

BPHC Office of Health Equity Update

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EQUITY ADVISORY COMMITTEE

BOSTON BOARD OF HEALTH

7/18/2018



Moving Equity Forward Together

Boston Public Health Commission

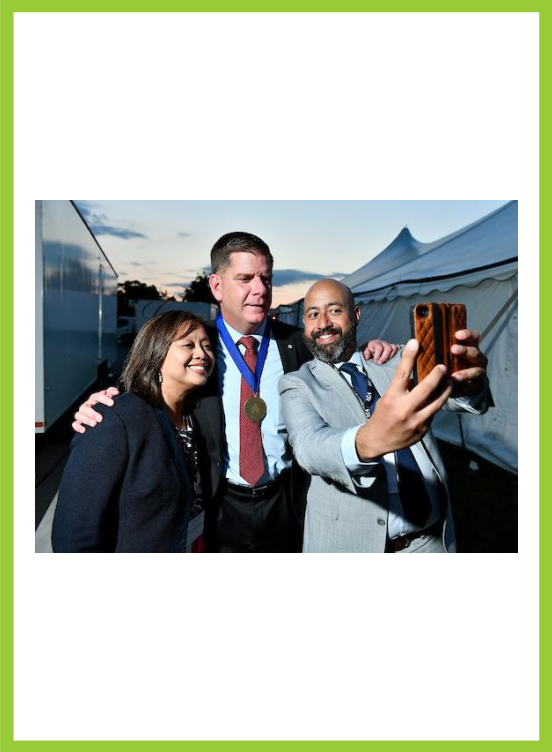
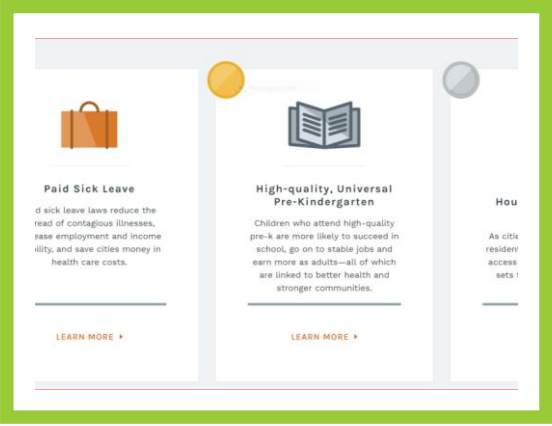
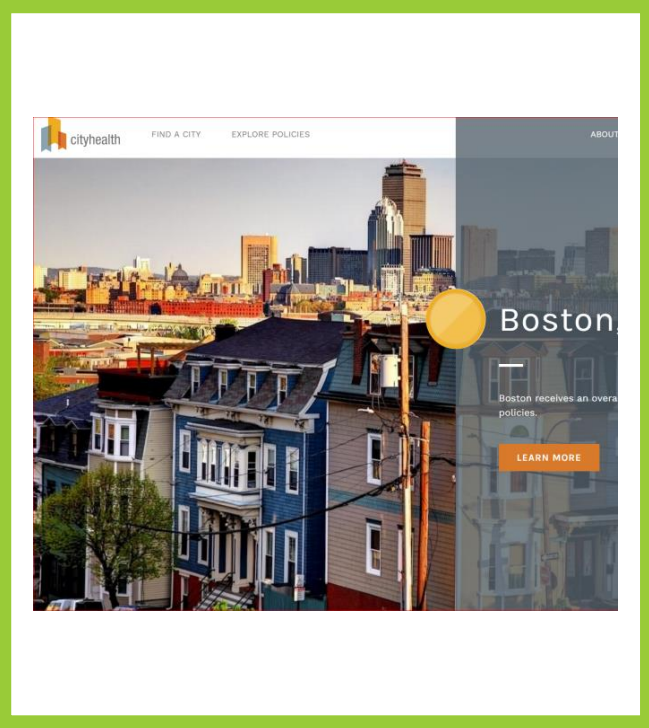
- **MISSION**

To protect, preserve, and promote the health and well-being of Boston residents, **particularly the most vulnerable.**

- **VISION**

A thriving Boston where all residents live healthy, fulfilling lives free of racism, poverty, violence, and other systems of oppression. All residents will have equitable opportunities and resources, leading to optimal health and well-being.





CityHealth Gold Medalist

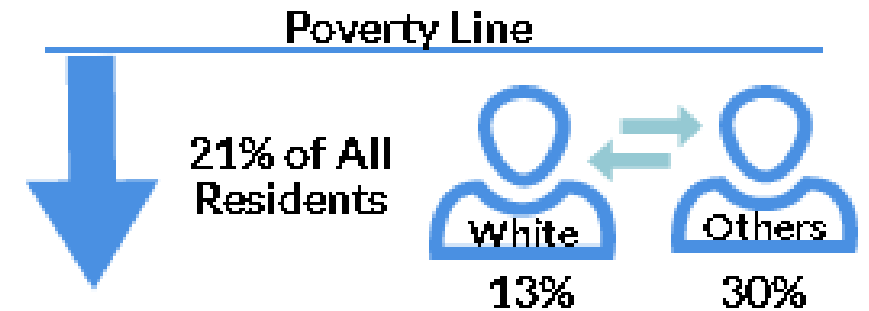
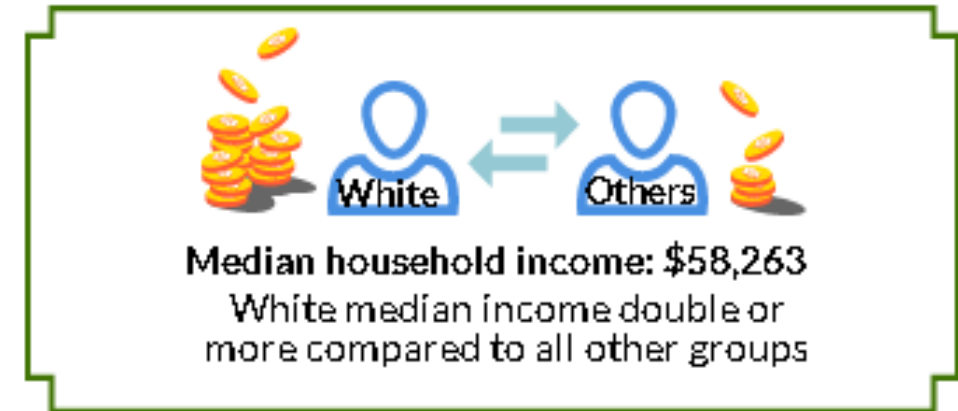
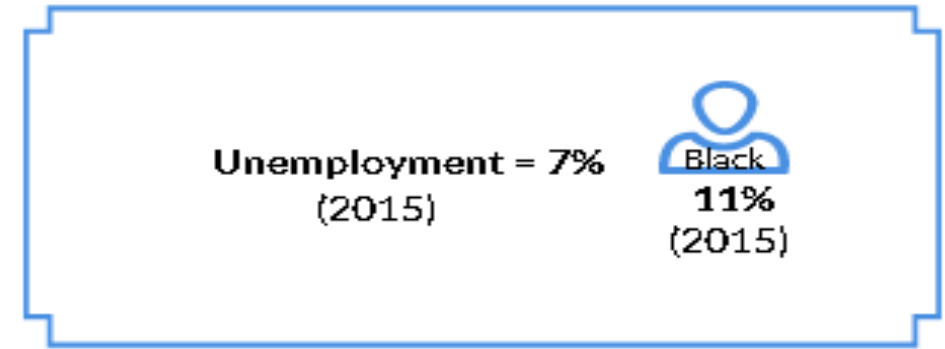
But Also Tops Other Lists

#1 in income inequality (*and the gap is growing!*)

#3 in highest average rent

#9 on the list of most segregated cities

#10 on the list of poorest cities



Health Equity Strategic Plan (2017-2018)

Goals	Implemented Strategies
1 Expand the understanding and dialogue of what creates health and what creates inequities	<ul style="list-style-type: none"> • Communications webinar (NACCHO) • 3 Health Equity Videos highlighting great equity work of BPHC staff • Health Equity in All Policies task force launched • Health Equity Advisory Committee created • Community Health Improvement Plan (CHIP) Council created
2 Support comprehensive place-based strategies to improve health	<ul style="list-style-type: none"> • Launched 5 community meetings in 2017 on affordable housing (expanded nontraditional partnerships); • Launched first 2018 community meeting focused on mental health among youth. • Developed stakeholder database to increase equity in BPHC's engagement and partnerships (on intranet) • Members of multiple hospital Community Advisory Boards for CB and DoN investments • 3 brown bags to introduce staff to equitable approaches to community engagement
3 Strengthen workforce development opportunities for all staff to integrate equity into practice	<ul style="list-style-type: none"> • Budget questions, RJHE assessment toolkit, Hiring, Promotion, and Retention work group – examples of ways we are applying equity lens in decision-making and development of policies and programs across BPHC. • Offer quarterly Listening Circles facilitated by EAP across campuses; Workforce Resiliency Plan – examples of supporting emotional and overall staff wellbeing through racial justice and trauma informed approaches. • Hosted Office of Health Equity re-launch with over 50 staff participating.



Moving Equity Forward Together

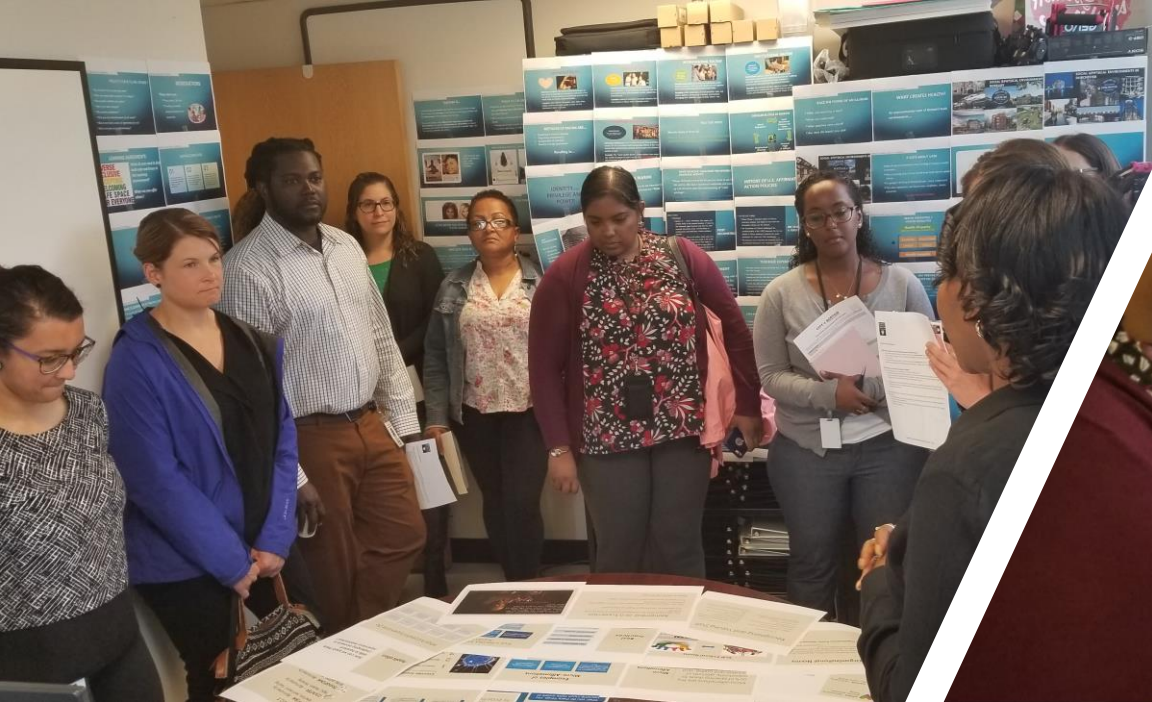
KINDLY JOIN
THE
*Office of
Health Equity*
RE-LAUNCH

WEDNESDAY, JUNE 6TH | 9AM-11AM

1010 MASS AVE
Kitchen Across from IT 6th FL



Please RSVP | By May 31st | healthequity@bphc.org



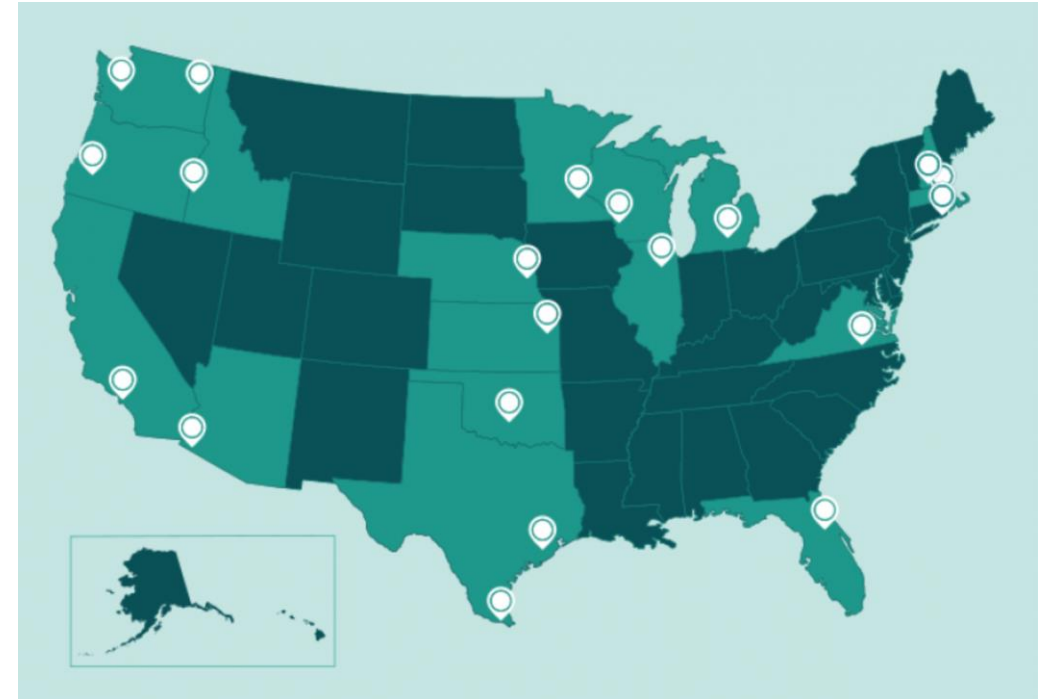


ELPH:

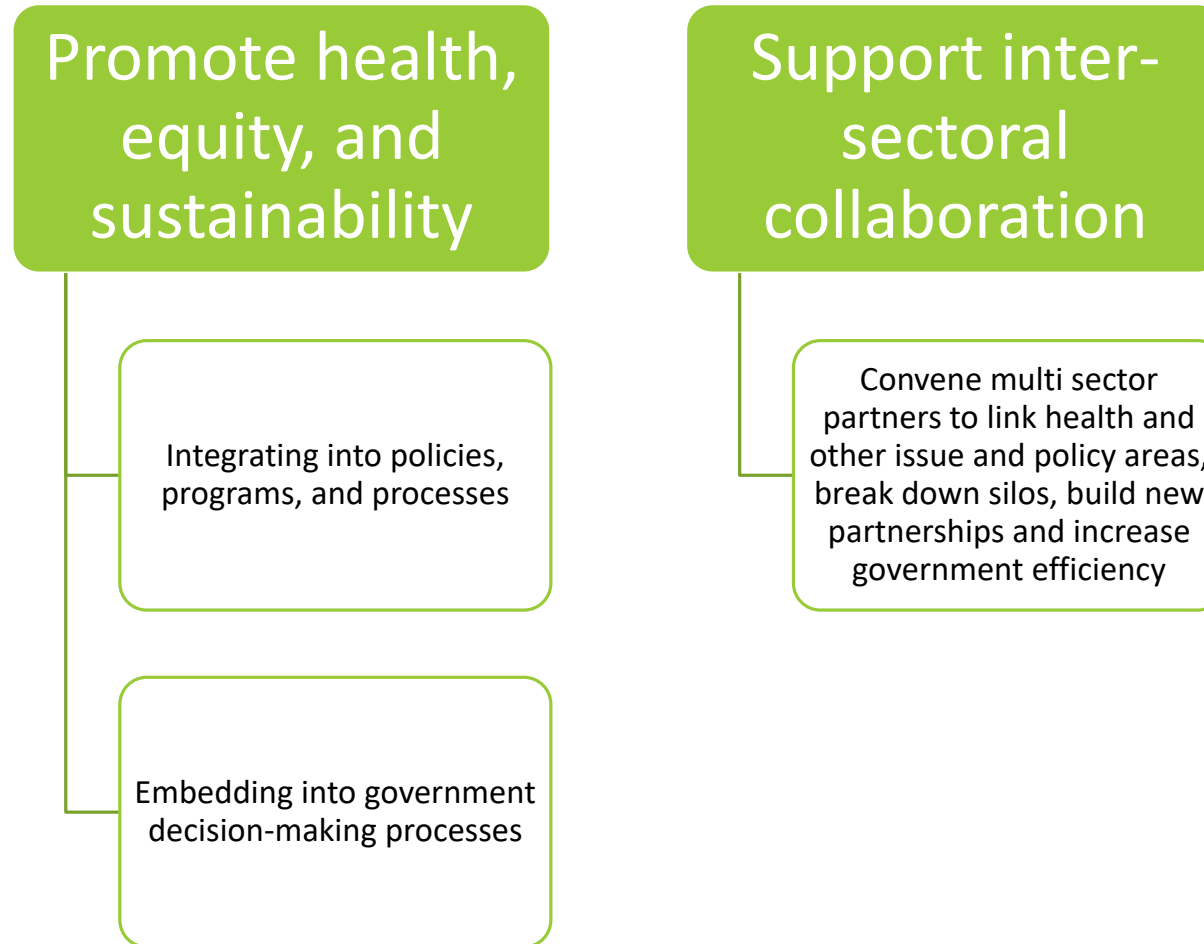
- Develop the leadership skills of a local public health director and a colleague
- Undertake transformational change within a local health department

BPHC:

- Reorganize activities to more effectively address SDoH.
- Engage other City Departments.
- Implement BPHC Community Engagement Strategy.
- Share health and SDoH data to support advocacy and equitable decision making.
- Update communication standards and practices



Key Elements of Health in All Policies

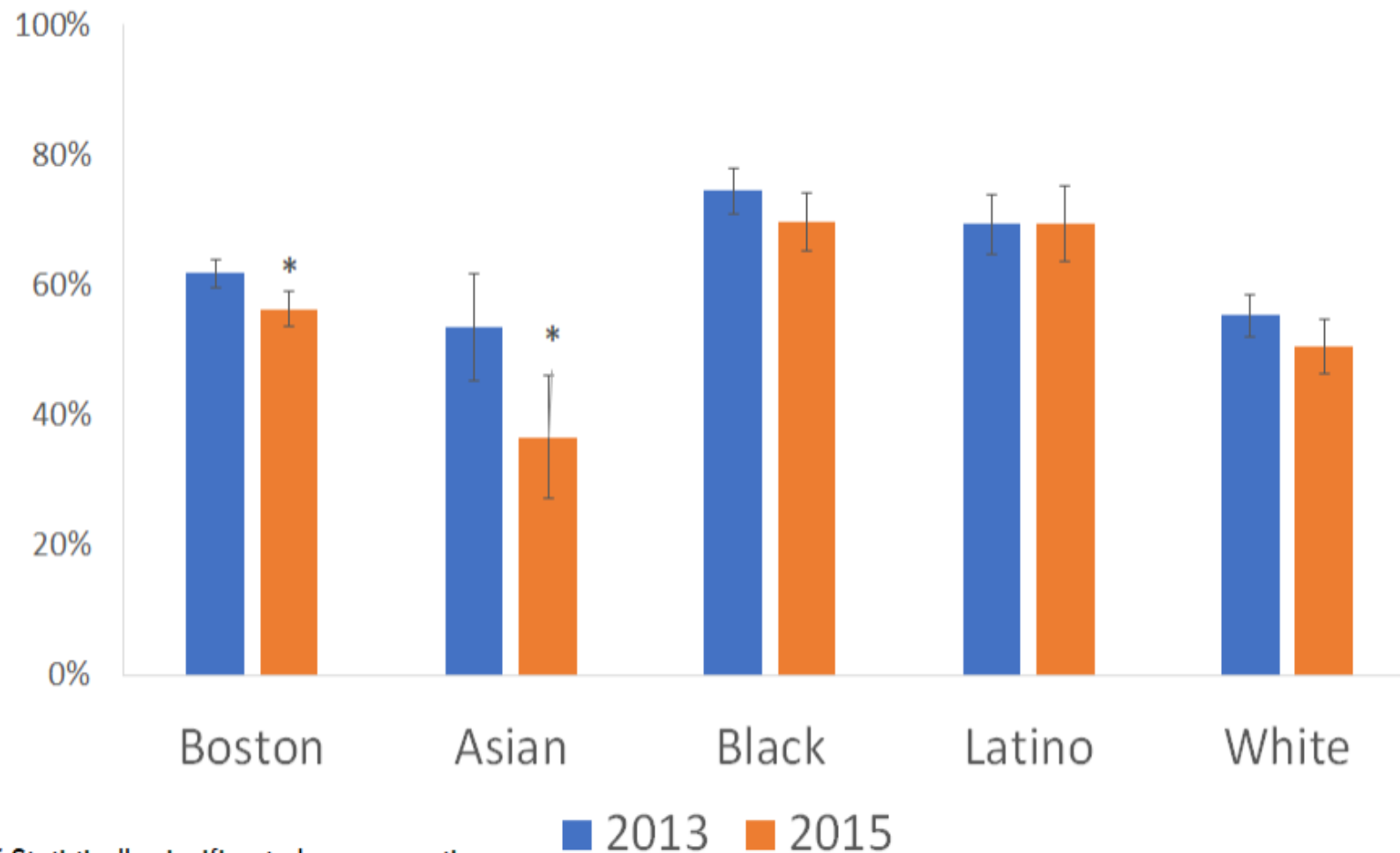


Rudolph, L., Caplan, J., Ben-Moshe, K., & Dillon, L. (2013). Health in All Policies: A Guide for State and Local Governments. Washington, DC and Oakland, CA: American Public Health Association and Public Health Institute.

Key Elements of Health in All Policies (cont.)



Adults Who Thought Their Neighborhood was Not Safe¹ by Race/Ethnicity and Year



* Statistically significant change over time

¹ Reported neighborhood to be “somewhat safe” or “not safe”

DATA SOURCE: Boston Behavioral Risk Factor Survey (2013, 2015), Boston Public Health Commission

Process and Strategies

HEiAP Task Force



Leadership

Early Adopters

Highlight Stories

Survey and Survey Results

TA/Trainings: evaluation & community engagement

Business Practices, Programs, Policies



Health Equity in All Policies Task Force

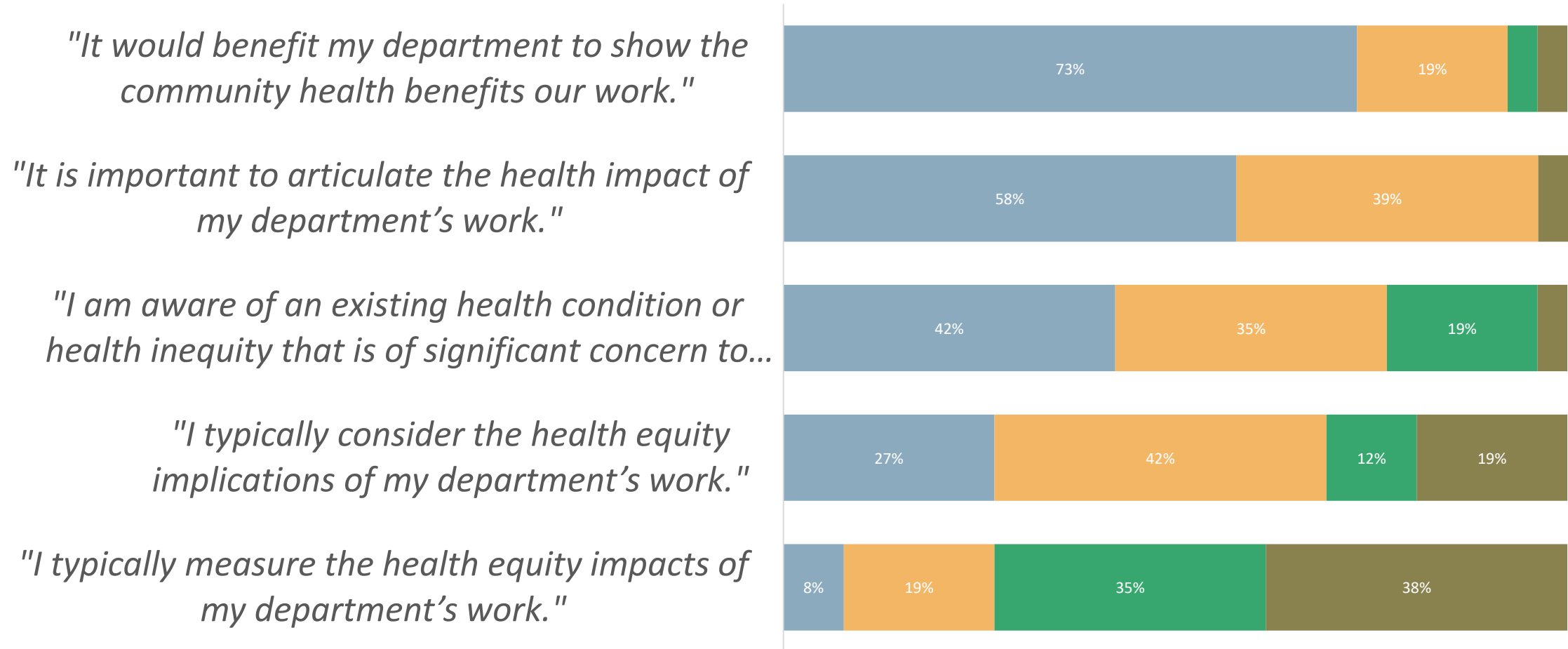
- Launched June 8, 2018
- 22 participants/11 participating depts.

Baseline Survey: who completed?

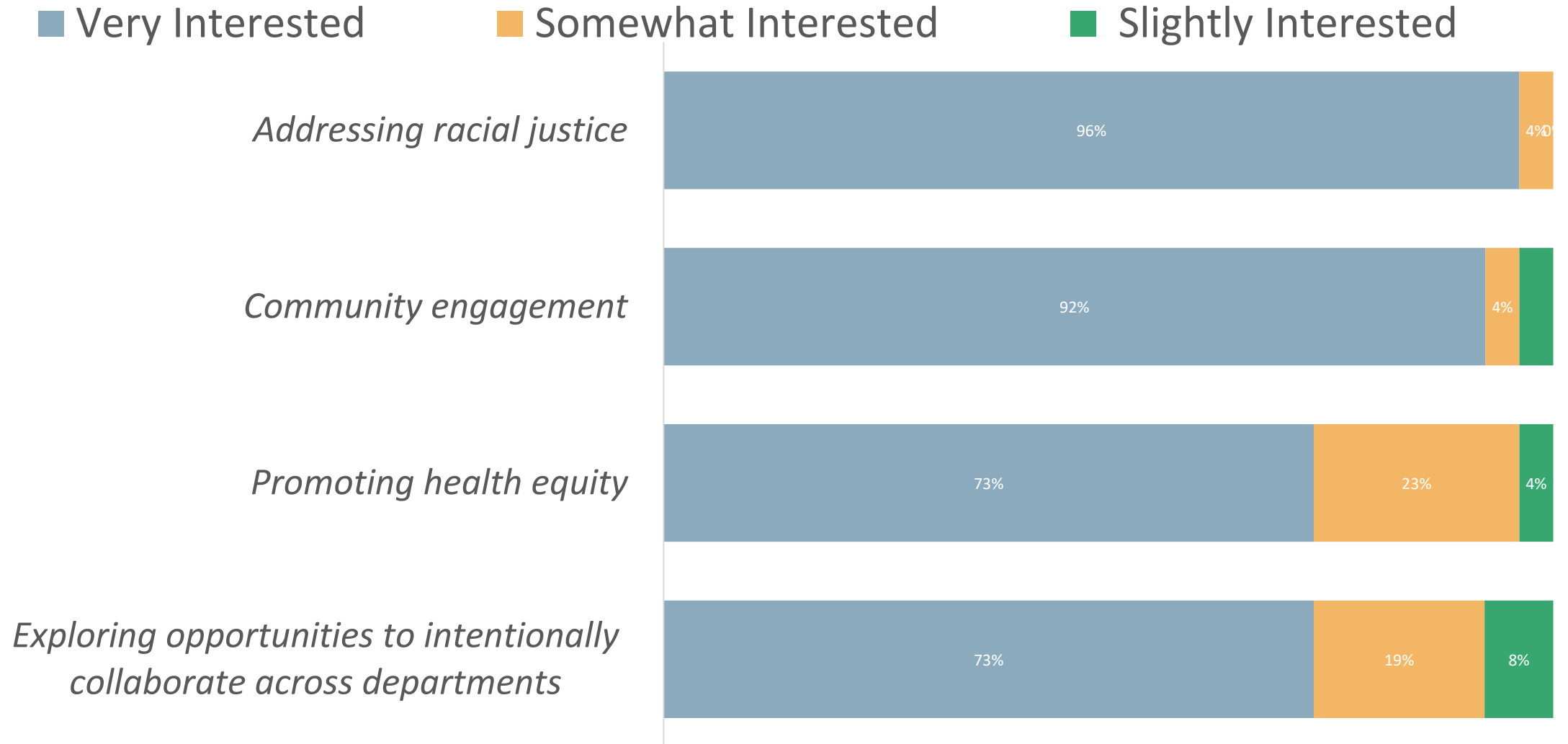
- Auditing Department
- Boston Centers of Youth & Families
- Boston Fire Department
- Boston Housing Authority
- Boston Parks and recreation
- Boston Police Department
- Boston Public Health Commission
- Boston Public Library
- Boston Public Schools
- City Hall to Go
- Commission on Affairs of the Elderly
- Department of Innovation and Technology
- Disabilities Commission
- Election Department
- Immigrant Advancement
- Inspectional Services Department
- Mayor's Office of Arts and Culture
- Mayor's Office of Resilience and Racial Equity
- Mayor's Office of Women's Advancement
- Neighborhood Development
- Office of Fair Housing & Equity
- Office of Small Business Development
- Office of Workforce Development
- Public Works & Transportation Department(s)
- Tourism, Sports & Entertainment
- Veterans' Services

HEiAP Awareness Among Boston Agencies (N=26)

■ Strongly Agree ■ Somewhat Agree ■ Neither Agree/Disagree ■ Disagree



Interest in Proposed Training Topics (N=26)



BPHC Community Engagement Plan



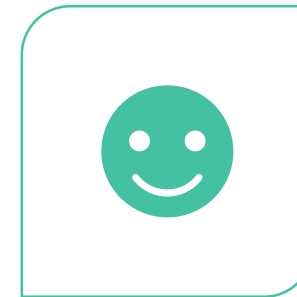
HEALTH EQUITY
ADVISORY COMMITTEE



COMMUNITY
MEETINGS



PARTNERSHIP
DATABASE



CUSTOMER
SATISFACTION SURVEY

Health Equity Advisory Committee

- 2 year term, up to 8 meetings a year
- 9 members representing 6 Boston neighborhoods



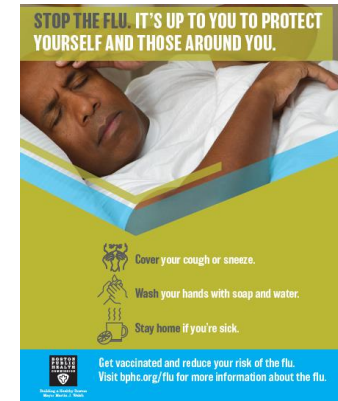
Board of Health Meeting, October 2017

HEAC shaping BPHC's Communications

FLU POSTERS BEFORE



FLU POSTERS AFTER



STOP THE FLU.
IT'S UP TO YOU.



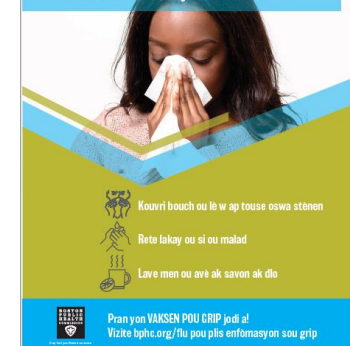
STOP THE FLU.



STOP THE FLU. IT'S UP TO YOU TO PROTECT YOURSELF AND THOSE AROUND YOU.



Sispann grip la. Sa depann de ou pou pwoteje tèt ou ak lòt moun sa yo ki bò kote ou.



HEAC worked with IGR on Patient Confidentiality

PATCH FAQ BEFORE

Frequently Asked Questions:

Patient Confidentiality Protections for Health Insurance Notices

Massachusetts law now allows individuals insured under another person's health plan policy (like a parent or spouse) to submit a request to share health insurance plan if they need or want to keep information about the health care services they receive while using their insurance confidential.

General / Why is this important?

What problem does this fix?

If you are covered by another person's health insurance policy (like a parent or spouse, you are called a 'dependent', and that person is considered the 'policyholder' of your health plan. Anytime you receive health care services, your health insurance company may send some of your confidential health information - like the name of your provider, or the date and type of the services you received - to the policyholder, through a form called the Summary of Payments (SOP).

What is a Summary of Payments (SOP) form?

Health insurance plans typically send a Summary of Payments (SOP) form (which is also known as an Explanation of Benefits form, or EOB) detailing the type and cost of medical services that have been provided to any insured dependents on the policyholder's plan each time they access medical care. The SOP form may contain information on sensitive health care services, such as care related to domestic violence or sexual assault, mental health or substance use disorders, sexual and reproductive health or HIV/AIDS. Sharing this form with the policyholder can unintentionally compromise patient confidentiality for anyone enrolled as a dependent on another person's health insurance policy, such as a young adult or spouse.

Why does my health insurance company send information to the policyholder in the first place?

Consumer protection law sometimes requires insurance companies to send the person who owns an insurance plan, called the policyholder, information about how and when an insurance plan is being used. Many [health insurance companies](#) do this even when it is not required in order to help inform the policyholder and any dependents on the plan about how the health plan is being used. Unfortunately, this can lead to the person health information of dependents on the plan being shared with the policyholder. Now, Massachusetts law requires insurance companies to stop sharing that information with the policyholder when the patient who received medical care requests that the information stay confidential.

How does this law protect my health care confidentiality?

The law protects patient confidentiality in four main ways:

- 1) Health plans must issue the SOP form directly to the patient (i.e. any dependents on the plan) rather than to the policyholder.
- 2) All patients, including dependents, can choose their preferred method of receiving SOP forms, including at a different mailing address or electronically through an online portal.
- 3) SOP forms will contain general information only, such as "office visit" or "medical care," rather than more explicit descriptions of sensitive health care services that could violate confidentiality.
- 4) All patients, including dependents, will have the option to opt-out of receiving an SOP form when there is no remaining cost-sharing (i.e. co-pay or deductible) for the health care visit or service.

Who can use these new privacy protections?

Anyone age 18 and older who is covered by another's health insurance plan can request to keep their health information confidential and the health plan must honor that request. If you're under 18, you can request to keep the information confidential only in certain circumstances (see question below). A legal guardian who is legally allowed to consent to health care for the patient may also request these protections on behalf of the patient.

If I'm under 18, do these protections apply to me?

If you're under 18, you can use these new protections only in the following circumstances:

- You are married, divorced or widowed
- You are a parent**
- You are living on your own and managing your own finances**
- You are a member of the armed forces**
- You are pregnant or you believe yourself to be pregnant**
- For emergency services if delay would risk your health or life
- For diagnosis or treatment relating to STI treatment and testing and HIV testing
- For family planning services, including those funded through the Department of Public Health
- For substance abuse treatment when you are 12 or older and at least two doctors have found you to be drug dependent (except for methadone maintenance therapy)
- For admission at a mental health treatment facility if you are 16 or older
- For abortion services if you obtain permission through a court order known as "judicial bypass", Mary Dale petition or 12B petition
- When the doctor determines that you are a "mature minor", which means the doctor believes the minor can give informed consent to the treatment and it is in the minor's best interest not to notify his or her [parents**](#)

If you're still unsure whether these protections apply you can contact your doctor or your health insurance plan.

PATCH BROCHURE AFTER

For More Info and Help

For more information on the help submitting a request or getting your request accepted and honored by your health plan, please contact IGR:

Contact Us

Phone: (Telephone)
Email: (Email address)
Web: (Web address)



(Type a reply to your question)

Do you get your health insurance through your parents, your spouse, or someone else? As of (effective date) in Massachusetts, you can make sure that you are the only person who will see your insurance statements by asking your insurance provider.

replace with
LOGO

Keeping Your Private
Health Care Private
(Address)
(Day, DT, ST, CWk)



Keeping Your
Private
Health Care
Private



Ask Your Health Insurance Company that Statements of Your Care Only be Available to You.

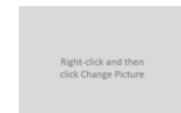
Tell your insurance provider you want statements about you to be sent only to YOU, the patient, and no one else. You can have these statements sent to a different address. You can ask for them to be available just electronically to you. Insurers are not required to have electronic access until April 2019, but they may already have it available. You also can request no statement be sent for services that do not have a co-payment. You need to make this request directly to your insurance provider for each medical visit or treatment.

In Massachusetts 100% of health insurance plans are "self-insured" and are not required but may follow these legal requirements. Call and ask your health insurance provider if they are self-insured and if they will provide the same added protections as other insurance providers.

SENSITIVE SERVICES are NEVER DETAILED in any INSURANCE STATEMENTS

To give the greatest protection, some health care services considered sensitive will never be disclosed in insurance statements. They will say things like office visit and medical care. They will include the doctor, clinic, or health care provider.

Mental Health Services - Substance Use Disorder Services, including Medication and Treatment - Gender Transition-Related Services - Testing, Treatment and Prevention of Sexual Transmitted Infections (e.g. HIV, syphilis) - Testing, Treatment and Prevention of HIV and AIDS (including pre-exposure prophylaxis (PrEP) - Hepatitis C Testing, Treatment and Medication - Hepatitis B Testing, Treatment and Medication - Reproductive Services (e.g. Invas. cervical and prostate cancer screening, identification and treatment of cancer precursors) - Contraceptive Services - Fertility Services - Abortion Services - Pregnancy Testing and Counseling on Pregnancy Options - Any Visit Involving Assessment of Sexual Risk, Pregnancy Intention, and/or Reproductive, Sexual, Pregnancy Concern - Services Related to Sexual Assault - Domestic Violence Diagnosis, Services, Support and Counseling - Management of Abnormal Pap Smears - Diagnostic and Treatment of Vaginal Infections - Perinatal Care



Children under 18 can have the Same Privacy if you:

- Are a parent
- Are pregnant or think you might be
- Live on your own and manage you own finances
- Are in the military
- Are married
- Think you may have an STI or HIV or need treatment for an STI or HIV
- Are divorced or widowed
- Are experiencing emergency medical situation which is life threatening
- This list does not include every reason you may be granted the same privacy. Please check with your insurance plan.


Client Registration

The information in your medical record is confidential and is protected under Massachusetts General Laws Ch. 111, Sec. 70. Your written consent will be required for release of information except in the case of a court order.

Medical Record #
(For office use only)

Legal Name Last				First				Middle Initial			
Preferred name:						Preferred pronouns:					
Legal Sex (please check one)* <input type="checkbox"/> Female <input type="checkbox"/> Male <small>*While Fenway recognizes a number of genders / sexes, many insurance companies and legal entities unfortunately do not. Please be aware that your legal name and sex you have listed on your insurance must be used on documents pertaining to insurance, billing and correspondence. If your preferred name and pronouns are different from these, please let us know.</small>											
Date of Birth Month Day Year / /				Social Security #				State ID # or License #			
Your answers to the following questions will help us reach you quickly and discreetly with important information.											
Home Phone () - () - ()			Cell Phone () - () - ()			Work Phone () - () - ()			Best number to use: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work		
Local Address						City		State		ZIP	
Billing Address (if different from above)						City		State		ZIP	
Email address:											
Occupation				Employer/School Name				Are you covered under school or employer's insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Emergency Contact's Name				Phone Number				Relationship to you			
<small>If you are under 19, the Department of Public Health requires that you provide parent/guardian contact information.</small>											
Parent/Guardian Name				Phone Number				Relationship to you			
May Fenway Health send mail to your local address (check one)? <input type="checkbox"/> Yes <input type="checkbox"/> No <small>This question only refers to mail for purposes other than billing. Payment is expected at the time of your visit.</small>											

This information is for demographic purposes only and will not affect your care.

1.) Which of the categories best describes your current annual income? Please check the correct category: <input type="checkbox"/> < \$10,000 <input type="checkbox"/> \$10,000 - 14,999 <input type="checkbox"/> \$15,000 - 19,999 <input type="checkbox"/> \$20,000 - 29,999 <input type="checkbox"/> \$30,000 - 49,999 <input type="checkbox"/> \$50,000 - 79,999 <input type="checkbox"/> Over \$80,000			2.) Employment Status <input type="checkbox"/> Employed full time <input type="checkbox"/> Employed part time <input type="checkbox"/> Student full time <input type="checkbox"/> Student part time <input type="checkbox"/> Retired <input type="checkbox"/> Other _____			3.) Racial Group(s) <input type="checkbox"/> African American/Black <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Multi racial <input type="checkbox"/> Native American / Alaskan <input type="checkbox"/> Native / Inuit <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other _____			4.) Ethnicity <input type="checkbox"/> Hispanic/Latino/Latina <input type="checkbox"/> Not Hispanic/Latino/Latina		
6.) Language(s) <input type="checkbox"/> English <input type="checkbox"/> Español <input type="checkbox"/> Français <input type="checkbox"/> Português <input type="checkbox"/> Pycckий <input type="checkbox"/> Other _____			7.) Do you think of yourself as: <input type="checkbox"/> Lesbian, gay, or homosexual <input type="checkbox"/> Straight or heterosexual <input type="checkbox"/> Bisexual <input type="checkbox"/> Something else <input type="checkbox"/> Don't know			8.) Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Other _____			5.) Country of Birth <input type="checkbox"/> USA <input type="checkbox"/> Other _____		
11.) What is your gender? <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Genderqueer or not exclusively male or female			12.) What was your sex at birth? <input type="checkbox"/> Female <input type="checkbox"/> Male			9.) Veteran Status <input type="checkbox"/> Veteran <input type="checkbox"/> Not a Veteran			10.) Referral Source <input type="checkbox"/> Self <input type="checkbox"/> Friend or Family Member <input type="checkbox"/> Health Provider <input type="checkbox"/> Emergency Room <input type="checkbox"/> Ad/Internet/Media/Outreach <input type="checkbox"/> Worker/School <input type="checkbox"/> Other _____		
13.) Do you identify as transgender or transsexual? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't know						Please turn over 					

HEAC advises on how to create inclusive environment for Boston's LGBTQ Homeless Population


2017 COMMUNITY MEETINGS

- CO-HOSTED IN FIVE (5) NEIGHBORHOODS

WE REACHED **211**
RESIDENTS IN TOTAL

Serie de Reuniones 2017 de la Comisión de Salud Pública de Boston y sus Socios Comunitarios
Haciendo la Conexión entre la Salud y la Vivienda Equitativa

Reunión #5: East Boston




Martes, 12 de septiembre de 2017
5:30 PM Refrigerios; 5:45 PM - 8:00 PM Discusión
Umana Academy, 312 Border Street, East Boston, MA 02128

Aprenda cómo las opciones de vivienda afectan su salud, escuche los datos más recientes del informe "Salud de Boston", y comparta sus experiencias con funcionarios públicos para ayudar a elaborar las futuras opciones de vivienda en Boston.

Habrà refrigerios ligeros y cuidado de niños. Para solicitar servicios de interpretación en ASL y español, contáctenos antes del 1 de septiembre de 2017, Alkia.powell@boston.gov / 617-635-2500 / 617-635-2541 TTY

Para registrarse, por favor visite: <https://makingconnectioneastboston.eventbrite.com/>

Más información: boston.gov/departments/neighborhood-development/assessment-fair-housing



En asociación con: Boston Tenant Coalition, Fair Housing Center of Greater Boston, Metropolitan Boston Housing Partnership, Chinese Progressive Association, Mattapan United, Greater Boston Legal Services, Homes for Families, Lawyers Committee for Civil Rights, Vietnamese American Initiative for Development, Charles Hamilton Houston Institute for Race and Justice.

2018 Community Meetings

CO-HOSTED IN SIX (6)
NEIGHBORHOODS

COMMUNITY CONVERSATIONS WITH YOUTH:

MENTAL HEALTH AND COMMUNITY VIOLENCE

Mental health is as important as physical health.



Boston Public Health Commission & Community Partners Community Meeting Series 2018



Madison Park Development Corporation youth on July 5, 2018

steps to

ADVANCE RACIAL JUSTICE AND HEALTH EQUITY



The Boston Public Health Commission's Racial Justice and Health Equity Assessment Tool is a guide for ALL STAFF to proactively build in equity analysis for any function area (policy, program, practice, or budget decision) and to align our everyday work with our mission and vision.

1

Gather Data. Focus on Impact.

How do the data you use and the outcomes you set work to eliminate racial/geographic inequities? Are you making assumptions?

2

Talk to the Experts.

How are you continuously including the communities who are most impacted by your proposal in priority setting and implementation? Who have you identified as constituents and stakeholders and how will you engage them?

3

Analyze Data. Determine Benefit and Burden.

How does your plan benefit or cause unintended harm to people of color or other vulnerable populations? What does this data tell you about what needs to be changed?

4

Advance Opportunity or Minimize Harm.

How will you revise your original proposal to build racial justice and health equity (e.g., including constituent and stakeholder voices, addressing root causes, customizing approaches according to population)?

5

Evaluate.

How do you know your measures of success advance racial justice and health equity?

6

Ensure Accountability and Ongoing Feedback Loop.

How will you ensure your project contributes to building a sustainable culture of racial justice and health equity (e.g., transparent communications, equitable community engagement, etc.)?

For more information on integrating these steps into your work, please email the Office of Health Equity at healthequity@bphc.org.

Racial Justice and Health Equity Assessment Toolkit

- 4 feedback sessions (May – June 2018) with:
 - Health Equity Advisory Committee
 - Anti Racism Advisory Committee, and
 - 2 internal staff sessions
- Pilot tool August 2018

Technical Assistance

Request Examples	
Short term support: Staff seeking immediate support, e.g. one day, one meeting, totals up to 2 weeks	<ul style="list-style-type: none">• Review a one pager, fact sheet to assure language, terminology, and framing of racial justice and health equity are appropriate;• Review a document, presentation to maintain consistency of racial justice and health equity messaging;• Support brainstorming within a process
Mid-level support: Staff seeking intermediate support, up to 3 months of planning, review, and/or implementation	<ul style="list-style-type: none">• OHE participate/present at a workshop, conference, or review a proposal for equity considerations.• OHE participate on a committee or project to assist in the design and implementation of activities to meet their goals and objectives, such as the Healthy Start Systems or Ryan White medical case managers training
Equity Change Projects: Staff seeking long-term and sustainable solutions to equity concerns through short or long-term projects, up to 3 months (up to 15 hours)	<ul style="list-style-type: none">• OHE/Equity Change Project Team will work with up to 3 chosen projects at a time to:<ul style="list-style-type: none">• Apply equity considerations within a specific area such as community engagement, communications.• Support through a full 6 step racial justice and health equity assessment project.• Engage in deeper dive into one of the 6 steps.

Moving Equity Forward Together

<https://youtu.be/XfAY6UgjAbc>



Moving Equity Forward Together

Thank You & Q&A