

**Carney Hospital**  
**Community Benefits Report**  
**October 2000-September 2001**

---

**Prepared for the**  
**Massachusetts Attorney General**  
**Submitted May 31, 2002**

Prepared By:

Carney Hospital  
2100 Dorchester Avenue  
Dorchester, Massachusetts, 02124

**Carney Hospital**  
**Community Benefits Report**  
**October 2000 – September 2001**

**Table of Contents**

	Page
I. Mission Statement	1
II. Internal Oversight and Management of Community Benefits Program	2
III. Community Health Needs Assessment	3
IV. Community Participation	5
V. Community Benefits Plan	7
VI. Progress Report: Activity During Reporting Year	10
VII. Next Reporting Year	21
VIII. Contact Information	24
Attachments	
A Carney Hospital Programs and Services	
B Board of Trustees Community Needs and Benefits Committee	
C Carney Hospital Board of Trustees	
D Fiscal Years 2001 and 2002 Budgets	
E Selected Community Benefits Programs	
F Standardized Summary	

## **I. Mission Statement**

Carney Hospital, a member of the Caritas Christi Health Care System, is a 200 plus bed community teaching hospital affiliated with Tufts University School of Medicine, which serves the greater Dorchester area and beyond. Carney's medical staff provides a wide-range of services from primary care medicine to a host of specialty and sub-specialty services including cardiology, neurology, and rehabilitative services, among others (see Attachment A for complete list of services).

Caritas Christi is a Catholic Health Care System rooted in the history of the Archdiocese of Boston. As a community of health care providers, we affirm Christ's healing ministries, foster excellence in care, and commit ourselves to those in need in accordance with the principles of the Catholic Church.

Throughout our programs and services, which cover the spectrum of health care, we affirm the sanctity of life, advocate for the poor and disenfranchised, and exercise responsibility for the common good.

With just stewardship of our human and material resources, we pledge to strengthen this health care ministry through sound health care practices, research, education and innovation.

### **A. Community Benefits Mission Statement**

In keeping with the Hospital's mission, Carney is committed to outreach, education, and advocacy in partnership with our culturally diverse communities. Our Community Benefits Plan extends to communities located to the south and southeast of Boston with a particular focus on the Hospital's immediate neighbors in Dorchester and Mattapan.

Our mission is to work with our diverse communities in order to improve access to health care, and to encourage the utilization of Carney services as appropriate. We continuously evaluate the needs of our service area and develop specific programs and services for preventive health care, illness management and emergency services, among other health care needs.

Our goal is to promote wellness and enhance the quality of life for individuals, families and communities through the development of health benefits programs. We are devoted to identifying and implementing the components of an effective public health agenda in concert with community partners. The results of which, is the development and implementation of a Community Benefits Plan.

### **B. Approval of Community Benefits Plan**

The Community Benefits Plan (Plan) is reviewed and approved annually by the Hospital's Board of Trustees (Trustees).

## **II. Internal Oversight and Management of Community Benefits Program**

### **A. Management Structure**

The Trustees' Community Needs and Benefits Committee (Committee) provides recommendations and direction regarding existing and future community benefits programs. (See Attachment B for the Committee list.) The Committee is comprised of Trustees, the Hospital President, Vice-Presidents, and Senior Management staff. Annually, the Committee establishes several short and long-term strategic initiatives to meet the health care needs of the community. As described in Section III, both the Hospital staff and the Committee identify health care and community needs based on many factors including, the review of available Federal, state and local published data and from discussions with community groups and state and local agencies.

Upon completion by the Committee, the Plan is distributed to the Trustees (see Attachment C for a list of Trustees) for approval. Upon approval by the Trustees, the Plan is implemented by the Hospital's Community Service staff.

Community Service staff consists of the Volunteer and Community Services Coordinator who works with the Public Relations Coordinator within the Hospital's Development Department. The Director of Development reports the progress of implementing the Plan directly to the Hospital President and the Committee.

### **B. Information Sharing**

The Hospital President communicates the Community Benefits strategic initiatives to the staff throughout the hospital via monthly staff meetings and written memoranda. In addition, once approved, the Community Service staff is responsible for distributing the Plan to all Hospital departments. Information regarding the implementation of the Plan is continuously shared with employees via the staff newsletter, *PayDay Press*, and the medical staff newsletter, *Staff Notes*.

In addition, the Plan, its objectives and a calendar listing of events and programs are shared with the community through press releases and announcements to local newspapers, churches, health centers and community groups.

In the coming year, a *Community Calendar* announcing support groups, health promotion screenings, and educational lectures on specific health care topics will be provided to community members via mail and point of contact events at libraries and other locations.

### **III. Community Health Needs Assessment**

#### **A. Process and Participants**

As stated in Section II, the Committee, Hospital Administration and staff continuously work to identify community health needs. These needs are prioritized and are developed into short and long-term strategic initiatives. Participants who provide published data, anecdotal information, and community voiced-needs include but are not limited to: physicians, area health centers staff, community and church leaders, allied health professionals, social workers, legislators and department of public health officials.

Furthermore, strong local partnerships help Carney to learn first hand the needs of the community. Carney has established partnerships with: Neponset Health Center, Massachusetts Association of Health Centers, Catholic Charities Haitian Multi-Service Center (HMSC), Vietnamese-American Civic Association (VACA), Patterson Street Neighborhood Crime Watch, Churches Organized to Save Tomorrow (COST) and Women of Color Breast Health Initiative, among others.

#### **B. Information Sources**

Several factors affect the type of information that is used by the Committee and staff as the basis for developing the Plan, including:

- fast-paced changes in medicine and technology;
- rapidly-changing demographics of the service area; and
- uncertainty within the health care industry.

As a result, multitudes of information sources are regularly reviewed in order to develop the strategic initiatives that meet the community's health needs. These information sources include but are not limited to:

- The Report to the Mayor, The Health of Boston;
- city and state-wide demographic information including short and long-term projections;
- immigrant populations health data; and
- Massachusetts Hospital Association data.

#### **C. Summary of Findings**

From the needs assessment, the following target populations and health issues have been identified.

##### **1. Target Populations**

The designated geographic and patient populations served extend to communities to the south and southeast of Boston with a particular focus on the Hospital's immediate neighbors in Dorchester and Mattapan. Target populations identified within these

communities include Vietnamese, Haitian, African-American and Latino individuals and families.

As provided in the *Report to the Mayor, The Health of Boston 2001*, North and South Dorchester combined experienced a population growth of 11.3 percent with the Vietnamese and Haitian communities the fastest growing. As a result, Carney will endeavor to increase services and capabilities to meet the needs of these two communities, among others.

## 2. Health Issues

From our investigation, we have identified the following serious health issues to be addressed:

- heart disease and cancer continue to be the leading causes of death for both males and females in our service area;
- African-American women and Asian women have higher incidences of breast and cervical cancer than any other groups;
- childhood asthma is the most common chronic disease in children; and
- Dorchester and Mattapan are among communities with high hospitalization rates for asthma in children under the age of five.

Given this information, Carney will focus its priorities for health education, early screening and direct care services on the areas of heart disease, cancer and asthma.

## **IV. Community Participation**

### **A. Process and Mechanism**

On an ongoing basis, Carney Hospital assesses the needs of the community. This process includes information reviews as described in Section III, but more importantly, includes interaction with the community whose needs we are trying to meet. Several mechanisms exist to foster this contact:

- Physicians, nurses and staff at both the Hospital and nearby health centers listen to patient's needs and share this information with Hospital administration.
- Many of the medical and Hospital staff are also active members of community-based organizations and regularly attend these meetings and events. These include, but are not limited to:
  - Churches
  - Conference of Boston Teaching Hospitals (COBTH)
  - Dorchester Board of Trade
  - Dorchester Roundtable
  - HMSC
  - The Wellness Community of Greater Boston
  - VACA
- Community members, civic leaders and other representatives, listed below, are invited regularly to meet with Hospital Administration and staff. Some of the organizations represented include:
  - American Heart Association
  - American Red Cross
  - COST
  - St. Mary's Women and Infant Center
  - VACA

Information gathered is shared with Hospital Administration and the Committee as an additional aspect of the community needs health assessment.

### **B. Identification of Community Participants**

Community participation is the key to developing the Plan. As a community hospital, our number one priority is to provide the highest quality of services for members of our community. Therefore, we value communication in many forms with those in our service area to ensure we are meeting their needs. Carney is well connected with the culturally diverse civic associations, health centers and service groups throughout Dorchester and Mattapan. Carney also collaborates with churches, wellness groups, schools and businesses to learn what additional resources may be needed by these groups.

As previously described, the Hospital is in constant communication and interaction with the community. These community participants, among those previously listed, also include patients, clergy, civic leaders, legislators, and Trustees, among others. The representatives who specifically communicate ideas are also changing as the demographics of the community

change. As Carney works to meet the needs of the changing population in our service area, relationships with such groups as VACA and HMSC are strengthened and more communication takes place to ensure the needs within these specific communities are met.

### **C. Community Role in Plan Development**

At all steps in the process of developing the Plan Carney involves the community as described above. A final review of the Plan is made by the Committee, which also consists of representatives from HMSC, Massachusetts Association of Community Health Centers, St. Gregory's Church, Carney Medical staff and other community organizations.

## **V. Community Benefits Plan**

### **A. Process**

The Plan is developed as a result of ongoing information gathering, the understanding of community-voiced health needs, and identifying gaps in services to meet the current and future needs of the community, as previously described.

### **B. Target Population and Identification of Priorities**

As the only community hospital in its service area, Carney endeavors to meet the needs of the community while balancing the changing needs of fast-growing immigrant populations. Carney's target populations for increased community benefits programs are Vietnamese, Haitian, African-American and Latino. More specifically, Carney is committed to increasing the Hospital's capacity to serve the fastest growing patient populations in our service area which are Vietnamese and Haitian people.

Once the needs assessment is completed as described in Section III, Community Benefit priorities are set for 2000-2001, as listed below:

- Provide an excellent diabetes education program.
- Facilitate the establishment and growth of new physician practices to meet the fast growing and diverse patient populations of our service area and to "fill gaps" in response to these community needs.
- Ensure that the needs of children in the community will be met through the presence of pediatric medical services.
- Ensure compliance with American Heart Association Cardiac Outcome measures.
- Monitor and ensure compliance with Asthma Education Standards.
- Improve ambulatory care services, so that the patient's experience is less stressful and more effective and as a means of encouraging more people to seek preventive care in a comfortable, welcoming environment.
- Provide the highest level of emergency response to residents of South Dorchester with the goal of decreasing response times for life-threatening situations, thereby improving outcomes in emergency situations.

### **C. Short-Term and Long-Term Community Health Strategies**

These short-term and long-term community health strategies have been established to meet the Hospital's 2000-2001 priorities.

#### **1. Short-Term (one year)**

##### **a) Diabetes Education:**

- Achieve certification status for Caritas Diabetes Education Program.

##### **b) Physician Initiatives:**

- Recruit physicians to support existing medical practices, specifically for the Vietnamese and Haitian communities.
  - Recruit and develop specialty/sub-specialty practices that "fill gaps" such as neurosurgery and surgical oncology expertise.
- c) Pediatric Program:
- Establish a New England Medical Center/Floating (NEMC) specialty clinic at Carney to support pediatric medicine.
  - Provide increased physician coverage by NEMC at Carney's Pediatric Clinic.
  - Enhance continuity of care for children needing continued secondary treatment.
- d) Cardiac Outcomes:
- Participate in national benchmarking effort "Get With the Guidelines" sponsored by American Heart Association.
  - Improve cardiac outcomes in relation to smoking, lipid management and cardiac rehabilitation by increasing educational opportunities and services.
- e) Asthma Education:
- Consistently review documentation for communication with primary care clinicians regarding inpatient treatment of asthma.
  - Review documentation for asthma education that is provided by clinicians to patients.
  - Confirmation that primary care clinician scheduled follow-up.
- f) Ambulatory Care Services:
- Move all ophthalmology surgery to the Ambulatory Care Center.
  - Expand Medical/Surgical Procedures Unit to accommodate higher volume of patients in a lower-intensity site with enhanced patient satisfaction and lower cost.
- g) Emergency Services:
- Construct Emergency Medical Services Advanced Life Support Ambulance Base Station at Carney Hospital.
  - Provide highest level trained paramedics and response vehicles.
2. Long-Term (three-five years)
- a) Cardiac Outcomes:
- Reduce incidence of secondary events for coronary artery disease in both acute and chronic patients.
- b) Pediatric Program:
- Strengthen our Tufts University School of Medicine affiliation via the addition of pediatric residents.
  - Explore shared registered nurse staffing resources with New England Medical Center.
- c) Ambulatory Care Services

- Move all low-intensity plastic surgery to Ambulatory Care Center.
  - Redevelop Ambulatory Care Center to increase recovery and procedure space.
  - Develop central pre-admission testing and low-tech diagnostic center.
- d) Emergency Services
- Ensure that hazardous material decontamination capabilities are state-of-the-art.

#### **D. Process for Measuring Outcomes and Evaluating Program Effectiveness**

The Trustees and the Volunteer and Community Services Coordinator measure outcomes and evaluate effectiveness of programs based on program data and statistics, responses from community focus groups and civic association meetings, and through suggestions from program directors and participants. Measuring and evaluating effectiveness of programs is ongoing.

#### **E. Process and Considerations for Determining a Budget**

The process for determining a budget relies on input from administration, fiscal services and all departments throughout the Hospital that provide programs and services intended to improve the health of our community. When planning the budget the following costs are considered: staffing and volunteer needs, advertising and other vehicles for communication, capital and equipment needs and laboratory testing.

Furthermore, one of the major costs in determining the Community Benefits budget is that of free and uncompensated care. The ability to develop a budget for overall community benefits reflects what the state provides each year to Carney from the uncompensated care pool.

#### **F. Process for Reviewing, Evaluating and Updating the Plan**

The process for reviewing the Plan internally and with the community is ongoing. Quarterly, the Trustees review the Committee's report of activities related to the Plan and, if necessary, makes recommendations to the Committee. Also on an ongoing basis, the Committee evaluates the results and outcomes of the Plan and proposes revisions, if necessary.

In addition, the Hospital staff and community members involved in Plan implementation provide ongoing reviews and assessments of activities. This information is also used to make changes in programs.

## **VI. Progress Report: Activity During Reporting Year**

### **A. Expenditures**

As a tax-exempt, not-for-profit Catholic hospital committed to a public health agenda, all departments of Carney provide programs and services intended to improve the health of our community. Therefore, the Plan's budget incorporates the costs from ambulatory care centered clinics, community services staff, health screenings and promotions including laboratory and equipment fees, and the cost of uncompensated care, among others. The budget for Fiscal Year 2001 is included in this report as Attachment D. As shown in the budget, the total cost of services for programs as described below, equals \$585,414. In addition, to this Carney contributes \$1,138,371 to the uncompensated care pool and an additional \$6,450 to support other non-profit programs and events.

### **B. Major Programs and Initiatives**

Carney is committed to working with the numerous diverse groups within the neighborhoods of its service area as outreach improves the health and well being of our communities through awareness, early detection and health maintenance. Carney provides a range of educational events, health screenings, and lectures by physicians and other health professionals. Disease specific health screenings afford members of the community the following benefits:

- access to free information, which may ultimately assist in keeping families safe and healthy;
- early detection for people who do not have a primary care physician;
- one-on-one interaction with specialists without the burden of insurance issues; and
- information in the form of lectures and take-home brochures.

This series of lectures, screenings and health fairs is sponsored in accordance with meeting the Plan's short-term objectives. Please refer to Attachment E, Selected Community Benefit Programs for a summary of some of these programs.

The following is a brief description of activities and partnerships related to the Plan that occurred during the reporting year.

#### **1. Community Benefits - Health Education and Screenings**

##### **a) Carney Hospital Tobacco Treatment and Education**

Through a Department of Public Health grant, the Carney Hospital Ambulatory Care Center (ACC) provides tobacco treatment services to the tobacco users in the service area. The ACC incorporates the guidelines of the Agency for Health Care Policy and Research in order to institutionalize tobacco control strategies and maximize success of delivery systems of tobacco dependent treatment. Tobacco treatment services are comprised of behavioral counseling combined with the appropriate use of pharmacotherapy treatment. Inherent in the protocols for tobacco treatment is the use of

the stages of change model to access all clients and provide the strategies to move them toward tobacco cessation and the maintenance stage.

The ACC provides tobacco treatment services to patients and other community members. These clients learn about the program from information that is distributed regularly through physicians who facilitate patient referrals and through education from COST events. The ACC collaborates with COST to educate and recruit clients into the treatment program.

b) Diabetes Health Fair

A comprehensive diabetes health fair was hosted by Carney and the new Caritas Diabetes Education Program at Carney in a visible location outside on the Carney campus. More than 150 residents availed themselves of services in the form of screenings, and educational materials from more than twenty pharmaceuticals, health care providers and community organizations. The program included a lecture by a Carney endocrinologist. Screenings at the fair included blood glucose, blood pressure, cholesterol, feet, eyes and bone density and pharmaceutical companies provided information about insulin, glucose meters, insulin pumps, and more. The first 50 participants were able to trade in an old glucose meter for a new one. Information about the event was translated into Vietnamese, Haitian Creole, Portuguese and Spanish. Several interpreters, including representatives from VACA, assisted attendees.

c) Flu Clinics

In the fall of 2000, the Carney ACC conducted free flu clinics targeting 33 sites and administered 4000 flu shots. Inoculations were provided to community residents and employees. Carney health professionals went to churches, assisted living facilities and housing developments to ensure accessibility to this much-needed service.

d) Health Screenings

Carney was the host site for free health screenings including four screenings on prostate, breast, colorectal and skin cancers and one on heart health. In addition, one heart health screening was held at the Woodrow Wilson School. More than 220 community residents attended and were presented with information regarding prevention and detection. In addition, this year COST members were invited to participate in the health promotions and screenings in order to maximize health education and screening opportunities.

e) Women of Color Breast Health Initiative (WCBHI)

The WCBHI began in 1995 as an educational, community outreach arm of the Carney Hospital Breast Cancer Support group, which started in 1992. The Initiative reaches the psychosocial, psychospiritual, and psychophysical needs of individuals, families and groups on issues of breast and cervical cancer. Participants include African-American, Hispanic and Asian women. Workshops and conferences are held at Carney and in area churches, senior residents and individual homes.

2. Community Benefits - Education

a) Boston Private Industry Council (PIC)

The PIC is a non-profit organization whose mission is to connect the youth and adults of Boston with jobs in the mainstream economy. The PIC strives to connect the classroom with work-site experiences, helping young people understand the correlation between what they study in school and how it relates to their future careers. Partnerships with Boston employers have helped Boston students achieve success in education and obtain skills necessary to be successful in school, work and life. Carney participates as follows:

- Carney hosted five students for the annual middle school Job Shadow Day sponsored by PIC and the Boston Public Schools. This program introduces students to a wide array of career opportunities available at a community teaching hospital.
- Jointly sponsored by PIC and the Boston Public Schools, the summer of work and learning program merges the worlds of work and learning. A five-week program, students making the transition to high school combine intense skill building in mathematics and reading with career exploration and project-based learning. Four students assigned to Carney work on job-readiness skills with human resources, Carney Medical Group doctors and fiscal services.
- In 1995, Carney Hospital and the Woodrow Wilson Middle School formed a business/school partnership with the assistance of PIC. The partnership is the Hospital's corporate volunteer program. Employees actively participate in partnership programs that serve the students, teachers and families at the School. This year partnership activities included hospital support to a sixth grade class involved in a Life Science Boston Public School grant entitled "Food and Nutrition". Carney provided professional nutritional support and assisted in a Health Fair at the School. The class also toured the Food and Nutrition Department at Carney. The students shared traditional family recipes with the Carney employees at lunch. The sixth grade class participated at Carney's Diabetes Health Fair by exhibiting poster boards representing the year's theme of healthy eating

b) Carney Community Employment and Training Center (CCETC)

CCETC offers vocational training in the areas of electronics, banking, and computers to refugees and immigrants primarily from Vietnam. CCETC also offers vocational English as a second language, mathematics, employment, counseling, and job readiness skills to students to minimize the difficulties in adjusting to the workplace. CCETC runs two fifteen-week training cycles per year.

c) Carney Hospital Workplace Skills and Education Program

Coordinated by the Human Resources Department and two teachers, this program, endorsed by the Council on Higher Education, provides resources for career development through English as a Second Language (ESL). The program, open to employees, their families and the community, also includes Graduate Equivalency Diploma (GED) preparation, job skills training and ESL education. The program provides students with the benefit of one-on-one tutoring and teaching. Graduates obtain, among other things, college admission, job promotions, and U.S. Citizenship. Over the past year, twenty-five employees and community residents used some or all of the educational services provided by this program.

d) The Wellness Community of Greater Boston

The mission of The Wellness Community of Greater Boston is to help people with cancer and their loved ones enhance health and well being by providing a professional program of support, education and hope. All programs are free of charge. Through participation in professionally led support groups, educational workshops and mind/body programs, people affected by cancer learn coping skills that enable them to regain control, reduce isolation and restore hope regardless of the stage of the disease. In 1999, Carney Hospital embarked on a partnership with The Wellness Community to provide cancer support groups to the Dorchester and Mattapan communities. These groups for family and friends of cancer patients are held at Carney twice a month. The Wellness Community also offers special educational workshops on cancer-related issues throughout the year that are held at Carney.

3. Community Benefits - Services

a) Interpreters Services

Patients at Carney speak more than eighteen different languages. To provide the most effective care for these patients, communication is critical. Thus, Carney Hospital provides interpreter services, on-site medical interpreters and volunteer bilingual staff, and when necessary uses the Language Line. Fifty-six bi-lingual staff interpreters work with patients and medical staff to translate throughout the patient visit. Interpreters also translate health promotion information and event advertisements.

In addition, Carney contracts with VACA for additional Vietnamese interpreter services to meet the growing needs of our patient population. VACA volunteers also serve as interpreters during health screenings and fairs. VACA was formed in 1984 to facilitate the resettlement and adjustment process of Vietnamese newcomers to the Greater Boston area. As the only community based organization in Boston with a Vietnamese board and staff, VACA offers critical services to the Vietnamese- Americans living in the local area.

b) MassHealth Expansion Assistance Activities

Since 1997, financial counselors at Carney, some of whom are bi-lingual, have been providing MassHealth Application assistance to low-income, uninsured, and under-insured patients and residents of the community. Each month, the Hospital's financial counselors prepare approximately thirty applications for review by an outreach worker from the Division of Medical Assistance (DMA) who screens each application for compliance with program eligibility criteria. Through the education of Carney staff by DMA's outreach worker we have increased our understanding of the programs offered by MassHealth which has led to increased enrollment.

In recent years, Carney has expanded its advocacy efforts by contracting with an outside vendor to work with patients with special needs. The hospital currently outsources applications for patients with mental health or substance abuse problems, adolescent psychiatry, and patients of any age who require placement in a long-term care facility. Applications are submitted directly to the DMA by a vendor well versed in government

regulations and experienced with the administrative appeals process necessitated by some denials.

Additionally, the Hospital's Social Work Department plays an active role in ensuring that patients and family members receive assistance with the MassHealth application process. Social workers routinely share family contact information with the financial counselors and provide assistance with the Disability Determination Supplements and Community MassHealth Applications. This collaborative effort has resulted in increased enrollment.

c) Women's Clinic for Health and Safety (WCHS)

The WCHS provides comprehensive counseling and medical services to women who are affected by abuse or violence. The WCHS provides community and legal referrals in addition to offering women refuge, treatment, support and safety planning. Mary Lou Ashur, M.D., a social worker and an administrative assistant manage the clinic. The social worker is funded through a grant from the Dorchester Community Roundtable. In addition, the Ladies of Charity of Carney Hospital contribute \$15,000 for program support. Dedicated survivors of domestic violence serve as volunteer mentors in the SAFE Mentors Program, which provides peer support for victims of abuse and domestic violence.

4. Community Services - Health Education and Screening

a) American Red Cross

Carney and the American Red Cross work together to organize blood drives at Carney which in turn help to sustain the blood supply for patients of Boston and other communities. Blood drives typically run for five hours and enables employees and community members to donate blood and give-the gift of life. Two blood drives were held this year for a total of seventy-two pints of donated blood.

b) Speaker's Bureau

More than 25 Carney Physicians and other health professionals participate in the Speaker's Bureau to share their knowledge and expertise on over fifty topics through lectures, workshops, and TV and radio programs. Through more than 25 engagements held this year at Carney and throughout Boston, 350 individuals were taught more about illness and health. Topics covered included asthma, colorectal health and cancer, death and dying, depression, diabetes: "Back to the Basics", domestic violence, newest treatments in arthritis and teen relationships.

In addition, the Caritas Christi HealthLink television program airs seven days a week on Boston Catholic Television (BCTV). BCTV reaches over 1.5 million households in Eastern Massachusetts. The program features 30-minute segments concerning current health issues and follows a question-and-answer format. Carney physicians Elizabeth Childs, M.D., Director of Psychiatry and Benjamin Kerman, M.D., Director of Emergency Services were featured on BCTV this year.

5. Community Service - Education

#### a) Cultural Diversity

The Cultural Diversity Committee, a sub-committee of the Hospital's Mission Committee made up of volunteer staff from all areas of the hospital, ensures that the Hospital is a sensitive and culturally competent environment in which quality care is delivered with utmost respect to our multi-cultural patients and staff. Carney is committed to:

- Fostering an environment in which all members of our diverse staff can freely contribute to their full potential and all behaviors motivated by prejudice or bias are eliminated.
- Using the richness of diversity within the hospital and its community to provide quality health care to our multi-cultural community.
- Enhancing and expanding the hospital's relationship with its external communities.
- Providing training in cultural awareness to all employees.

Cultural Diversity Awareness Training is now an integral component of the orientation program for new employees. Every new employee of Carney participates in this awareness training. To further expand staff's understanding and appreciation of the diverse cultures served by the hospital, cultural presentations and celebrations are offered throughout the year. Lunchtime presentations, offered to employees and the community, allow individuals to share with each other, the practices, beliefs, and holiday celebrations of their cultures.

#### b) Girl Scouts of America

The Girl Scouts of America in conjunction with other organizations sponsored an enrichment program entitled "Wider Opportunity - Healthy, Wealthy and Wise" in the Boston area. The goal of the program was to offer an enrichment event for young women around the world that would help them to identify career goals and develop leadership skills in the field of medicine. Five Girl Scouts visited Carney on July 26 and shadowed medical interns and residents, observed operating room procedures, and learned more about careers in medicine.

#### c) Mission and Spiritual Care

Under the supervision of the Director of Spiritual Care Services, the department offers several programs that assist patients, staff and community members.

- Lay Ministry Training Program: The chaplaincy staff of the Mission and Spiritual Care Services Department offers an annual training program to lay ministers in the vicinity. Seven lay ministers were trained this year. This program is designed to serve the faith communities in our area by providing training to enhance the quality of visitation to the sick offered by lay ministers.
- Ministerial Preparation: Under the supervision of the Director of Mission and Spiritual Care Services, Carney assists in the preparation of ministers from a variety of faith communities for ordination or for professional lay ministry. This summer

four men completed Internships in Chaplaincy, two will be ordained deacons in the Roman Catholic Church, and two will be ordained as Ministers in the Baptist and Presbyterian churches. Three of these men will be serving in the local area, and one will be returning to South Africa to work with children who have been orphaned by HIV/AIDS.

- Interfaith Memorial Service: Twice each year, the staff of Mission and Spiritual Care Services offers an interfaith memorial service at the hospital to minister to the bereaved in the Community. This time of prayer provides an opportunity for individuals who have experienced the death of a loved one to come together with others who have suffered a similar loss. A time of sharing and refreshments follows the service, allowing the bereaved time to speak personally with the chaplaincy staff, to recall their loved ones last days, and to seek support and healing in their journey through grief.

d) National Youth Leadership Forum on Medicine (NYLF)

The NYLF was founded in 1992 in response to high-achieving high school students interested in learning about potential career paths. Carney has been a host site for the NYLF for many years and this year hosted seven students. These students shadowed medical interns and residents, observed operating room procedures, and learned more about careers in medicine.

e) Women at Work Program

The Women at Work Program at St. Mary's Women and Infants Center creates a supportive and nurturing environment that fosters personal growth and empowerment for program participants. Women at Work is a job readiness program designed to transition women into jobs and careers. Participants are encouraged to invest in themselves and the program to reach the following goals: gain self-confidence and self-respect, learn and employ positive life and job readiness skills, provide support for family and seek to live a fulfilling and independent life.

Carney is an internship and job placement site for the Program and offers entry-level jobs with career advancement in the areas of culinary arts and hospitality and health and human services. The internship is generally four weeks in length and allows the participants to apply skills learned in the classroom. This year Carney assisted five women who chose opportunities to work in other area businesses following their internship.

6. Community Service – Services

a) Caritas DoctorFinder

Caritas DoctorFinder, operated by Caritas Christi, is a physician referral program for residents of Eastern Massachusetts and provides referrals to physicians at Carney Hospital. There is no cost to callers or to physicians affiliated with Caritas DoctorFinder. Referrals are made to physicians based on the needs and/or preferences indicated by the caller. This may include specialty, office location, insurance accepted, language requirements, gender, race, and other variables important to the individual

caller. Information about this free service is proactively distributed to new area residents.

b) Conference of Boston Teaching Hospitals (COBTH)

In the spirit of advocacy and collaboration, Carney values membership on COBTH's Community Benefits and Public Relations Committees. Although supportive and active in all COBTH activities, these two committees demonstrate Carney's commitment to advocating for our service area with respect to citywide health-related policy and initiatives. COBTH membership and support enables hospital CEOs and community benefit staff to share successes and discuss ways to meet the challenges of health care.

c) Dorchester Community Roundtable (Roundtable)

The Roundtable is a collaboration of community agencies, including law enforcement, judicial, hospitals, health centers and Northeastern University Law School, which provides services to individuals and families in Dorchester who have been impacted by domestic violence. For the past five years, the Roundtable has been funded through a grant from the Center for Disease Control. The grant provides a network of enhanced advocacy through the collaborating agencies that support victims of domestic violence. Carney has been an essential partner in the Roundtable and has received funding for a social worker in the WCHS.

d) Social Services

In keeping with the Hospital's mission, Social Work clinicians strive to maintain the dignity and confidentiality of our patients by providing services that are responsive to the needs of each individual and enhance the well being of the total person. Services provided are available to all and without regard to financial status. The Social Work Department provides the following support groups and health education programs to in-house patients as well as to the community.

- The Bereavement Group, a six-week session held three times per year, includes drop-in session, co-led by a social worker and the Director of Spiritual Care. In addition, bereavement workshops are held before and after the Christmas Holiday.
- At no charge, the social work department maintains funds to assist needy patients with assistance for prescriptions as well as transportation for medical appointments on an emergency basis. This is limited and not publicized but is available to patients at the discretion of the social work department.
- Transportation: In collaboration with the Mayor's Office, the department can assist cancer patients who reside in Boston with transportation to their cancer treatment appointments.

e) Volunteer Services

Carney's Volunteer Services Coordinator provides volunteer opportunities for the community (teens through seniors) to develop workplace skills, increase motivation and self-esteem and foster friendships while providing a benefit to the hospital and its patients. Volunteer programs include:

- Volunteers provide care, comfort and support to patients, families and staff that are essential to maintaining the "high-touch" of this community hospital. In the continually changing healthcare environment, volunteers provide added support for our patients, families and staff. In addition, volunteers provide office and clerical support, patient mail delivery and patient advocacy and clinical support on medical/surgical units and the Transitional Care Unit. This year, volunteers contributed over 12,000 hours to the hospital.
- The Retired Seniors Volunteer Program (RSVP) was funded by ACTION in 1972, and is now under the direction of the Federally funded Corporation for National and Community Service. RSVP seeks to address the difficulties, which accompany retirement and roll loss among older persons. The purpose of RSVP is to create meaningful opportunities for persons of retirement age to participate more fully in the life of their communities through volunteer service. To encourage seniors to volunteer, all RSVP volunteers are covered by an accident, personal liability and excess auto liability policies paid for by the Corporation. In 2000, RSVP volunteers provided 4000 hours of dedicated service at Carney.
- The Ladies of Charity of Carney Hospital is an unincorporated non-profit Catholic association established in the 1940's to support charitable enterprises for Carney. Over the past 60 years, the Ladies have donated more than one million dollars to Carney. These contributions have helped to fund such projects as the Carney Cares Van, the Women's Imaging Suite, the Stroke Unit, laser equipment for the Department of Surgery and renovations to the Department of Emergency Medicine. In addition, the ladies have supported the Carney Community Dinner and the Women's Clinic for Health and Safety. The Ladies manage a variety of fundraising activities with their 285 volunteer members from the community. The Gift Shop, located in the hospital lobby is managed entirely by a dedicated group of volunteers and serves as the main source of revenue for the organization as well as a resource for the hospital staff.
- Volunteer Eucharist Ministers bring the Sacrament of Holy Communion to Roman Catholic patients each evening. These lay ministers are representatives of their local parish community, and receive training in hospital visitation and ministry to the sick, as well as on-going support and mentoring from the professional staff of Spiritual Care Services. At present there are 36 lay ministers serving their faith communities.
- To recognize, encourage and support the volunteer work that our employees engage in outside of the Hospital, the *PayDay Press*, Carney's bi-weekly employee newspaper, features "Profiles in CARE". This provides an opportunity to inform other staff about the ways in which their co-workers exercise our Hospital's Core Values of CARE: Compassion, Advocacy, Respect and Excellence, in the local community. The articles include ideas on how other employees might support this agency.

### **C. Notable Challenges, Accomplishments and Outcomes**

Two major challenges were faced in the implementation of our Community Benefits Plan this year, as follows:

- Keeping pace with the fast-growing immigrant populations and their needs. For example, having health promotion materials available in all of the appropriate languages needed for our diverse populations.
- Limited available funding for distressed hospital relief. Carney received \$2.5 million of the needed \$6 million to cover a portion of the cost of free care provided by the hospital.

However, this past year Carney was able to achieve several goals set for its community benefits plan, as described below.

#### 1. Caritas Diabetes Education Program

Carney Hospital identified the need, based on local and national data, to address the high morbidity and mortality rates of patients diagnosed with diabetes. To complete Phase I Implementation of the Caritas Diabetes Education Program, staff attended necessary training to implement this program. Specific program objectives and data collection for certification with the American Diabetes Association is ongoing.

#### 2. Women's Health

Cancer continues to be a major health concern and the leading cause of death among women in the United States. Carney's commitment to cancer management is reflective in its Women's Health activities. The Women's Imaging Suite was expanded to provide more patients with mammograms and other diagnostic modalities. In addition, the Hospital purchased for the operating room a state-of-the-art gamma probe used for identifying cancerous lymph nodes in a minimally invasive procedure compared to surgical exploration. To provide more effective communication to non-English speaking patients, social services continues to work with physicians and staff to provide interpreter services throughout the detection and treatment process.

#### 3. Pediatric Services

In support of Carney's Pediatric Program in-house pediatric coverage was expanded and now covers 7:00 AM to midnight, with on-call coverage from midnight to 7:00 AM. The in-patient unit moved to a smaller and more attractive area where the high quality physical and emotional care given to Carney patients continues. Additionally, Pediatric Clinic hours were expanded to meet the needs of those families in our service area. The Pediatric Outpatient Clinic is staffed to include evening and weekend hours for sick and well-child physicals.

#### 4. Outpatient Surgical Service

Outpatient surgical services for eye surgery and pain management improved with the development of an outpatient surgical center. Access to this center is more convenient for the patient and allows for less invasive procedures to be done in a more patient-friendly and efficient manner. Expansion of services is planned as this service has been well received by patients.

#### 5. Emergency Medical Services (EMS) Advanced Life Support Ambulance Base Station

Carney staff continuously met with community organizations to communicate its vision of improved emergency response in life threatening situations. Carney subsequently

received community support and city approval of its plan as well as the necessary permits to begin construction. Construction of the EMS Base Station should be completed by spring 2002.

#### 6. Mental Health

In response to a large community need for local treatment for psychiatric services of adolescents, Carney received Department of Public Health and Department of Mental Health approval for the construction of an Adolescent Psychiatry Unit on campus. This unit, opened in May 2000, carries a full census and fills the need for the community's young people to receive local in-hospital psychiatric treatment. In August 2001, the commissioner of the Department of Mental Health toured the facility and stated that it was an excellent model for other hospitals.

## **VII. Next Reporting Year**

### **A. Approved Budget/Projected Expenditures**

This past year, the Development Department of Carney began soliciting private foundations, among others, to provide additional funding resources for community benefit programs. Also, in partnership with COST, a grant was received for additional men's health related initiatives, as described in Section B, below. Thus, the projected Community Benefits Program budget for Fiscal Year 2002, Attachment D, reflects grants from private foundations and the state. The total estimated budget for Community Benefits Programs only and not including the estimated contribution to the uncompensated care pool is \$1,039,467.

### **B. Anticipated Goals and Program Initiatives**

Anticipated goals and program initiatives for next year will directly relate to the Hospital's short-term community health strategies outlined in section V.C. These goals and initiatives will be achieved with the support of the Trustees, Hospital Administration, staff and community organizations.

#### 1. Anticipated Goals

##### a) Physician Initiatives

Carney's goals for next year continue to focus on access, education, and outreach. Carney will continue to expand physician practices to support the growing Vietnamese and Haitian populations. Sub-specialty physician practices will be developed and expanded to "fill gaps" and respond to the community's needs of having excellent care within the community.

##### b) Ambulatory Care Services

The future of health care requires a heavier balance on ambulatory care. Carney will keep pace with this changing environment through the development of plans for a state-of-the-art Ambulatory Care Center to enhance efficiencies while increasing customer satisfaction. To accomplish this Carney would expand outpatient services and incorporate a central registration and treatment area.

##### c) Pediatric Program

Expansion of pediatric services through the establishment of on site specialty clinics is planned along with the formalization of a link with New England Medical Center/Floating Hospital to provide increased physician coverage. Additionally, Carney will seek to strengthen its Tufts University School of Medicine affiliation through the recruitment of pediatric residents.

##### d) Emergency Services

The EMS Advanced Life Support Ambulance Base Station is expected to be in service by spring 2002. The cost of constructing this Station will be borne entirely by Carney, with the exception of an estimated \$13,000 in charitable contributions received, as a

community benefit to the City of Boston EMS. As such, the estimated construction cost is included in the Fiscal Year 2002 Budget.

## 2. Program Initiatives

In addition to continuing the programs as described in Section VI.B., the following new initiatives will be implemented.

### a) Health Education and Screenings

Thanks to a grant of \$7,500 from NSTAR, in addition to the screenings and lectures currently provided, Carney is able to collaborate with additional organizations to participate in four more free programs. 1.) With the American Heart Association and COST, Carney will present a community day to share important information about heart disease. The event called, "Nourish Your Souls" will include presentations, a panel discussion, glucose and blood pressure screenings and more. 2.) At Speaker Thomas M. Finneran's, Massachusetts House of Representatives, annual Spring Fling for more than 500 community seniors, Carney will provide glucose and blood pressure screenings as well as information regarding diabetes, cancer, and Medicaid. 3.) At the Colorado Street Fair held for 200-300 residents of Mattapan, Carney will provide glucose screenings and health information. 4.) At the HMSC's annual Health Fair, attended by 500 people, Carney will provide glucose screening and health information and will have Haitian interpreters available.

### b) Parish Based Nursing

Parish-Based Nursing is an outreach program designed to provide ways for parish leadership to help parishioners recognize and address health needs. Informally, Carney has been sponsoring flu clinics in parishes in response to parishioners needs. However, in the coming year Carney plans to work toward formalizing the concept of parish based nursing in one parish in the Dorchester area. Carney nursing staff and other health professionals will volunteer their time to provide screenings, education and support for parishioners.

### c) Men's Health Prostate Cancer and Cardiovascular Program

Carney and COST have been awarded a grant from the Department of Public Health Men's Health Partnership totaling \$117,000 for three years (February 1, 2002 through June 30, 2004). This grant is to provide education, outreach and case management related to prostate cancer and cardiovascular disease for uninsured or underinsured men. In addition, this grant makes available funds for the reimbursement of screening and follow-up for prostate cancer and cardiovascular disease for 50-300 men over the three-year period. COST will provide the personnel for the outreach and education while Carney will provide medical staff and the site for screenings and additional funding and staff for program management.

### d) Reach Out and Read (ROR)

ROR will provide a \$3,000 grant to Carney Pediatrics to purchase books and program materials. The goal of ROR is to ensure that all children under the age of six are given a book with the hope of encouraging families to read together. The process of ROR is two-fold 1) to have a volunteer read a book to the child before or after their scheduled well visit, and 2) at the same time have the pediatrician discuss with the parents or

guardian the importance of reading to their children. To support this program, students from the Woodrow Wilson Middle School will volunteer as readers for ROR.

e) Senior Suppers

As a service to the seniors in the community, at a minimal cost to guests Carney will host a dinner once per month beginning in May 2002. The dinner will also include a lecture/interactive seminar regarding health, finance and social issues affecting seniors. Each month a different department in the hospital will volunteer to manage the supper, set-up, clean up and provide social interaction with the group.

**C. Projected Outcomes**

We anticipate that this Community Benefits Plan will help us achieve the goal of improving the health and well being of individuals and families in our community. This Plan will be implemented with the support of the Hospital Administration, physicians and staff in cooperation with the community to ensure effectiveness. The outcomes are expected to be the achievements of the short-term objectives and the preliminary development of the long-term objectives identified in Section V.

## **VIII. Contact Information**

If you would like more information or additional copies of this report, please contact:

Ms. Marti Breau  
Volunteer and Community Services Coordinator  
Carney Hospital  
2100 Dorchester Avenue  
Dorchester, MA 02124  
617-296-4000, extension 2467  
fax: 617-298-4943  
e-mail: [mbreau@cchcs.org](mailto:mbreau@cchcs.org)