



CITY OF CAMBRIDGE • EXECUTIVE DEPARTMENT

Robert W. Healy, City Manager

Richard C. Rossi, Deputy City Manager

January 25, 2013

To the Honorable, the City Council:

Please find attached for your information the 2012 Public Health Annual Report.

Very truly yours,

A handwritten signature in cursive script, appearing to read "Robert W. Healy".

Robert W. Healy
City Manager

RWH/mec
Attachment



Cambridge Health Alliance

January 15, 2013

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



HARVARD
MEDICAL SCHOOL
TEACHING AFFILIATE

JP 1/15/13 aw1052 City Manager

Dear City Manager Healy:

I am pleased to submit **Cambridge Health Alliance's annual report to the City of Cambridge**. Since joining in March 2012 as Chief Executive Officer for the Cambridge Health Alliance and as Commissioner of Public Health for the City of Cambridge, I continue to be impressed by the accomplishments that the Cambridge Public Health Department has been able to achieve with the support of and through partnership with the Cambridge Health Alliance. This past year was no exception. **Some of the department's accomplishments include:**

- Responding to four confirmed cases of West Nile virus in Cambridge
- As part of the federal Community Transformation Grant to Middlesex County, the department is overseeing an initiative aimed at creating an environment that makes it easier for residents and workers to eat healthy and be physically active.
- Implementing smoking prevention activities in Cambridge public housing sites
- Administering over 1,300 seasonal flu vaccines to area residents
- Receiving a statewide award for its exemplary contributions to tuberculosis care.
- Being selected as one of eleven finalists nationwide by the Robert Wood Johnson Foundation for its inaugural *Roadmaps to Health Prize*. This prize focuses on the city's accomplishments in the areas of healthy eating and physical activity, strengthening families, progressive urban planning, and integration of public health and clinical care.
- The re-election of Claude-Alix Jacob, Chief Public Health Officer, to the National Association of County and City Health Officials (NACCHO) Board of Directors and named Vice Chair of the Public Health Foundation Board of Directors.

Cambridge Health Alliance continues its commitment to the Cambridge community by continued investment in its Cambridge facilities including:

- Working towards Level 3 National Committee on Quality Assurance (NCQA) Patient Centered Medical Home (PCMH) accreditation of the Cambridge Family Health and Cambridge Family Health North primary care practices.
- Implementation of a Computerized Provider Order Entry (CPOE) system throughout the system integrating all medical records of Cambridge Health Alliance patients.

- Launch of the CHA Doctor Finder Service which connects new patients to a CHA PCP. New patients can either access the service on-line or by calling the multilingual team at 617-665-1305.
- CHA becomes a part of the Harvard Center for Primary Care's new Academics Innovations Collaborative which changes the way CHA residents learn about patient care, providing them a greater understanding of the patient-centered medical home model and the benefits of interdisciplinary work.
- Entering a Letter of Intent with Beth Israel Deaconess Medical Center (BIDMC) to explore clinical, academic, and strategic affiliations which could enhance care for patients at both of our institutions.

Cambridge Health Alliance's providers continue to receive prestigious awards including:

- Soma Stout, MD, PCP and Vice President of Patient-Centered Medical Home Development received the Young Leader Award from the Robert Wood Johnson Foundation which acknowledges 10 individuals nationwide for their early successes and their potential for improving health and health care in the United States in the future.
- Katherine Miller, MD, a PCP at Windsor Street Health Center, who received the 2012 Harvard Primary Care Center's Excellence in Teaching Award.

As I close this letter, I want to thank you for your past and current support of the Cambridge Health Alliance and the Cambridge Public Health Department. Your contributions to the residents and the City of Cambridge are immeasurable and will continue to be felt after your retirement.

Sincerely,



Patrick R. Wardell
Chief Executive Officer, Cambridge Health Alliance
Commissioner of Public Health, City of Cambridge

Cc: Claude-Alix Jacob, MPH

2012 Public Health Annual Report



Public Health
Prevent. Promote. Protect.

2012 Public Health Activities of Cambridge Health Alliance

A Report to the Cambridge City Manager

January 15, 2013

**Cambridge Public Health Department
Cambridge Health Alliance**

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

In January 2012, the Cambridge Health Alliance Board of Trustees announced the selection of Patrick Wardell as the new Chief Executive Officer for Cambridge Health Alliance. Mr. Wardell, who also serves as the Commissioner of Public Health for the City of Cambridge, 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 2012:

- CPHD staff provided updates to the Cambridge Public Health Subcommittee on a variety of departmental activities, including national voluntary accreditation for public health departments, health promotion and marketing projects, men’s health programming, domestic violence initiatives, and departmental responses to City Council policy orders. The Cambridge Public Health Subcommittee advises the Chief Public Health Officer about departmental priorities for health issues affecting Cambridge; promulgates public health regulations; and enhances linkages between the public health department and the Cambridge Health Alliance health care delivery system.
- Topics addressed at the bimonthly meetings of the Community Health Advisory Council included a presentation about emerging immigrant populations in the CHA service area, the Community Transformation Grant awarded to Middlesex County, food equity as a public health issue, population health approaches to employee wellness, and access to care at CHA. The Community Health Advisory Council provides input and recommendations to the Committee on Community and Public Health, a subcommittee of the Board of Trustees. The members are 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 approximately 2,800 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 public health services") 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 public health services 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 2012, the Cambridge Public Health Department brought in approximately \$1.3 million in state, federal, and private foundation funding. The department's direct expense budget was \$5.0 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 \$6.0 million appropriation received from the City of Cambridge during this period.

2012 Spotlight: A Public Health Perspective on Injury & Violence Prevention

Overview

“Injury and Violence Free Living” is one of the seven priorities of the 2011 National Prevention Strategy, a historic federal effort led by the Office of the U.S. Surgeon General to shift the nation’s health care system away from a sick-care model to one focused on prevention. The National Prevention Strategy for “Injury and Violence Free Living” focuses on strengthening policies and programs that promote safety and prevent injury and violence, with an emphasis on falls prevention, workplace safety, violence prevention, and transportation safety.

Injury—unintentional or caused by violence—is the top killer of Americans in the first four decades of life and costs the nation an estimated \$465 billion annually in health care and lost productivity.¹ Of the millions of Americans injured each year who survive, many never fully recover and often face life-long health, social, and financial problems.

In Massachusetts, injury^{*} is the third leading cause of death in the state, after cancer and heart disease. While mortality rates for cardiovascular disease, cancer, and diabetes have fallen dramatically in the Commonwealth over the past decade, the rate of fatal injuries rose 15% between 2000 and 2009. Driving this statewide trend were higher death rates from falls and drug overdoses.²

Cambridge recognizes that a collaborative, strategic approach is necessary for developing and implementing policies, programs, and coalitions that will reduce injury and violence in the community. An illustration of this approach is the 2012 citywide “21 Days of Questions, 365 Days of Action” campaign in which city and business leaders, community groups, and residents participated in a community assessment that will inform strategic planning around domestic violence prevention. The collaborative approach has also been successful in intervening in domestic violence situations. The Cambridge-Arlington-Belmont High Risk Assessment and Response Team (CABHART) is a regional coalition formed in 2010 that aims to reduce and prevent domestic violence homicides and hold offenders accountable by refining and tightening existing relationships between police, courts, and community providers in these communities.

Domestic Violence Prevention

As a community, Cambridge has taken a strong stand on domestic violence. In 1995, Cambridge launched the Domestic Violence Free Zone (DVFZ) initiative, which has raised awareness about the issue and secured funding for services. The Cambridge Public Health Department oversees the initiative and works with city and community partners to address this complex issue. The following sections highlight the department’s recent efforts around teen dating violence and workplace domestic violence policy development.

Domestic Violence Workplace Policy Initiative

Domestic violence knows no boundaries, and can carry over to the workplace. It can take many forms, including cyberstalking, threatening phone calls, or unwanted emails and texts, which can compromise the victims' job performance and attendance, and threaten their safety and that of the workplace.

In a 2005 federal survey of 7.4 million U.S. businesses and government agencies, nearly one in four large establishments (with more than 1,000 employees) reported at least one incidence of domestic violence, including threats and assaults, in the prior 12 months.³ Yet, according to the same survey, only 13% of these establishments had a domestic violence policy or program in place.⁴

Fortunately, the workplace can be a powerful ally in the life of a victim, by providing financial independence, the ability to leave the household, and a social network unknown to the abuser. It can also provide a sense of empowerment, competency, and individuality that has been damaged by abuse.

Recognizing the important role of employers in supporting and empowering workers who are victims of domestic violence, the Cambridge Public Health Department began addressing this issue in 2009. That year, the department published *How to Respond to Employees Facing Domestic Violence: A Workplace Handbook for Managers, Supervisors, and Co-Workers*. This practical guide has been adapted by organizations in four U.S. cities, as well as United Way Canada, and TJX, the parent company of T.J.Maxx.

In 2012, CPHD drafted a model policy, an implementation guidebook, and two companion videos for U.S. workplaces on responding to employees experiencing domestic violence. The first video is a fast-paced, mini-documentary that explains the issue of domestic violence in the workplace through scenarios that illustrate real-life situations and short interviews with Massachusetts Attorney General Martha Coakley, the Cambridge Police Commissioner, and a human resources manager. The second video supports employers in leading a policy development process that is appropriate for their respective workplaces.

The guidebook and videos will be released in spring 2013. This project is funded through a Policy Innovation Award from the American Public Health Association.

Teen Dating Violence

Abuse in teenage relationships, also called teen dating violence, is a substantial public health issue. Teens who experience dating violence are also at increased risk for depression, poor school performance, substance abuse, suicidal thinking, and victimization in adult relationships, as well as injury and death.⁵

In Cambridge, nearly 5% of CRLS students report having been forced or tricked into having sex in their lifetime, and 6% report having been verbally or emotionally abused in the preceding year by someone they were going out with.⁶

Teens themselves do not always realize they are in an unhealthy relationship and if they do, they may be afraid or reluctant to seek help from their parents or other caring adults.^{7,8}

Recognizing signs of teen dating violence can also be challenging. Increasingly, adolescent perpetrators are using cell phones, instant messaging, and social networking websites to monitor, threaten, and harass dating partners.

In 2010, the department began developing strategies for addressing teen dating violence as a citywide issue through policy and education. This approach focuses on promoting healthy dating relationships among youth and educating adults about how to recognize and respond to teen dating violence.

The department worked with the Cambridge Public Schools to develop a district-wide policy against teen dating violence, which was adopted in November 2010. In the policy and accompanying administrative guidelines, the school district commits to providing a learning environment in which domestic violence and teen dating violence are not tolerated. Also in 2010, CPHD and the Cambridge Women's Commission designed, promoted, and facilitated the first annual "Promtacular," a workshop on healthy self-image and healthy dating relationships for teen girls held every May.

In 2011, CPHD produced a poster campaign targeting youth about how texting can be used to perpetuate dating violence, which were distributed to CRLS, libraries, youth centers, and other locations. The department has also incorporated the role of technology into all of its community trainings about domestic violence and teen dating violence.

Most recently, CPHD developed half-day trainings for youth workers on how to talk to preteens and adolescents about sexual risk behaviors, with a focus on how teen dating relationships play out in online environments. CPHD is developing an online version of the training for youth workers and other groups.

Trauma Response

Cambridge Community Response Network

Events like teen shootings and the devastating earthquake in Haiti have raised an important question among city leaders: Before disaster strikes or an act of violence ends in tragedy, what should the city have in place to counter both the immediate and long-term impacts of trauma on a community?

To address this issue, CPHD and the city's police department, human services department, public schools, and the Peace Commission are establishing the Cambridge Community Response Network (CCRN). The CCRN will help residents, students, and workers identify the various tools and resources needed to build resiliency and better recover from a traumatic episode. Innovative approaches will include developing a multicultural behavioral response team and formalizing a "compassionate witness" component at community events, such as vigils.

Another integral component of the CCRN will be trainings on recognizing and responding to trauma as well as Mental Health First Aid (MHFA), a groundbreaking public education program that helps individuals identify, understand, and respond to signs of mental illnesses and substance use disorders. In 2013, in collaboration with area stakeholders, CPHD will be offering the 12-hour course to police officers, youth center workers, and other community groups.

Injury Prevention: Cambridge Health Alliance in the Community

Cambridge Health Alliance physicians, Cambridge Public Health Department staff, and community partners are working together to reduce accidental injuries in seniors and adolescents through two recent initiatives.

Preventing Falls in Older Adults

Falls take a daily and often unmeasured toll on the quality and length of life for seniors. Recurrent falls are a common reason why otherwise independent elderly people are admitted to long-term care institutions. Injuries sustained from falls are also the leading cause of injury death among Massachusetts residents age 65 and older. Older people are often not aware of their increased risk for falls, and many providers do not regularly assess their elderly patients for this type of risk. Recognizing the need for a comprehensive community approach to falls, a Cambridge Health Alliance physician, the Cambridge Public Health Department, and multiple community agencies formed CREW (Community Resources for Elder Wellness) in 2010. CREW focuses on screening seniors for falls risk and connecting frail elderly residents to medical care and other services. Program strategies include implementing routine falls screenings for older patients at all CHA sites, pharmacy-based education and screenings, and outreach to isolated seniors.

Sports-Related Head Injuries in Teen Athletes

Children and adolescents are among those at greatest risk for concussions, which can have a serious effect on a young, developing brain. Massachusetts law now requires all public schools to participate in a mandatory sports injury and concussion awareness program. At Cambridge Rindge and Latin School (CRLS), all student athletes receive neurocognitive assessments at the beginning of the sports season. When an athlete suffers a head injury, a team of athletic trainers, coaches, school nurses, and the teen's physician work together to ensure that the player receives appropriate treatment, follow up, and a long-term recovery plan, if needed. For students from Cambridge and surrounding communities who suffer serious concussions and require specialist care, the Cambridge Health Alliance's Teen Health Center (based at CRLS) opened a concussion clinic in fall 2012. The clinic is staffed by a Cambridge Health Alliance sports medicine physician who is a credentialed IMPACT (Immediate Post-Concussion Assessment and Cognitive Testing) Consultant.

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- * The injury category combines injuries of all intents (unintentional, suicide, homicide, injuries of undetermined intent).
- ¹ "Injury: The Leading Cause of Death Among Persons 1–44," Centers for Disease Control and Prevention, 2012. Available at: http://www.cdc.gov/injury/overview/leading_cod.html
- ² Massachusetts Department of Public Health. "A Decade of Mortality—Massachusetts: 2000–2009." July 11, 2012. Available at: www.mass.gov/eohhs/docs/dph/research-epi/death-report-09.pdf
- ³ U.S. Department of Labor, Bureau of Labor Statistics. Survey of Workplace Violence Prevention, 2005. Washington, DC. Available at: www.bls.gov/iif/oshwc/ostb1629.pdf
- ⁴ Ibid.
- ⁵ Centers for Disease Control and Prevention. "Understanding Teen Dating Violence." 2012.
- ⁶ "Summary of Results from the 2011–2012 Cambridge Teen Health Survey." Social Science Research and Evaluation, Inc. 2012. Note: The survey was administered to 1,363 Cambridge Rindge and Latin Students in spring 2012.
- ⁷ Ibid.
- ⁸ California Adolescent Health Collaborative. "Teen Dating Violence: Keeping California Adolescents Safe in Their Relationships." Available at: www.californiateenhealth.org/wp-content/uploads/2011/06/TDVbrief.pdf

2012 Highlights: Cambridge Public Health Department

Cambridge Public Health Department is a municipal health agency operated by Cambridge Health Alliance through a contract with the City of Cambridge. The department's mission is to improve the quality of life of residents and workers by reducing sickness and injury; encouraging healthy behaviors; and fostering safe and healthy environments. Service areas include communicable disease prevention and control, epidemiology, school health, environmental health, emergency preparedness, health promotion, and regulatory enforcement. The department is advised by the Cambridge Public Health Subcommittee, the Community Health Advisory Council, and the City Council's Community Health and Environment committees.

In 2012, the department continued to focus on prevention and policy initiatives around obesity, tobacco, and injury and violence, as well as respond to crisis situations. Key highlights:

- The Cambridge Food and Fitness Policy Council completed a draft strategic "roadmap" for city departments and other groups aimed at improving access to healthy foods and fitness opportunities through policy and systems change.
- The city's Smoking in Parks Task Force, co-facilitated by CPHD staff, made a formal recommendation to prohibit smoking in all public parks in Cambridge. The task force will reconvene in 2013 as the Cambridge Smoking Policy Advisory Committee, a standing committee charged with reviewing all aspects of tobacco policy within the city.
- To address sports-related head injuries in high school athletes, CPHD school nurses continued to work with Cambridge Rindge and Latin School staff and athletes' physicians to ensure that injured players receive appropriate treatment and follow up. The department was also instrumental in launching the Cambridge Health Alliance concussion clinic at the Teen Health Center in 2012. (For more injury and violence prevention highlights, see "Spotlight" essay.)
- In response to four confirmed human cases of West Nile virus in Cambridge in August, the department worked with partners to ensure that all storm drains were treated with larvicide, explored options for spraying adult mosquitoes, and launched a public information campaign focused on reducing mosquito breeding grounds and preventing bites.

The department also produced *Cambridge Health Indicators*, a report that will be released in January 2013, which provides local, state, and national data on broad measures of health and includes Healthy People 2020 target goals. The report will help inform agency strategic planning and national accreditation efforts.

Departmental Activities

West Nile Virus

- In August, state health officials reported four confirmed cases of West Nile virus in Cambridge, three positive mosquito pools, and raised the WNV threat level in Cambridge to “critical.” For several weeks, Cambridge was the only Massachusetts community at the highest WNV risk level. In response, CPHD took the following actions:
 - Ensured that all municipal storm drains in Cambridge were treated with larvicide and worked with MIT, Harvard, and the state to ensure that storm drains on private and state-owned property were fully treated.
 - Issued standing water notices to Cambridge residential property owners and provided guidance to tenants and property owners upon request.
 - Developed a WNV public information campaign focused on personal protection, which included creating laminated posters on preventing mosquito bites that were posted by the Department of Public Works in 100 outdoor locations across the city; producing WNV fact sheets and flyers that were published on the CPHD website and disseminated to city and community agencies, as well as neighboring health departments; conveying the protection and breeding source prevention message in multiple television and newspaper interviews; providing frequent updates to the public via the CPHD and city websites; and working with the Cambridge Public Schools to deliver a targeted telephone message to all CPS families about protecting their children from bites.
 - Explored options for spraying adulticide with the regional mosquito control agency and state and local health officials. The consensus, in consideration of all risk factors, was to recommend not spraying due to the probable ineffectiveness of truck-based spray in a dense urban environment like Cambridge. Future use of truck-based applications were not ruled out.

No additional Cambridge cases were reported in September.

Teen Shooting Response

- CPHD and CHA staff provided grief counseling and other support to the Cambridge Rindge and Latin School community and several after-school programs after the tragic shooting of two students on June 3.

Healthy Eating & Physical Activity

- As part of the federal Community Transformation Grant to Middlesex County, the department is overseeing an initiative aimed at creating an environment that makes it easier for residents and workers to eat healthy and be physically active.

2012 Highlights

- Staff from CPHD and MAPS (Massachusetts Alliance of Portuguese Speaker) interviewed 16 convenience store owners to find out barriers and incentives to selling healthier foods and beverages.
- Conducted focus groups with immigrant families to learn about potential cultural barriers to participating in the Cambridge Public Schools meals program. The Community Learning Center recruited focus group participants and facilitated the sessions.

- Piloted portable water stations at two elementary schools and promoted the effort.
- The Cambridge Community Center and CPHD promoted the Cambridge Winter Farmers Market to residents, especially low-income adults and families.
- The **Cambridge Food and Fitness Policy Council (FFPC)**, led by the Cambridge Public Health Department, represents a major step forward in creating a comprehensive approach for addressing obesity (and other diet-related chronic diseases) and hunger at the municipal level by making healthy foods and fitness opportunities available to more residents.

2012 Highlights

- The 18 members of the Food and Fitness Policy Council were appointed by the Cambridge City Manager in February.
- The Cambridge Food and Fitness Policy Council completed a draft strategic “roadmap” for city departments and other groups aimed at improving access to healthy foods and fitness opportunities through policy and systems change.
- Developed a two-page *Food Resource Guide* for the city’s Food Pantry Network, which was distributed widely to community organizations, pediatricians’ offices, parent support programs, the Cambridge Public Schools, and other groups.
- In partnership with Cambridge Community Television, the FFPC produced six public service announcements (PSAs) about healthy eating and physical activity initiatives in Cambridge.
- In consultation with the FFPC, the Cambridge Public Health Department submitted a memo to the Cambridge City Manager that provided a preliminary analysis of the efficacy of limiting the serving size of sugar-sweetened beverages in restaurants, as well as an approach for evaluating the merits of a municipal “soda ban” policy.
- **Let’s Move Cambridge**, led by CPHD, is part of First Lady Michelle Obama’s national campaign to reduce childhood obesity. In 2012, Let’s Move Cambridge (in partnership with the Healthy Children Task Force, the FFPC, and the school department’s Green Schools Initiative) awarded \$500 mini-grants to five Cambridge organizations and schools to develop healthy eating and fitness activities for the children and families they serve. In addition, CPHD staff produced and distributed two *Let’s Move Cambridge* electronic newsletters and actively promoted community events and resources to the LMC listserv throughout the year.
- Staff from CPHD and the city’s Community Development Department reviewed the menus and food quality of mobile food trucks for the 2012 Cambridge Riverfront Mobile Food Program.

Community Health Network Area 17

- Health department staff served on the steering committee of Community Health Network Area 17 (CHNA 17), a regional community health network comprised of Cambridge and five other municipalities. In 2012, CPHD funded three mini-grants to Cambridge-based organizations: Transition House, On the Rise, and Philips Brooks House. The programs serve domestic violence survivors, homeless women, and youth, respectively.

CHNA 17 also provided \$15,000 in funding to the Cambridge Food and Fitness Policy Council over a two-year period. Other funding priorities for CHNA 17 are youth services, adult mental health, and crime and safety.

Community Health and Wellness

The goal of the Division of Community Health and Wellness Programs is to promote and encourage healthy behaviors, develop public health policy, and identify opportunities for early intervention and disease prevention. Programs areas include children's dental health, men's health, domestic violence prevention, healthy weight and physical activity, early childhood literacy, and substance abuse prevention.

- Men's Health League programs attracted approximately 120 participants in 2012 and has served over 600 men since the MHL launched in 2008. The League completed its 15-month federal Legacy grant in March 2012, which supported the Fit For Life and Fitness Brothers programs. In addition, the MHL administered a men's health and fatherhood survey (completed by 385 men), which is part of multi-agency fatherhood initiative led by CPHD; awarded \$500 mini-grants to five Cambridge groups; and presented at regional and national conferences.

Community outreach events for the Men's Health League addressed issues such as HIV/AIDS, prostate health, stroke, and domestic violence. The Men's Health League, in partnership with the Men of Color Task Force, hosted the 19th annual Hoops 'N' Health sports tournament and health fair in Cambridge in June. Staff from CPHD, as well as CHA's Volunteer Health Advisor Program, HIV Services, and Sports Medicine Program, provided health education and screenings. The event attracted about 700 people, including 260 players.

- During the 2011–2012 academic year, staff provided oral health education to 3,197 children (pre-K–4) in 14 public, charter, and parochial schools in Cambridge. Of these children, 2,774 received a dental screening. About 15% of children screened were referred for treatment, and 2% of those screened required urgent care. In addition, staff provided oral health education and screenings to 410 children in 20 Cambridge preschools during summer and fall 2012. Of these children, 17% were referred for treatment.

In November, the Dental Advisory Committee reconvened with new members and a shift in focus to oral health policy for children and adults. Previously, the committee had served as an advisory board for the department's school-based Healthy Smiles dental screening program.

- To support parents in talking and reading with their young children, the Agenda for Children Literacy Initiative led 30 workshops for 329 parents; visited 775 new parents on the Cambridge Hospital's maternity ward and in their homes; co-organized Family Literacy Fun Day, attended by a record 1,148 parents and children; sent Born to Read bags and books to 1,150 families with newborns; participated in nine community fairs; with community partners, organized seven StoryWalks in Cambridge neighborhoods; with the Center for Families, offered 18 eight-week community playgroup sessions for young children; co-organized two 16-week sessions of Baby University; and distributed over 7,000 books to families. (For evaluation data, see ICH chapter.)

In addition, staff co-organized and facilitated a six-part early literacy training series for 20 Cambridge family child care providers on supporting language and literacy development in young children; and delivered books twice a month to 19 family child care providers.

- Staff redesigned the Pathways to Family Success program so that it now primarily serves low-income immigrant parents and their elementary school-aged children, with a focus on family

engagement and family literacy. In 2012, the program organized 36 parenting and family literacy activities for its core group of 10 to 15 families.

- With grant funding from the American Public Health Association, staff developed a workplace policy on domestic violence, a video implementation guide for employers, and a companion video explaining the role of the workplace in protecting employees who are victims of domestic violence. Also in 2012, the department's Violence Prevention Coordinator became a certified instructor to teach Mental Health First Aid; helped launch the citywide "21 Days of Questions, 365 Days of Action" domestic violence awareness campaign; organized the third annual "Promtacular" workshop for CRLS teen girls that focused on healthy self-image and healthy dating; and gave trainings on multiple topics to city departments and community organizations. (See also Spotlight essay: "A Public Health Perspective on Injury & Violence Prevention.")
- The department completed a contract with the Cambridge Prevention Coalition supporting its federal grant aimed at lowering alcohol use among Cambridge middle school students by addressing access in the home. During the four-year Reality Check campaign, the proportion of CPS eighth graders who reported they had tried alcohol in their lifetime declined from 31% to 27%. Activities in 2012 included organizing a workshop for parents on teen brain development and addiction; developing a resource guide for parents, which was mailed to all families of CPS middle schoolers; and creating a print advertising campaign that was displayed on MBTA Red Line trains and Cambridge bus shelters in October.
- Nutrition staff provided technical assistance to the Margaret Fuller Neighborhood House and the Cambridge Community Center in organizing the second diabetes workshop series, which took place in April and May.
- Staff supervised a project with a Tufts graduate student that assessed the department's existing models for community health workers and examined potential new models that could support clinical care and better integrate the work of CPHD community health workers with broader departmental goals.

Emergency Preparedness

The goal of the Division of Emergency Preparedness is to increase preparedness of the City of Cambridge, other Region 4b communities, and Cambridge Health Alliance. The division creates plans for effective public health and medical response to emergencies and disasters, and provides opportunities to test and use these plans. Core functions are facilitating 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 2012:

- In spring 2012, the department worked closely with federal and state agencies to inform the public about a Department of Homeland Security (DHS) project to test biological detection sensors at T stations in Cambridge and Somerville. A media release was disseminated by multiple agencies and a public forum was held in Cambridge in May. The nation's first tests of the Detect-to-Protect biosensor system took place in the designated T stations in August and October.

- Staff continued working with Cambridge Health Alliance to prepare for emergencies and disasters. This work included tabletop and full-scale exercises, training, and policy development. Staff also continued to lead the Emergency Health Planning Committee (formerly the Hospital Operations Group) of the Cambridge Local Emergency Planning Committee. In September 2012, the EHPC expanded its membership to include primary care, long-term care, and human services programs.
- Staff co-organized a large regional conference on June 14, “Voices of Experience: When Infrastructure Fails,” which featured first-hand accounts of severe weather disasters and hospital infrastructure damage. About 400 hospital and public health staff attended.
- Emergency preparedness staff were instrumental in developing Code Silver, a new CHA policy that addresses the possibility of an armed intruder on CHA properties. The code was implemented in July.
- CPHD staff partnered with CHA leadership and the Cambridge Police Department to develop and exercise Operation Safeguard, which involved an active shooter at the Cambridge Hospital campus. A tabletop version was held Oct. 1 for CHA senior management and the full-scale exercise—which involved 40 volunteer “actors,” police officers, and EMTs—was held Oct. 16. A similar tabletop was held at Whidden Hospital in September.
- Tools designed by CPHD to aid first responders in communicating to victims during decontamination process were adopted by the Federal Emergency Management Association (FEMA) and the Department of Homeland Security. Staff presented the tools to Massachusetts first responders at the annual Mass Decontamination Summit.
- The Region 4b Medical Reserve Corps held its third annual conference on March 24 in Needham, which was attended by more than 120 volunteers from 23 communities.
- In July, Region 4b received its annual grant award of \$557,205 from the Centers for Disease Control and Prevention to enhance public health emergency preparedness in the region and \$114,286 from Massachusetts Department of Public Health to support the region’s Medical Reserve Corps.
- In summer 2012, Region 4b staff created public service announcements on eastern equine encephalitis (EEE) and extreme heat for the Talking Information Center (TIC), a radio reading service for the blind. The audio announcements were aired by the TIC and affiliated radio/cable TV stations. In addition, the state health department distributed the EEE announcement to local health departments prior to aerial spraying in southeastern Massachusetts.
- During Hurricane Sandy in October, Region 4b staff provided situational awareness updates to the region’s 27 communities and gathered local shelter and response information for the state health department, which shared this information with the Massachusetts Emergency Management Agency.
- Staff conducted trainings throughout the year to improve regional readiness to use social media during emergencies and attended a national conference focused on public health risk communication.

Environmental Health

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. The division assists city departments by responding to resident and business concerns; enforcing several local and state regulations; working with local academic institutions on targeted research topics; and collaborating with state and federal agencies to pursue better environmental health outcomes. In 2012:

- The Cambridge-Somerville Healthy Homes program made 187 home visits to families of children with asthma and elevated lead levels who reside in Cambridge and surrounding communities.
- Staff provided information about asthma and lead poisoning prevention to the community at 19 informational workshops and health fairs in Cambridge.
- The Cambridge-Somerville Healthy Homes program began to expand the role of its community health worker (CHW) to include clinical assessment of children with asthma. In 2012, the CHW received training from the Healthy Homes program coordinator (a registered nurse), attended a national conference for asthma educators, and completed a six-week course to become a state-certified community health worker.
- Staff co-facilitated the Smoking in Parks Task Force, a group of city leaders who reviewed policy options for limiting second-hand smoke in public parks. At the final meeting in August, the task force made a formal recommendation to City Councillor Marjorie Decker that the city prohibit smoking in all public parks (e.g., tot lots, playgrounds, athletic fields, open spaces). In 2013, the task force will be expanded and reconvened as the Cambridge Smoking Policy Advisory Committee, a standing committee charged with reviewing all aspects of tobacco policy within the city.

In addition, as part of the federal Community Transformation Grant awarded to Middlesex County, staff played the lead role in smoking prevention activities in Cambridge. Staff continued to work with the Cambridge Health Alliance's Department of Community Affairs and Cambridge Housing Authority to expand access to smoking cessation resources and promote a no-smoking policy for all public housing sites in Cambridge. CPHD staff also participated in a quarterly tenants' forum to discuss second-hand smoke and no smoking policies in public housing.

For tobacco control enforcement data, see "Policy, Licensing, and Regulatory" section.

- West Nile Virus: See "Departmental Activities."
- Staff posted and maintained signs in multiple locations along the Charles River alerting swimmers and boaters about dangerous levels of cyanobacteria in the river during two separate blooms in July and early fall.
- Staff continued to address environmental health issues across the city that impact public health and safety. Interventions and investigations included large construction site impacts on abutters and the public from cement and concrete grinding and residential impacts from demolition and construction.
- Staff worked with property owners, residents, and city staff to address widespread bed bug outbreaks in two multi-unit residential buildings, a privately-owned property, and a Cambridge

Housing Authority senior housing site. Staff counseled several affected occupants and organized fact-finding meetings with building managers, pest control service providers, and other city agencies. In addition, CPHD staff evaluated treatment protocols, identified shortcomings in prior pest control efforts, and provided guidance on best management practices to all concerned parties.

- The Cambridge Biosafety Committee: See “Policy, Licensing, and Regulatory” section.
- The department’s Director of Environment Health was invited to serve on the steering committee for the city’s Climate Change Vulnerability Assessment. The goal of the project is to assess how increased temperatures, more intense storms, and storm surge flooding connected with sea level rise would impact the city’s infrastructure, human health, and the local economy and to identify associated risks and vulnerabilities within Cambridge.

In August, the Department’s Director of Environmental Health was featured in a WBUR (Boston’s NPR station) radio story, “Climate Change: Coping with the Health Effects of Rising Temperatures,” which aired nationally.

- The department’s Director of Environmental Health and Environmental Health Officer both passed a certification exam to become Registered Environmental Health Specialists (REHS). This is a nationally-recognized credential in the field of environmental health issued by the National Environmental Health Association.
- Conducted 71 environmental health investigations involving mold and other pollutants.
- Licensing & Permits: See “Policy, Licensing, and Regulatory” section.
- Staff responded to over 800 inquiries about environmental health concerns from Cambridge residents and businesses.

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.

- Staff monitored 414 communicable disease reports (includes confirmed, probable, suspect, contact and revoked cases) in Cambridge residents in 2012. Of these reports, 160 required clinical follow-up by public health nurses. Staff collaborated with the Massachusetts Department of Public Health, and when necessary, hospitals, universities, and schools. Continued to monitor disease trends and emergency department data for unusual activity. (See also Public Health Nursing section.)
- Led the accreditation planning efforts for the department. Staff researched tools for meeting the three prerequisites for accreditation and developed documentation materials, presentations, an accreditation coordinator/quality improvement job description, and a timeline for completing the 18-month process.
- Produced *Cambridge Health Indicators*, a report that will be released in January 2013, which provides local, state, and national data on broad measures of health and includes Healthy People

2020 target goals. The report will help inform agency strategic planning and national accreditation efforts.

- The department was selected to participate in a CDC-funded training program for local health departments on integrating Geographic Information Systems (GIS) in the surveillance of certain chronic diseases. For this project, epidemiology staff led the CPHD effort and worked closely with CDC staff, CPHD team partners, and the University of Michigan. Staff developed GIS maps of heart disease and stroke hospitalizations and mortality data across 61 Massachusetts communities.
- The department was selected as one of two Massachusetts health departments to participate in a national CDC viral hepatitis evaluation project. For this project, epidemiology staff worked with the Massachusetts Department of Public Health and participated in an extensive in-person interview with CDC consultants.
- Produced a report on communicable disease cases among residents during 2006–2012 and a single-page profile of adult health behaviors, which summarized Cambridge data from the 2008 Five Cities in Massachusetts Behavioral Risk Factor Surveillance System Survey.
- Staff continued regional public health work with Everett, Somerville, and Watertown to build additional capacity in select public health services and to share best practices. Staff recruited and met with a number of potential academic partners to support the work of this regional network and to build greater capacity for training future public health workers.
- Staff participated in regional, state, and national work groups, including the Massachusetts Department of Public Health’s MAVEN Governance Council, the newly created the Massachusetts Viral Hepatitis workgroup, and the National Association for County and City Health Official’s Food Safety Workgroup.
- School health and epidemiology staff worked closely with Cambridge Public Schools’ IT Department on a new database system used by PE teachers to capture BMI and fitness scores. Epidemiology staff also worked with the Massachusetts Department of Public Health to evaluate and refine analysis procedures for BMI data. (See also “School Health” section.)
- Through a contract with the city’s Department of Human Service Programs, staff continued to serve on the steering committee for the Cambridge youth risk behavior surveys, and revised and successfully implemented the 2012 Teen Health Survey.

Policy, Licensing, and Regulatory* Activities

- During the annual inspection of the city’s 114 tobacco vendors, 93% of retailers did not sell tobacco products to minors. The Massachusetts Tobacco Control Program target for compliance is above 90%.
- The department licensed six body art (e.g., tattoo, piercing) establishments and 45 practitioners; two bodywork (a form of massage therapy) establishments and nine practitioners; two indoor ice rinks; and four tanning establishments.

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

- 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 2012, there were 36 facilities using animals in research. The animals were primarily mice and rats, but included a variety of other species.
- The Cambridge Biosafety Committee, acting through department staff, enforces the Recombinant DNA Technology Ordinance and the Laboratory Biosafety Regulation. This function is carried out through presentations to the Committee, management and review of experimental protocols and internal laboratory safety documents, site inspection of all facilities permitted under the regulation, and general enforcement of all requirements imposed by the ordinance and regulation. The committee routinely requests details on the internal assessment of riskier biological practices; assignment of physical containment and procedural standards that are consistent with specific biological agents and the risks they pose; and other operational aspects of lab safety and assurance. In 2012, the department issued permits to 83 biotechnology labs in Cambridge.

Public Health Nursing Services

The department's Division of Public Health Nursing Services 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. In 2012:

- Public health nursing and epidemiology staff followed up on 160 communicable disease reports (which do not include chronic hepatitis B, acute and chronic hepatitis C, influenza, Lyme disease and varicella). In addition to routine investigations, nursing and epidemiology staff responded to two unrelated tuberculosis exposures, a chickenpox exposure at an international language school, and a salmonella outbreak at a local chain restaurant. (See also Epidemiology and Data Services section.)
- For the 2012–2013 flu season, public health nurses administered 1,348 seasonal flu vaccines and 33 pneumonia shots at citywide flu clinics, homeless shelters, and other venues. The department hosted nine public flu clinics, including five clinics at which children as young as 6 months were vaccinated.

To increase vaccine coverage among public housing residents, the department hosted targeted flu clinics at Corcoran Park Apartments and the Pisani Center (serving Washington Elms and Newtowne Court), which were advertised on door hangers distributed around the respective complexes.

- Nursing staff continued to serve as case managers for patients with tuberculosis infection or disease. In 2012, patients with TB made 1,935 visits to the Schipellite Chest Center at the Cambridge Hospital campus, a 15% increase in patient visits from 2011. In addition, public health nurses made home visits to Cambridge residents with active or suspect TB.

In October, the Tuberculosis Program at the Cambridge Hospital campus launched group appointments for patients with latent TB infection. At these sessions, CPHD public health nurses

educated patients about TB disease and treatment. This type of teaching model, which is an industry best practice, is expected to decrease patient wait times and improve patient satisfaction.

TB program award: See "Honors & Recognition."

- 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. In addition, staff continued to participate in a community task force (Community Resources for Elder Wellness) aimed at reducing accidental falls among seniors. (See also Spotlight essay: "A Public Health Perspective on Injury & Violence Prevention.")

School Health Programs and Services

The goal of the Division 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. Program staff include registered nurses, nutritionists, vision and hearing specialists, and health assistants.

- Cambridge public school students made 48,688 visits to school nurses during the 2011-2012 academic year for illness, injury, scheduled medical procedures, and scheduled medication administration. This reflects a 2% decrease in the number of nurse visits compared to the 2010-2011 school year.
- Of the 29,019 visits to school nurses for illness and injury only, 6% resulted in dismissal from school. This reflects a 5% decrease in the number of nurse visits for injury and illness compared to the 2010-2011 school year.
- School nurses cared for over 1,400 children diagnosed with a physical or developmental condition.
- During the 2011-2012 school year, 4,427 CPS elementary and high school students received a vision screening (resulting in 148 referrals for care), 3,060 received a hearing screening (resulting in six referrals), and 1,712 received a postural screening (resulting in 33 referrals).
- All entering kindergarteners in the Cambridge Public Schools met state vaccination requirements in 2012, including 21 children with exemptions.
- The School Health Program continued to provide health care oversight and clinical guidance to three Cambridge nonpublic schools, as well as private day care centers and city-managed preschools and camps. In 2012, staff provided health and medication trainings to more than 120 staff from Cambridge summer camps, the city's Recreation Division, and employees of the city's Department of Human Service Programs' after-school and nursery school programs.
- Staff trained 60 Cambridge Public Schools' bus drivers and bus monitors on how to deal with a child passenger who experiences a life-threatening allergic reaction.
- A designated school nurse continued to serve as the Health Care Liaison to the CPS Office of Special Education. In this capacity, she assessed and evaluated medically fragile preschool children entering the school system to determine what health services they would require and she worked collaboratively with the CPS Special Start program.

- School health and epidemiology staff worked with the CPS Health and Physical Education Department to assess BMI and fitness status of public school students in grades K–8 and BMI of 10th graders enrolled at CRLS. In summer 2012, Health and Fitness Progress Reports were mailed to all CPS families with children in grades K–8 and BMI report cards were mailed to all families of CRLS 10th graders.
- Nursing staff continued to work with the CRLS athletic department, school administrators, and physicians to address sports-related head injury and concussion prevention and management at the high school. The department was also instrumental in launching the Cambridge Health Alliance concussion clinic at the Teen Health Center in 2012. (For more injury and violence prevention highlights, see “Spotlight” essay).
- Nutrition staff conducted 24 elementary cafeteria “tastings,” introduced two ethnic dishes on the high school lunch menu, launched salad bars at two elementary/upper school cafeterias, conducted three cooking activities for children and families, and gave 21 nutrition presentations to adults and children.

Honors & Recognition

- Cambridge Health Alliance received a statewide award for its exemplary contributions to tuberculosis care. The TB program is staffed by public health nurses and CHA physicians.
- The Robert Wood Johnson Foundation selected Cambridge as one of 11 finalists nationwide for its inaugural Roadmaps to Health Prize. Led by CPHD, the Cambridge application focused on the city’s accomplishments in the areas of healthy eating and physical activity, strengthening families, progressive urban planning, and integration of public health and clinical care. Six award winners will be announced in early 2013.

As part of the application, staff produced a four-minute promotional video for Cambridge, emphasizing achievements in healthy eating and physical activity, strengthening families, urban planning, and integrating public health within Cambridge Health Alliance’s clinical delivery system.

- Cambridge was honored on Nov. 29 by the National League of Cities for meeting key health and wellness goals for *Let’s Move! Cities, Towns and Counties*. Let’s Move Cambridge is based at CPHD.
- The department’s Josefine Wendel, School Nutrition Coordinator, and Dawn Olcott, School Nutritionist, were honored as “2012 Cambridge Food Heroes” by Mayor Henrietta Davis at an Oct. 20 reception, as part of the Cambridge Food Day celebration.
- Claude-Alix Jacob was reelected to the NACCHO (National Association of County and City Health Officials) Board of Directors, was named Vice Chair of the Public Health Foundation Board of Directors, and was named Vice Chair of the Middlesex Community Transformation Grant Leadership Team.

Other Activities

- Produced a bulletin featuring citywide health data and a call to action about people with disabilities.
- U.S. Surgeon General Dr. Regina Benjamin was the guest of honor at a several events in late March, including a panel discussion about the National Prevention Strategy, a walk in Kendall Square, and the launch of Mass in Motion in Middlesex County.
- Staff produced three public service announcements that will air on CCTV through June 2013: “Concussion Testing” targets high school athletes; “Take Your Pets With You” concerns disaster preparedness; and “Cooking Together” concerns healthy eating and literacy skills.
- For National Public Health Week in April, CPHD produced a poster exhibit on healthy eating, physical activity, and environmental health, which was displayed at Cambridge City Hall and the Cambridge Hospital campus; and co-hosted the ninth annual “Real World Public Health” symposium with the Institute for Community Health for 50 public health graduate students.
- Staff gave presentations at national conferences on promising local strategies for preventing obesity (CDC Orientation for New Health Officials), the department’s domestic violence workplace policy initiative (American Public Health Association annual meeting), the Agenda for Children Let’s Talk campaign (National Conference on Family Literacy), and public health communications (National Association of County and City Health Officials annual conference).

2012 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 helps CHA 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 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, including 100 VHAs trained from Cambridge. The program is a past recipient of an American Hospital Association NOVA Award for innovative, collaborative programs that improve community health status and the 2008 Booker T. Washington Award for Wellness in Minority Health. In 2012:

- 15 Cambridge residents actively participated as Volunteer Health Advisors.
- In April and May, program staff trained 17 ESL (English as a second language) students at Centro Latino in Cambridge to be Volunteer Health Advisors.

The program sponsored or participated in 18 events in Cambridge at which staff and VHAs provided screenings and community health education. These events included Hoops 'N' Health, Area 4 Walks, and Area 4 Community Pride Day, as well as activities organized in collaboration with Somerville-Cambridge Elder Services and Fresh Pond Apartments.

Reaching Out About Depression (ROAD)

Reaching Out About Depression (ROAD) is a community-based program by and for low-income women struggling with both poverty and depression. Due to a loss of funding in 2011, ROAD's paid staff position ended in July 2011. Since September 2011, ROAD has continued to offer a limited program model with support from the program's peer volunteers, community advisory board, and Community Affairs Department staff.

In 2012, maintaining the core supportive workshops for the ROAD community has been the program's greatest accomplishment. Without paid staff and in the absence of the program's former volunteer supports and resources, a small dedicated group of volunteer facilitators have continued to meet weekly to

discuss the workshop curriculum; design and lead monthly workshops and social events; and respond to community needs. ROAD members also gave four outreach presentations to community groups in Cambridge and organized five grassroots fundraising events. The fundraising supports childcare services for ROAD activities and small stipends for facilitators.

In 2012, 19 women (including two new members) and seven children participated in ROAD activities. The women ranged in age from 26 to 60.

The program plans to continue its monthly workshops and social events, and engage new women in these activities.

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, and the Cambridge Breast Center (CBC), with funding support from the Avon Foundation. Its current goal is to improve access to breast health screening, diagnostic and treatment services, and patient and community outreach education. An additional grant from the Massachusetts Affiliate of the Susan G. Komen Foundation supports community-based breast health education, outreach, and patient navigation for both women and men through the CHA Breast Health Connection. In 2012:

- Breast Health Connection staff provided education and outreach at five Cambridge community events. Educational events included a breast health presentation to residents of Fresh Pond Apartments given by Diane Lockhart, M.D., Director of the Cambridge Breast Center, and a breast health training to new Volunteer Health Advisors (VHAs) given by VHA Program staff.
- The Breast Health Initiative supported patient navigators at the Cambridge Breast Center (CBC) clinics at the Cambridge Hospital and Whidden Hospital campuses. The navigators provided support to women undergoing diagnostic evaluation and treatment services for breast cancer, as well as programs for breast cancer survivors.

In 2012, CBC patient navigators conducted a bimonthly “Living with Cancer” support group, the annual Breast Cancer Survivorship Celebration, and the annual memorial service. Staff also worked closely with the American Cancer Society (ACS) to offer two ACS survivorship programs throughout the year.

Prevention Integrated Counseling Screening and Referral Program

The Prevention Integrated Counseling Screening and Referral Program (PICSR) provides confidential counseling and testing for people who may be infected with HIV, hepatitis C, chlamydia, gonorrhea, or syphilis. HIV rapid testing, which produces results in approximately 20 minutes, is available at all program sites. Clients at risk for hepatitis A or B are referred for vaccination and services, regardless of ability to pay. The PICSR program also provides educational workshops on 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 2012:

- HIV counseling and testing clinics were available to Cambridge residents at the Windsor Street Health Center and the East Cambridge Health Center. In fiscal year 2012, staff administered 787 HIV tests, 577 chlamydia and gonorrhea tests, 563 syphilis tests, and 77 hepatitis C tests.
- In 2012, staff organized three HIV counseling and testing days in Cambridge at the Windsor Street Health Center and the East Cambridge Health Center in observance of National Black HIV/AIDS Awareness Day on Feb. 7 and National HIV Testing Day on June 27. A total of 36 rapid tests were provided at these events.
- In June, the PICSR program formed a new collaboration with the AIDS Action Committee's needle exchange program to provide confirmatory testing at the Windsor Street Health Center for rapid HIV tests.
- PICSR staff provided educational materials, condoms, and information on where to get tested at the following Cambridge events: Hoops 'N' Health (June 16); the East Cambridge Health Center open house (June 22); Celebrate Fresh Pond Cookout and Multicultural Fair (Aug. 29); and the Cambridge Carnival (Sept. 9).
- In August 2012, the Dimock Center subcontracted with the HIV Services Program to provide medical case management to families at the Zinberg Clinic. The program will receive \$108,900 over five years to provide this service.

Cambridge-Somerville HealthCare for the Homeless

The Cambridge-Somerville HealthCare for the Homeless (HCH) program 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, and one site in Somerville: The St. Patrick's Women's Shelter. Program staff also provide street outreach and inpatient rounds at the Cambridge Hospital campus. The program's mission is to provide health care services that are affordable, accessible, and acceptable to homeless men, women, and children.

In addition to primary care medical services, the program offers limited psychiatric care and easy access dental care. The CHA dental residency program offers screenings twice a month at HCH shelter locations, with same day treatment and follow-up at the Windsor Street Health Center's dental clinic.

In 2012, staff continued to make significant changes to the HealthCare for the Homeless program:

- **New Clinic Space.** The Cambridge Salvation Army completed a major building renovation in June 2012, which included a rent-free space for HCH clinical operations. The Salvation Army designated the space for the exclusive use of HCH in exchange for providing clinical services to homeless men and women.
- **Electronic Medical Record.** HCH patient records were fully integrated into Cambridge Health Alliance's EPIC (electronic medical records) system in December. HCH staff and other CHA providers use the system to enter patient information, laboratory results, provider communication and to track a variety of health improvement measures required by the HCH's federal grant through the Boston Health Care for the Homeless Program.

- **Providing a Medical Home.** HCH continued to solidify relationships with specialty services in order to provide a “medical home” to its patients. A successful collaboration with the CHA dental residency program and the Windsor Street Health Center’s dental clinic has allowed HCH patients easy access to dental care and provided the dental residency program with a valuable experience in community dentistry.

In addition, HCH worked closely with CHA’s psychiatric residency program to provide limited psychiatric services on-site at the program’s outreach clinics. HCH is now an elective third- and fourth-year placement for psychiatric residents. In 2012, a CHA psychiatrist provided services to HCH patients, and patients were better able to access referrals to behavioral health adult outpatient services at CHA. In addition, CHA also provided psychiatric support to the HCH medical team.

- **Changes in the Homeless Service Network.** Changes in leadership at CASPAR (Cambridge and Somerville Program for Alcohol and Drug Rehabilitation), a major community partner, caused some disruption to HCH services at the Albany Street shelter. CASPAR is looking at shifting its focus from sheltering active users to providing recovery treatment. During the transition, changes in leadership, staff, focus and the patient mix at the shelter had an effect on HCH services at the site.

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 to eligible pregnant and postpartum women, infants, and children up to age 5. WIC provides the services at two locations in Cambridge: the Windsor Street Health Center and the Jefferson Park Housing Development in North Cambridge. In 2012:

- The program served 1,297 Cambridge residents in fiscal year 2012. About 53% 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. WIC Breastfeeding Peer Counselors visited the Maternity Suite at the Cambridge Hospital to provide support three days a week to all new mothers who were breastfeeding their newborns. In FY12, 251 new mothers who delivered at the Cambridge Hospital Maternity Suite received breastfeeding support from WIC Breastfeeding Peer Counselors.
- In summer 2012, the program issued 881 sets of farmers’ market checks to eligible WIC participants during the WIC Farmers’ Markets Week event. WIC participants could use the checks to purchase locally grown, fresh fruits, vegetables, and herbs at participating farmers’ markets, which included the six Cambridge farmers’ markets.
- WIC program offered monthly Happiest Baby on the Block classes at the Windsor Street Health Center and Broadway Health Center to pregnant women and new parents who were interested in learning techniques to sooth their crying babies. The classes were taught by Happiest Baby certified trainers who were fluent in English, Spanish, and Portuguese. Twelve classes were offered in 2012, which were attended by 64 mothers.
- WIC is a designated voter registration agency. In the first three quarters of 2012, Cambridge/Somerville WIC assisted 31 Cambridge residents with their voter registration.

Family Planning Program

The Family Planning Program (FPP) provides free and confidential reproductive health services for Cambridge Health Alliance clients. Services include access to birth control, pregnancy testing and options counseling, HIV counseling and testing, sexually transmitted infections testing and treatment, emergency contraception, fertility awareness, and healthy relationships. Services are available at five program sites in Cambridge: a women's health center, a school-based health center, and three primary care sites. The program also provides educational workshops on reproductive health for youth, adults, community leaders, and providers. In 2012:

- Reproductive health services expanded to include a new site at Cambridge Pediatrics (Cambridge Hospital campus), in addition to current services at the Windsor Street Health Center, East Cambridge Health Center, the Women's Health Center at the Cambridge Hospital campus, and the Teen Health Center based at Cambridge Rindge and Latin School.
- Clients made 2,225 family planning visits to the five Cambridge sites in 2012.
- The program began providing sexually transmitted infection treatment (in addition to counseling and testing), Ella Emergency Contraception, expanded HIV rapid testing at all FPP sites, and free services for uninsured patients needing urgent reproductive health care.
- FPP staff provided more than 50 workshops for 1,000 youth, adults, community leaders, and providers on reproductive anatomy, birth control, sexually transmitted infections, puberty, self-esteem, diversity, and GLBTQ issues. In addition, staff provided regular workshops at the Cambridge Hospital Adolescent Assessment Unit for in-patients.
- FPP staff worked with the National Family Planning and Reproductive Health Association (NFPRHA) on a case study exploring the integration of family planning services into a primary care setting. FPP staff presented the case study at a national conference for federally-funded family planning organizations.

2012 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, Everett, 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 2012, 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

- **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. In 2012, ICH received a \$275,000 grant from the National Institutes of Health to evaluate the impact of the Cambridge Health Alliance screening program on health care utilization.
- **Baby University.** ICH continued to evaluate Baby University, a citywide collaborative in Cambridge focused on parenting. ICH staff collected and analyzed data from the first post-pilot 16-week session that took place in 2012. Of the 22 program graduates who were surveyed, the majority reported an increase in their confidence as a parent; their use of new tools and strategies for parenting; and having closer relationships with their children.
- **Agenda for Children Literacy Initiative.** ICH continued to evaluate the Agenda for Children Literacy (AFC) Initiative, based at the Cambridge Public Health Department. In FY12, AFC literacy ambassadors conducted 160 first-time home visits with Cambridge parents of children newborn to age three. ICH conducted a telephone survey of 28 of these parents. Respondents reported that after the home visit they experienced an increase in awareness of 1) why it was important to talk to their young children (21% were "very aware" prior to the home visit compared to 64% afterwards) and 2) what to do when reading to their child (21% knew "a lot" prior to the home visit compared to 71% afterwards). More than 85% of respondents also reported they had changed the way they talk and read to their babies and toddlers following the home visit.
- **Childhood Obesity Research.** As part of a project of the Harvard Medical School's Department of Population Medicine, ICH conducted formative research to examine parental acceptability and

preferences regarding the use of text messaging and other mobile technologies to support pediatric obesity-related behavior change. ICH conducted five focus groups and seven follow-up interviews with an ethnically diverse group of parents of overweight/obese children (age 6 to 12) in Greater Boston, including three focus groups with parents of Cambridge Health Alliance patients. Findings indicated that parents were enthusiastic about text messaging interventions to support healthy behaviors for their children, and that text messaging was preferable to paper or email communication because it is immediate, brief, and difficult to ignore.

- **Healthy Children Task Force (HCTF).** To prepare for the implementation of the Cambridge Public Schools' Innovation Agenda, the Healthy Children Task Force's overarching theme for the 2011–2012 school year was "Health and School Success – A focus on middle-school-aged children to support the CPS Innovation Agenda."

2012 Highlights:

- In January 2012, following the MBTA announcement of proposed service reduction and fare increases, the HCTF invited MBTA's Director of Development and representatives from the Cambridge Community Development Department and the Green Streets Initiative to talk about how the proposed MBTA service reduction and fare increases would affect the health and transportation options of Cambridge students.
- The 5-2-1 HCTF subcommittee shared some of its ongoing school-based efforts and initiatives to increase the number of Cambridge public school students who learn how to swim. Nationally, the rate of fatal drowning among black children age 5 to 14 is almost three times higher than that of their white peers, according to the Centers for Disease Control and Prevention. This is one of the primary reasons that learning how to swim is an educational requirement for students at Cambridge Rindge and Latin School. The HCTF engaged in a larger discussion about strategies to ensure that all CPS students are capable of swimming and reduce barriers.
- The HCTF mental health subcommittee, comprised of the Cambridge Public Schools' Conflict Mediator and CRLS students, explored racial and ethnic disparities in disciplinary referrals and high school suspension rates in Cambridge. Subcommittee members participated in a broader Cambridge initiative to collect local and national data, and spur community discussion.
- In conjunction with the Cambridge Public Health Department's Let's Move initiative, the HCTF solicited and helped select five Cambridge-based community organizations to receive Cambridge Let's Move mini-grants to promote healthy eating and active living.

Public Health Systems Research

- **Local Public Health Activities, Capacities, and Technical Skills (PHACTS) Research.** The Cambridge Public Health Department was one of 249 local health departments in Massachusetts to take part in a 2011 statewide survey examining the relationship between infrastructure, organization, and capacity to perform essential public health services. In 2012, ICH analyzed the survey data and published some of the findings in the *Journal for Public Health Management*. Additional analyses will be prepared for dissemination in 2013.

The study found that in comparison to other local health departments in the state, Cambridge has moderate to strong capacity in all 10 essential public health services. Findings from the larger study found that higher capacity is associated with population size, municipal budget, poverty rates, and understanding of local public health responsibilities among elected municipal officials.

- **Partnership for Effective Emergency Response (PEER).** In 2012, the Institute for Community Health continued to serve as the evaluator for Partnership for Effective Emergency Response (PEER). For the past five years, the Boston University School of Public Health has been facilitating the development and implementation of PEER, a collaborative effort among hospitals, local health departments, long-term care facilities, emergency medical services, and community health centers in 62 Boston-area communities (including Cambridge) to enhance communication during health and medical emergencies and disasters. In 2012, ICH worked closely with PEER and the Executive Committee members (including several Cambridge team members) to conduct a needs assessment looking at facilitators and challenges to moving PEER from a communication support entity to an active response entity.

Other Activities

- **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. In addition, ICH completed the Legacy Grant-funded evaluation of two MHL program components (Fit for Life and Fitness Brothers). ICH also worked with the Cambridge Public Health Department and other partners in Cambridge to develop and distribute a men's health and fatherhood survey, which was completed by 385 men.
- **Opioid Overdose Prevention (MassCALL2).** ICH continued to evaluate the city's Opioid Overdose Prevention Project in collaboration with the Cambridge Prevention Coalition. This goal of this initiative, which began in 2008, is to reduce the number of fatal and non-fatal opioid-related overdoses in Cambridge. ICH supported data collection and analysis for outreach efforts, jail interventions, and workshops with users, bystanders, and providers. The initiative is funded by the Massachusetts Department of Public Health.
- **Project LEAP 2.0 (Linking, Engaging and Advocating with Peers 2.0).** ICH continued to serve as an evaluation partner with AIDS Action Committee (Boston and Cambridge sites) to assess the impact of an innovative intervention designed to identify and connect individuals living with HIV to HIV medical care, and help them stay in care. The intervention employs the use of an integrated advocacy team comprised of case managers, mental health specialists, and peers to support individuals who are not optimally engaged in HIV medical care.

Sixty men and women from the Boston and Cambridge areas were enrolled in the intervention during first half of the three-year project (FY12 enrollments). In 2012, ICH worked closely with AAC on its data management systems, and data collection and quality improved significantly. Based on data collected and analyzed by ICH staff since November 2011, about half of the participants have been connected to HIV medical care and almost three quarters have been connected to peer support.

2012 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.

CHA continued to be a leading provider of health care services, caring for approximately 20,000 city residents during fiscal year 2012. CHA also remained a leader in academic medicine, with extensive publishing and teaching activities.

Systemwide Transformation

CHA is on a multi-year journey to transform its clinical care in accordance with the Institute for Healthcare Improvement's "Triple Aim": (1) improve the health of the population, (2) enhance the patient experience of care, (3) and control the per capita cost of care.

- **Expanding the Electronic Health Record System.** In 2012, CHA finished implementing its state-of-the-art electronic health record system for all inpatient services. In May, the Cambridge Hospital campus went live with a clinical documentation tool that enhances workflow for all inpatient providers and makes information accessible to those who need it and a computerized physician order entry system that allows providers to order medications and tests online.

In addition, the Maternity Service and Cambridge Birth Center began using a medical record product called Stork, which organizes the complete course of obstetric care and supports the documentation workflow of labor and delivery. Surgery services began using a product called iSirona, which links patient data from medical devices to the electronic record system. These systems are now integrated with the primary care medical record, allowing providers across the CHA system to provide more efficient and effective care to patients.

- **Transforming Care through Massachusetts Delivery System Transformation Initiative.** As part of the Massachusetts Medicaid Waiver, Cambridge Health Alliance worked closely with six other safety net hospitals and the state Executive Office of Health and Human Services in 2012 to earn federal funding to support key changes across its system. CHA is now working on six projects approved by the federal Centers for Medicare and Medicaid Services:
 - Further developing the Patient-Centered Medical Home model of care.
 - Developing complex care management teams in all CHA primary care practices.
 - Integrating behavioral health and primary care, including screening more patients for depression.
 - Expanding the management of patients with diabetes, including facilitating self-management.
 - Increasing the use of tobacco cessation and reducing the percentage of patients using tobacco.
 - Improving the ability to manage and reduce the medical expense of caring for patients.

- **Taking a More Humanistic Approach to Care.** CHA is working to be a leader in compassionate patient care. In 2012, the system received a grant from the Schwartz Center for Compassionate Healthcare to develop a training curriculum for clinical staff and residents using video vignettes of personal care stories from patients from multicultural backgrounds. This curriculum has the potential for being a powerful learning tool as CHA staff continued to focus on giving every patient the best care experience.

CHA physicians are also taking a more humanistic approach. Dr. Elizabeth Gaufberg, Director of CHA's Center for Professional Development, is a leader in this area, and was named the founding director of the Arnold P. Gold Foundation Institute for Professionalism and Compassion in Healthcare. She will continue her role at CHA and expand the organization's understanding of how humanistic care contributes to patient outcomes, with special emphasis on developing tools to evaluate care provided by individuals and teams of health care professionals.

- **Improving Care Transitions.** CHA is working to provide patients with excellent care as they transition from home to the hospital, and back again. In 2012, CHA's Department of Medicine and the Institute for Community Health teamed up with the Harvard Medical School's Department of Population Medicine to secure an Agency for Healthcare Research and Quality grant. The new project, "Evaluating Strategies to Reduce Readmission in a Diverse Population," aims to improve care coordination after hospital discharge and identify new strategies to lower hospital readmission rates.

CHA is also collaborating with Somerville-Cambridge Elder Services on a Medicare grant for the Community-Based Care Transition Program. This program mandates that provider organizations collaborate with community-based organizations to help decrease Medicare hospital readmissions. Its aim is to reduce readmission rates for high-risk Medicare beneficiaries by 20%, thereby improving care and quality of life for seniors and reducing overall health care costs to society.

- **Developing Strategic Partnerships.** In October, CHA and Beth Israel Deaconess Medical Center (BIDMC) signed a Letter of Intent to investigate clinical, academic, and strategic affiliations that could enhance care at both institutions. As many health care organizations are exploring ways to expand services and build networks in advance of coming payment reform in Massachusetts, CHA and BIDMC have begun exploring how to best harness the strengths of both health care systems to deliver better, broader, and more affordable care to patients in their respective communities.

The CHA approach to transforming its care delivery system – which includes both clinical and population health components – has been validated by policy-makers and health care industry observers. In 2012, CHA was named an "innovative and effective primary care/public health system" by the U.S. Department of Health and Human Services.

Primary Care

In 2012, CHA remained a leader in primary care and continued to serve patients of all ages. CHA offers services in Pediatrics, Family Medicine, Adolescent Medicine, Internal Medicine, and Geriatrics at its Cambridge-based medical practices.

CHA also continued to provide primary care specialty programs for specific populations. Older adults continued to benefit from its Eider Service Plan and House Calls program, both of which make special accommodation for senior health needs. Population-sensitive primary care was provided through the Cambridge-Somerville HealthCare for the Homeless program and Zinberg HIV clinic.

In an effort to provide more efficient and customer-oriented service, CHA launched a new Doctor Finder Service for its primary care sites. This multilingual team helps new patients get connected to primary care in Cambridge and across the CHA system, based on patient preference.

In 2012, CHA primary care providers continued to earn industry recognition for their work:

- Soma Stout, MD, a primary care provider and CHA's Vice President of Patient-Centered Medical Home Development, received a Young Leader Award from the Robert Wood Johnson Foundation. This award recognized 10 individual nationwide for their early successes and their potential for improving health and health care in the United States in the future.
- Katherine Miller, MD, received the 2012 Harvard Primary Care Center's Excellence in Teaching Award. This annual award recognizes an HMS faculty member who is an outstanding primary care physician and whose dedication to teaching inspires future primary care leaders to serve their patients and the community at-large. She was nominated by Harvard and Tufts medical students who have worked with her at the Windsor Street Health Center and were inspired by her teaching and mentorship.
- The Harvard Medical School Center for Primary Care also named six new core faculty members, three of whom are CHA primary care physicians:
 - Monica DeMasi, MD, became the Student Scholar Program Leader.
 - Katherine Miller, MD, became the center's Family Medicine career advisor.
 - Soma Stout, MD, became the center's lead physician for the Leadership, Management, and Innovations Portfolio and co-director of its new Innovation Fellows Program.

Emergency Medicine

The Emergency Department at the Cambridge Hospital campus cared for patients who made 30,000 emergency visits during fiscal year 2012. In 2012, 97% of patients who visited a Cambridge Health Alliance emergency department were seen within five minutes, and patient satisfaction remained high.

In 2012, the CHA Emergency Department (ED) was recognized as a national model by HealthLeaders Media, which hosted a national webcast at the Cambridge Hospital campus. The department was also featured in *ED Management*, an academic journal focused on emergency medicine best practices.

Obstetrics/Gynecology & Women's Health

CHA has a diverse team of providers (midwives, nurse practitioners, obstetricians, and family medicine physicians) who provide well-woman care, maternity services, and gynecologic surgery. In FY12, CHA continued to provide local women with the ability to choose a provider and a style of care with which they feel most comfortable, and helped growing families by overseeing more than 1,300 births.

One option available for women is the Cambridge Birth Center, which serves women who want to experience a natural approach to childbirth. This year, after a thorough review of procedures, the Birth Center earned national reaccreditation from the Commission for the Accreditation of Birth Centers.

The OB/GYN Department also welcomed three new providers to its team. Dr. Robert Berry and Dr. Marianne Muchura began seeing patients at Cambridge Women's Health and the East Cambridge Health Center. Kathryn Rowan, CNM, began seeing midwifery patients at Cambridge Women's Health and the Cambridge Birth Center.

Specialty Care

CHA continued to provide a wide range of surgery, orthopedic, specialty, and testing services at the Cambridge Hospital campus.

In 2012, the system named Dr. Rebecca Osgood Chief of the Department of Pathology and Laboratories. Dr. Osgood, who is based at the Cambridge campus, is a graduate of Cornell University Medical College and completed her residency training at Massachusetts General Hospital.

In other specialty news, Dr. C. Douglas Taylor, CHA's Chief of Hematology/Oncology, received the Sandra C. Labaree Values Award from the American Cancer Society for his efforts to prevent and reduce the impact of cancer in CHA communities.

Behavioral Health

A recognized leader in psychiatry, CHA continued to provide mental health services across the entire spectrum of care. This included hospital programs for all ages, 24-hour psychiatric emergency care, and office visits for patients with health needs ranging from mild anxiety to severe and chronic mental illness. It also continued to provide specialty programs for its diverse patients in Cambridge, including the Portuguese Mental Health Program at the East Cambridge Health Center, the Latino Mental Health Program at the Windsor Street Health Center, and a mental health clinic for African-American patients, also at Windsor Street.

Academics

In 2012, CHA continued to provide top academic experiences for medical students, residents, and trainees through its Harvard and Tufts teaching programs.

- **Undergraduate Medical Training:** CHA continued to play an important role in medical education, teaching both Harvard and Tufts medical students. CHA continued to attract high caliber Harvard

Medical School students for its Cambridge Integrated Clerkship. During this clerkship, third-year medical students are assigned a panel of patients, and follow these patients for an entire year as they navigate the health system. This allows them to gain a broader perspective of disease and treatment, and to develop greater empathy for patients. This is different from traditional third-year clerkships in which students see patients during month-long rotations to different service areas. A 2012 article in the journal *Academic Medicine*, written by CHA physician David Hirsh and other CHA faculty, highlighted the benefits of the Cambridge clerkship: CIC students performed as well or better than their peers at other Harvard sites on academic and clinical measures, had stronger connections with patients, and showed substantially higher satisfaction with their training.

CHA was also pleased to learn that one of its CIC students, Sophia McKinley, received the 2012 Patricia Numann Medical Student Award from the American Association of Women Surgeons, based on nominations from her teachers at the Cambridge Hospital campus.

- **Graduate Medical Training:** CHA became part of the Harvard Center for Primary Care's new Academics Innovations Collaborative, which is helping align the CHA resident training curriculums with system transformation efforts. Through this effort, CHA is changing the way residents learn about patient care, providing them with a greater understanding of the patient-centered medical home model and the benefits of interdisciplinary teamwork.

In 2012, several CHA advanced fellows were recognized for their contributions to the field of medicine. Dr. Dee Shaligram (Child Psychiatry) received the Anne Alonso Memorial Award from the American Academy of Psychiatric Residency Training for her paper, "Addressing Psychotherapy Challenges in the Medication Visit." Dr. Amy Mayhew (Child Psychiatry) authored the lead article in the January/February issue of *AACAP News*, "Las Muchachas: Lessons Learned from Two Unauthorized Adolescent Sisters." Dr. Leah Zallman (Internal Medicine) received the Mack Lipkin Sr. Award from the Society of General Internal Medicine for her study, "Do Immigrants Subsidize the Health Care of the U.S. Born Through Medicare?"

- **Faculty Accomplishments:** Dr. Todd Griswold, a psychiatrist at the Cambridge Hospital campus, earned three prestigious teaching awards this year. He was chosen by the Harvard Medical School Class of 2012 as the Best Clinical Instructor at CHA and by the Massachusetts General Hospital Psychiatry Clerkship as Best Teacher. Dr. Griswold also received the 2012 Cynthia N. Kettyle Teaching Award from the Harvard Department of Psychiatry, which annually recognizes a faculty member for outstanding teaching and mentoring.

Commitment to Diversity and Multicultural Health

To serve a highly diverse patient population, CHA relies on its outstanding multilingual services staff. In 2012, these interpreters assisted patients during more than 200,000 encounters. By removing language barriers, patients were better able to communicate with their care teams and to access care.

CHA in the National Media Spotlight

In 2012, CHA was featured in local and national media for its clinical, research, training, and advocacy work. Highlights include:

- The Harvard-Cambridge Integrated Clerkship was showcased by numerous media outlets including the *New York Times*, *American Medical News*, and the WBUR CommonHealth blog.
- Dr. Soma Stout discussed impact of health reform in Massachusetts on the CBS Evening News, CNN, and the PBS news magazine *Need to Know*.
- CHA was profiled in a story about health care reform on the nationally-syndicated NPR show *Marketplace*.
- Dr. Pieter Cohen's research and clinical work on dangerous diet supplements was covered by the *New York Times*, *Boston Globe*, *Chicago Tribune*, *Consumer Reports*, CNBC, and WebMD.
- Dr. Jo Solet's study on sleep disruptions in hospitals was profiled in the *Wall Street Journal* Health Blog.
- Dr. Danny McCormick's research on the costs of Health IT systems was featured in the *Washington Post*.

Other CHA News

- **CHA is Now Tobacco Free.** On January 1, 2012, CHA's tobacco free policy took effect, banning smoking from the grounds of the Cambridge Hospital and all neighborhood facilities.
- **Prestigious Research Grant.** CHA received a grant under the Prevention Above All Discoveries Program to study "A Standardized Process of Preoperative Body Cleansing with Comfort Bath."
- **Community Recognition.** COO Allison Bayer was honored by Centro Latino, a multi-service human services organization that works to improve the quality of life of Latinos. She received a Celebrating Partnerships Award for her leadership at CHA in partnering with the Latino community on community health improvement initiatives and for helping CHA remain a sustainable and vibrant health care system that places emphasis on culturally competent care.
- **Nursing Excellence.** Myra Potishman, RN, received the Excellence in Nursing Practice Award from the Massachusetts Nurses Association. Myra works in the Operating Room at the Cambridge Hospital campus. Jennifer Wallace, RN, was named the 2012 Nurse of the Year by the Metro Boston EMS Council. She works in the emergency department at the Cambridge Hospital campus.