

Partners HealthCare System, Inc.
Newton-Wellesley Hospital Community Health Initiative Narrative

A. Community Health Initiative Monies

The breakdown of Community Health Initiative (“CHI”) monies for the Proposed Project at Newton-Wellesley Hospital (“NWH”) is as follows:

- Maximum Capital Expenditure: \$58,394,045.00
 - Community Health Initiative: \$2,919,702.25 (5% of Maximum Capital Expenditure)
 - CHI Administrative Fee to be retained by NWH: \$87,591.07 (3% of the CHI monies)
 - Overall CHI Money – less the Administrative Fee: \$2,832,111.18
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- CHI Funding for Statewide Initiative: \$708,027.80 (25% of CHI monies – less the administrative fee)
- CHI Local Funding: \$2,124,083.38 (75% of CHI monies – less the Administrative Fee and the Evaluation Monies)
- Evaluation Monies to be retained by NWH: \$212,408.34 (10% of the CHI Local Funding)
- CHI Local Funding to be disbursed: \$1,911,675.04 (CHI Local Funding – Evaluation Monies)

B. Overview and Discussion of CHNA/DoN Processes

The Community Health Initiative (“CHI”) processes and community engagement for the proposed Determination of Need (“DoN”) Project¹ will be conducted by community benefit staff at Newton-Wellesley Hospital (“NWH”). NWH is a 273-bed comprehensive medical center affiliated with Partners HealthCare System, Inc. In January 2018, NWH engaged Health Resources in Action (“HRIA”), a non-profit public health organization in Boston, to conduct its triennial community health needs assessment (“CHNA”). In addition to fulfilling the requirement by the IRS Section H/Form 990 mandate, the NWH CHNA process was undertaken to:

- Identify and provide an update on the health needs and assets of the NWH service area (Natick, Needham, Newton, Waltham, Wellesley, and Weston), including information on social determinants of health;
- Identify the NWH service area’s community needs for cancer prevention and screening; and
- Understand how outreach activities may be more effectively coordinated and delivered across the institution and in collaboration with community partners

The CHNA used a participatory, collaborative approach and examined health in its broadest context. As part of this assessment, NWH sought input and was provided oversight by its Community Benefits Committee (“CBC”) to inform the methodology, including recommendation of secondary data sources, and identification of key informants and focus group segments. The

¹ This Application requests approval for the following projects (collectively, the “Proposed Project”): (1) renovation to establish an observation unit; (2) renovation and expansion of endoscopy unit; (3) renovation to expand special care nursery; (4) renovation to inpatient adult psychiatric units; (5) acquisition of a cardiac computerized tomography (“CT”) unit; and (6) conservation projects.

assessment process included synthesizing existing data on social, economic, and health indicators from various sources, as well as, conducting eight interviews and six focus groups to explore perceptions of the community, health and social challenges for community members, and recommendations for how to address these concerns. In total, over 50 individuals were engaged in the 2018 assessment process. Consequently, the CHNA report provides key findings of the needs assessment process, which explored a range of health behaviors and outcomes; social and economic issues; including the social determinants of health; health care access and gaps; and strengths of existing resources and services.

C. Oversight of the CHI Process

NWH's CBC will continue to provide oversight on community benefits processes. However, the group will now formally be known as the Community Advisory Committee ("CAC"). This continued oversight will ensure that the CHI processes are guided by a diverse group of individuals aware of the health and social determinant of health issues facing the local communities.

D. Advisory Committee Duties

Given that this is a Tier 2 CHI, the scope of work that the CAC will carry out includes:

- Ensuring appropriate engagement with residents from targeted communities and community partners around the CHI.
- Determining the Health Priorities for CHI funding based upon the needs identified in the 2018 NWH CHNA/CHIP. The CAC will ensure that all Health Priorities are aligned with the Department of Public Health's Health Priorities and the Executive Office of Health and Human Services' Focus Areas.
- Providing oversight to the evaluator that is carrying out the evaluation of CHI-funded projects.
- Conducting a conflict of interest disclosure process to determine which members also will comprise the Allocation Committee (a Conflict of Interest Form has been developed).
- Reporting to the Department of Public Health on the DoN – CHI.

E. Allocation Committee Duties

The Allocation Committee is comprised of individuals from the CAC who do not have a conflict of interest in regard to funding. The scope of work that the Allocation Committee will carry out includes:

- Selecting Strategies for the noted Health Priorities.
- Completing and submitting the Health Priorities and Strategies Selection Form for approval by the Department of Public Health.
- Carrying out a formal request for proposal ("RFP") process (or an equivalent, transparent process) for the disbursement of CHI funds.
- Engaging resources that can support and assist applicants with their responses to the RFP.
- Disbursement of CHI funding.

- Providing oversight to a third-party vendor that is selected to carry out the evaluation of CHI-funded projects.

F. Timeline for CHI Activities

Upon a Notice of Determination of Need being issued by the Public Health Council, the CAC will commence meeting and begin the CHI Process. The timeline for CHI activities is as follows:

- Six weeks post-approval: The CAC will begin meeting and reviewing the 2018 CHNA/CHIP to commence the process of selecting Health Priorities.
- Three – four months post-approval: The CAC has determined Health Priorities for funding.
- Four – five months post-approval: The Allocation Committee is selecting strategies for the Health Priorities and will submit the Health Priorities and Strategies Form to the Department.
- Five – six months post-approval: The Allocation Committee is developing the RFP process and determining how this process will work in tandem with NWH's current grant efforts.
- Five – six months post-approval: NWH will commence working with the evaluator that will serve as a technical resource to grantees.
- Nine months post-approval: The RFP for funding is released.
- Ten months post-approval: Bidders conferences are held on the RFP.
- Twelve months post-approval: Responses are due for the RFP.
- Fifteen months post-approval: Funding decisions are made, and the disbursement of funds begins.
- Eighteen months to two years post-approval: Evaluator will begin evaluation work.

The aforementioned process is longer than the process outlined in the DoN Guidelines for Tier 2 projects. However, given the Applicant's and NWH's previous experience with RFP processes, staff feel strongly that it will take nine months to develop an RFP process that is transparent, fair and appropriate.

G. Request for Additional Years of Funding

NWH is seeking additional time to carry out the disbursement of funds for CHI. Based on NWH's 2018 CHNA, as well as previous experience with providing grant funding, NWH will offer larger, potentially multi-year grants with CHI funding. Consequently, NWH is seeking to disburse these monies over a 3-5-year period to ensure the greatest impact for the largest number of individuals.

H. Evaluation Overview

NWH is seeking to use 10% of local CHI funding (\$212,408.34) for evaluation efforts. These monies will allow NWH to engage a third-party evaluator to carry out technical assistance and ensure appropriate evaluation of the CHI-funded projects.

I. Administrative Monies

Applicants submitting a Tier 2 CHI are eligible for a three percent (3%) administrative fee. Accordingly, NWH is requesting \$87,591.07 in administrative funding. These monies are critical in developing a sound CHI process that complies with the Department of Public Health's expectations as administrative funding will be used to hire additional support staff, as currently Lauren Lele facilitates all engagement and community benefit activities with the CBC. These monies will also pay for reporting and dissemination of promising practices and lessons learned, facilitation support for the CAC and Allocation Committee, costs associated with the development of communication materials and placement of procurement information in community newspapers. Finally, these monies will help to offset the costs of the development and implementation of the RFP process.