



**FY 2009
REPORT TO THE ATTORNEY GENERAL**

**TUFTS MEDICAL CENTER
Community Health Improvement Programs
800 Washington Street, Box 116
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Summary: More than 200 years ago, the roots of Tufts Medical Center were planted by several compassionate Bostonians, including American patriots Samuel Adams, Paul Revere and Oliver Wendell Holmes. In 1796, these public-minded individuals founded the Boston Dispensary, a facility dedicated to the care of the poor. This charitable endeavor was at the forefront of numerous developments and improvements in the delivery of health care in early America.

- Between 1856–1899, the Dispensary established the first medical clinic, the first dental clinic and the first lung clinic in the United States.
- By 1918, the Dispensary had created the first evening pay clinic, a well-child clinic, a preventative health clinic and the first food clinic.
- In 1929, the Boston Dispensary entered into an arrangement with the Boston Floating Hospital for Children and Tufts College Medical School.
- In 1931 the Pratt Diagnostic Clinic (and later the Pratt Diagnostic Hospital) was established.
- By 1965 the three hospitals (Boston Dispensary, Floating Hospital for Children, and Pratt Diagnostic Hospital) were merged into a new institution – New England Medical Center Hospitals.
- In 1969 Tufts University’s medical school’s relationship with the organization was codified in an affiliation agreement whereby the newly named Tufts-New England Medical Center began its relationship as the principal clinical unit of Tufts University School of Medicine.
- In 2008 the organization would undergo one last name change in order to more clearly articulate the relationship between the University and the Medical Center. The hospital dropped New England and became Tufts Medical Center.

Each and every day, the employees and physicians of Tufts Medical Center know that their work is building on an impressive history of innovation, selflessness and courage by providing care in adult and pediatric specialties including Cancer, Cardiovascular, Medicine, Neurosciences, Obstetrics, Pediatrics, Psychiatry, Surgery, Transplantation and

Trauma. This dedication helps the Medical Center in achieving its goal as one of the best tertiary and quaternary referral resources for community physicians.

The Medical Center's mission statement reflects its history and continuing commitment to meeting the needs of all its patients:

We strive to heal, to comfort, to teach, to learn, and to seek the knowledge to promote health and to prevent disease. Our patients and their families are at the center of everything we do. We dedicate ourselves to furthering our rich tradition of health care innovation, leadership, charity, and the highest standard of care and service to all in our community.

Approval of governing body: Tufts Medical Center's Board of Governors established a standing committee, its Community Outreach Committee, to provide governance for the community benefits planning process. This committee is comprised of Tufts Medical Center Governors, many of whom are community leaders. The Committee is charged with the responsibility of fulfilling the Medical Center's Community Health Mission:

To define the role and responsibility of Tufts Medical Center in supporting and sustaining the health and well-being of residents in communities that have historic or developing relationships with Tufts Medical Center, and

To provide leadership for academic medical centers in the creation of a model that implements a long term community health agenda.

Internal Oversight and Management of Community Benefits Program

The Senior Vice President for Strategic Services has oversight responsibilities for the community benefits program and along with the Director of Community Health Improvement Programs reports to the Medical Center's Chief Executive Officer, the Board of Trustees, and the Board Governors' Community Outreach Committee to ensure

that the development and implementation of all community benefits programming engages and is shared with the Medical Center's senior leadership.

The office for Community Health Improvement Programs was established in 1992 by the Board of Governors to meet the emerging health needs of an ever increasing and diverse patient population and to develop, implement and coordinate strategies to address public health concerns and disease prevention within the Medical Center's service communities. Its Director reports to the Senior Vice President for Strategic Services, and they, as the senior management and leadership team, establish relationships and collaborations within the Medical Center and with the respective communities and collegial organizations to maintain or improve the health of community members and patients, especially from the communities that the Medical Center has had long standing relationships with or who are unable to effectively access healthcare due to cultural, linguistic, economic, or health reasons.

Community Health Needs Assessments

Tufts Medical Center conducts regular community health needs assessments to develop appropriate priorities for its community benefits programming. The needs assessments include review of public health data available from the Massachusetts Department of Public Health (DPH) and from the Boston Public Health Commission (BPHC) and its regular reports on the health of the city and the health of individual neighborhoods. These data are reviewed with community members, service providers, and other key informants who serve on Advisory Committees that guide specific community benefits efforts such as the Asian Health Initiative and Dorchester Health Initiative. The combination of statistical data and data from key informants help to identify priorities that reflect real needs as well as community members' assessments and perceptions of issues and needs which guide the targeting of resources and programming.

As both the Asian and Dorchester Health Initiatives approach the third and final year of their respective funding cycles in 2010, a more formalized data review began in the

summer of 2009 to the lay the foundation for establishing priorities for the new grant-making cycles.

A review of maternal and infant health data suggested that there were populations within the community who were more vulnerable to problems associated with general health, access to medical care and the physical and social environments that contributed to higher risks for low-birth weights and infant mortality.

For FY 2010, the Medical Center has transitioned its Parent-to-Parent (P2P) Initiative to a competitive grant-making process and identified two new providers for the upcoming program year, one of which focuses on the needs of pregnant women who are homeless. This grant-making process, completed during the latter half of FY2009, enabled established P2P providers to integrate efforts within their sites to provide for more comprehensive and integrated approaches to meeting the needs of expectant mothers.

Tufts Medical Center is an active member in a number of collaborative efforts where the exchange of information helps to complement data obtained through the other identified sources. Among the major community collaborations that contribute to the community health needs assessments are The Chinatown Coalition (a Healthy Boston Initiative coalition), Chinatown Safety Committee, the Boston Alliance for Community Health (Community Health Network Areas 19), and the Boston Health Equity Committee, a committee convened by the Boston Public Health Commission on behalf of the Mayor of Boston.

Community Participation

Tufts Medical Center values community participation in evaluating its services, in the development of programming to ensure that the Medical Center fulfills its mission of providing quality, patient-focused care, and supporting the good health of community members in Chinatown, Dorchester and South Boston, the three communities where there

have been long-standing relationships, and the Asian community, the Medical Center's largest non-English speaking patient population.

Community members, including the Board of Governors' Community Outreach Committee that oversees the Medical Center's community benefits programming, lend their insights, knowledge and advocacy to support the Medical Center's mission and commitment to community collaborations to address community health needs.

Advisory Committees have been established and are actively engaged in setting the priorities for funding and evaluation of both the Asian Health and Dorchester Health Initiatives. Community residents and representatives from community-based organizations, and advocates represent 70% of the membership of the Asian Health Initiative's Advisory Committee and 64% of the Dorchester Health Initiative's Advisory Committee. The remainder of committee members consists of Medical Center staff, a representative from the Board of Governors, and government officials, including a representative from the Boston Public Health Commission.

The Medical Center also takes a proactive approach and participates in numerous community collaborations with community-based organizations and providers. Its participation and leadership within these groups helps to continually inform the community benefits plan by complementing the data collected by the BPHC, the DPH and many other agencies.

As mentioned in the Community Health Needs Assessment section, the Medical Center participates in numerous community collaborations that reflect broad membership, including community-based human service providers or businesses, community members, law enforcement and other government representatives.

Neighborhood Profiles and Health Issues

The brief neighborhood profiles will illustrate key demographics and health issues that have guided Medical Center's funding and outreach program activities:

Neighborhood profile: Chinatown

Boston's Chinatown is the smallest of the City's neighborhoods and is located in Downtown Boston near major transportation nodes for north-south and east-west automotive travel (I-93 and I-90), train and bus travel (MBTA Orange and Silver Lines), and the City's downtown retail, financial and theater districts. Its 42 acres include a robust residential, economic and service hub for Greater Boston's Chinese and Asian community. The 2000 U.S. Census indicates that over 9,100 people live in Chinatown, making it one of the most densely populated neighborhoods in the City of Boston. It is a community where many new immigrants settle and where approximately 35% of the residents describe themselves as speaking English "not well" or "not at all", approximately one-fifth of the population is over the age of 65, and one-fifth is disproportionately low-income.

Health data for Chinatown is often integrated with data from the adjoining neighborhoods making it difficult to identify health trends, let alone bring to the surface health disparities specific to its residents. The BPHC has consistently provided citywide health data for Asians in Boston to provide a holistic view of their needs, though data may be limited by not surveying non-English speaking residents. The most recent report illustrates that health issues such as cancer, heart disease and stroke, are particular concerns.

All of this data, along with input from advisory committee members, identified the priorities for the Medical Center's Asian Health Initiative in 2007 and guided the emphases and funding for the three-year initiative: chronic disease management, family health, mental health, and violence prevention. This data, and data from the recent

review of BPHC data, is being made available to a Chinatown community planning process and will be incorporated into a new section on Environmental Health in the 2010 Chinatown Master Plan.

Neighborhood profile: Dorchester

North and South Dorchester are among the largest neighborhoods in Boston and reflect the city's economic, linguistic and cultural diversity. Together they have a population of over 128,000 residents, or approximately 20% of the city's population. Census data indicates that 30% of the population is under the age of 17, and 32% were between the ages of 25 and 44.

Health data from the BPHC in 2007 indicated that it had the highest birth and infant mortality rates in the City, a high incidence of violence related injuries, the second highest homicide rate among Boston neighborhoods, a high asthma hospitalization rate among children under the age of 5, and 50% of the adult population considered as obese or overweight. These health issues were identified as high priorities for the Medical Center's Dorchester Health Initiative in 2007 and its three-year funding cycle: obesity and diabetes prevention, violence prevention, and infant mortality.

Four of the Dorchester Health Initiative grantees have reported an increase in mental health issues for youth and young adults that they attribute to the continued violence in the community: trauma from experiencing and/or witnessing violent acts, the loss of friends and family members, and stress from constant threats of violence.

Neighborhood profile: South Boston

South Boston is a community of approximately 30,000 residents and is a neighborhood in transition. Historically considered a family, working-class community, with a significant number of public housing developments, there has been a flurry of new construction and conversions of multi-family housing to condominiums priced beyond the means of many long-time residents.

Health data from the 2006 BPHC report on the “Health of South Boston” and the “The Health of Boston 2007” identified high rates of alcohol and drug abuse and the highest mortality rate associated with substance abuse. The incidence of low-birth rates was 8.5%. South Boston’s health education and public health issues are addressed through multiple programs established by Tufts Medical Center including substance abuse, specifically opioid dependence treatment and mental health programs that are based in the community.

Boston’s diverse Asian and linguistic minority communities continues to grow and are dispersed throughout the city’s many neighborhoods. To ensure that the Medical Center continues to meet the healthcare needs of the growing populations, hospital-based programs such as Interpreter Services, Asian Access Initiative, Asian Clinical Services and Josiah Quincy School Psychiatry Consultation Program were established.

The Community Benefits Plan

Tufts Medical Center’s Community Benefits Plan focuses on three broad areas:

- Identifying opportunities for public health related collaborations within the communities we serve
- Increasing the Medical Center’s capacity to be user friendly to all patients and visitors
- Creating partnerships with community health centers for capacity building

Tufts Medical Center has established relationships with a wide range of community-based organizations that serve diverse constituents in order to identify opportunities to not only partner, develop, and implement programming that address the health issues, but to do so in a collaborative way, and in a manner that builds capacity within the community organizations to help meet the health needs of the community.

The Medical Center has developed three direct grant initiatives that support public health efforts. All of the services are implemented by human service agencies and community health centers and advance our goals of sustaining or improving the health of the communities we serve. Whenever appropriate, direct links are established between the programs funded by the initiatives and the Medical Center's clinical work.

The three grant-funded initiatives are the Parent-to-Parent Program, Asian Health Initiative and Dorchester Health Initiative.

To increase access to all hospital services to newcomer communities the Medical Center continues a long-standing commitment to increase cultural competency among our medical providers and to remove language barriers wherever possible. Our working definition of cultural competency is:

The ability to understand and respect the differences among people, and use our understanding to influence our interactions with one another. This involves developing the capability to deliver patient-centered services consistent with the needs and expectations of various cultures.

To help achieve this goal of being user friendly and culturally and linguistically accessible, the Medical Center has reviewed staff recruitment efforts to reach out to potential new staff and clinicians who reflect the linguistic and cultural backgrounds of patients. In addition a set of educational programs has been developed and is offered by the Human Resources Department for new staff and clinicians to introduce them to the cultures of the patients we serve. Training is available to all employees (which includes board members, physicians, volunteers, and others – including contractors and vendors who have direct patient contact) on cultural differences, with special training provided to residents and other clinical staff.

The Medical Center's commitment to being linguistically and culturally competent continues to be demonstrated through the Interpreter Services Department which can

assist patients in 37 languages. Not only is there an in-house staff, there is a corps of on-call interpreters and links to 24 hour translational services via a telephone interpreting company.

Established Medical Center programs such as the Asian Access Program, Asian Psychiatry and Asian Clinical Services have bilingual and biliterate staff who provide linguistically accessible and culturally appropriate health care to members of the Chinatown and Boston Asian community.

Another on-going priority for the Medical Center is building the capacity of community health centers to serve their patients, and more effectively improve the overall health status of their patient populations. Tufts Medical Center continues to support and work with three health centers, South Boston Community Health Center, Manet Community Health Center, and Neponset Health Center, as well as provide programmatic funding to several more. The programming that has been developed through the partnerships include increasing access to primary care and preventative medicine and increasing access to prenatal care and reducing infant mortality for the increasingly diverse patient populations served by the health centers.

Major Community Benefits Programs

Three direct grant initiatives support community-based programs that address a wide range of health concerns and racial and ethnic disparities: Parent-to-Parent Program, Asian Health Initiative and Dorchester Health Initiative.

The Parent-to-Parent (P2P) program began as a workforce development initiative in 1992 to address the high infant mortality rate and high incidence of low-birth rates in the neighborhood of Dorchester. The program has evolved over 17 years to a competitive grant-funded program that supports outreach workers in 8 community sites to work within their neighborhoods, or special populations, to engage expectant mothers in early pre-natal care and other services to ensure a healthy pregnancy and healthy baby.

Outreach workers also provide case management to help patients with the coordination of appointments, accessing workshops on nutrition, early childhood development, safety training, transportation, housing, financial assistance, medical insurance, child care, employment, education and/or job training. Six of the 8 sites are located in Dorchester where the data shows that the infant mortality and low-birth rates continue to be higher than the city-wide average.

The current year's P2P program sites are: Boston Asian: Youth Essential Service, Codman Square Health Center, Dorchester House Multi-Service Center, Geiger Gibson Community Health Center, Harvard Street Neighborhood Health Center, Neponset Health Center, and Uphams Corner Health Center.

Towards the end of FY2009 the Medical Center transitioned the P2P to a grant-funded initiative and identified two new providers for Fiscal Year 2010, the Boston Home Care for the Homeless and La Alianza Hispana. The providers will focus on a new target population, homeless women, and an increased focus on Latinas.

The Asian Health Initiative (AHI) is the oldest of the Medical Center's grant-giving initiatives and has been designed to provide multi-year funding to community-based organizations which introduce direct services or health education activities to improve the health of their constituents. The AHI seeks to address health disparities in the Chinatown and Boston Asian community as a result of barriers such as language, culture, lack of insurance and low incomes.

In FY 2009, AHI was completing year two of a three-year funding and programming cycle. The array of services funded ranged from regularly scheduled health columns in the region's only bilingual Chinese-English newspaper, youth development and violence prevention, family support services, and chronic disease management for seniors.

FY 2009 grantees were: Asian American Civic Association/Sampan, Asian Spectrum, Asian Task Force Against Domestic Violence, Boston Asian: Youth Essential Service,

Boston Chinatown Neighborhood Center, Greater Boston Chinese Golden Age Center, and the Wang YMCA. A major accomplishment was achieved by Asian Spectrum, which produces Chinese language programming for Malden and Boston local cable access channels. Asian Spectrum completed a special broadcast series on the mental health needs of Chinese seniors and their caretakers. The broadcasts were then compiled in a DVD which has been widely disseminated to area mental health providers to help them understand community members' concerns, stigmas and misunderstandings about mental health issues and treatment.

The Dorchester Health Initiative (DHI) completed year two of a three-year funding and programming cycle. Four of the five grantees focus on youth development and violence prevention: Bird Street Community Center, Neponset Health Center, Project R.I.G.H.T. and the Vietnamese American Civic Association. These grantees have designed different approaches to reduce the violence by providing opportunities for alternative, positive activities to build skills and resiliency to avoid being drawn into risky behaviors including violent actions, or build the skills, knowledge, and opportunities to help formulate solutions to the problems that promulgate violence. The approaches include civic engagement, mentoring programs, sports leagues, life skills development and part-time/summer employment programs. Together these four grantees have provided insights into the effects of violence on neighborhood youth and the emerging need for mental health services. The grantees have also provided important information about the impact of the current economy on family stability and the new challenges and difficulties for older youth.

The fifth DHI grantee, Kit Clark Senior Services (KKSS) introduced the Fit-4-Life program to help seniors living in the sub-neighborhood of Fields Corner to reduce the incidence of obesity and its consequences. KKSS's partner in the Fit-4-Life program is Tufts University's Human Nutrition and Research Center on Aging which offers a unique opportunity to conduct research into the benefits of exercise and nutritional counseling while addressing the physical and social health of seniors living in the neighborhood.

Health center support is another major commitment to providing community benefits programming for the Medical Center's service area communities. Financial support to community health centers such as South Boston Community Health Center, Manet Community Health Center and Neponset Health Center helps to build their respective capacities to address specific community health needs.

South Boston Community Health Center continues to direct its support to two critical health issues, (1) expanding a Pediatric Asthma Registry as part of the health center's efforts to reduce the rate of pediatric asthma hospitalizations and the impact that has on the community, and (2) reducing the level of substance abuse among the community's youth.

Manet Community Health Center located in the City of Quincy, receives support from Tufts Medical Center in part because of the significant growth of that City's Asian community and overall increase in the diversity its patient population. Between the 1990 and 2000 U.S. Census, Quincy experienced more than a 300% increase in its Asian population, which has continued to grow for many reasons, including the proximity to Downtown Boston, job opportunities, easy access to public transportation and the availability and affordability of multi-family housing.

Manet has directed its support to four areas of programming designed to improve access to care for its patient population which is increasingly more diverse linguistically, ethnically, and culturally. The four areas, disease awareness and prevention, immunization and vaccinations, and general health education and promotion, are efforts designed to promote a better understanding and use of the American preventative health care model.

Neponset Health Center has dedicated the Medical Center's financial support to augment resources and capacity to reduce the incidence of low-birth weights and infant mortality in its sub-neighborhood of Dorchester. Neponset integrates the OB/GYN efforts with its Parent-to-Parent program to create wrap-around services to help pregnant women obtain

the pre-natal care and support services they need to ensure a healthy pregnancy and healthy baby and good post-partum care.

Clinical departments within the Medical Center are constantly monitoring their patients to determine ways to contribute to health maintenance, disease prevention, early diagnosis, and/or chronic disease management. Many of the Medical Center's departments have developed and initiated specific health screenings related to the area of their concern and expertise and work with community groups or with Community Health Improvement Programs staff to support each other's efforts and commitment to the Medical Center's mission. Some health screenings have reflected the needs of specific patient groups, either by age or the prevalence of a particular disease.

Among the clinical services departments addressing specific health issues for populations and communities of special interest were:

- General Medicine's Patient Home Care Program for Chinese Elderly, providing homebound patients with physician house calls
- General Pediatrics, which has implemented a wide array of programs to serve specific target populations with special needs such as Asthma Prevention and Management (for students attending the Josiah Quincy Elementary School in Boston's Chinatown), Asian Clinical Services, Children with Disabilities, Adolescent Obesity, Substance Abuse Treatment
- Nephrology – Kidney Early Evaluation Programs and Education and Screenings for multiple communities known to have high incidences of high blood pressure and related chronic diseases
- Obstetrics and Gynecology's two programs, Women's Health and Asian Access, enhance the collaboration between the Medical Center and area health centers to reach women at-risk deferring pre-natal care
- Otolaryngology's Early Detection of Nasopharyngeal Cancer for the Chinese community and Oral, Head and Neck Cancer Detection for multiple communities in direct response to the high incidence of these cancers in the community

- Psychiatry, providing School Consultations, clinical services for the South Boston Behavioral Health Clinic, and Asian Psychiatry Program
- Social Work Services' Asian Access Program, helping patients to navigate their health care and the resources available to support their access to health care

A community benefit which reflects the Medical Center's on-going efforts to provide culturally sensitive and linguistically accessible medical care is the commitment to a strong Interpreter Services program, and its ability to provide limited English proficient patients with assistance in 37 languages. In FY 2009 Interpreter Services received requests from 11,000 patients for 57,000 medical interpreting encounters.

Research: Tufts Medical Center is a well-established and well-regarded academic medical institution engaged in many medical research projects. One newly funded project led by the Tufts Clinical and Translational Science Institute (CTSI) will help build the capacity of community-based, non-health care providers to undertake research to identify the needs of their constituents and document the benefits of initiatives to address those needs. This capacity building effort will support and complement the on-going efforts to work with healthcare organizations, community and industry groups to “turn groundbreaking laboratory research into widely-used treatments for patients in a faster, more productive manner.” This community engagement effort continues to foster collaborations between the general lay community, community-based organizations, the clinical practice community and the academic community to train pediatricians for work in under-served communities.

The Medical Center's Cancer Center continues its efforts to increase the representation of linguistic and ethnic minorities in clinical trials. To that end, the Center has been attempting to translate information from surveys into outreach and educational efforts to foster a greater awareness about clinical trials, their availability and the benefits of participating in clinical trials.

Community Services

Tufts Medical Center encourages and supports a wide array of community service activities. These include participation in, or financial support of outreach events/health fairs, workforce development efforts and corporate sponsorships which also reflect support for community and capacity building. Medical and non-medical personnel volunteer time and departmental resources to these endeavors, especially the health fairs and community health screenings that encourage prevention, early diagnosis and treatment of a wide range of illnesses to prevent the on-set, advancement of, or consequences of specific health risks.

Medical Center personnel also engage in community service activities that help to maintain the health of its service communities, with health being defined in the broad context to include the physical, economic, cultural and social health of the community, and lend their efforts to community-building and coalition building to sustain the assets of the community and to address the challenges to the community's overall health and the health of community members. Examples of this commitment include the Medical Center's participation in The Chinatown Coalition which is part of the Healthy Boston and Healthy Communities Initiatives, and the advisory roles and contributions of many physicians and nurses in advancing the knowledge, skills of patients, patient caretakers, teachers, counselors and other helping professionals. In FY2009 over 3,300 hours of volunteer activities were reported by Medical Center personnel.

Community service programs and staff volunteerism included the following:

- Kiwanis Outreach Programs which work with families and communities to promote safety for over 4,000 children and their families.
- Tufts Medical Center's community parking program that provides neighborhood service organizations, businesses and faith based institutions access to parking at no costs on a regular basis

- Health screenings at both Medical Center sponsored and hosted events as well as health screenings conducted in collaboration with community organizations and community events such as the City of Quincy's Asian New Year Celebration, Dorchester Day, Chinatown August Moon Festival, Oak Street Fair, Kidney Awareness Day, and the AIDS Walk
- Tufts Medical Center Health Expo
- Boston Shines, the City of Boston's annual event to bring community stakeholders together for neighborhood clean-up and community-building

The Medical Center's community parking program provides hundreds of free parking spaces for one of the City's smallest neighborhoods on an on-going basis. The available parking encourages shoppers, restaurant patrons, worshippers and family visitors to maintain their cultural, social and spiritual connections while contributing to the economic vitality of Boston's Chinatown.

The commitment to the economic health of the community includes encouraging neighborhood residents to consider employment opportunities at the Medical Center, internships for adult trainees from 12 workforce development programs, a summer jobs program for Boston high school students, and a workplace education program to enhance the academic, job retention skills of Medical Center staff in entry-level positions and encourage advancement and career ladder opportunities.

Attachment A: Board of Governors' Committee on Community Outreach

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Attachment B: Asian Health Initiative Advisory Committee

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Attachment C: Dorchester Health Initiative Advisory Committee

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