



CITY OF CAMBRIDGE • EXECUTIVE DEPARTMENT

Robert W. Healy, City Manager

Richard C. Rossi, Deputy City Manager

January 21, 2011

To the Honorable, the City Council:

Attached for your information is the 2010 Cambridge Public Health Annual Report, received from Dennis D. Keefe, Chief Executive Officer, Cambridge Health Alliance and Commissioner of Public Health.

Very truly yours,

A handwritten signature in blue ink, appearing to read "Robert W. Healy", with a long horizontal flourish extending to the right.

Robert W. Healy
City Manager

RWH/mec
Attachment



Cambridge Health Alliance

January 14, 2011

Robert W. Healy
City Manager
Cambridge City Hall
795 Massachusetts Avenue
Cambridge, MA 02139

JAN 14 11 04:11:04 City Manager



HARVARD
MEDICAL SCHOOL
TEACHING AFFILIATE

Dear City Manager Healy:

I am pleased to submit Cambridge Health Alliance's annual report to the City of Cambridge. I am proud to announce that this has been a very successful year for Cambridge Health Alliance. In addition to completing FY10 with a net income of \$2.0M, an improvement from the prior fiscal year's loss of \$25.3M, Cambridge Health Alliance has made significant progress towards its vision of becoming an Accountable Care Organization (ACO). This vision is coming to fruition with the strengthening of the leadership structure to support our journey to becoming an ACO as well as the appointment of Doug Thompson as Cambridge Health Alliance's first Chief Administrative Officer for ACO Development, and the advancement of David Osler, MD, as the Senior Vice President for Ambulatory Services and Soma Stout, MD, as the Vice President for Patient-Centered Medical Homes (PCMH). Two of Cambridge Health Alliance's health centers have just been accredited by the National Centers for Quality Assurance (NCQA) as Medical Homes and there are three additional health centers, including Cambridge Family Health, which have just been funded by an EOHHS grant to pursue the same accreditation.

I believe that it is these successes that have provided Cambridge Health Alliance the opportunity to receive committed funding from the existing Medicaid waiver via an amendment that was just approved by the Centers for Medicaid and Medicare Services (CMS) and am hopeful that our funding provision within EOHHS' new waiver application to CMS will also be approved.

Cambridge Health Alliance continues to excel in providing high quality and safe patient care while providing continued access to essential health care services for the residents of Cambridge. This year was also filled with many accomplishments for Cambridge Health Alliance as a whole, and the Public Health Department specifically, as follows:

Cambridge Health Alliance:

- Continued exceptional performance in publicly reported quality core measures for Congestive Heart Failure, Pneumonia, Acute Myocardial Infarction (Heart Attack), and Surgical Care Infection Prevention; meeting or outperforming both national and statewide norms.
- 4th year in a row to receive honors from the Harvard Pilgrim Health Care Honor Roll for Pediatrics.
- The Haitian Mental Health Team (HMHT) is selected as the 2010 Kenneth B. Schwartz Center's Compassionate Caregiver Awardee. The Haitian Mental Health Team has been serving and supporting the community for 25 years.

- CHA recognized by the American Hospital Association's Institute for Diversity as "Best in Class" in the area of *Delivering Culturally and Linguistically Competent Patient Care*.
- Network Health received the highest level of accreditation, "Excellent" from the National Committee for Quality Assurance (NCQA). NCQA awards its highest accreditation status of "Excellent" to organizations with programs for service and clinical quality that meet or exceed rigorous requirements for consumer protection and quality improvement and has HEDIS results in the highest range of national performance.
- Continued implementation of a fully integrated electronic medical record. In 2010, the Cambridge Health Alliance launched the *MyChart* patient portal at all primary care and specialty locations which gives patients electronic access to their medical record, using a secure action, at any time. *MyChart* also allows patients to electronically communicate directly with their provider and renew medications without a phone call.

Cambridge Public Health Department:

- Over 2,600 doses of Combined H1N1/Seasonal Flu vaccine administered at citywide flu clinics and other venues in Cambridge.
- Expanded the school absenteeism and influenza-like illness surveillance system to include other communicable diseases and emerging health issues. The system was implemented in Cambridge schools and universities.
- Continued funding of the Body Mass Index (BMI) Health Disparities project; a project based on a partnership between the Cambridge Public Health Department, Cambridge Public Schools, the Margaret Fuller Neighborhood House, and the Institute for Community Health (lead investigator).
- Chief Public Health Officer Claude-Alix Jacob was elected to the Board of Directors of the National Association of County and City Health Officials (NACCHO).
- Cut It Out Cambridge, a domestic violence prevention initiative at CPHD, earned a "Bright Idea" designation from Harvard University's Kennedy School of Government.

Sincerely,



Dennis D. Keefe
 Chief Executive Officer, Cambridge Health Alliance
 Commissioner of Public Health, City of Cambridge

Cc: Claude-Alix Jacob, MPH

2010 Public Health Annual Report

2010 Public Health Activities of Cambridge Health Alliance

A Report to the Cambridge City Manager

January 15, 2011

**Cambridge Public Health Department
Cambridge Health Alliance**

Overview

The Cambridge Public Health Commission, doing business as “Cambridge Health Alliance,” was established as a public authority on June 30, 1996 through a special act of the Massachusetts legislature. Prior to this event, The Cambridge Hospital and the public health department were owned and operated by the City of Cambridge.

The Cambridge Public Health Department enforces existing laws and regulations pertaining to public health, and has the statutory authority to make and enforce new public health regulations within the City of Cambridge. The Cambridge Public Health Department exercises its statutory authority under Massachusetts General Laws, chapters 111, 112, and 114. As a result of a Memorandum of Agreement signed in 1983, the city’s Inspectional Services Department assumes responsibility for several major categories of public health code enforcement.

Cambridge Public Health Department Governance

Dennis Keefe serves as the Commissioner of Public Health and delegates the department’s operations to Claude-Alix Jacob, Chief Public Health Officer. The public health department is advised by the Cambridge Public Health Subcommittee of the Cambridge Health Alliance Board of Trustees, the Community Health Advisory Council, and through designated committees of the Cambridge City Council such as the Community Health, Environment and Human Services committees. The Cambridge Public Health Department works closely with the City Manager, City Council, the School Committee, and all city departments. In 2010:

- CPHD staff gave presentations to the Cambridge Public Health Subcommittee on the national profile of local public health departments, the department’s Epidemiology and Data Services division, and the newly established Food & Fitness Policy Council. Other topics addressed included funding for the Men’s Health League, linkages with the city’s Inspectional Services Department, and departmental updates. The Cambridge Public Health Subcommittee provides recommendations to the Board of the Trustees of Cambridge Health Alliance on public health priorities in Cambridge; assists with delineating strategic directions for the Cambridge Public Health Department; and develops and implements strategies to garner community input and engagement.
- Topics addressed at the bimonthly meetings of the Community Health Advisory Council included effective strategies for obesity prevention and reduction, HIV services and outreach in high-risk populations, immigrant health initiatives in Everett, a description of the Accountable Care Organization and Medical Home models that CHA is beginning to implement, and an overview of the work of local substance abuse prevention coalitions. The Community Health Advisory Council is comprised of a diverse group of community leaders representing a wide variety of health and human service organizations. The Council reviews key community health problems and the role of Cambridge Health Alliance in addressing these problems through collaboration with community partners.

Local Health Department Responsibilities

There are nearly 3,000 health departments at the state, county, and local levels that are charged with addressing the public's health across the United States, according to the National Association of County and City Health Officials (NACCHO). In 2005, NACCHO developed an "Operational Definition of a Functional Local Public Health Department" outlining ten fundamental responsibilities of local public health departments. These responsibilities (often referred to as the "ten essential services of public health") were developed within nationally recognized frameworks and with input from public health professionals and elected officials across the country. They are linked to the three core functions of public health (assessment, policy development, assurance) established by the Institute of Medicine in 1988. The ten essential services of public health are:

1. Monitor health status to identify community health problems.
2. Diagnose and investigate identified health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public health and personal health care workforce.
9. Assess effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

The Cambridge Public Health Department, in partnership with the Cambridge Health Alliance Department of Community Affairs and the Institute for Community Health, ensures that these obligations are met by providing sophisticated public health and health promotion services to city residents, collecting and analyzing data, and developing programs in response to community-defined needs. In addition, Cambridge Health Alliance provides high quality health care to Cambridge residents of all backgrounds.

Cambridge Public Health Department Budget

In fiscal year 2011, the Cambridge Public Health Department brought in approximately \$1.6 million in state, federal, and private foundation funding. The department's direct expense budget was \$5.5 million. In addition to direct expenses, the Cambridge Health Alliance provides substantial support to the Teen Health Center, Institute for Community Health, maintenance, utilities, and other overhead costs; and salaries for the school health medical director and infectious disease physician consultants. These direct and indirect expenses account for the \$6 million appropriation received from the City of Cambridge during this period.

2010 Spotlight: Addressing Health Disparities in Cambridge

A longstanding national public health goal has been to eliminate disparities in health status among different populations in the United States. There is no simple explanation for why one group of people might fare better healthwise than another. Rather, there are many contributing factors to poor health, including poverty, unemployment, racism and other forms of discrimination, education level, exposure to environmental hazards and violence, and access to medical and preventive care. While some progress has been made in addressing this complex issue, there is still much work to be done.

More than half of local health departments across the country currently support community efforts to address the underlying causes of health disparities and use data to describe health disparities in their jurisdictions, according to a 2008 report from the National Association of County and City Health Departments (NACCHO). A smaller proportion of health departments are involved in educating their civic leaders and other policy-makers about health disparities; prioritizing resources and programs specifically for the reduction of health disparities, and taking public policy positions on this issue. About 22% of local health departments have taken no action on this issue due to limited staffing capacity, according to the NACCHO report.

The Cambridge Approach

Like elsewhere in the nation, certain groups of people in Cambridge experience higher rates of injury, disease, and premature death than others. In recent years, the Cambridge Public Health Department and a diverse group of partners have joined together to better understand the root causes of these health inequities in Cambridge and to develop programs and policies aimed at solving the problem.

Over the past 15 years, the department and its partners have established work groups, councils, and task forces to identify the needs of vulnerable populations in Cambridge and to secure funding to develop effective programs and services. This comprehensive team approach has resulted in multi-faceted, citywide initiatives that have addressed early childhood development and healthy parenting; healthy eating and physical activity among Cambridge public school children; and the health of men of color, to name a few.

More recently, the department and its colleagues have begun exploring how physical, environmental, social, cultural, and economic factors can affect residents' current and future health. Staff have also begun to use more sophisticated tools and processes – GIS and spatial mapping; disease surveillance systems; social marketing strategies, including surveys and focus groups of target audiences; and formal program evaluations – to improve programs and inform policy-making.

The following three initiatives exemplify how the Cambridge Public Health Department and its partners are working together to create programs, services, and a support network for people at risk for poor health outcomes.

Agenda for Children Literacy Initiative

Early life experiences have a huge impact on a very young child's developing brain. Reading, talking, and listening to babies and toddlers spurs brain development, builds confidence and self-esteem, promotes parent-child bonding, and lays the foundation for school success and a healthy adulthood.

The Agenda for Children Literacy Initiative, a citywide initiative based at the Cambridge Public Health Department, is premised on the idea that parents are a child's first and most important teacher of language. Because many program activities focus on *talking* with children, the program has empowered parents who were not successful in school, cannot read and write, or have a limited capacity to speak English.

In keeping with this philosophy, the program has trained more than 30 Cambridge parents from diverse cultural and ethnic backgrounds to become Literacy Ambassadors. These women and men, many of whom are English language learners themselves, share the *talk* message with members of their linguistic and ethnic communities. This work includes visiting new mothers on the Cambridge Hospital maternity ward and in their homes, organizing talk workshops and reading parties, and connecting families to community resources and events. The Literacy Ambassadors provide direct education to about 150 Cambridge families a year through the home visiting program and connect with hundreds of other parents through other outreach activities.

This peer education model addresses health inequities in two important ways. First, the Literacy Ambassadors are able to reach immigrant families who are often isolated from the larger community and unfamiliar with how to access resources like affordable housing and child care, playgroups and mom's groups, food banks, jobs, English classes, and health care services, including childhood asthma and lead poisoning prevention programs. Second, the Literacy Ambassadors are able to explain the importance of talking and reading to very young children through the lens of a shared culture, and can help immigrant families better understand the parenting culture in the United States.

Emergency Preparedness: Outreach to Vulnerable Populations

In a disaster situation, emergency response teams may not have the manpower, knowledge, or resources to adequately help certain "at-risk" populations. Among these vulnerable groups are people with disabilities, frail or elderly adults, immigrants or visitors who speak little or no English, unattended children, and individuals confined in nursing homes, prisons, or other facilities.

Since 9/11, public health departments in Massachusetts have become increasingly involved in planning and outreach activities aimed at ensuring that vulnerable and hard-to-reach populations have equitable access to emergency preparedness, response, and recovery information and services.

Massachusetts Public Health Emergency Preparedness Region 4b, which is comprised of 27 communities in Metro Boston (including Cambridge) and hosted by the Cambridge Public Health Department, made this issue a top priority in 2010. The region's strategy was to build and cultivate relationships with agencies that serve vulnerable populations; improve the region's ability to understand health disparities and ensure cultural competence among health department staff and Medical Reserve Corps volunteers; increase the region's capacity to address the needs of vulnerable populations; and increase awareness among at-risk individuals about their role in preparedness planning.

Region 4b's accomplishments in 2010 included engaging with organizations that serve IRAA (Individuals Requiring Additional Assistance) communities, creating a listserv of IRAA agencies so that emergency information can be disseminated in "real time" to clients, and partnering with a communications firm to provide translators and interpreters to Region 4b communities. In addition, Region 4b staff created opportunities for its member health departments to learn best practices and network with organizations serving vulnerable populations, and shared resources with members via weekly emails and postings to the Region 4b website.

The Men's Health League: A Community Health Partnership for Men

In the United States, men of all races experience higher death rates than women for the nation's leading causes of death. Within this group, males of African descent—a term that includes African-Americans and black immigrants from Africa, the Caribbean, and other countries—have the highest death rate among all populations of U.S. males.

For nearly 20 years, public health and civic leaders in Cambridge have been concerned about the unique health challenges faced by men of color, especially African-American and other black men. In 2007, the Cambridge Public Health Department and two community partners launched a major initiative focused on reducing type 2 diabetes, heart disease, and stroke in men of color. The initiative, called The Men's Health League, engages primarily men of color in improving their health through fitness, nutrition education, disease management, and social support.

Over the past three years, more than 360 men have participated in at least one of the four MHL core programs: "Fit For Life," a 12-week program for men at risk for heart disease, stroke, or type 2 diabetes; "Fitness Brothers," a 10-week program that combines fitness and interactive workshops; "Navigated Care," which works one-on-one with participants to enroll them in health insurance and ensure that they are receiving health care services; and the "Men's Health Team," a group of men who provide direct community outreach and mentoring for the Men's Health League.

A number of men who have participated in the Men's Health League face not only health issues, but difficulties in other areas of their lives, such as unemployment, legal problems, and family and relationship issues. Many have also expressed mistrust of "the system," including the health care system. For these reasons and others, personal health has typically not been a pressing priority for these men.

The Men's Health League has succeeded in motivating many participants to improve their diets, exercise more, and/or see a doctor regularly by using a social support model to address underlying beliefs and social norms that were contributing to poor health. Another important outcome of the Men's Health League experience is that it has led to a renewed commitment to men's health on the part of the health department, city leaders, and residents.

2010 Highlights: Cambridge Public Health Department

Community Health and Wellness Activities

The goal of the Division of Community Health and Wellness Programs is to encourage healthy behaviors, influence public health policy, and promote opportunities to prevent disease and improve health. In 2010:

- In August 2010, the Men's Health League completed a three-year grant from the federal Office of Minority Health. The grant objectives were to reduce incidence of cardiovascular disease and type 2 diabetes among men of color in Cambridge. Over the grant period, the Men's Health League served a total of 363 individual men through four programs that focused on physical activity, healthy eating, and gaining access to primary care. Each of the programs also had a strong social support component. Evaluation data indicated that the programs succeeded in promoting positive behavior change and improved access to health care among participants (for more outcome data, see "Institute for Community Health" chapter.)

The Men's Health League continued to offer its programs through 2010, and aggressively pursued opportunities to sustain programming beyond the three-year demonstration phase. In July 2010, the Massachusetts Department of Public Health renewed its commitment to support the program and during the fall, the department was awarded several grants, including a \$30,000 Legacy Grant from the Communities IMPACT Diabetes Center of the Mount Sinai School of Medicine (NYC) to support Men's Health League programs in 2011.

- In fall 2010, CPHD nutrition staff collaborated with the Margaret Fuller Neighborhood House and the Cambridge Community Center to conduct focus groups of people with type 2 diabetes to learn more about their needs and develop diabetes-related workshops for this population. In addition, staff from CPHD and the Margaret Fuller Neighborhood House attended a "Diabetes Today" training in Washington, D.C., designed to empower communities to develop appropriate interventions to reduce diabetes complications.
- The Men of Color Health Initiative sponsored its annual Hoops 'n' Health sports tournament and health fair in June, drawing 300 players and about 1,200 spectators; organized the Men's Health Breakfast as part of the Men's Health League program, attracting 108 attendees; conducted three stroke education workshops and about 60 blood pressure screenings at Cambridge barbershops; and organized a prostate health workshop and screening. Nine Men's Health Team members supported the annual Domestic Violence Vigil by reading aloud the names of deceased Massachusetts residents who were victims of domestic violence.
- To support parents and caregivers in talking and reading with their young children, the Agenda for Children Literacy Initiative led 24 workshops for 250 participants; visited 536 new parents on the Cambridge Hospital's maternity ward and in their homes; co-organized Family Literacy Fun Day, attended by 720 parents and children; gave two professional development workshops to 65 early care and education professionals; sent Born to Read bags and books to 1,200 families with newborns; participated in 12 community fairs; and distributed a total of 8,260 books to families. In collaboration with local community partners, the Agenda for Children held seven StoryWalks in Cambridge neighborhoods to promote literacy and physical activity. In addition, staff helped

launch two 16-week pilot sessions of Baby University, a citywide collaborative focused on parenting. (For program outcome data, see “Institute for Community Health” chapter.)

- The Pathways to Family Success program organized 56 parenting and family literacy activities for its core group of 15 families. Staff also provided individual support to help families achieve their goals.
- During the 2009–2010 academic year, classroom instruction and dental screenings were provided to 3,094 children in 14 public, charter, and parochial schools (grades pre-K–4) in Cambridge. Of these children, 2,638 participated in dental screenings, of whom 19% were referred for treatment and 2% required urgent care. In addition, staff provided oral health education and screenings to 506 children in 26 Cambridge preschools during summer 2010. Of these children, 21% were referred for treatment. (For program outcome data, see “Epidemiology and Data Services” section in this chapter.)
- The department continued to partner with the Cambridge Prevention Coalition on the “Reality Check” campaign, which encourages parents of middle schoolers to limit access to alcohol in the home. In 2010, staff developed and tested messaging to parents, and incorporated these messages in newspaper and subway advertisements and social media venues. In addition, Reality Check partners organized a workshop in April for parents of middle school and high school students about the effects of alcohol on adolescent brain development and effective parent-teen communication.
- The department’s Domestic Violence Free Zone initiative focused on preventing and responding to teen dating violence. In addition to co-organizing 12 events for Domestic Violence Awareness Month in October, department staff (1) wrote the Cambridge Public School Department’s Policy and Guidelines on teen dating violence, (2) created and facilitated multiple trainings with West Cambridge Youth Center staff and youth on dating violence, fighting, and unhealthy communication, (3) created and facilitated “Promtacular,” a workshop on healthy self image and healthy dating practices that 50 teen girls attended in spring 2010; and (4) partnered with MIT on the MARVIN (MIT Alcohol-Related Violence Initiative) grant, and provided consultation and advice on addressing on teen dating violence on college campuses.

Emergency Preparedness Activities

The goal of the department’s Emergency Preparedness Division is to increase preparedness of the City of Cambridge, other Region 4b communities, and Cambridge Health Alliance. The program does this by creating plans for effective public health and medical response to emergencies and disasters, and providing opportunities to test and use these plans. Core functions are facilitating local public health mutual aid, dispensing medication and vaccines in emergencies, training workers and volunteers for public health emergency response, and communicating critical information to the public during emergencies and disaster response. In 2010:

- Staff helped organize two major tabletop exercises in Cambridge. The first fictional exercise involved an active shooter at the high school, and was attended by staff from the Cambridge Public

Schools and other city departments. The second scenario involved a fictional gas leak and explosion in Kendall Square, and was attended by the business community and city staff.

- The Senior Director of Emergency Preparedness was an active member of several federal and state planning committees focused on developing (1) large-scale regional exercises, and (2) statewide plans for mass fatality management and medical surge. Planning efforts culminated in two tests of the federal BioWatch system (an early warning system designed to detect the intentional release of select biological agents) and two major exercises dealing with mass casualty incidents.
- Staff continued working with Cambridge Health Alliance staff to prepare for a range of possible emergencies and disasters. This work included tabletop and full-scale exercises, training, policy development, and production of a hospital emergency preparedness brochure for all CHA employees. Staff also continued to lead the hospital operations subcommittee of the Cambridge Local Emergency Planning Committee, and participated in a regional test of mutual aid among hospitals.
- Staff were instrumental in organizing two major flu clinics at Cambridge Rindge and Latin School, both of which served as emergency dispensing site exercises. The first clinic was held in January in response to the H1N1 flu epidemic. The second, in November, was part of the annual flu vaccine campaign.
- Staff continued working with PEER (Partnership for Effective Emergency Response), a federally funded project managed by the Boston University School of Public Health. In 2010, staff assisted in designing exercises, reviewing software and protocols, and writing articles for publication. Staff also co-presented a workshop at the National Association of County and City Health Officials' annual Public Health Preparedness Summit in Atlanta.
- As part of a larger Massachusetts Department of Public Health grant to Cambridge Health Alliance, \$75,000 was allocated to CPHD to produce decontamination signs for all Massachusetts hospitals. The signs were developed in 2009 to provide simple, pictographic instructions to individuals requiring decontamination.
- Emergency Preparedness Region 4b, based at the health department, launched a website (www.region4b.org) that features general emergency preparedness resources and information for the public and a private workspace that allows the region's 27 health departments to share documents.
- Region 4b staff assisted 14 municipalities affected by the May 1 water emergency by serving as liaison between the regional communities and the State Emergency Operations Center in Framingham. Staff also provided risk communications materials for regional partners and local municipalities.
- Region 4b staff designed and conducted numerous drills and exercises during 2010 including two regional Health and Homeland Alert Network drills, one Medical Reserve Corps Volunteer call-down drill, and a regional 24/7 drill of the Local Emergency Notification System. Response time improved significantly compared to previous years.

- To better serve culturally and linguistically diverse populations in Region 4b, staff (1) partnered with a communications firm to provide translators and interpreters to Region 4b communities, and (2) partnered with local health departments to produce news releases and opinion pieces about family preparedness that were published in the foreign language media in September.
- To better understand and address the needs of people with disabilities and others who would require additional assistance in an emergency, staff (1) engaged with organizations that serve the Individuals Requiring Additional Assistance (IRAA) community, (2) created a listserv of IRAA agencies so that emergency information can be disseminated in “real time” to the IRAA community, and (3) began hosting a quarterly speaker series for Region 4b health department staff that featured agencies who serve this community.
- The Region 4b Medical Reserve Corps was awarded \$95,865 by the Massachusetts Department of Public Health to continue recruiting and training medical and non-medical volunteers for public health emergencies and to expand capacity to aid underserved populations.

Environmental Health Programs and Services

The goal of the Division of Environmental Health is to protect Cambridge residents, workers, and students from environmental threats that can lead to poor health. This division assists city departments with responding to consumer complaints and to action items from state and federal agencies related to environmental health. In 2010:

- During inspections of the city’s tobacco vendors in FY10, the rate of sales to minors was 6%. The state target is 10%.
- The Healthy Homes childhood asthma program conducted more than 200 home visits to families, and provided information about asthma and lead poisoning prevention to the community.
- Lead Safe Kids conducted lead poisoning prevention education activities and provided case management to children with elevated blood levels who reside in Cambridge and 35 neighboring communities. In 2010, the program served six Cambridge families and provided lead poisoning educational materials at 19 Cambridge events.
- Conducted 54 environmental health investigations involving mold and other pollutants.
- Provided consultation to multiple elder care sites and residents about potential bacterial exposures from the sewer overflow that resulted from severe thunderstorms in July 2010.
- Staff worked with the Massachusetts Department of Public Health to alert the public about the risks posed by high counts of toxic algae that were detected in the river in August 2010. Signage developed by CPHD staff was adopted for the entire Charles River basin along both sides of the river. Monitoring of algae counts continued into late fall.
- Addressed environmental health issues related to commercial ventures involving a proposed residential development adjacent to Cambridge Highlands on a traditionally industrial parcel; a review of the impact of the Mich-Lin waste transfer station on abutters and the city storm system;

and consultation with several auto body shops on better containment of fumes and transitioning to less hazardous materials.

- The division served as a key partner on an air quality project, which is supported by a \$50,000 Harvard Catalyst grant, to develop and test multiple protocols for measuring air pollution using mobile and fixed monitoring systems. In 2010, the project team hired a program coordinator, conducted preliminary field tests of equipment, and began developing strategies for mobile air quality sampling and community engagement. The project is a partnership of the Cambridge Public Health Department's Environmental Health Division, Harvard University and MIT researchers, the Museum of Science, Boston University, residents, and community advocates. (See also "Institute for Community Health" chapter.)
- As a member of the city's Rodent Control Task Force, the Director of Environmental Health continued to develop a comprehensive rodent control strategy with city partners. In 2010, the task force participated in a three-day course on rodent control and behavior offered by the New York City Department of Health and Mental Hygiene. Following the training, the Cambridge team engaged in citywide outreach and education on rodent control strategies, and provided guidance to the city's Inspectional Services Department on a neighborhood assessment project to identify properties at high risk for rodent activity.

Epidemiology and Data Services

The Division of Epidemiology and Data Services provides key epidemiological, data management, and analysis support to all CPHD divisions. The goal of the division is to monitor the overall health status of Cambridge residents.

- Expanded the school absenteeism and influenza-like illness surveillance system to include other communicable diseases (in addition to flu) and emerging health issues. The system was implemented in Cambridge schools and universities.
- Continued to monitor disease trends and emergency department data for unusual activity.
- Staff provided data and tools for a number of CPHD programs and grant applications in 2010. Highlights include analysis of data from the 2008 Cambridge Behavioral Risk Factor Surveillance System, and recent Teen Health Surveys and Middle Grades Health Surveys; analysis of enforcement data related to the Cambridge Trans Fat Regulation; and creation of tools and forms for enhancing communicable disease surveillance and investigation.
- Analyzed data from the department's school-based oral health program, which provides dental screening to Cambridge school children in grades pre-K–4. The analysis showed that frequent dental screenings and/or screenings conducted at an early age were associated with reduced incidence of serious tooth decay in third graders in Cambridge schools. The study was presented at the American Public Health Association Annual Meeting in November.
- As part of a two-year, \$62,000 grant through the Boston University School of Public Health, staff tested and provided feedback on epidemiologic software for local and state health departments.

- Staff participated in regional, state, and national work groups, including the Massachusetts Department of Public Health's MAVEN Governance Council and the National Association for County and City Health Officials' Infectious Disease Control and Prevention Workgroup.

Policy, Licensing, and Regulatory* Activities

- The Cambridge Biosafety Regulation, which extends oversight authority to include all infectious and recombinant high-risk biological work conducted in Cambridge, took effect January 1, 2010. Cambridge is one of the few municipalities in the country that regulates biotechnology, and as a result, the department's Director of Environmental Health was invited to speak about the regulation to statewide and larger regional audiences in 2010, as well as provide technical assistance to several Massachusetts towns.
- In a formal memo to the Cambridge City Manager, the department recommended establishment of a Cambridge Food and Fitness Policy Council for a one-year period. The purpose of the council would be to provide a forum for developing strategies to make healthier foods and physical activity opportunities accessible to more residents. Staff facilitated the first meeting in September 2010, and members included representatives from city departments, Cambridge Health Alliance, food pantries and other community-based organizations, and the agricultural community.
- The department released enforcement data for the first year of the Cambridge Trans Fat Regulation, which was implemented in 2009. Of note, the city's Inspectional Services Department conducted more than 1,100 inspections between July 2009 and June 2010. More than 30 businesses, or 3%, were found to be using products containing trans fat. The violators discontinued use of trans fat and were not fined.
- In March 2010, the Cambridge Public Health Department submitted written testimony in support of proposed food allergy awareness regulations from the Massachusetts Department of Public Health. The final regulations were promulgated in June, and reflected suggestions made by CPHD and other groups. The goal of regulations is to minimize risk of illness and death due to accidental ingestion of food allergens in a food service establishment.
- The Commissioner of Laboratory Animals inspects research facilities that use laboratory animals in the City of Cambridge and enforces city Ordinance 1086 by reviewing protocols, husbandry, and procedures. In 2010, there were 40 facilities using animals in research. The animals were primarily mice and rats, but also included a wide variety of other species.
- The department licensed 77 biotechnology labs: six body art establishments and 36 practitioners: three bodywork establishments and 10 practitioners; two indoor ice rinks; and three tanning establishments.

* This section highlights key CPHD regulatory activities but does not address the full scope of CPHD's statutory obligations.

Public Health Nursing Services

The department's Public Health Nursing Division focuses on disease prevention and control. Core functions are communicable disease investigation and follow-up, tuberculosis prevention and control, immunizations to vulnerable populations, and community health and wellness education.

- Public health nursing staff followed up on 142 communicable disease reports. In addition to routine investigations, this work included responding to several tuberculosis exposures (see TB section), a typhoid exposure, and one of the state's largest norovirus outbreaks in which more than 280 people became ill after dining at the Harvard Faculty Club. During the norovirus outbreak, epidemiology staff created interview forms, interviewed (along with nursing staff) over 150 individuals reporting illness, and produced comprehensive surveillance reports.
- In winter 2010, the department organized and staffed six public flu clinics, including mass clinics at the Cambridge Rindge and Latin School and the Cambridgeside Galleria; offered flu vaccination "walk in" hours at the health department twice weekly through February; and continued to provide on-site vaccinations to Cambridge Public School teachers and staff. The department administered a record 10,000 seasonal and H1N1 flu vaccinations during the 2009–2010 flu season.
- For the 2010–2011 flu season, public health nurses administered 2,651 seasonal flu vaccines and 77 pneumonia shots at citywide flu clinics and other venues. The department hosted four "family friendly" flu clinics at which children as young as 6 months were vaccinated.
- Nursing staff continued to serve as case managers for patients with tuberculosis infection or disease. In 2010, patients with TB made 2,235 visits to the Schipellite Chest Center at the Cambridge Hospital campus and public health nurses made home visits to Cambridge residents with active TB. Staff also responded to separate TB exposures at a local university, a large Cambridge biotechnology laboratory, and a long-term nursing care facility. This work involved assessing, educating, and performing skin tests on people who may have been exposed to infected individuals.

In addition, nursing staff received training on the Cambridge Health Alliance's EPIC system (electronic medical records). When the system becomes fully active in early 2011, nurses and physicians will use the EPIC system to enter TB patient information, laboratory results, and provider communications.

- Nursing staff provided 115 hepatitis A and B, measles, mumps, rubella (MMR) and pneumonia immunizations to walk-in patients at CPHD.
- The Cambridge Public Health Department (nursing and epidemiology staff) and Cambridge Health Alliance providers continued to identify and facilitate treatment and follow up for residents at high risk for hepatitis B infection or who are already infected. In 2010, staff contributed to the development of a hepatitis B "SmartSet" that will provide guidance to CHA clinicians on how to care for patients living with hepatitis B. The "SmartSet" is a product of the Center for Public Health Care Training, a collaboration of the CHA Department of Medicine and CPHD. In addition, nursing staff provided free hepatitis B vaccines to patients referred by the Cambridge Health Alliance's HIV counseling and testing program.

- Nursing staff organized an all-day health fair, "Footsteps for Life: Claiming your Health and Wellness," at the St. Paul AME Church Christian Life Center in April. CPHD nurses provided blood pressure, cholesterol, and glucose screenings, and gave seminars on diabetes, women's health, breast cancer, cardiovascular disease, prostate cancer, dental care, and nutrition. More than 100 people attended the event.
- To promote senior wellness, nursing staff continued to provide monthly health seminars, exercise classes, and blood pressure screenings to Cambridge seniors at the city's two senior centers and to a group of Haitian seniors at the LBJ Towers, a senior housing development. About 50 seniors regularly attended these meetings. In addition, nursing staff (1) held weekly support meetings in winter 2010 to the group of Haitian seniors at LJB apartments, following the earthquake in Haiti; (2) participated in a community task force (Community Resources for Elder Wellness) aimed at reducing accidental falls among seniors, and screened more than 100 seniors for falls risk; and (3) attended a program on hoarding to develop skills at identifying and responding to community members with this problem.

School Health Programs and Services

The goal of School Health Programs and Services is to help students in grades K-12 stay healthy and in school so they can reach their academic potential.

- Cambridge public school students made 35,946 visits to school nurses for illness and injury during the 2009-2010 school year. Of these visits, only 5% resulted in dismissal from school. The low dismissal rate meant that the vast majority of CPS students who visited their school nurse were successfully treated and sent back to their classrooms with minimal interruption of their academic day.
- During the 2009-2010 school year, school nurses cared for more than 1,200 CPS children diagnosed with a chronic physical or developmental condition.
- During the 2009-2010 school year, 3,388 CPS elementary and high school students received a vision screening, 2,664 received a hearing screening, and 2,664 received a postural screening.
- Nursing staff immunized more than 800 CPS students (grades pre-K-12) against seasonal flu during fall 2010. Free flu shots were also offered to CPS teachers and staff.
- The School Health Program established the role of Health Care Liaison to the Cambridge Public Schools' Office of Special Education. A school nurse is serving as the liaison for the 2010-2011 academic year, and is responsible for providing assessment, evaluation, and placement recommendations for medically fragile preschool children entering the school system.
- The School Health Program continued to provide health care oversight and clinical guidance to five Cambridge nonpublic schools, as well as city-managed preschools and camps. In summer 2010, staff provided health and medication trainings to approximately 135 staff from Cambridge summer camps and the city's Recreation Division.

- The School Health Program developed a food allergy policy to ensure the safety and well-being of all CPS students with life-threatening food allergies, which was implemented in fall 2010. In addition, staff trained more than 40 CPS school bus drivers on how to deal with a child passenger who experiences a life-threatening allergic reaction.
- The School Health Program collaborated with the CPS Health and Physical Education Department and the Institute for Community Health to produce and distribute the annual Health and Fitness Progress Reports.
- Nutrition staff conducted 22 elementary cafeteria “tastings”; introduced 15 menu items and a soup/salad bar at Cambridge Rindge and Latin School; secured funding for fruit and vegetable snacks at four schools; conducted 22 cooking activities for children and families; gave six nutrition presentations to adults; and presented at the Museum of Science’s “Food for Thought: Setting the Agenda” forum for high school youth.

Honors & Recognition

- Claude-Alix Jacob was elected to the Board of Directors of the National Association of County and City Health Officials (NACCHO) and was appointed to the Council of the Public Health Leadership Society.
- The Men’s Health League was selected as a model practice by NACCHO for demonstrating exemplary and replicable qualities in response to a local public health need. In addition, Program Manager Albert Pless, Jr., and the Men Health’s League received the 2010 Community Service Award from the Partnership for a Heart-Healthy, Stroke-Free Massachusetts.
- Cambridge was named one of the nation’s “100 Best Communities for Young People” by America’s Promise Alliance and ING. CPHD is a key partner in three initiatives highlighted in the award nomination: the Agenda for Children, Baby University, and Healthy Living Cambridge Kids.
- Cut It Out Cambridge, a domestic violence prevention initiative at CPHD, earned a “Bright Idea” designation from Harvard University’s Kennedy School of Government.
- The department’s “Promtacular” workshop was named the 2010 “Outstanding Substance-Free Event” by the Cambridge Prevention Coalition. The workshop challenges teen girls’ preconceptions about prom, dating, and self-image.

Other Activities

- In partnership with the Cambridge Police and Cambridge Prevention Coalition, CPHD staff helped launch a citywide program that will allow residents to safely dispose of unused prescription drugs.
- Staff produced four public service announcements that will air on CCTV through June 2011. Topics were flu vaccination, children’s dental health, domestic violence, and nutrition.

- For National Public Health Week in April, staff produced a poster exhibit, "H1N1: The Cambridge Story," which was displayed at Cambridge City Hall; co-hosted the 7th annual Real World Public Health symposium with the Institute for Community Health for 60 graduate students, and organized other events.
- Staff gave presentations on domestic violence prevention, men's health, and children's oral health at the American Public Health Association's 138th Annual Meeting in Denver.
- Staff presented at two Museum of Science forums, "Toxic Traffic" and "Food for Thought: Setting the Agenda."
- The Director of Environmental Health gave a presentation about the public health impact of anticipated climate change to the Cambridge Climate Protection Action Committee in January; and attended a two-day workshop on adapting to climate change at the Lincoln Land Policy Institute in November.

2010 Cambridge Highlights:

Community Affairs Department of the Cambridge Health Alliance

One of the greatest strengths of Cambridge Health Alliance is its ability to respond to community needs. The Department of Community Affairs (CAF) helps the Alliance address these needs through outreach efforts and innovative community health programs. Through these efforts, Community Affairs staff reach populations that may not have access to the health care system, informing them about health care services and helping reduce barriers to care. They also help individuals make behavior changes to support a healthy lifestyle for themselves and their families.

Volunteer Health Advisor Program

The Volunteer Health Advisor (VHA) Program is operated by the Community Affairs Department of Cambridge Health Alliance. The program works with faith-based and community-based organizations to recruit, train, and support Volunteer Health Advisors (VHAs) to provide culturally appropriate peer-based support, health education, and health promotion activities where community residents live, work, and go to church.

Since its inception in 2001, the program has trained more than 500 VHAs from the Brazilian, Latino, Haitian, South Asian, African, African-American, and other communities in the Cambridge Health Alliance service area. The program was the recipient of an American Hospital Association NOVA Award for innovative, collaborative programs that improve their community's health status and the 2008 Booker T. Washington Award for Wellness in Minority Health. In 2010:

- 75 Cambridge residents served as Volunteer Health Advisors.
- In March, program staff trained 16 ESL students at Centro Latino in Cambridge to be Volunteer Health Advisors.
- The program sponsored or participated in 35 events in Cambridge. These events included a health fair at Fresh Pond Apartments organized by the VHA Program, the Cambridge Economic Opportunity Committee (CEOC), and the Fresh Pond tenants group; as well as Area IV Pride Day, Hoops 'N' Health, and the Area IV Community Health Fair at which staff and VHAs provided outreach.
- Program staff gave 22 health education workshops for Cambridge residents on an array of topics, including cardiovascular health and breast, cervical, colorectal, and prostate cancer, in partnership with the Massachusetts Department of Public Health's "Helping You Take Care of Yourself" program. The sessions were held in English, Spanish, Portuguese, and Haitian Creole.
- With support from the Tufts Health Plan Foundation, staff from the VHA Program and Community Affairs, (in collaboration with CHA clinical services and Community Servings), developed an eight-session diabetes self-management support program for Haitian seniors. The program is based on the American Diabetes Association's Diabetes Conversation Maps Program, and was adapted for a Haitian senior population by Community Affairs staff. The program, which is open to all CHA

Haitian patients age 60 or older, was presented once in the spring for Cambridge Elder Service Plan patients and twice in the fall for Haitian seniors from CHA primary care sites.

Reaching Out About Depression (ROAD)

Reaching Out About Depression (ROAD) is a community-based program created by and for low-income women struggling with both poverty and depression. ROAD offers workshops that provide women with peer support and opportunities for networking and social action; an Advocacy Resource Team of law and counseling students; and a leadership development program for women who join the network so they can become agents of change in their communities. Eight Cambridge women continued as volunteer program “facilitators” who develop their leadership and advocacy skills by directing programming, facilitating workshops, and serving as peer advocates.

The ROAD program experienced significant financial challenges in 2010, including the loss of ROAD’s primary foundation supporter. This led to a reduction in staffing support and advocacy services during the fall. As a result, ROAD began exploring opportunities for collaborating with other Cambridge-area agencies that serve low-income women to build a sustainable future for the program.

In 2010:

- ROAD facilitators served 28 adult women directly through the workshop series, and provided child care to 14 children.
- The ROAD Advocacy Resource Team worked with 20 advocates from Harvard Law School and Boston College. In total, the advocates provided over 700 hours of direct advocacy to ROAD women.
- ROAD explored collaboration opportunities with Transition House and the YWCA Cambridge; and did outreach with the Vineyard Christian Fellowship, the Somerville Rotary Club, and the Dance World Fellowship. ROAD members also participated in a practice session for Cambridge Hospital residents learning about community-based participatory research (CBPR) methods and presented at a panel discussion on CBPR organized by the Harvard Catalyst.
- In the spring 2010, as a wrap-up to a workshop on coping with life changes, ROAD members hosted a community ceremony to celebrate change and mourn loss.
- The ROAD leadership development program provided trainings for women on motivational interviewing and non-violent communication, as well as weekly yoga classes and regular writing groups.
- ROAD women hosted regular social events in the Area IV community, including potlucks, a holiday “cookie-off,” game nights, and a summer cookout.
- In December, ROAD was named “Partner of the Month” by the National Network to Eliminate Disparities (NNED) in Behavioral Health and spotlighted on the NNED website.

Cambridge Health Alliance Breast Health Initiative

The Breast Health Initiative is a collaborative project of the Cambridge Health Alliance departments of Radiology, Medicine/Primary Care, and Community Affairs, with funding support from the Avon Foundation. Its goal is to improve breast health screening, diagnostic and treatment services, patient outreach, and patient education. In 2010:

- Community Affairs received new grants from (1) the Avon Foundation to support patient navigation and outreach and (2) the Massachusetts Affiliate of the Susan G. Komen Foundation to support breast health education and community outreach.
- Cambridge Health Alliance's Breast Health Connection, which began in 2009 with initial funding support from the Komen Massachusetts Affiliate, provided education on breast health and connected women to CHA breast health services. The program served community organizations and women residing in Cambridge and surrounding communities.
- In collaboration with primary care sites, the program's Breast Health Coordinator and Community Affairs multilingual staff contacted more than 800 CHA patients overdue for mammography screening, and provided these women with breast health education and support to help them identify and help them overcome barriers that had kept them from getting mammograms in the past.
- Breast Health Initiative staff provided education and outreach at eight community events in Cambridge, including the CHA World Breastfeeding Week Party at the Cambridge Hospital Campus in August. About 50 to 100 people attended each event, many of whom received "one-on-one" direct education about breast health.
- The Community Affairs Breast Health Team worked closely with two Breast Health Initiative patient navigators at the Cambridge Breast Center clinics at the Cambridge Hospital and Whidden Hospital campuses to promote and support the programs that these clinics offer to breast cancer survivors, as well as participate in joint activities.

Integrated Counseling, Testing, and Referral Program

The Integrated Counseling, Testing, and Referral (ICTR) Program provides confidential counseling before and after testing for people who may be infected with HIV, hepatitis C, chlamydia, gonorrhea, or syphilis. Clients who are at risk for hepatitis A or B are referred for vaccination and services, regardless of their ability to pay. The ICTR program also provides educational workshops about the transmission of these diseases, how to prevent them, and where to seek treatment. Services are provided in English, Spanish, Portuguese, Haitian Creole, and French. Interpreters are also available. In 2010:

- HIV counseling and testing clinics were available to Cambridge residents at the Windsor Street Health Center, the Zinberg Clinic at the Cambridge Hospital Campus, and the East Cambridge Health Center.
- In January, the ICTR Program introduced HIV rapid testing at the Windsor Street Health Center in Cambridge. In 2010, more than 580 patients received rapid tests at this site.

- Staff organized five HIV counseling and testing days in Cambridge: two at the East Cambridge Health Center and three at the Windsor Street Health Center. Three of these testing days were organized in observance of National Black HIV/AIDS Awareness Day on Feb. 11 and World AIDS Day on Dec. 1. Staff and volunteers provided rapid tests to a total of 121 people at these events.
- Staff led two weekly group education sessions on HIV, hepatitis C, and sexually transmitted infections for 17 clients of the Cambridge Community Corrections Center.
- Staff hosted four monthly group education sessions on HIV, hepatitis C, and sexually transmitted infections for 34 clients of Womenplace, a residential treatment program operated by CASPAR.
- The HIV Outreach Program participated in the Hoops 'N' Health event in Cambridge in 2010, providing condoms and information about HIV prevention and services to some of the participants.

Health Care for the Homeless

Health Care for the Homeless (HCH) provides primary and episodic health care to homeless adults and families at two sites in Cambridge: the Salvation Army Shelter and the CASPAR-Albany Street Shelter. The program's mission is to provide health care services that are affordable, accessible, and acceptable to homeless men, women, and children. In 2010:

- Health Care for the Homeless providers treated more than 500 unique patients, who accounted for more than 2,500 visits.
- The Homeless Patient Committee at the Cambridge Hospital Campus helped improve coordination of care between inpatient teams and the program's outpatient providers. Following the committee's recommendation, HCH staff now conduct hospital rounds three times weekly, and HCH staff have more input to inpatient teams.
- Program staff worked closely with the CASPAR First Step Street Outreach Team to care for the acute needs of people living on the streets.

Women, Infants, and Children Program (WIC)

The Cambridge/Somerville Women, Infants and Children (WIC) Program provides nutrition counseling, breastfeeding support, referrals to health and social services, and checks to receive free healthy foods for eligible families. The WIC program provided services at two locations in Cambridge: the Windsor Street Health Center and the Jefferson Park housing development. In 2010:

- The WIC program served more than 1,470 Cambridge residents. About 62% of eligible Cambridge residents participated in WIC.
- The program continued to work with the CHA Breastfeeding Task Force to coordinate breastfeeding support services for new mothers. In April 2010, WIC Breastfeeding Peer Counselors began visiting the maternity unit at the Cambridge Hospital Campus to provide support to all new mothers who breastfeed their newborns three days a week. On average, 35 new mothers who

delivered at the Cambridge Hospital maternal unit received the breastfeeding support from WIC Breastfeeding Peer Counselors each month.

- The program began offering “Happiest Baby on the Block” classes at the Windsor Street Health Center to new parents (including non-WIC clients) interested in learning techniques for soothing their crying babies.

2010 Cambridge Highlights: Institute for Community Health

The Institute for Community Health (ICH) is a collaborative effort of three Harvard teaching affiliates: Massachusetts General Hospital, Mount Auburn Hospital, and Cambridge Health Alliance (CHA). The mission of ICH is to improve the health of residents in Cambridge, Somerville, and surrounding towns through community-based participatory research and evaluation, program and policy development, and education and training. Dr. Karen Hacker, ICH Executive Director and Associate Professor of Medicine at Harvard Medical School, and the staff have established trusting relationships with community leaders and helped build capacity in these communities to understand and integrate evidence into public health programming.

Core elements of the ICH mission are improving access to quality health care, working on community-relevant concerns, involving diverse partners, and respecting the diversity of the communities ICH serves. ICH has been involved in community-based participatory research (CBPR) projects which have improved community health, built community capacity, and translated research and evaluation results to community action programs and policies. In 2010, ICH partnered with the Cambridge Public Health Department, Cambridge Health Alliance, and many local agencies and coalitions to improve and expand public health programming in Cambridge.

Children's Health Research and Evaluation

- **Baby University.** ICH evaluated the first pilot session of Baby University, a citywide collaborative in Cambridge focusing on parenting. Twenty-six North Cambridge residents participated in the 16-week session that launched in January 2010. ICH staff collected and analyzed data, which was used to further improve and refine the program. The vast majority of participants reported an increase in their confidence as a parent; understanding of child development; knowledge and use of new tools and strategies for parenting; confidence in being able to find appropriate support and resources for their family; and comfort-level with advocating for their children. In addition, families reported having a better understanding of the role peer support and how to access it.
- **Agenda for Children Literacy Initiative.** ICH continued to evaluate the multifaceted Agenda for Children Literacy Initiative, based at the Cambridge Public Health Department. In 2010:
 - ICH conducted a telephone survey of 20 Cambridge parents of children newborn to age 3 who received a literacy home visit. Respondents reported an increase in awareness of why it is important to talk to their young children and what to do when reading to them. More than 85% of respondents also reported changing the way they talk and read to their babies and toddlers following the home visit.
 - Three of the 15 families enrolled in the Pathways to Family Success program were selected to take part in case studies implemented by ICH. Interviews highlighted the important role the Pathways program plays in supporting women and their families. This fall, ICH continued to work with Agenda for Children on modifying and creating programmatic and evaluation databases, conducting analysis on post-workshop "talk" and "read" surveys, and conducting phone interviews with home visit recipients.

- **Behavioral Health.** ICH continued to evaluate the implementation of behavioral health screening for children in Cambridge Health Alliance pediatric and family medicine sites. On average, over 70% of pediatric patients receive a behavioral health screening at their annual well-child visit.

Karen Hacker, ICH Executive Director, was the lead author of “Mental and Behavioral Health Screening at Preventive Visits: Opportunities for Follow-Up of Patients Who are Nonadherent with the Next Preventive Visit,” which was published in *The Journal of Pediatrics* (November 2010, online edition). Co-authors were Lisa Arsenaault (ICH), Sandra Williams (ICH), and Ann DiGirolamo (ICH).

Community-Based Participatory Research Initiative

- ICH serves as the lead organization for the community-based participatory research program at the Harvard Clinical and Translational Research Initiative (Harvard Catalyst), whose goal is to improve human health by enabling collaboration and providing tools, training, and technologies to academic researchers and community partners. In 2010:
 - ICH convened a workshop for the Association for Prevention Teaching and Research entitled, “Taking it to the curbside: Engaging communities to create sustainable change for health.” The April workshop was attended by more than 200 researchers and community partners from Cambridge and other municipalities.
- The CBPR initiative also funded several Cambridge-based CBPR projects through its planning grant program:
 - The program awarded a CBPR project development grant to Cambridge Health Alliance’s Reaching Out About Depression (ROAD) program and researchers from Harvard University and Boston College to build the evidence base for a grassroots community-based intervention to address depression among women living in extreme poverty in Cambridge.
 - The Sustainable Community Exposure Network via Telemetry project received a CBPR project development grant in 2009. In 2010, the team hired a program coordinator, conducted preliminary field tests of equipment, and began developing strategies for mobile air quality sampling and community engagement. The primary goal of this air quality project is to develop and test multiple protocols for measuring air pollution using mobile and fixed monitoring systems. The project is a partnership of the Cambridge Public Health Department’s Environmental Health Division, Harvard University and MIT researchers, Museum of Science, Boston University, residents, and community advocates. The project subsequently received a \$50,000 grant from the Harvard Catalyst in summer 2010 to continue this work. (See also “Cambridge Public Health Department” chapter.)
 - The ADHD pilot study (which received a project development grant in 2009) team developed tools in the CHA electronic medical record system for data collection, and trained physicians at the pilot sites how to use them. The goal of the study is to improve physician adherence to ADHD treatment guidelines using a patient registry, and builds on CHA’s pioneering work with immunization and asthma registries. This project is a collaboration between investigators

at Cambridge Health Alliance (lead investigator) and ICH. This project subsequently received a \$50,000 grant in 2010 from the Harvard Catalyst to continue this work.

- The Body Mass Index (BMI) Health Disparities project (funded in 2009) used a variety of data, interviews with Cambridge families, and meetings with community groups to better understand why African-American and black youth are disproportionately affected by obesity and to identify promising interventions. The project is a partnership of ICH (lead investigator), the Cambridge Public Health Department, the Cambridge Public Schools, and the Margaret Fuller Neighborhood House. This project subsequently received a \$50,000 grant in 2010 from the Harvard Catalyst to continue this work.

Obesity Prevention and Physical Activity Promotion

ICH continued to partner with the Cambridge Public Health Department and other groups to address obesity prevention and the physical activity promotion in Cambridge. In 2010:

- In partnership with representatives from the public health department, the school department, and the Margaret Fuller Neighborhood House, ICH led the Harvard Catalyst-funded investigation of weight status disparities among black and African-American youth in Cambridge. The grant facilitated analysis of existing data, interviews with Cambridge families, and community focus groups to inform the development of prevention and intervention strategies. (See “Harvard Catalyst” section).
- ICH Senior Scientist Virginia Chomitz, Ph.D, was the lead author of “Healthy Living Cambridge Kids: A Community-based Participatory Effort to Promote Healthy Weight and Fitness,” which was published in the January 2010 issue of the journal *Obesity*. The article summarized the grassroots collaborative, multi-year efforts to promote healthy eating and physical activity in Cambridge. A significant decline in obesity was documented for Cambridge public school students during this time period. Co-authors were Robert McGowan (CPSD), Josefina Wendel (CPHD), Sandra Williams (ICH), Howard Cabral (Boston University School of Public Health), Stacey King (CPHD), Dawn Olcott (CPHD), Maryann Cappello (CPSD), Susan Breen (CPHD), and Karen Hacker (ICH).
- Virginia Chomitz (ICH) and school nutritionist Dawn Olcott (CPHD) were featured prominently in an article about the Cambridge school meals program, “Lunchroom Makeover: How schools can plant the seeds for healthy eating,” which was published in a *Newsweek* guidebook for schools distributed nationwide in fall 2010.

Public Health Systems Research

- **Public Health Services and Systems Research.** In February 2010, the Institute for Community Health and Boston University received a Research Implementation Award from the Robert Wood Johnson Foundation to conduct a statewide survey of local public health departments and boards of health, including Cambridge. The purpose of the study is to determine whether communities that work in partnership to provide public health services have greater capacity to meet national

performance standards and deliver evidence-based services than those who do not. Survey interviews will be conducted with local public health officials through spring 2011, with the goal of collecting information from all 351 health departments or boards of health in Massachusetts. Results will be disseminated in a formal report, as well as in community settings.

- **H1N1 After-Action Report.** The Massachusetts Coalition for Local Public Health contracted with the Institute for Community Health in March 2010 to conduct a statewide assessment of local public health response to the 2009-2010 H1N1 flu pandemic. The study focused on how local boards of health and health departments, including Cambridge, planned for H1N1 outbreaks in their communities, the successes and challenges of implementing their plans, solutions they developed to address unexpected challenges or limitations, and recommendations for improving local and state coordination and prevention efforts. The outcome of the study was a report released in October 2010, *Local Public Health Response to H1N1 in Massachusetts*, which is intended for local and state public health officials and municipal leaders to use in planning for future infectious disease outbreaks.

Other Activities

- **Healthy Children Task Force:** ICH continued to coordinate and staff the Healthy Children Task Force, a coalition of Cambridge-based education, health care, public health, and social service providers committed to improving the health of Cambridge children. The task force continued to prioritize health and school success, and had four active subcommittees: The 5-2-1 Action Group (devoted to healthy eating and physical activity), the Food Service Advisory Group, the Mental Health Promotion Group, and the Child Trauma Group.
- **Men's Health League.** ICH continued to evaluate the Men's Health League (MHL) based at the Cambridge Public Health Department. In partnership with MHL program staff, ICH gathered evaluation data through written surveys completed by participants; participant interviews and focus groups; and clinical data. Key findings:
 - Participants in the Men's Health Team, Fit for Life, and Fitness Brothers programs showed improvement in physical activity levels and nutritional intake upon completion of their respective programs.
 - Of the 49 men enrolled in the Navigated Care Program from 2008 through 2010, 59% did not have health insurance at baseline. Of these uninsured men, 86% acquired health insurance upon graduation from the program.
 - The vast majority of participants expressed high levels of satisfaction with all program components of the Men's Health League.

2010 Cambridge Highlights: Clinical Services of Cambridge Health Alliance

Cambridge Health Alliance (CHA) is an integrated health system that provides comprehensive clinical, public health, teaching, and research programs that benefit Cambridge residents.

In 2010, CHA continued to offer expert health care services across the continuum of care. It also had a highly successful recruiting year, filling the key leadership positions of Chief Medical Officer and Chief Nursing Officer, hiring new physicians to support its many patient care services, and attracting new residents and trainees from some of the nation's finest medical schools.

CHA also continued to lay the foundation for a major transformation in its clinical care. It expanded its electronic medical record system by launching a new patient portal. It also did major planning work to develop a Patient-Centered Medical Home model. This effort will result in better coordinated patient care and improved patient outcomes.

Primary Care

In 2010, CHA continued to provide primary care services to patients of all ages and offer the entire spectrum of primary care disciplines – Pediatrics, Family Medicine, Adolescent Medicine, Internal Medicine, and Geriatricians – at its Cambridge medical practices.

CHA primary care services were available at seven locations in Cambridge:

- CHA Primary Care Center at the Cambridge Hospital Campus
- CHA Cambridge Pediatrics at the Cambridge Hospital Campus
- CHA Cambridge Family Health (Inman Square)
- CHA Cambridge Family Health North (Porter Square)
- CHA East Cambridge Health Center
- CHA Teen Health Center at Cambridge Rindge and Latin School
- CHA Windsor Street Health Center

CHA also continued to provide primary care specialty programs for specific populations. For older adults, CHA continued to offer the Elder Service Plan and the House Calls program, both of which make special accommodation for senior health needs. Population-sensitive primary care was provided through the Healthcare for the Homeless program and Zinberg HIV clinic.

As a community-based health system with a national reputation for primary care excellence, CHA was successful in recruiting new primary care providers to meet the needs of Cambridge residents. In 2010, eight primary care physicians joined CHA medical practices and programs in Cambridge, resulting in a net gain of five physicians. Two of these providers specialize in Geriatrics, ensuring that seniors will continue to have access to doctors that understand their unique and complex health needs.

CHA also recruited Dr. Avra Goldman as the new Medical Director for the East Cambridge Health Center. Dr. Goldman previously served as the Medical Director of Boston Medical Center's Family Medicine Clinic.

Emergency Medicine

The Cambridge Hospital Emergency Department continued to have a major impact on the health of the city, caring for patients who made more than 30,000 emergency visits in 2010.

The organization's multi-year emergency service improvement work also continued in 2010, with notable successes. Data released in 2010 indicate that the length of stay in the emergency department decreased 13% since 2006, while patient satisfaction improved nearly 10% over the same period. These results led the National Association of Public Hospitals and Health Systems to recognize the Cambridge Emergency Department as a national model for emergency care.

Emergency staff at the Cambridge Hospital Campus also worked to improve community health. In 2010, the Cambridge Emergency Department received a national CARES award for improving the care of cardiac arrest patients. The award was presented to Cambridge Health Alliance by the Centers for Disease Control and Prevention (CDC) and the Emory University School of Medicine.

CHA staff were also recognized for individual accomplishments. Luis Lobon, MD, site chief of emergency medicine, was named president of the Massachusetts College of Emergency Physicians. Nicole Jean-Louis, RN, received the EMS Nurse of the Year award from the Metropolitan Boston Emergency Medical Services Council.

Obstetrics/Gynecology & Women's Health

CHA's Women's Health team includes a diverse team of midwives, nurse practitioners, obstetricians, and family medicine physicians. As a group, these providers offer outstanding well-woman care, maternity services, and gynecologic surgery to women of all ages. They also provide local women with the ability to choose a provider, and a style of care, with which they feel most comfortable. In 2010:

- The global Baby-Friendly Hospital Initiative recognized the Cambridge Birth Center as a "Baby-Friendly" birth facility for implementing specific steps to support successful breastfeeding. The Center is one of only 100 facilities in the United States to earn this designation. The Baby-Friendly Hospital Initiative is sponsored by the World Health Organization and the United Nations Children's Fund (UNICEF).
- The CHA midwifery program received the "Healthy Mothers, Healthy Babies Partners Award" from Partners in Perinatal Health.

- Researcher Melissa Bartick, MD, based at the Cambridge Hospital Campus, identified that poor breastfeeding rates cost the U.S. health care system \$13 billion annually. This finding was covered by the CBS Evening News, CNN, ABC News, *U.S. News & World Report*, *Scientific American*, and many other local, national, and international outlets.

Breast Health

CHA continued to be a leader in the area of breast health awareness and care of breast disease. This important work was furthered through collaboration among clinical and community health programs across the system, including the departments of Surgery, Radiology, Medicine/Primary Care, and Community Affairs. In 2010:

- More than 800 patients from Cambridge health centers were identified as not being up-to-date with their mammograms and were referred to CHA's Breast Health Initiative. CHA staff also provided education and outreach at eight community events in Cambridge.
- CHA recruited two female breast surgeons, including Diane Lockhart, MD, the new Director of the Cambridge Breast Center. Dr. Lockhart joined CHA from Harvard Vanguard Medical Associates.

Other Specialty Services

CHA continued to provide expert specialty services to Cambridge residents and had an exceptional year recruiting top specialists. Highlights for 2010:

- **Podiatry.** CHA recruited two foot surgeons, including Adam Landsman, DPM, who is the new Chief of Podiatry. Dr. Landsman joined CHA from Beth Israel Deaconess Medical Center.
- **Surgical Specialties.** Two female surgeons joined the CHA team: (1) A urologist who recently completed her fellowship at Memorial Sloan Kettering Cancer Center, and (2) an ear, nose, and throat specialist with nearly 20 years experience.
- **Neurology.** CHA added two neurologists to its team: (1) A headache specialist who recently completed his fellowship at the Mayo Clinic and (2) a seizure specialist who completed his residency at Beth Israel Deaconess Medical Center.
- **Gastroenterology.** CHA added two female gastrointestinal physicians, one of whom recently completed her fellowship at Lahey Clinic, and the second who completed her fellowship at Boston Medical Center.
- **Oncology.** The CHA cancer program was reaccredited by the American College of Surgeons' Commission on Cancer. To receive accreditation, the CHA cancer program had to comply with 36 Commission on Cancer standards.

Mental Health

CHA continued to provide award-winning care for people of all ages with mental health needs. Outpatient services were available at several sites across Cambridge with inpatient care for children, adolescents, and adults at the Cambridge Hospital Campus. In 2010:

- CHA made substantial renovations to the Child Assessment Unit, an award-winning inpatient service for young children with severe emotional or behavioral problems. Renovations included upgrading rooms, and creating new play areas and a new sensory room for quiet time.
- CHA recruited Elizabeth Ross, MD, to serve as the new Medical Director for the Child Assessment Unit. Dr. Ross is a board-certified child psychiatrist who has partnered with Nurse Manager Kathy Regan to continue to make the program a national model for child psychiatry care.

Inpatient Medical Care and Health Care Quality

In 2009, CHA consolidated its inpatient services and now operates two medical-surgical floors and an intensive care unit (ICU) at the Cambridge Hospital Campus. This has given Cambridge residents direct access to 24-hour care in a friendly community hospital setting, increased overall efficiencies, and improved quality.

As a result, CHA continued to post strong scores in most national quality measures, including the care of patients with pneumonia, heart failure, and acute myocardial infarction (CORE measures) and patients undergoing selected surgical procedures (SCIP measures). Since 2005, CHA care teams have achieved a 40% improvement in pneumonia care, 75% improvement in heart failure care, and 20% improvement in heart attack care (acute myocardial infarction).

The organization's overall performance has been strong compared to other hospitals across the country. In fact, CHA tracks in the top 25% of hospitals nationwide for national quality measures and continues to outperform the average of all Massachusetts hospitals. CHA also continues to exceed by a wide margin the national average for all safety net hospitals.

In 2010, CHA nursing staff successfully established a Preventative Standard of Care for patients at risk for pressure ulcers (bedsores), which if untreated can lead to infection, sepsis, and even skin cancer. CHA efforts to address this national health concern reduced the number of patients at the Cambridge Hospital Campus who had a hospital-acquired pressure ulcer in 2010.

Other Activities

- **Information Technology.** In 2010, CHA launched the MyChart patient portal at all primary care and specialty locations. This new application gives patients electronic access to their medical record using a secure connection. CHA patients can now review their problem list, allergies,

immunizations, lab results, and medications online, 24-hours a day. They can also request medical advice, medication renewals, and appointments. Providers can communicate directly with their patients via MyChart and can renew medications without a phone call. This is a major improvement to the current system because it is more convenient, helps patients stay more connected to their health care team, and allows patients to better manage their health needs.

- **Commitment to Diversity.** In 2010, CHA was recognized nationally for providing high quality, culturally-competent care, an area in which the organization has traditionally excelled. A recent survey by the American Hospital Association's Institute for Diversity looked at hospitals across the country to gauge their progress in providing culturally and linguistically competent care and engaging diverse communities. Of the 185 participating hospitals, CHA was recognized in two categories. In the area of Delivering Culturally and Linguistically Competent Patient Care throughout the Organization, CHA was one of four systems named "Best in Class." In the area of Effectively Engaging Diverse Communities, CHA ranked in the top 12.
- **Response to Haiti Earthquake.** CHA staff responded swiftly to the needs of Haitian people following news of the 2010 earthquake. Some highlights:
 - Several staff members traveled to Haiti to provide direct medical care as part of U.S.-organized relief missions.
 - The Haitian Mental Health Team at Cambridge Health Alliance reached out to Haitian-Americans in communities served by CHA and helped them cope with unimaginable personal loss. In November 2010, the team was honored with the prestigious Kenneth B. Schwartz Center Compassionate Caregiver Award for its 25 years of service to the Haitian-American community.
 - CHA staff held numerous fundraisers, which raised more than \$35,000 for Haiti relief efforts.
- **Academics.** CHA continued to provide top academic experiences for medical students, residents, and trainees. In 2010, CHA made a significant effort to give participants in its academic programs the opportunity to have greater exposure to the fields of public health and community health. As part of the Internal Medicine Residency, CHA launched an innovative Health Advocacy and Activism Elective that give trainees experience with key health policy issues and allows them to conduct health advocacy research. CHA also established a partnership with the Harvard School of Public Health in a combined Internal Medicine/Occupational Medicine training program. The four-year program allows residents to train in both fields while earning a Master of Public Health degree.
- **Network Health.** CHA has a comprehensive care model that includes its health plan, Network Health. In 2010, Network Health provided health care coverage to more than 160,000 low-income Massachusetts residents. It also worked with clinical providers to improve the health of its members, including programs for CHA patients with chronic illnesses. In 2010, Network Health was named the fifth best Medicaid Health Plan in the United States by the National Committee for Quality Assurance.