct assessment for areas of medical and social concern.	manager and were served by case managers through the perinatal case management program.
To provide assistance with material goods to a minimum of 30 families to address the gaps in services	Provided diapers, wipes, infant supplies including layettes, grocery food cards to 145 clients of the case management program
To provide transportation assistance to a minimum of 60 patients in BWH licensed and affiliated health centers	Over 100 patients provided with transportation assistance through the provision of Charlie Cards and cab vouchers through the Perinatal Transportation Assistance Program
To promote preconception and interconception health and women’s reproductive health	PCMP case managers attended professional development trainings including, Basic Family Planning, Partners in Perinatal Health Conference, MA Breastfeeding Coalition conference

**Partner Name, Description**

Martha Eliot Health Center

**Partner Web Address**

<http://www.childrenshospital.org/locations/Site1395/mainpageS1395P57sublevel8.html>

Mattapan Community Health Center  
 South End Community Health Center  
 Whittier Street Health Center

<http://www.mattapanhc.org/>  
<http://www.sehc.org/>  
<http://www.wshc.org/>

**Contact Information**

Maisha Douyon Cover, Manager Family and Community Health Programs, Center for Community Health and Health Equity, Brigham & Women's Hospital, 41 Avenue Louis Pasteur, Boston, MA 02115; 617-582-0188, [mdouyon@partners.org](mailto:mdouyon@partners.org)

**Project TEACH (Teen Education About Careers in Health)**

**Program Type** Mentorship/Career Training/Internship, Outreach to Underserved, School/Health Center Partnership

**Brief Description or Objective** Project TEACH (Teen Education About Careers in Health) is a summer program designed to stimulate interest in health, science and medical careers, targeted to rising 10th grade students attending BWH partnering public high schools in the surrounding Roxbury and Mission Hill neighborhoods. In FY 2012: 25 youth participated. Since inception in FY 2009: 87 students have participated.

**Target Population**  
**Regions Served:** Boston  
**Health Indicator:** Other: Education/Learning Issues  
**Sex:** All  
**Age Group:** Child-Teen  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Expose rising 10th grade students to a	Provided Project TEACH students with a paid internship for

variety of professions in health and science in order to stimulate interest in the field	24 hours per week for six weeks in BWH departments. In FY 2012: 25 students participated; Since inception in 2009: 87 students
Prepare rising 10th grade students for high school math and science courses	Provided teaching, support, guidance in preparing research papers and presentations on science or health topics of students’ choosing; most popular field trips were college tours and science museums
Strengthen the pipeline between our middle school and high school youth programs	In FY 2012: 5 Summer Science Academy Alumni from Summer 2011 applied to Project Teach 2012 and 4 were accepted; 16 Project TEACH Alumni from Summer 2012 applied to Student Success Jobs Program 2012-2013 and 10 were accepted
Provide students with summer work experience in a hospital setting with highly skilled health care professionals as their supervisors	Recruited 13 BWH health professionals to advance learning and exposure of health, science and medical careers to participating rising 10th grade students in Project TEACH.

**Partner Name, Description**

Boston Private Industry Council

**Partner Web Address**

<http://www.bostonpic.org/>

Boston Latin Academy

<http://latinacademy.org/>

Community Academy of Science and Health

<http://www.bostonpublicschools.org/node/416>

Edward M. Kennedy Academy for Health Careers

<http://www.kennedyacademy.org/>

**Contact Information**

Edlyn Thompson-Mettle, SSJP Scholars Coordinator, Center for Community Health and Health Equity, Brigham and Women’s Hospital, [ethompson-mettle@partners.org](mailto:ethompson-mettle@partners.org)

**South Street Youth Center**

**Program Type**

Community Education, Community Participation/Capacity Building Initiative, Grant/Donation/Foundation/Scholarship, Healthy Communities Partnership, Outreach to Underserved, Prevention

**Brief Description or Objective**

BWH provides a financial contribution to the operation of the South Street Youth Center (SSYC) whose mission is to provide a safe, educational, and engaging space during out of school time for young residents of South Street Development. Through its broad-based programs participants learn a happy, healthy, resilient attitude toward life that will help sustain them through adulthood. In FY2012: SSYC had 145 different youth access the Center. Since inception, approximately 550 youth have accessed SSYC.

**Target Population**

**Regions Served:** Boston-Jamaica Plain  
**Health Indicator:** Other: Education/Learning Issues  
**Sex:** All  
**Age Group:** Child-Preteen, Child-Primary School, Child-Teen  
**Ethnic Group:** All  
**Language:** English , Spanish

**Statewide Priority:** Promoting Wellness of Vulnerable Populations

Goal Description	Goal Status
Provide a safe, educational, and engaging space during out of school time for young residents of South Street Development in Jamaica Plain	In FY2012: 145 youth participated. Since inception approximately 565 youth accessed SSYC
Maintain youth attendance rates in programming	Average daily attendance 46 (up from 43 in FY 11)
Maintain percentage of youth accessing SSYC as a resource for homework help during after-school	100% of youth report doing homework during homework time
Maintain percentage of teens accessing SSYC as a resource for employment/education assistance	83 youth received employment assistance and 62 received educational assistance

**Partner Name, Description**

**Partner Web Address**

Curley Consortium

Saint Rose Street Neighborhood Association

Percussion Consultant/ Instructor

BPD E-13 Community Service department

<http://www.bpdnews.com/districts/e-13/e-13-community-service-office/>

State Rep. Liz Malia’s Office

<http://www.malegislature.gov/People/Profile/eam1>

BHA

<http://www.bostonhousing.org/>

Jamaica Plain Neighborhood Development Corporation (JPNDC)

<http://www.jpndc.org/>

Spontaneous Celebrations/ Beantown Society

<http://www.spontaneouscelebrations.org/mission.html>

Teach 2 Learn/Learn 2 Teach

<http://www.learn2teach.org/>

JP Unidos/United

<http://www.jp uu.org/>

Northeastern University

<http://www.northeastern.edu/>

Curtis Hall/ BCYF

<http://www.jpcommunitycenters.com/curtishall.htm>

Agassiz Elementary School

<http://www.bostonpublicschools.org/node/392>

Hyde Square Task Force

<http://www.hydesquare.org/>

ABCD SummerWorks

<http://www.bostonabcd.org/programs/youth-development/summer-works/index.html>

**Contact Information**

Maura Ramsey , Director, South Street Youth Center, South Street Development. 617-477-8263, [southstreetyouth@gmail.com](mailto:southstreetyouth@gmail.com)

**Southern Jamaica Plain Health Center**

**Program Type** Direct Services, Health Coverage Subsidies or Enrollment, Health Screening, Outreach to Underserved, Physician/Provider Diversity, Prevention, School/Health Center Partnership

**Brief Description or Objective** SJPHC operates through the license of BWH and has been serving the community for 38 years. SJPHC's mission is to provide personal, high quality health care with compassion and respect to a diverse community. The health center now serves over 10,000 patients with its comprehensive services of adult medicine, pediatrics, women's health, mental health/substance abuse services, cardiology, dermatology, nutrition, and podiatry. Health center providers include nine internists, five pediatricians, an obstetrician/gynecologist, midwives and nurse practitioners in women's health, a podiatrist and cardiologist, dermatologists who are part of the BWH Dermatology staff, and social workers, psychologists and psychiatrists in the mental health/substance abuse department. A bilingual staff of nurses, medical assistants, secretaries, financial counselors, and other staff provide services and support the work of medical providers. The health center augments its medical and mental health services with health education, case management, screening programs (blood pressure, diabetes, mammography, cholesterol), a Mind/Body Center that includes T'ai Chi and yoga, and a child literacy program. In addition, the health center has a long history of providing substance abuse treatment services to patients, families, and the community. Health center staff also work collaboratively with residents of the local South Street public housing development to promote the health of public housing residents. In FY12 10,541 patients were served.

**Target Population**  
**Regions Served:** Boston  
**Health Indicator:** Access to Health Care  
**Sex:** All  
**Age Group:** All  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Address Unmet Health Needs of the Uninsured, Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Reducing Health Disparity, Supporting Healthcare Reform

Goal Description	Goal Status
Provide personal, high quality health care with compassion and respect to a diverse community	FY12: 10,541 patients served
Operate a Health Promotion Center to provide more alternative and complementary health services	Health Promotion Center has grown with multiple movement and youth programs
Expand group visits	Mental health groups have increased utilization.
Take steps to become a Patient Centered Medical Home	Continue to participate in Massachusetts Patient Centered Medical Home Initiative

**Partner Name, Description** **Partner Web Address**

- Hyde Square Task Force <http://www.hydesquare.org/>
- JP Neighborhood Development Corp <http://www.jpndc.org/>
- Boston Housing Authority – South Street <http://www.bostonhousing.org/detpages/devinfo52.html>
- Spontaneous Celebrations <http://www.spontaneouscelebrations.org/>

**Contact Information** Tom Kieffer, Executive Director, Southern Jamaica Plain Health Center, 640 Centre Street, Jamaica Plain, MA 02130; 617-983-4242, [tkieffer@partners.org](mailto:tkieffer@partners.org)

**Student Success Jobs Program Summer Internship for College Students (SSJP College)**

<b>Program Type</b>	Mentorship/Career Training/Internship, Outreach to Underserved
<b>Brief Description or Objective</b>	The Student Success Jobs Program Summer Internship for College Students is an intensive summer employment opportunity for students that have successfully graduated from the Student Success Jobs Program. SSJP College Summer Internship Program was created to support SSJP graduates, currently in college, majoring in a health related field. Summer internship opportunities are paid positions in a Brigham and Women’s Hospital department and are available to students for ten weeks, 40 hours per week, from June through August. SSJP creates pathways into science, health, or medicine careers for those who have traditionally been underrepresented in the field with 96 percent of students self-identified as people of color. In FY 2012 24 students were served. Since inception in FY2006, 78 individual students have been served.
<b>Target Population</b>	<p><b>Regions Served:</b> Boston</p> <p><b>Health Indicator:</b> Other: Education/Learning Issues</p> <p><b>Sex:</b> All</p> <p><b>Age Group:</b> Adult-Young</p> <p><b>Ethnic Group:</b> All</p> <p><b>Language:</b> All</p>

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
To address the need for proficient and under-represented professionals in health, science and medical careers	Recruited 24 college students majoring in health, science or medicine into the SSJP College program and to matched students to departments that were closely aligned to their career goals
To strengthen and sustain interest among college students in health careers through work-based mentoring by health care professionals	Recruited 21 BWH health professionals as preceptors who provided internship experiences to students
To foster networking opportunities for emerging under-represented health care professionals with peers and the hospital community.	Provided 24 SSJP college students with networking opportunities at the orientation and closing event, as well as paid internships for ten weeks in a BWH department
To foster networking opportunities for	Partnered with Health Career Connection, a national

emerging under-represented health care professionals with peers and the hospital community.	summer college Internship program for aspiring health care and public health professionals
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**Partner Name, Description**                      **Partner Web Address**

Not Specified

**Contact Information**                      Michelle Keenan, Director of Community Programs, Center for Community Health and Health Equity, Brigham and Women’s Hospital,  
[mjkeenan@partners.org](mailto:mjkeenan@partners.org)

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**Summer Science Academy**

**Program Type**                                      Community Education, Direct Services, Mentorship/Career Training/Internship, Outreach to Underserved, School/Health Center Partnership

**Brief Description or Objective**                      BWH Summer Science Academy is a six-week summer program designed to stimulate interest in science, health, and medical careers and is targeted to rising 9th grade students attending BWH partnering middle schools in the Mission Hill neighborhood in Roxbury. The goals of the Summer Science Academy are to: • Engage rising ninth graders from Mission Hill schools in health and science topics through an interdisciplinary curriculum, scientific literature review, and an introduction to scientific writing. • Expose rising ninth grade students to professions in the health and science field. Since inception in 2009, Summer Science Academy has served 63 students. In FY 2012, Summer Science Academy served 14 students.

**Target Population**                                      **Regions Served:** Boston, Boston-Mission Hill  
**Health Indicator:** Other: Education/Learning Issues  
**Sex:** All  
**Age Group:** Adult-Young, Child-Teen  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Engage rising ninth graders from Mission Hill schools in health and science topics through an interdisciplinary curriculum, scientific literature review, and an introduction to scientific writing. Expose rising ninth grade students to professions in the health and science field.	In FY2012: 14 students; Since inception in 2009, Summer Science Academy has served 63 students.
To address the need for traditionally under-represented populations in health, science and medical careers	100% of the participants were youth of color attending schools in Roxbury with a high percentage (over 85%) of free and reduced price lunch (a key indicator of low income status).
To enhance rising grade 9 students’ interest in health, science and medical careers through teaching and career	At the end of the six week program, 80% of the participants expressed that they plan on going to medical school.



exposure by health care professionals	
To advance health, science and medical learning for rising grade 9 students in participating Boston Public Schools	Participants choose an area of the brain to research and compiled their findings in a collective "Brain Book" chronicling what they learned and researched over the length of the program. All Participants received a copy of the book to keep.
To advance health, science and medical learning for rising grade 9 students in participating Boston Public Schools	Fourteen out of 14 students completed an end of science class test measuring how much knowledge they retained from six weeks of neuroscience class. Ninety percent (90%) scored a perfect score, with the remaining 10% scoring between 90-95%.

**Partners**

<b>Partner Name, Description</b>	<b>Partner Web Address</b>
Mission Grammar School	<a href="http://www.missiongrammar.org/">http://www.missiongrammar.org/</a>
Tobin School	<a href="http://www.bostonpublicschools.org/node/524">http://www.bostonpublicschools.org/node/524</a>
Roxbury Prep Charter School	<a href="http://www.roxburyprep.org/">http://www.roxburyprep.org/</a>

**Contact Information** Contact Information Pamela Audeh, Center for Community Health and Health Equity, Brigham and Women's Hospital, 41 Avenue Louis Pasteur, Boston, MA 02115;617-264-8740, [paudeh@partners.org](mailto:paudeh@partners.org)

**Brookside Community Health Center**

**Program Type** Direct Services, Health Coverage Subsidies or Enrollment, Health Screening, Outreach to Underserved, Physician/Provider Diversity, Prevention, School/Health Center Partnership

**Brief Description or Objective** Brookside’s mission is to provide high quality, family-oriented, comprehensive health care, with a focus on serving the low income population of the community, regardless of ability to pay. Moreover, Brookside strives to: 1. Continue to be recognized as a leader in the delivery of high quality, integrated family-oriented health care and as a model program for community-based primary care within the Brigham and Women's, Brigham and Women’s Faulkner Hospital, and Partners Healthcare Systems. 2. Continue to offer successful programs training practitioners in the provision of community-based, culturally appropriate health care, while still maintaining a focus on the delivery of primary care. 3. Maintain a leadership role in developing programs designed to improve the health status of Jamaica Plain and the surrounding communities. In FY12, Brookside provided care to 11,134 patients.

**Target Population** **Regions Served:** Boston  
**Health Indicator:** Access to Health Care  
**Sex:** All  
**Age Group:** All  
**Ethnic Group:** All  
**Language:** All

**Statewide Priority:** Address Unmet Health Needs of the Uninsured, Chronic Disease Management in

Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Reducing Health Disparity, Supporting Healthcare Reform

Goal Description	Goal Status
Provide high quality, family-oriented, comprehensive health care, with a focus on serving the low income population of the community, regardless of ability to pay	In FY12, 11,134 individuals were served.
Maintain ability to meet patient demand	Successfully recruited Child Psychiatrist and Family Nurse Practitioner to ensure access to coordinated care for patients and enrolled an additional 853 new patients for care
Expand support to youth for increased access to physical activity and healthy lifestyles	Health Corps Intern and Urban Youth Sports Coordinator offered on-site and community based programming for children
Expand support to youth for increased access to physical activity and healthy lifestyles	Pediatric and Urban Youth Sports programs created greater links with the Nutrition Department’s “Fitness in the City” Program to add physical activities and created the Healthy Life-Styles Clinic – a 9 week program of classes and group visits for children
Expand support to youth for increased access to physical activity and healthy lifestyles	Continued a very successful summer referral program assisting children with access to summer camps and/or summer jobs.
Maintain/exceed established clinical excellence in all departments	Medical Department exceeded goals for meeting National Patient Safety Standards and QI Goals for care and treatment of multiple chronic diseases including diabetes, hypertension and cardiovascular disease
Maintain/exceed established clinical excellence in all departments	WIC/Nutrition program had highest breastfeeding rates and pediatric Immunization rates in state
Maintain/exceed established clinical excellence in all departments	Dental program increased and enhanced services for high-risk patients: 2-4 year olds; diabetic patients; patients with AIDS and severely handicapped patients.
Maintain/exceed established clinical excellence in all departments	Family Services, in collaboration with Medical revised and refined Suboxone Treatment Policy & successfully renewed licensing by the MA Department of Public Health for Outpatient Substance Abuse Counseling.

**Partner Name, Description**

**Partner Web Address**

JP Health Planning  
 JP VIP & Trauma Response Team  
 JP Youth Disparities Initiative  
 Boston Conference of Community Health Centers  
 Mass League Governmental Affairs  
 Fitz Urban Youth Sports

Martha Eliot Health Center	<a href="http://www.childrenshospital.org/locations/Site1395/mainpageS1395P57sublevel8.html">http://www.childrenshospital.org/locations/Site1395/mainpageS1395P57sublevel8.html</a>
Boston Alliance for Community Health	<a href="http://www.bostonhealthalliance.org/">http://www.bostonhealthalliance.org/</a>
Center for Community Health Education Research and Service, Inc. (CCHERS)	<a href="http://www.ccher.org/index.htm">http://www.ccher.org/index.htm</a>
Boston Centers for Youth & Families	<a href="http://www.cityofboston.gov/bcyf/">http://www.cityofboston.gov/bcyf/</a>
Roxbury YMCA	<a href="http://www.ymcaboston.org/roxbury/">http://www.ymcaboston.org/roxbury/</a>
Jamaica Plain Neighborhood Development Corporation	<a href="http://www.jpndc.org/">http://www.jpndc.org/</a>
Urban Edge	<a href="http://www.urbanedge.org/">http://www.urbanedge.org/</a>
Camp Harborview	<a href="http://www.chvf.org/">http://www.chvf.org/</a>
ESAC	<a href="http://www.esacboston.org/">http://www.esacboston.org/</a>

**Contact Information** Paula McNichols, Executive Director, Brookside Community Health Center, 3297 Washington Street, Jamaica Plain, MA 02130; 617-983-6039, [pmmcnichols@partners.org](mailto:pmmcnichols@partners.org)

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**Racial Healing and Reconciliation Team**

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<b>Program Type</b>	Community Education, Community Health Needs Assessment, Healthy Communities Partnership, Mentorship/Career Training/Internship, Outreach to Underserved, Prevention
<b>Brief Description or Objective</b>	As an approach to improving community health, the Southern Jamaica Plain Health Center, a licensed health center of BWH is working with a group of 16 youth (8 white youth and 8 youth of color) in a racial healing and reconciliation (R &R) process. Through readings, affinity groups, workshops, speak outs and community teaching, youth are challenged and supported to understand the levels of the system of racism, explore racial identity development theory, and transform into racial justice activists, channeling their efforts to address the impact of racism on the social determinants of health with a focus on employment, workforce development and education.
<b>Target Population</b>	<b>Regions Served:</b> Boston, Boston-Jamaica Plain <b>Health Indicator:</b> Other: Education/Learning Issues <b>Sex:</b> All <b>Age Group:</b> Adult-Young, Child-Teen <b>Ethnic Group:</b> All <b>Language:</b> English

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Train 16 youth in health equity,	Completed June 2012, new group of 16 started in October

racial justice framing, basic public health and epidemiology and undoing racism work	2012.
Provide community education on health equity and the connection between racism and health	10 community trainings by August 2012
Complete R&R documentary for education and advocacy	Documentary completed April of 2012 <a href="http://www.youtube.com/watch?v=QtDfajOTayM">http://www.youtube.com/watch?v=QtDfajOTayM</a>
Connect work of R&R team with larger Jamaica Plain JP Equity	Ongoing. Monthly training offered to community members since December 2011
Collaborative via monthly meetings	Completion of values statement and commitments, support of a racial justice ad hoc committee for the JP Neighborhood council, ongoing community initiatives and dialogue opportunities.

**Partner Name, Description** Boston Public Health Commission  
**Partner Web Address** [www.bphc.org](http://www.bphc.org)

JP Youth Health Equity Collaborative

**Contact Information** Abigail Ortiz, MSW, MPH, Southern Jamaica Plain Health Center, 640 Centre Street, Jamaica Plain, MA 02130; 617-983-4100, [aortiz3@partners.org](mailto:aortiz3@partners.org)

**Brigham and Women's/Mass General Health Care Center (BW/MG HCC)**

<b>Program Type</b>	Direct Services
<b>Brief Description or Objective</b>	The goal of the Brigham and Women's/Mass General Health Care Center is to provide the same standards in high quality care and services to its patients in a more convenient community location. Moreover, it strives to provide maximum patient convenience and care by locating many specialty services under one roof. In FY12, over 1,2000 people were served and 2,370 have been served since health center inception.
<b>Target Population</b>	<p><b>Regions Served:</b> Canton, Dedham, Foxborough, Franklin, Mansfield, Medfield, Medway, Norfolk, North Attleboro, Norwood, Plainville, Sharon, Stoughton, Walpole</p> <p><b>Health Indicator:</b> Access to Health Care, Environmental Quality, Immunization, Injury and Violence, Other: Arthritis, Other: Asthma/Allergies, Other: Cancer - Breast, Other: Chronic Pain , Other: Colitis/Crohn Disease, Other: Diabetes, Other: Domestic Violence, Other: Elder Care, Other: Family Planning, Other: Hypertension, Other: Nutrition, Other: Osteoporosis/Menopause, Other: Parkinson’s Disease, Other: Pregnancy, Other: Pulmonary Disease/Tuberculosis, Other: Smoking/Tobacco, Other: Stress Management, Other: Stroke, Other: Uninsured/Underinsured, Overweight and Obesity, Physical Activity</p> <p><b>Sex:</b> All  <b>Age Group:</b> All  <b>Ethnic Group:</b> All  <b>Language:</b> All</p>

**Statewide Priority:** Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, Supporting Healthcare Reform

Goal Description	Goal Status
Supporting community educational initiatives by local organizations in the greater Foxborough elder population	Host site for Health and Social Services Consortium (HESSCO) Elder Services public education series on caregiver coping tools. Helped increase HESSCO’s reach within the community through sponsorship/promotion of its annual caregiver conference each fall.
General health education in greater Foxborough community via Speakers Bureau and other options.	Working with local municipal, business, elder, and other health-related stakeholders, BW/MG HCC sponsored multiple speaking events, both on-site and in greater Foxborough area.
Active participation in domestic violence (d/v) education in greater Foxborough community	Proponent and supporter of local d/v educational / advocacy organizations (HUGS, local support group); support has included coordinating, hosting, promoting, and sponsoring a free public education session, fundraising assistance etc.
Community support provided to local organizations addressing key health issues	Support provided to Foxborough Public Schools, local YMCA, Foxborough Discretionary Fund holiday food drive (via Jaycees), Foxborough Relay for Life, Neponset Valley Chamber of Commerce’s Eldercare Alliance, Foxborough substance abuse prevention coalition

Partner Name, Description	Partner Web Address
Foxborough Human Services & COA	<a href="http://www.foxboroughma.gov/Pages/FoxboroughMA_COA/index">http://www.foxboroughma.gov/Pages/FoxboroughMA_COA/index</a>
HUGS-Foxboro	
SAFE-Foxborough	<a href="https://sites.google.com/site/safefoxborough/">https://sites.google.com/site/safefoxborough/</a>
Tri-Town Chamber of Commerce	<a href="http://www.tri-townchamber.org/">http://www.tri-townchamber.org/</a>
HESSCO Elder Services	<a href="http://www.hessco.org/">http://www.hessco.org/</a>
Foxboro Jaycees	<a href="http://www.foxborojaycees.org/">http://www.foxborojaycees.org/</a>
Neponset Valley Chamber – Elder Alliance	<a href="http://www.nvcc.com/">http://www.nvcc.com/</a>
School-to-Career Partnership	<a href="http://www.schooltocareer.info">www.schooltocareer.info</a>

**Contact Information** Cindy Peterson, Administrative Director Brigham and Women's/Mass General Health Care Center (BW/MG HCC) 20 Patriot Place Foxborough, MA 02035, [clpeterson@partners.org](mailto:clpeterson@partners.org)

**Violence Intervention and Prevention Program**

<b>Program Type</b>	Community Education, Direct Services, Outreach to Underserved, Prevention
<b>Brief Description or Objective</b>	The Violence Intervention and Prevention Programs work to reduce intentional violence in our communities by providing comprehensive services to victims of intentional violence admitted to the BWH collaboratively with the Burn, Trauma and Surgical Critical Care Division (BTSCC). Our prevention efforts focus on increasing awareness and

education on the adverse health effects of all intentional violence on both an individual and community level. The Violence Recovery Program provides direct intervention to any patient admitted to BWH as a result of intentional violence. The Violence Recovery Specialist (VRS) meets with patients within 72 hours of admission, provides safety assessments, and helps tailor an individualized plan for ongoing advocacy after discharge. The VRS also provides supportive services to the patient’s family and significant others as appropriate. The VRS provides ongoing support, case management and community linkages as needed for patients post discharge. The Violence Prevention Program provides training, education and support to the BWH and local community on the health impacts of both community and domestic violence. The program works directly with youth in the community to provide education and support to local programs on violence prevention. In FY 2012 the program managed 122 cases and served 70 people.

<b>Target Population</b>	<p><b>Regions Served:</b> Boston</p> <p><b>Health Indicator:</b> Injury and Violence</p> <p><b>Sex:</b> All</p> <p><b>Age Group:</b> Adult-Young, All Adults, Child-Preteen</p> <p><b>Ethnic Group:</b> All</p> <p><b>Language:</b> All</p>
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**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Address the burden of violence in Boston by improving the outcomes of individuals exposed to violence through a focus on risk reduction, asset promotion, trauma recovery and prevention.	122 cases were referred to the Violence Recovery Program. 70 of these cases received assessment by the Violence Recovery Specialist (57%); of those assessments 43 patients participated in ongoing casework with the VRS (61%).
Address the burden of violence in Boston by improving the outcomes of individuals exposed to violence through a focus on risk reduction, asset promotion, trauma recovery and prevention	Provided support to 84 family members/friends of patients
Sponsor education events to improve capacity to respond to violence and trauma	Sponsored Trauma Training for First Responders – a two day event to train health care and community responders on psychological first aid and post traumatic stress management. 100 people participated in the training.
Engage youth as part of our prevention efforts to inform our efforts and cultivate a new generation of violence prevention educators	Recruited and trained 3 youth as peer leaders on violence prevention and peace promotion. The Team has conducted 17 trainings to approximately 504 youth workers, youth and community members on promoting peaceful relationships and violence prevention.
Sponsor education events to improve capacity to respond to violence and trauma	Co-sponsored Surgical Grand Rounds with the Burn Trauma and Surgical Critical Care Division – Violence Intervention Program with Dr. Carnell Cooper from

University of Maryland School of Medicine	
<b>Partner Name, Description</b>	<b>Partner Web Address</b>
Whittier Street Health Center	<a href="http://www.wshc.org">http://www.wshc.org</a>
Louis D. Brown Peace Institute	<a href="http://www.ldbpeaceinstitute.org/">http://www.ldbpeaceinstitute.org/</a>
Jamaica Plain Violence Intervention and Prevention Collaborative	<a href="http://childrenshospital.org/clinicalservices/Site2274/mainpageS2274P90.html">http://childrenshospital.org/clinicalservices/Site2274/mainpageS2274P90.html</a>
Mission Hill Youth Collaborative	<a href="http://missionhillyouthcollaborative.org/">http://missionhillyouthcollaborative.org/</a>
My Brother’s Legacy	<a href="https://jpuu.org/programs/my-brothers-legacy">https://jpuu.org/programs/my-brothers-legacy</a>
<b>Contact Information</b>	Mardi Chadwick, J.D. Director Violence Intervention and Prevention Programs, 41 Avenue Louis Pasteur, Boston, MA 02115 617-264-8751 , <a href="mailto:mchadwick1@partners.org">mchadwick1@partners.org</a>

## Expenditures

Community Benefits Programs	
Expenditures	Amount
Direct Expenses	\$24,055,312
Associated Expenses	Not Specified
Determination of Need Expenditures	\$1,237,568
Employee Volunteerism	Not Specified
Other Leveraged Resources	\$9,006,153

Net Charity Care	
Expenditures	Amount
HSN Assessment	\$32,025,478
HSN Denied Claims	\$850,920
Free/Discount Care	\$875,843
Total Net Charity Care	\$33,752,241

Corporate Sponsorships	\$841,590
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<b>Total Expenditures</b>	\$68,892,882
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<b>Total Revenue for 2012</b>	\$5,102,548,000
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<b>Total Patient Care-related expenses for 2012</b>	\$1,434,764,093
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<b>Approved Program Budget for 2013</b>	\$68,892,882
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(*Excluding expenditures that cannot be projected at the time of the report.)	
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**Comments:** 💡 Not Specified

**Optional Information**

<b>Community Service Programs</b>	
Expenditures	Amount
Direct Expenses	Not Specified
Associated Expenses	Not Specified
Determination of Need Expenditures	Not Specified
Employee Volunteerism	Not Specified
Other Leveraged Resources	Not Specified
<b>Total Community Service Programs</b>	Not Specified

**Full-Text PDF Report:** Not Specified

**Original Full-Text Report:** Not Specified

**Bad Debt:** Not Specified Not Specified

**IRS 990:** Not Specified