Organization Information

<table>
<thead>
<tr>
<th>Organization Address and Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization Name: Newton-Wellesley Hospital</td>
</tr>
<tr>
<td>Address (1): 2014 Washington Street</td>
</tr>
<tr>
<td>City, State, Zip: Newton, Massachusetts 02462</td>
</tr>
<tr>
<td>Web Site: <a href="http://www.nwh.org">www.nwh.org</a></td>
</tr>
<tr>
<td>Contact Name: Lauren Lele</td>
</tr>
<tr>
<td>Contact Title: Director</td>
</tr>
<tr>
<td>Contact Department: Community Benefits</td>
</tr>
<tr>
<td>Telephone Num: (617) 243-6330</td>
</tr>
<tr>
<td>Fax Num: (617) 243-5363</td>
</tr>
<tr>
<td>E-Mail Address: <a href="mailto:llele@partners.org">llele@partners.org</a></td>
</tr>
<tr>
<td>Contact Address (1): 2014 Washington Street</td>
</tr>
<tr>
<td>City, State, Zip: Newton, Massachusetts 02462</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Organization Type and Additional Attributes</th>
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</thead>
<tbody>
<tr>
<td>Organization Type: Hospital</td>
</tr>
<tr>
<td>For-Profit Status: Not-For-Profit</td>
</tr>
<tr>
<td>Health System: Partners HealthCare</td>
</tr>
<tr>
<td>Community Health Network Area (CHNA): West Suburban Health Network (Newton/Waltham)(CHNA 18),</td>
</tr>
<tr>
<td>Regions Served: Natick, Needham, Newton, Waltham, Wellesley, Weston,</td>
</tr>
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</table>

CB Mission

Community Benefits Mission Statement
For Newton-Wellesley Hospital to provide effective and coordinated local support to address and help prevent socio-medical problems that face the hospital's communities. Efforts to help community residents stay healthy include: raising awareness of health issues, advocating for change to improve health, presenting prevention programs, and partnering with the community to develop additional treatment resources to address unmet needs of the community.

To increase access to care in an equitable and efficient fashion to all

To identify and address specific health care needs which are unique to the hospital's community

To improve the health of the community and reduce health care costs through programs of preventive medicine and health promotion

Target Populations

<table>
<thead>
<tr>
<th>Name of Target Population</th>
<th>Basis for Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child &amp; Adolescent Health</td>
<td>CDC Risk Behavior Surveys</td>
</tr>
<tr>
<td>Seniors</td>
<td>Emergency Department data sources</td>
</tr>
<tr>
<td>People affected by domestic, family, or sexual violence</td>
<td>National, state, and local statistics</td>
</tr>
</tbody>
</table>
Community residents in Waltham
Substance Use Disorder
Low Income

Publication of Target Populations
Marketing Collateral, Annual Report, Website

Hospital/HMO Web Page Publicizing Target Pop.
https://www.nwh.org/ community-health-assessment

Key Accomplishments of Reporting Year
- Among community dwelling elders, fall-related injuries are the most common type of injury. In FY1882 elders participated in the Matter of Balance program, bringing the total number of participants since the program inception in 1997 to 1,745.
- In FY18, the Domestic Violence/Sexual Assault Program at NWH provided free, voluntary, and confidential services to over 250 survivors of domestic, family, or sexual violence. Other aspects included the creation of culturally and linguistically specific services and resources for survivors through Latinas Know Your Rights programs. Expanded expressive arts therapy program curriculum. Enhanced partnerships and the work being conducted by the Abuse in Later Life program and on trauma informed care. Facilitated the SANE Tele-nursing Center at NWH.
- In FY18, the Pediatric Primary Care Clinic provided care at 523 visits. At NWH Waltham Family Medicine and the NWH Pedi Clinic, 30 children were provided immunizations while they were in the application phase for Mass Health to ensure on-time access to school entry. Addressed and planned for issues confronted during appointment related to language, finances, and food access.
- In FY18, facilitated 411 rides through the Circulation/Lyft platform for ease of access to and from hospital care. Supported transport options through taxi vouchers from Veteran’s Taxi for clients of homeless shelters, low income housing or senior agencies to have on-going access to needed healthcare services. Sponsored the Waltham Partnership for Youth Rides Together study to address transportation needs of youth and families.
- Convened, quarterly, NWH’s six community Departments of Public Health expanding opportunities for shared communication, knowledge of resources, collaborations, and improved access to health care services. In addition, NWH convened quarterly meetings with local area higher education leadership to address prevalent health concerns on college campuses.
- In FY18, provided CPR/First Aid certification classes to 220 childcare workers. Provided free CPR/1st Aid training classes for 64 Domestic Violence workers. 15 parents who are residents of the Home Suites family homeless shelter were CPR trained.
- In FY18, NWH administered 970 flu vaccines at 14 flu clinics held at various locations in the NWH service areas. NWH conducted 7 specialty clinics/screenings in the community.
- In FY 18, NWH had representatives at 20 health community events promoting health, wellness and safety. 55 NWH clinical experts spoke at various community agencies/group/school events.
- In FY18, held a mental health summit with 130 attendees (principals, school nurses, social work, guidance staff and therapeutic staff) from the six school districts in our primary service area.
- In FY 2018, 150 seniors attended the annual senior supper held at NWH. The event fostered socialization, nutrition and wellness.
- The Resilience Project incorporated school teams (psychiatrist and social worker) into the 7 high schools. Increased access for referrals to Child and Adolescent Psychiatry clinic. Clinic visits for 2018 were 3,276, a 39% increase over 2017. 15% of the clinic visits were referrals from local schools.
- Conducted instructive groups in the following areas: The Parents Program (45 attended), DBT skills, High School Teens group, Transition to College group.
- In FY18, NWH distributed 340 doses of Narcan to community agencies/partners. NWH dispensed 79 naloxone kits to patients in the NWH Emergency Department with diagnosis of opioid overdose.
- Substance use Service clinicians consulted on over 100 new patients and completed more than 200 patient visits.
- Conducted a community wide lecture on Vaping and Juuling. Created a Juuling Tool Kit that was distributed to community public health departments, schools, and parents.
- The hospital collaborated with the Middlesex District Attorney’s office to create the Charles River Regional Opioid Task Force.
- In FY18, NWH continued the Waltham Wellness Collaborative in partnership with Healthy Waltham to promote health and wellness across the age spectrum.
- Supported the Summer Eats program for students during the summer months which saw a 1/3 of an increase in free meals delivered to Waltham youth.
- In FY 18, active participation with the work of Waltham Connections for Healthy Aging to create a model for incorporating age-friendly aspects into the policies and practices of Waltham organizations to improve lives of local seniors. Created the "Walk With A Doc" program for Waltham Connections to combine both education and physical activity. Each session attended by 60 seniors.
- Sponsored a significant portion of the Waltham Partnership for Youth Language Access for Civic Engagements (LACE) Program. 20 Spanish/English bilingual teens trained as interpreter liaisons by Cross Cultural Communications, Inc. to become interpreters for community events that focus on substance use, strategies and available resources.
- Hired two Waltham High School students through the Waltham Partnership for Youth Summer Internship program. Hosted two student interns from the Newton Mayor Youth Internship Program through Newton Health and Human Services.
- Provided 126 individuals in youth and adult vocational programs with separate, on-going, placement opportunities to learn, practice and be exposed to work place skills.
- Provided 25 hemorrhage control kits for Newton Public Schools.
- 30 community chaplains attended and received certification at a two-day disaster training in partnership with National Disaster Interfaith Network for Metro-Boston area chaplains held at NWH.
- Convened and participated in numerous local, state and regional planning meetings, committees, and initiatives for emergency management planning, including 4 active shooter drills in Newton.
- Completed a Community Health Needs Assessment.
- Created the Collaborative for Healthy Families & Communities. Developed Councils that address identified community health needs. Councils comprised of, and led by, community members

### Plans for Next Reporting Year
In addition to the ongoing programs sponsored or in partnership with other organizations, the hospital will continue to focus on key findings highlighted in the assessment (2018): addressing needs for specific populations (youth, seniors, low income), access to care and transportation, Waltham as a unique community in the service area, and a focus on mental health and substance use. These identified populations and specific issues are viewed as critical and have a growing need for more resources and collective action. NWH efforts in all priority areas emphasize improvement in health status and working collaboratively within and across its communities. In 2018, the hospital will facilitate the process and dissemination of funds of the MGH DoN in the Waltham community.

Specific priority categories were established and will continue to be of focus to NWH. These include:
- Mental Health
- Access to Care
- Social Determinants of Health - Food access and healthy eating, transportation, housing, violence and trauma, and employment/education - workforce development
- Chronic Disease Management and Prevention
- Community Emergency Preparedness
- Substance Use

The monitoring of a variety of strategies within each of these priority initiatives are in collaboration with the community benefits committee, the hospital’s Strategic Leadership Team, Board of Trustees, and Collaborative for Healthy Families & Communities Leadership.

### Community Benefits Process

#### Community Benefits Leadership/Team
The Committee consists of Board Members, senior leadership, medical staff members, and Directors. Additionally, the Committee is comprised of representatives from the Departments of Public Health, education system leadership, senior focused agencies, businesses and neighborhoods, faith-based groups, agency involvement from healthy living, low income and mental health community organizations and social service agencies.

#### Community Benefits Team Meetings
The Committee meets approximately 3-4 times per year.

### Community Partners
American Cancer Society
American Heart Association
American Red Cross
Babson College
Boston Athletic Association
Boston Area Rape Crisis Center
Boston College
CAN-DO
Circulation, Inc./Lyft
Charles River Community Health Center
Community Day Center
Healthy Waltham
Jewish Community Housing for the Elderly
Metro Boston Project Outreach
Middlesex District Attorney Marian Ryan Office
Middlesex Human Services Agency
Mt. Auburn Hospital
Neighbors Who Care
Newton At Home
Newton-Needham Chamber of Commerce
Newton, Needham, Natick, Waltham, Wellesley & Weston Councils on Aging
Newton, Needham, Natick, Waltham, Wellesley & Weston Health Departments
Newton, Needham, Natick, Waltham, Wellesley & Weston School Departments
Community Health Needs Assessment

Date Last Assessment Completed and Current Status

NWH's CHNA was completed and approved by the Hospital Board in November of 2018.

Consultants/Other Organizations

Health Resources in Action (HRiA) was consulted and retained to conduct the community health needs assessment in 2018. The assessment was completed and approved by the NWH Board in November 2018.

Data Sources

Consumer Group, Hospital, Interviews, Other, Public Health Personnel, Surveys, Data sources included: the U.S. Census Bureau, American Community Surveys, County Health Rankings, the Massachusetts Behavioral Risk Factor Surveillance System (BRFSS), the Massachusetts Department of Public Health, MetroWest Health Foundation, the Massachusetts Department of Elementary and Secondary Education, and the Federal Bureau of Investigation.

Implementation Strategy (optional)

File Upload (optional) Not Specified

Community Benefits Programs

<table>
<thead>
<tr>
<th>Fall-Related Injuries among Community Dwelling Elders: A Matter of Balance</th>
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<tbody>
<tr>
<td><strong>Program Type</strong></td>
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<tr>
<td><strong>Statewide Priority</strong></td>
</tr>
<tr>
<td><strong>EOHHS Focus Issue(s) (optional)</strong></td>
</tr>
<tr>
<td><strong>DoN Health Priorities (optional)</strong></td>
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<tr>
<td><strong>Target Population</strong></td>
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<tr>
<td><strong>Goal Description</strong></td>
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<tr>
<td><strong>Goal Status</strong></td>
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</tbody>
</table>
Reverse or prevent loss of function and disablement commonly associated with fear of falling among older persons.

In FY18, the program served 82 participants for a total of 1,745 since inception in 1997.

**The Domestic Violence/Sexual Assault Program at Newton-Wellesley Hospital (DV/SA Program)**

| Program Type | Community Education, Direct Services, Health Screening, Mentorship/Career Training/Internship, Outreach to Underserved, Support Group, |
| Statewide Priority | Promoting Wellness of Vulnerable Populations, |
| EOHHS Focus Issue(s) (optional) | Not Specified |
| DoN Health Priorities (optional) | Not Specified |
| **Target Population** | • **Regions Served:** Natick, Needham, Newton, Waltham, Wellesley, Weston, • **Health Indicator:** Injury and Violence, Mental Health, Other: Domestic Violence, Other: Rape, Other: Safety - Home, • **Sex:** All, • **Age Group:** Adult-Elder, All, All Children, • **Ethnic Group:** All, • **Language:** All, |
| **Goal Description** | Continue to increase safety, health and well-being of patients and employees by providing comprehensive services to those experiencing domestic and sexual violence. Continued participation in multi-year, multidisciplinary abuse in later life partnership that has historically included REACH Beyond DV, Springwell Elder Protective Services, & the Middlesex County DAs office. Grow accessibility for Latin, Spanish-speaking, and, in particular, undocumented survivors (who are disproportionately at risk) Increase access to services for patients and employees by increasing | Goal Status | In FY18, the program provided 1000+ hours of safety planning, counseling & advocacy to survivors. In addition, thousands of hours of additional time were devoted to community education, training, policy development, & collaboration with community organizations. In FY18, the partnership trained numerous community-based victim service providers and built capacity in detectives from 7 surrounding communities. In FY18, the program continued collaboration with REACH Beyond Domestic Violence and Greater Boston Legal Services to place a bilingual- intern with the Latinas Know Your Rights Program. This multi-program collaboration resulted in culturally and linguistically-specific support groups and expressive art therapy groups, as well as a community education series for parenting survivors concerned about their children's experiences of bullying. In addition, a notable number of community education events were marketed in Spanish, with fully bilingual materials and interpretation available. These events included a weekend health retreat for female and genderqueer survivors, as well as a gender inclusive "Night of Healing" for survivors of sexual assault, amongst other events. In FY18, the DV/SA Program provided education and consultation to over 1,000 healthcare providers and multidisciplinary professionals on topics ranging from partner violence, child abuse, and human trafficking.

**Partners**

| Partner Name, Description | Partner Web Address |
| Community Senior Centers | Not Specified |
| Maine Health’s Partnership for Healthy Aging | Not Specified |
| New England Research Institute (NERI) | http://www.neriscience.com/ |

**Contact Information**

Kathy Beans Program Coordinator, Newton-Wellesley Hospital Wellness Center, 2014 Washington St., Newton, 617-243-6649
The hospital participates with other local hospitals, emergency management systems, and a network of community-based organizations to provide comprehensive care to patients. The hospital is committed to addressing the social determinants of health and promoting health equity for all patients.

### Goal Status

In FY18, the program served over 250 survivors.

### Expenditures

In FY18, the program provided substantial donations and other in-kind expertise to support the shelter infrastructure and DV/SA agencies in the community.

Lent substantive time and expertise to community and healthcare-based domestic violence programs across the Commonwealth, in order to build capacity to better support the following: 1) survivors in probate and family court to protect traumatized/abused children, 2) trauma-informed responses to all survivors, and 3) relationships with healthcare providers and institutions.

In FY18, the program continued its participation in a multi-disciplinary team that included the SANE program, several local district attorney's offices, and offices from multiple local police departments. In addition, this FY, this project expanded to include campus-based police and Title IX Coordinators.

In FY 18, continued efforts to integrate expressive arts modalities into treatment. NWH staff crafted and implemented a first of its kind culturally-specific expressive arts therapy curriculum for survivors of multiple kinds violence & abuse - violence experienced in people's country of origin, violence experienced on their immigration journeys, discrimination and oppression experienced in the United States, and sexual and partner abuse. It is believed that this curriculum is the first of its kind in the country. Staff also held community events featuring musicians, storytellers, and nationally-recognized sculptors, painters, and multi-modal artists all of whom represented their survivorship through their art.

In FY 2018, the NTC provided education to hundreds of providers across the country, influenced expanded adherence to national SANE protocols, and contributed to institutionalizing the advocacy response at several pilot sites (most notably in MA). This, in addition, to its core work of serving as clinical presence for survivors and their providers during real-time post-assault exams across the country.

### Partners

<table>
<thead>
<tr>
<th>Partner Name, Description</th>
<th>Partner Web Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boston Area Rape Crisis Center</td>
<td><a href="http://www.barcc.org/">http://www.barcc.org/</a></td>
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<tr>
<td>GLBT Domestic Violence Coalition</td>
<td><a href="http://www.thenetworklared.org/glbtdvcwebappl.pdf">http://www.thenetworklared.org/glbtdvcwebappl.pdf</a></td>
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<tr>
<td>Middlesex Co DA's Office</td>
<td><a href="http://www.middlesexda.com/">http://www.middlesexda.com/</a></td>
</tr>
<tr>
<td>REACH Beyond Domestic Violence</td>
<td><a href="http://www.reachma.org/">http://www.reachma.org/</a></td>
</tr>
<tr>
<td>The Second Step</td>
<td><a href="http://www.thesecondstep.org/">http://www.thesecondstep.org/</a></td>
</tr>
</tbody>
</table>

### Contact Information

| Erin C. Miller Domestic Violence/Sexual Assault Coordinator Newton-Wellesley Hospital 617-243-6521 |

### Detailed Description

The DV/SA Program provides free, voluntary, and confidential services to patients and employees who are experiencing domestic violence, family violence and sexual assault. In FY18, over 250 survivors were served through support groups, counseling and safety planning, and several hundred consults to providers.

### Provision of primary care to children and adolescents who are uninsured or present other challenges interfering with accessing primary care.

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Direct Services, Health Screening, Outreach to Underserved, School/Health Center Partnership,</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statewide Priority</td>
<td>Address Unmet Health Needs of the Uninsured, Promoting Wellness of Vulnerable</td>
</tr>
</tbody>
</table>
The substance use program at NWH is designed to provide multidisciplinary addiction treatment to individuals in the community.

### Goal Description

- **Accept agency referrals for children/adolescents without primary care.**
- **Consult to schools and agencies and coordinate services for disadvantaged youth.**
- **Participation by clinicians on various local and state-wide agencies as experts on pediatric health.**
- **Provide primary care to children and adolescents.**
- **Provide primary care and specialty care to uninsured children and/or those with medical/social conditions beyond ability of private office.**
- **Provide primary care to children and adolescents who are uninsured or present other challenges interfering with accessing primary care.**
- **Facilitate services to ease access of care.**

### Goal Status

In FY18, continued to serve a consistent number of youth for referrals.

- **In FY18, worked to collaborate with Waltham agencies to address areas of concern by patients and families presenting at the clinic; to include food access, behavioral health, and language barriers.**
- **In FY18, there were numerous school consultations and participation on agency boards, e.g. Newton Boys & Girls Club, local Boards of Public Health and Mass Medical Society - School Health Committee.**
- **In FY18, there were 523 visits to the pediatric clinic.**
- **The clinic has reached out to Waltham for provision of primary pediatric care to children not followed routinely by a pediatrician.**
- **In FY18, provided care to 30 pediatric uninsured patients while they were in the application phase for Mass Health so as not to delay school entry.**
- **At the Waltham practice location, developed presence of financial counseling (certified to complete Mass Health applications). Expanded language interpreter availability through the hospital contract.**

### Partners

<table>
<thead>
<tr>
<th>Partner Name, Description</th>
<th>Partner Web Address</th>
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<tbody>
<tr>
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</tbody>
</table>

### Contact Information

- **Joel Bass, MD Chair, Department of Pediatrics Newton-Wellesley Hospital 617-243-6565**
- **Carrie Goodhue, Practice Manager, Waltham Family Medicine, 781-7**

### Detailed Description

The Pediatric Primary Care Clinic (PPCC) and NWH Waltham Family Medicine provide medical care to children and adolescents who do not have access to a private physician. Additionally, a wide range of specialty clinics associated with Massachusetts General Hospital for Children are available to Clinic patients.

### Health Education, Promotion and Disease Prevention Education

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Community Education, Grant/Donation/Foundation/Scholarship, Health Professional/Staff Training, Promoting Wellness of Vulnerable Populations,</th>
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<tbody>
<tr>
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<tr>
<td>EOHHS Focus Issue(s) (optional)</td>
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<tr>
<td>DoN Health Priorities (optional)</td>
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</tr>
<tr>
<td>Target Population</td>
<td><strong>Regions Served:</strong> Natick, Needham, Newton, Waltham, Wellesley, Weston, <strong>Health Indicator:</strong> Mental Health, Other: Child Care, Other: Education/Learning Issues, Other: Elder Care, Other: First Aid/ACLS/CPR, Other: Smoking/Tobacco, Other: Stress Management, Physical Activity, <strong>Sex:</strong> All, <strong>Age Group:</strong> Adult, <strong>Ethnic Group:</strong> All, <strong>Language:</strong> English,</td>
</tr>
</tbody>
</table>
Goal Description
Conduct community flu clinics.
Offer wellness classes designed to address tobacco use.
Promote education through health education.
Provide a source of health education and socialization for local seniors in the community.
Provide CPR/First Aid certification classes for childcare workers, workers in Domestic Violence Programs, and parents living in homeless family hotels seeking.
Provide health awareness and disease prevention programs.
Representation and involvement on local community boards and activities.
Support local initiatives that promote health and wellness.

Goal Status
In FY18, NWH administered 970 flu vaccines at 14 flu clinics held at various locations in the NWH service areas.
In FY18, the hospital partnered with Mt. Auburn Hospital to offer a Freedom From Smoking class in the Waltham community at the Charles River Health Center. The 8-week class was offered at no cost to attendees. 11 individuals signed up for the class, with 2 participants completing the program.
In FY 18, 55 NWH clinical experts spoke at various community agencies/schools events. Through the Collaborative for Healthy Families & Communities, Hospital offers a Speaker’s Bureau available to the community and created a monthly on-line Hot Topics segment for health education.
Continued holding an annual senior supper that has been taking place for over 20 years. In FY 2018, 150 seniors attended. The event fostered socialization, nutrition and wellness.
In FY18, at no cost to attendees, 220 childcare workers became certified. 64 Domestic Violence workers were trained. 15 parents who are residents of the Home Suites family homeless shelter were CPR trained. This location houses children with disabilities and has residents with complex medical needs.
In FY18, NWH conducted 7 specialty clinics/screenings in the community.
Numerous NWH clinicians and staff served on local community boards and offered their specialized perspectives on strategic initiatives.
In FY18, NWH had representatives at 20 health community events promoting health, wellness and safety. NWH held annual events such as Think Pink and Survivorship as well as established several first-time events on such topics such as car seat safety, scout first aid, and advanced care planning.

Partners
Partner Name, Description
Not Specified
Partner Web Address
Lauren Lele, Director, Community Benefits, Newton-Wellesley Hospital, 2014 Washington St., Newton, MA 02462 617-243-6330

Contact Information

Detailed Description
In FY18, in response to health education needs identified in the community health needs assessment, NWH conducted a series of screenings, clinics, health awareness programs certification in CPR/First Aid and tobacco cessation in the community. Additional health promotion education was conducted on various topics such as a senior living, health and sports, heart, cancer as well as other topics.

Child and Adolescent Mental Health Services at Newton-Wellesley Hospital

Program Type
Community Education, Prevention, School/Health Center Partnership,

Statewide Priority
Promoting Wellness of Vulnerable Populations,

EOHHS Focus Issue(s) (optional)
Not Specified

DoN Health Priorities (optional)
Not Specified

Target Population
• Regions Served: Natick, Needham, Newton, Waltham, Wellesley, Weston,
• Health Indicator: Mental Health,
• Sex: All,
• Age Group: Child-Teen,
• Ethnic Group: All,
• Language: English,

Goal Description
Address parenting education and needs in to mental health services.
Create school-specific mental health programming.

Goal Status
Began the development of the Parents Program within The Resilience Project. Approximately 45 parents attended the sessions. The Program promotes the well-being of children and families in the community by offering to parents, education, support and practical strategies for managing and preventing the problems that can arise in their children.
The Resilience Project incorporated school teams into the 7 high schools. A child psychiatrist and social worker visited the schools over ten times and offered customized training to the teams.
Expand access to mental health services.

Expanded clinical expertise for the school program.

Provide education and awareness to community on the topic of mental health.

Provide opportunity for collaboration with high schools on the issue of mental health.

Support local initiatives focusing on mental health.

Create a framework for supportive group guidance in mental health.

Increased access for referrals to Child and Adolescent Psychiatry clinic. Clinic visits for 2018 were 3,276, a 39% increase over 2017. 15% of the clinic visits were referrals from local schools. In FY 18, ED visits were 611, an 11% increase from the previous year.

Further integrated a psychologist as part of The Resilience Project Team. Enabled expansion of group-based supports for the community.

Conducted multiple professional development sessions for school administration and personnel. Held multiple session for parents through PTO's, local parent groups, faith-based organizations, etc.

Held the third annual Mental Health Summit with attendees from the six school districts in NWH's PSA. The Summit focused on Stress in Students and Adolescent Well-Being and featured two clinical professors from New York University School of Medicine. The 130 attendees included Principals, school nursing, social work, therapeutic staff, guidance staff and coaching staff. The Summit is also designed to offer participants a chance to connect with and learn from their counterparts from other schools.

NWH clinical staff was represented on numerous local committees, and task forces across communities that focus on mental health in adolescents.

Conducted instructive groups in the following areas: DBT skills, High School Teens group, Transition to College group. Started development of groups focused on Raising Resilient Teens and School Avoidance.

<table>
<thead>
<tr>
<th>Partner Name, Description</th>
<th>Partner Web Address</th>
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<tr>
<td>High Schools: Natick, Needham, Newton, Waltham, Wellesley, Weston; The Manton Foundation; NWH Charitable Foundation</td>
<td>Not Specified</td>
</tr>
</tbody>
</table>

Liz Booma, MD, Interim Chief, Child & Adolescent Psychiatry, 2014 Washington St., Newton; 617-243-6490;

The National Institute of Mental Health reports that 1 in 5 children or adolescents experience a mental health problem before the age of 18, yet only 1 in 5 of these children or adolescents receives the treatment they need. The hospital is focused on addressing the mental health needs of the families in our community through collaboration with area high schools with emphasis on managing mental health problems and prevention initiatives.

**Substance Use and Narcan Distribution**

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Community Education, Direct Services, Prevention, School/Health Center Partnership,</th>
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<tbody>
<tr>
<td>Statewide Priority</td>
<td>Promoting Wellness of Vulnerable Populations,</td>
</tr>
<tr>
<td>EOHHS Focus Issue(s) (optional)</td>
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<tr>
<td>DoN Health Priorities (optional)</td>
<td>Not Specified</td>
</tr>
<tr>
<td>Target Population</td>
<td>• <strong>Regions Served:</strong> Natick, Needham, Newton, Waltham, Wellesley, Weston,</td>
</tr>
<tr>
<td>Goal Description</td>
<td>Collaborate with various local multi-community, and state-wide agencies to address the opioid crisis.</td>
</tr>
<tr>
<td>Goal Status</td>
<td>In FY18, NWH staff and clinicians played a leadership role on various community initiatives and collaborations with local health departments, police, fire and schools. Involvement included Newton PATH and MetroBoston Project Outreach, in addition to others. The hospital collaborated with the Middlesex District Attorney's office to create the Charles River Regional Opioid Task Force, bringing together, monthly, various community personnel to focus on a public safety approach to addressing the crisis. Provided a location for safe medication disposal within the program.</td>
</tr>
</tbody>
</table>
Provide education to clinicians and pharmacists and public health officials on role in pain management and addiction.

Provide preventive substance use resources to ED patients and families.

To support local community partners with using Narcan and providing Narcan training, when necessary.

Provide care to substance use patients in the SUS clinic.

Provide education on various forms of substance use.

Expert substance use clinicians provided training in pain management and addiction.

In FY18, NWH dispensed 79 naloxone kits to patients in the Emergency Department with diagnosis of opioid overdose.

In FY18, NWH provided 340 doses of Narcan to local community partners - police and fire, public health, schools and shelters.

SUS clinicians consulted on over 100 new patients and completed more than 200 patient visits for those referred by NWH primary care, inpatient Hospitalist service, and emergency department clinicians.

Conducted a community wide lecture on Vaping and Juuling. Created a Juuling Tool Kit that was distributed to community public health departments, schools, and parents. Provided education forums to various organizations throughout the community. Numerous clinicians provided education to school programs with audiences of youth, parents and educators.

### Partners

<table>
<thead>
<tr>
<th>Partner Name, Description</th>
<th>Partner Web Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health depts., schools, police &amp; fire depts, homeless shelters</td>
<td>Not Specified</td>
</tr>
<tr>
<td>NWH Pharmacy Dept</td>
<td>Not Specified</td>
</tr>
<tr>
<td>NWH Substance Use Service (SUS)</td>
<td>Not Specified</td>
</tr>
<tr>
<td>Middlesex County District Attorney</td>
<td><a href="http://www.middlesexda.com/">http://www.middlesexda.com/</a></td>
</tr>
</tbody>
</table>

### Contact Information

Antje Barreveld, Medical Director, Substance Use Service; 617-243-6142

### Detailed Description

The substance use program at NWH is designed to provide multidisciplinary addiction consultation and coordinate a treatment transition for long term recovery for patients; educate clinicians on caring for substance use disorders; and educate and collaborate with the community on substance use disorder prevention and treatment. Access and use of Narcan is an effective option of treating drug overdose. The use of this resource in the community is a need for various agencies. NWH is able to provide Narcan and training to our community partners to support their efforts of dealing with the opioid crisis. Naloxone kits are also made available to those who present at the hospital with an opioid overdose.

### Waltham Wellness Collaborative with Healthy Waltham

| Program Type | Community Education, Direct Services, Prevention, |
| Statewide Priority | Chronic Disease Management in Disadvantage Populations, Promoting Wellness of Vulnerable Populations, |
| EOHHS Focus Issue(s) (optional) | Not Specified |
| DoN Health Priorities (optional) | Not Specified |
| Target Population | • **Regions Served:** Waltham,
• **Health Indicator:** Other: Nutrition, Overweight and Obesity, Physical Activity,
• **Sex:** All,
• **Age Group:** All,
• **Ethnic Group:** All,
• **Language:** English, |

**Goal Description**

Create platforms for the promotion of healthy living.

Involvement in Waltham community wellness educational initiatives.

Partner with other organizations in

**Goal Status**

Supported the Walking Waltham initiative to engage the entire community and get more people walking-from ages 2-96. Promote physical activity, and help combat obesity and stress. Initiative promotes walking in Waltham’s natural spaces and on city streets.

Supported Healthy Waltham to participate in the School Health Advisory Committee. Focused on the implementation of a new school wellness policy.

Actively participate in Waltham Connections for Healthy Aging. A model created for
Newton-Wellesley Hospital Certified Application Counselors

**Program Type**: Direct Services,

**Statewide Priority**: Supporting Healthcare Reform,

**EOHHS Focus Issue(s) (optional)**: Not Specified

**DoN Health Priorities (optional)**: Not Specified

**Target Population**:
- **Regions Served**: Natick, Needham, Newton, Waltham, Wellesley, Weston,
- **Health Indicator**: Access to Health Care,
- **Sex**: All,
- **Age Group**: All,
- **Ethnic Group**: All,
- **Language**: All,

**Goal Description**: Provide information about the full range of insurance programs offered by EOHHS and the Health Connector.

**Goal Status**: In FY18, NWH CACs contributed to the estimated 75 patient financial counselors that served patients who needed assistance with their coverage.

**Partners**

<table>
<thead>
<tr>
<th>Partner Name, Description</th>
<th>Partner Web Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care For All</td>
<td><a href="https://www.hcfama.org/">https://www.hcfama.org/</a></td>
</tr>
<tr>
<td>Mass Health</td>
<td><a href="http://www.mass.gov/eohhs/gov/departments/masshealth/">http://www.mass.gov/eohhs/gov/departments/masshealth/</a></td>
</tr>
<tr>
<td>Massachusetts Health Connector</td>
<td><a href="https://betterhealthconnector.com/">https://betterhealthconnector.com/</a></td>
</tr>
<tr>
<td>Massachusetts Hospital Association</td>
<td><a href="https://www.mhalink.org/">https://www.mhalink.org/</a></td>
</tr>
<tr>
<td>Massachusetts League of Community Health Centers</td>
<td><a href="http://www.massleague.org/">http://www.massleague.org/</a></td>
</tr>
</tbody>
</table>

**Contact Information**

Kim Simonian, Director for Public Payer Patient Access, Community Health, Partners Healthcare

**Detailed Description**: Newton-Wellesley Hospital Certified Application Counselors (CACs) provide information about the full range of insurance programs offered by EOHHS and the Health Connector. Our CACs help individuals complete an application or renewal; work with the individual to provide required documentation; submit applications and renewals for the Insurance

**Optional Supplement**: Not Specified
<table>
<thead>
<tr>
<th>WorkForce Development.</th>
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</thead>
<tbody>
<tr>
<td><strong>Program Type</strong></td>
</tr>
<tr>
<td><strong>Statewide Priority</strong></td>
</tr>
<tr>
<td><strong>EOHHS Focus Issue(s) (optional)</strong></td>
</tr>
<tr>
<td><strong>DoN Health Priorities (optional)</strong></td>
</tr>
</tbody>
</table>
| **Target Population**  | - Regions Served: Natick, Needham, Newton, Waltham, Wellesley, Weston,  
- Health Indicator: Other: Education/Learning Issues,  
- Sex: All,  
- Age Group: Adult-Young,  
- Ethnic Group: All,  
- Language: All, |

<table>
<thead>
<tr>
<th>Goal Description</th>
<th>Goal Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide opportunities for youth to gain exposure to the health care environment and learn from professionals about career options. Provide skills based learning and transferrable work place skills for young teens. Provide paid employment to youth. Engage teens in the community using their skills to further health education. Provide paid employment opportunities to underserved youth in the community. Enhance exposure and opportunities for a career in the healthcare industry. Provide work-skill based opportunities for students and adults through the NWH vocational volunteer program. Provide exposure to the health care setting and career options to at-risk adult learners in the community. Provide outlets for exposure to health-related educational and employment opportunities to those with less economic stability and means to pursue education opportunities. Provide community outreach to student populations to expose individuals to healthcare careers.</td>
<td></td>
</tr>
<tr>
<td>Hosted two student interns from the Newton Mayor Youth Internship Program through Newton Health and Human Services. Students spent 7 weeks at the hospital exploring different departments and working alongside a variety of staff professionals. Learned about the skills necessary to perform a variety of health care functions. Sponsored a significant portion of the Waltham Partnership for Youth Language Access for Civic Engagements (LACE) Program. 20 Spanish/English bilingual teens trained as interpreter liaisons by Cross Cultural Communications, Inc. Program provides paid employment, transferrable skills and possibility for career development. Adds a component of community engagement by having teens interpret at community events that focus on substance use, strategies and available resources. Allows outreach events to occur at locations with culturally and linguistically diverse venues. Hired two Waltham High School students through the Waltham Partnership for Youth Summer Internship program. Students worked for 7 weeks in the areas of Imaging and Rehabilitation. Students interacted with hospital personnel, patient populations, and learned new skills. Provided 126 individuals adult and youth in vocational programs with separate, on-going, placement opportunities to learn, practice and be exposed to work place skills. Individuals contributed over 8000 hours of service in the year. NWH Volunteer Services works with 20 schools and organizations to facilitate program. Over 25 hospital staff provide instruction, training and a mentor presence for individuals. Partnered with One Family, Inc. to develop an educational program for clients in the One Family Scholar Program. Began planning for a Lunch and Learn event to be held in October 2018 at Newton-Wellesley Hospital. Began planning for a Career Night to be held at NWH. Geared to high school students. Career training to be provided. NWH departments and staff to represent healthcare areas that require less than four-year degrees, certificate programs or no formal schooling.</td>
<td></td>
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<table>
<thead>
<tr>
<th>Partners</th>
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</thead>
<tbody>
<tr>
<td><strong>Partner Name, Description</strong></td>
</tr>
<tr>
<td>Newton Dept. Health and Human Services</td>
</tr>
<tr>
<td>One Family, Inc.</td>
</tr>
<tr>
<td>NWH Volunteer Services</td>
</tr>
<tr>
<td>Waltham Partnership For Youth</td>
</tr>
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</table>
## Access to Care/Transportation

**Program Type**: Outreach to Underserved,

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

**EOHHS Focus Issue(s) (optional)**: Not Specified

**DoN Health Priorities (optional)**: Not Specified

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Goal Description</th>
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</thead>
<tbody>
<tr>
<td><strong>Regions Served</strong>: Natick, Needham, Newton, Waltham, Watertown, Wellesley, Weston</td>
<td>Collaborate with local health departments and other community agencies.</td>
</tr>
<tr>
<td><strong>Health Indicator</strong>: Access to Health Care</td>
<td>Make appointments for those in need of accessing clinical services for either primary or specialty care.</td>
</tr>
<tr>
<td><strong>Sex</strong>: All</td>
<td>Provide access to transportation for underserved populations who are otherwise unable to obtain health care services due to transportation obstacles,</td>
</tr>
<tr>
<td><strong>Age Group</strong>: Adult-Elder, All</td>
<td>Provide transport options to facilitate transition to and from hospital care</td>
</tr>
<tr>
<td><strong>Ethnic Group</strong>: All</td>
<td>Support transportation initiatives in hospital service area.</td>
</tr>
<tr>
<td><strong>Language</strong>: All</td>
<td>Provide resources for assistance with basic needs related to patients’ medical condition when no alternative option is accessible.</td>
</tr>
<tr>
<td></td>
<td>Collaborate with area higher education leaders to address challenges faced by higher education institutions.</td>
</tr>
</tbody>
</table>

**Goal Status**

NWH convenes quarterly meetings with local health departments and other community agencies (senior services, etc.). Goals are to communicate challenges, share best practices, review services, and strategize solutions on access and types of care, in hospital and in community. NWH Emergency Department data is provided on a quarterly basis in the areas of top five diagnosis, overdose, and behavioral health.

In FY18, the hospital's Care Finder program facilitated scheduling appointments for patients in need of a physician or hospital service. Total year end call volume was 8000 calls.

In FY18, supported transport options through taxi vouchers from Veteran's Taxi for clients of homeless shelters, low income housing or senior agencies to have on-going access to needed healthcare services.

Facilitated 411 rides through the Circulation/Lyft platform for ease of access to and from hospital care.

Sponsored the Waltham Partnership for Youth Rides Together study to address transportation needs of youth and families. The study examines existing policy and practice in Waltham around transportation; engages community members to identify gaps in current infrastructure; and proposes possible solutions.

Provided assistance to patients in the categories of food, lodging, safety, and others.

**Partners**

<table>
<thead>
<tr>
<th>Partner Name, Description</th>
<th>Partner Web Address</th>
</tr>
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<tbody>
<tr>
<td>Not Specified</td>
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</tr>
<tr>
<td>Health Departments</td>
<td>Natick, Needham, Newton, Waltham, Wellesley, Weston</td>
</tr>
<tr>
<td>Middlesex Human Service Agency</td>
<td><a href="http://www.mhsainc.org">www.mhsainc.org</a></td>
</tr>
<tr>
<td>NWH Carefinder</td>
<td>617-243-6566</td>
</tr>
<tr>
<td>Circulation Inc.</td>
<td><a href="http://www.circulation.com">www.circulation.com</a></td>
</tr>
</tbody>
</table>
Promoting Wellness of Vulnerable Populations,

**Contact Information**
Lauren Lele, Director, Community Benefits, Newton-Wellesley Hospital, 2014 Washington St., Newton, MA 02462 617-243-6330

**Detailed Description**
To assist with access issues, NWH develops and supports various community agencies with transportation support to facilitate client access to needed healthcare. NWH facilitates access to providers and resources for patient needs. NWH regularly convenes community health departments, community agencies and higher education institutions to engage in discussion and strategy development for improved access to healthcare.

**Community Emergency Preparedness**

**Program Type** Community Education, Community Participation/Capacity Building Initiative,

**Statewide Priority** Not Specified

**EOHHS Focus Issue(s) (optional)** Not Specified

**DoN Health Priorities (optional)** Not Specified

**Target Population**
- **Regions Served:** Natick, Needham, Newton, Waltham, Wellesley, Weston,
- **Health Indicator:** Other: Safety,
- **Sex:** All,
- **Age Group:** All,
- **Ethnic Group:** All,
- **Language:** All,

**Goal Description**
Convene community partners for emergency management planning.
Serve in leadership capacity for local emergency management and disaster planning.

Conduct community-wide emergency management exercises and drills.
Provide designated resources for emergency management to community partners.
Serve as key convener for Boston Marathon preparation and planning.
Conduct functional planning exercises.
Provide community education in the area of emergency management and disaster planning.
Provide emergency and disaster training to various community groups.

**Goal Status**
Convened and participated in numerous local, state and regional planning meetings, committees, and initiatives for emergency management planning.
Collaborated with EMS, Fire, Police, City Services, Health and Human Services, and others on emergency preparedness.

Conducted 4 Active Shooter Drills in City of Newton. Conducted drills with Newton Fire and Cataldo Ambulance. Conducted a tabletop exercise with Waltham.

Provided 25 hemorrhage control kits for Newton Public Schools. Provided City of Newton with replacement Halo seals for kits.

Worked with multi-agencies to prepare for the Boston Marathon.
Conducted a Massachusetts Emergency Management Agency functional exercise for the Boston Marathon.

Conducted Mutual Aid Coordinating Entity and Urban Area Strategic Initiative presentations. Conducted numerous other presentations on emergency management to community organizations.
Hosted a two-day disaster training in partnership with National Disaster Interfaith Network for Metro-Boston area chaplains. 30 community chaplains attended and received certification.

**Partners**

**Partner Name, Description**
- Public Health Departments
- Police and Fire Departments
- Emergency Medical Services Providers
- NWH Emergency Management

**Partner Web Address**
- Natick, Needham,. Newton, Waltham, Wellesley, Weston
- Natick, Needham,. Newton, Waltham, Wellesley, Weston
- Cataldo
- 617-243-6923
Collaborative for Healthy Families & Communities (CHF&C)

**Program Type**
Community Benefits Planning Process, Community Participation/Capacity Building Initiative,

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

**EOHHS Focus Issue(s) (optional)**
Not Specified

**DoN Health Priorities (optional)**
Not Specified

**Target Population**
- **Regions Served:** Natick, Needham, Newton, Waltham, Wellesley, Weston,
- **Health Indicator:** Access to Health Care, Mental Health, Other: Domestic Violence, Other: Elder Care, Other: Pregnancy, Substance Abuse,
- **Sex:** All,
- **Age Group:** All,
- **Ethnic Group:** All,
- **Language:** All,

**Goal Description**
Creation of a model for enhanced community engagement, extension of outreach, and expanded services in areas identified in the NWH community health needs assessment.

Form Councils for each identified health area.

Create additional councils that address identified health needs.

Involve community in CHF&C.

Provide community programming and education through the CHF&C.

**Goal Status**
Developed an operational framework in the hospital for the creation of the Collaborative for Healthy Families & Communities. The Collaborative includes a Medical Director, a Director, and a program outreach coordinator.

Supported the work of the Resilience Project Council, a school-based initiative focused on mental health in adolescents. Further developed the Palliative Care Council with a focus on access to palliative care in outpatient settings. Created the Maternity Services Council with a focus to specifically address depression and mental health concerns in maternal patients.

Started planning for the creation of a domestic and sexual violence council and an elder care council.

Each council is comprised of approximately 50% community members - those with expertise on the subject and those engaged on the topic. Chairs for each of the councils are community members.

Each council conducts an annual lecture for the community. The Resilience Council held both a screening and panel discussion of the film Screenagers. The Collaborative held a lecture and discussion on Juuling and Vaping in schools. Both events had over 100 attendees. A Maternity lecture on post-partum depression is being held.

**Partners**

**Partner Name, Description**
NWH Development Office
NWH Office of Public Affairs

**Partner Web Address**
Not Specified
Not Specified

**Contact Information**
Lauren Lele, Director, Community Benefits and Volunteer Services; 617-243-6330;
Michael Jellinek, MD, Medical Director, CHF&C; 617-726-0519;

**Detailed Description**
There is clear evidence that social factors are a major contributor to poor health outcomes and impact the well-being of our patients and families. The creation of CHF&C recognizes that we need to provide even more support to our communities through a range of educational and preventive services throughout the lifespan of families. The CHF&C was formed to enhance the services and resources that address unmet patient and community wellness needs.
**Community Benefits Programs**

<table>
<thead>
<tr>
<th>Expenditures</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
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<tr>
<td>Associated Expenses</td>
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<tr>
<td>Determination of Need Expenditures</td>
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<tr>
<td>Employee Volunteerism</td>
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<tr>
<td>Other Leveraged Resources</td>
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**Net Charity Care**

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<td>HSN Denied Claims</td>
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<tr>
<td>Free/Discount Care</td>
<td>$681,766.00</td>
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<tr>
<td>Total Net Charity Care</td>
<td>$5,702,203.00</td>
</tr>
</tbody>
</table>

Corporate Sponsorships: $167,804.00

**Total Expenditures**: $8,296,947.00

**Total Revenue for 2018**: $465,981,000.00

**Total Patient Care-related expenses for 2018**: $435,345,134.00

**Approved Program Budget for 2019**: $8,296,947.00 (*Excluding expenditures that cannot be projected at the time of the report.*)

**Comments**: Not Specified

**Optional Information**

**Community Service Programs**

<table>
<thead>
<tr>
<th>Expenditures</th>
<th>Amount</th>
</tr>
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<tbody>
<tr>
<td>Direct Expenses</td>
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<tr>
<td>Determination of Need Expenditures</td>
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<td>Employee Volunteerism</td>
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<tr>
<td>Other Leveraged Resources</td>
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**Total Community Service Programs**: Not Specified

**Link to Hospital Formatted PDF Community Benefits Report**: Not Specified

**Bad Debt**

Not Specified

**Optional Supplement**: Not Specified