

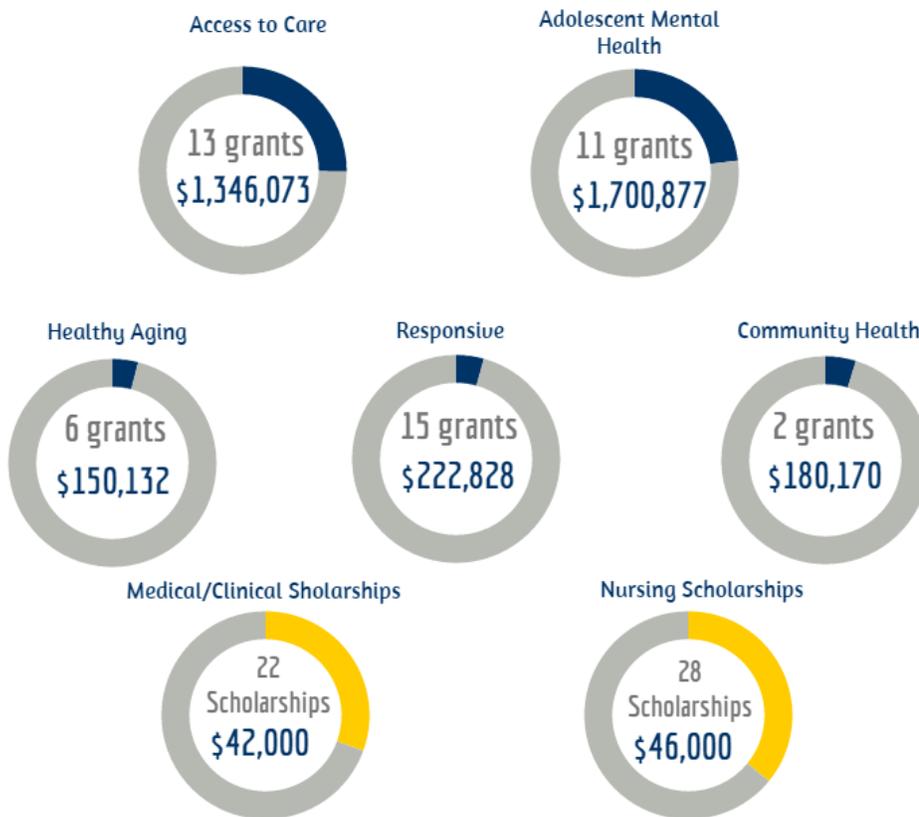
The foundation has three targeted initiatives -- Access to Care, Adolescent Health, and Healthy Aging – as well as responsive grants for projects that fall outside the three areas but have the potential to have an impact on health in the region. Programs funded within the three targeted areas are supported for up to three years, while those outside this scope are generally supported with a one-year grant. In addition to making grants, the foundation is continuously offering programming, convening partners to discuss key health issues, and collecting and disseminating data on the health of the region. This report will summarize the foundation’s efforts in the 2015 fiscal year (October 1, 2014-September 30, 2015).

GRANTMAKING

The foundation awarded **47 grants** for a total of **\$3,600,080** and **50 medical/clinical and nursing scholarships** for a total of **\$88,000** this year.

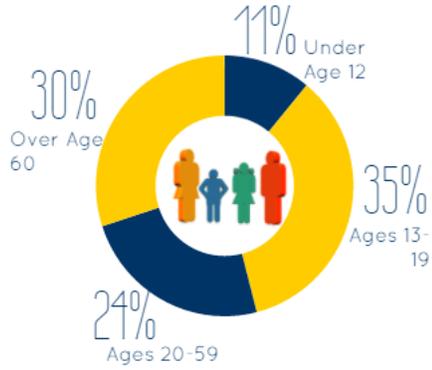
PROGRAM IMPACT

Grant & Scholarship Numbers by Focus Area **Fall 2014–Spring 2015**

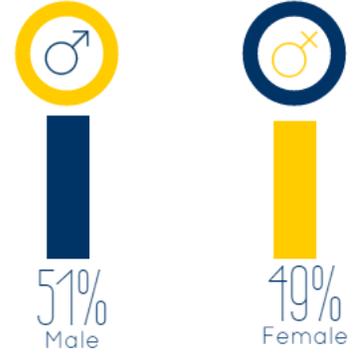


Grantee Participant Demographics

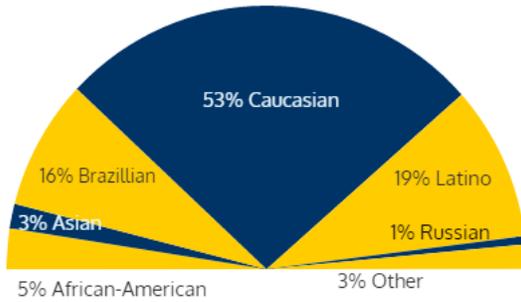
Age



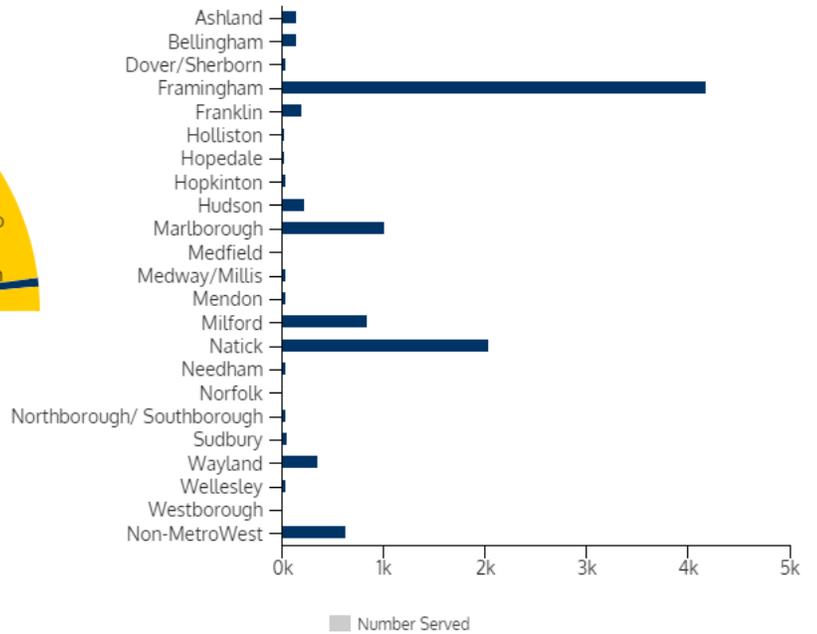
Gender



Race and Ethnicity

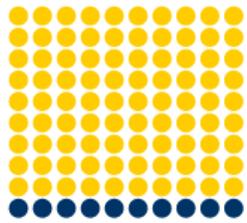


Residence



Data Source: Grantee reports

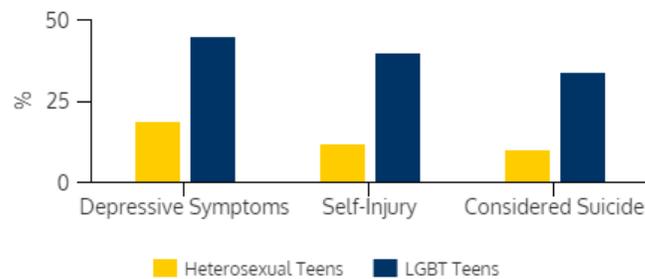
Adolescent Health



90% of high school students have a trusted adult in their lives

33,923

of adolescents (ages 15-19) in MetroWest



27% of high school girls have been cyberbullied in the past year

12

of MetroWest Schools that have replicated the Brookline Resilient Youth Team (BRYT) model

Community Context

According to the 2014 MetroWest Adolescent Health Survey, 22% of high school youth reported depressive symptoms and nearly one in 20 attempted suicide in the past year. For vulnerable populations, the rates are even higher. For example, 45% of LGBT youth reported depressive symptoms and nearly one in seven attempted suicide in the past year. Mental health problems may lead to substance abuse, poor school performance, school dropout, strained family relationships, involvement with the child welfare or juvenile justice systems and engaging in risky sexual behaviors.¹

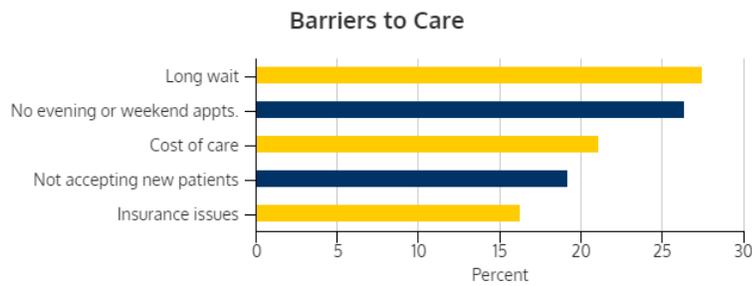
¹ Kappahn, C.; Morreale, M.; Rickert, V.; Walker, L. 2006. Financing Mental Health Services for Adolescents: A Position Paper of the Society for Adolescent Medicine. *Journal of Adolescent Health* 39: 456-458.

The Foundation's Efforts

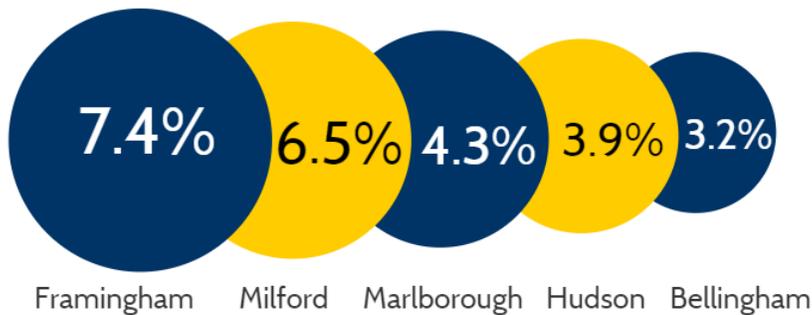
The foundation funded three new high schools to replicate the Brookline Resilient Youth Team (BRYT) model and provided continued support to five additional school districts. These programs help students successfully return from psychiatric and medical hospitalization. The foundation also funded two organizations to provide rapid in-school mental health intervention and referral services for at-risk students in the Framingham, Franklin, Bellingham, and Mendon-Upton schools and a local college to provide mental health screening and, if necessary, a computer-based therapeutic intervention to all Natick High School students.

As a follow on to its initial ten-year commitment, the foundation funded the sixth iteration of the MetroWest Adolescent Health Survey. This project will continue to collect data on risky behaviors from all MetroWest high school and middle school students and to provide technical assistance to districts on understanding and using the data to improve school and community programs and policies.

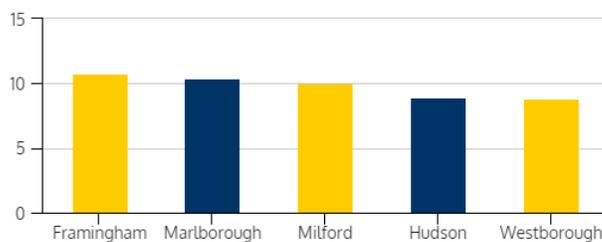
Access to Care



Percentage of Uninsured Adults and Children



Percentage of resident without a doctor



Community Context

Although the MetroWest region has a high percentage of residents who have health insurance, several towns experience sizeable numbers of children and adults who are uninsured. In Framingham, 7.4% of residents are uninsured and the rate in Milford is similar at 6.5%². In addition, while those percentages are better than they were prior to health reform in 2006, residents of MetroWest still experience barriers to health care, including transportation, language, cost, hours of operation and health literacy. Lack of connection between health care providers and community-based health and wellness programs further hampers coordinated care that supports optimal health.

The Foundation's Efforts

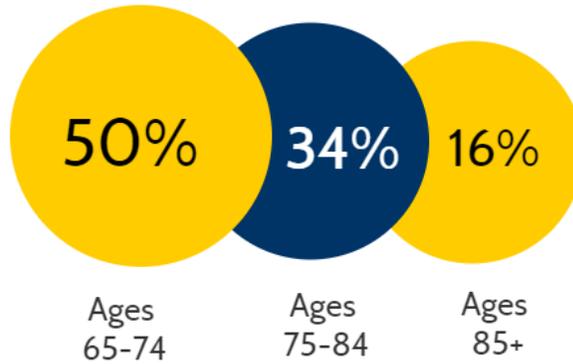
The foundation funded two legal aid organizations to launch Medical-Legal Partnerships at the Edward M. Kennedy Community Health Center sites in Framingham and Milford. There, low-income patients can receive legal assistance that improves their health, including assistance with poor housing, insurance denials, and domestic violence situations. The foundation also funded several Community Health Workers to help enroll children and adults in health insurance and connect them with primary care, as well as a community response team that will outreach to homeless adults to engage them in positive healthy behaviors.

In the area of medical-community linkages, the foundation funded the establishment of a pediatric health home that integrates mental health services into a large pediatric practice in Framingham, an evidence-based diabetes management program that helps diabetes patients manage symptoms and access wellness activities and a triage and referral program that improves access to children's mental health services.

² The Geography of Uninsurance in Massachusetts 2009-2013

Healthy Aging

58,397
MetroWest
Residents Over
Age 65



14% diagnosed with
dementia or
Alzheimer's



57% have 4+
chronic diseases



28% have been
disabled for 1+ years



17% do not receive
adequate emotional
support



28% have been
diagnosed with
depression at some
point

Data Source: Massachusetts Healthy Aging Data Report (2015)

Community Context

The population in MetroWest is aging, as it is across the country. Older adults (defined as 60+) in MetroWest tend to fare as well or better than those in the overall state, but there remain gaps in services and unaddressed health needs. The Massachusetts Healthy Aging Collaborative, coordinated by the Tufts Health Plan Foundation, created a demographic report of older adults. It provides statewide as well as individual town and city data. Data compiled on the 25 MetroWest towns served by the foundation shows that chronic diseases, Alzheimer's disease and mental health issues are the biggest areas of need in the region. The foundation is also concerned with social isolation among older adults, which directly impacts mental and physical health.³ Social isolation is a complex issue that takes community wide efforts to address.

³ Elder, K. & Retrum, J. (2012): *Framework for Social Isolation in Adults Over 50*. AARP Foundation.

The Foundation's Efforts

The foundation made six new grants this year in the Healthy Aging category. Two programs support caregivers; two provide services to those with dementia and their families; one is a fall prevention program; and one provides transportation and support for frail elders attending medical appointments. In addition there were five ongoing foundation funded projects over the course of the year.

The foundation has also been exploring the concept of Age Friendly Communities over the course of the year. Building upon key stakeholder meetings held in partnership with the Tufts Health Plan Foundation, Ruth Palumbo from the Tufts Health Plan Foundation presented data from the Healthy Aging Report and answered questions from participants representing current and former grantee organizations. The session helped to provide a context for the data and highlighted ways it can be used to promote and develop programming.

PROGRAM ACCOMPLISHMENTS

MetroWest Adolescent Health Survey

This past year marked the 5th iteration and 10th year of the MetroWest Adolescent Health Survey. Now adopted by every public middle and high school in MetroWest, over 40,000 students participated in the 2014 survey, which was conducted in the fall of 2014. In the spring of 2015, schools received their customized data reports, complete with trend analysis and comparisons to the regional data. Education Development Center, the foundation's partner in this endeavor, provided technical assistance to schools in understanding and communicating their data, prioritizing needs to be addressed by the district and communities, and connecting with other schools to learn about successful programs to be replicated.

MetroWest Health Leadership Program

In June of 2015, the foundation graduated its tenth class of the MetroWest Health Leadership Program. The class was comprised of eight women and two men, representing a variety of professions, including nursing, social work and legal aid. Their six-month participation concluded with a presentation to the foundation's board of trustees on strategies to address the opioid crisis and family homelessness in MetroWest. The program scored a 4.9 out of 5.0 on overall quality from participants.

Racial and Ethnic Disparities Workgroup

The Workgroup is composed of leaders from social service, medical, and housing agencies across the region. The mission of the Workgroup is to *work towards the elimination of racial and ethnic disparities in health, health care and access to care for all MetroWest residents by providing education and resources that support health literacy and culturally competent services*. Health literacy was the issue focus in 2015. In order to address this issue the Workgroup implemented two strategies.

1. **Health Literacy Forum:** It was held on October 29, 2014 with 72 in attendance. Mary Philbin, EdM, a professor at UMass Medical School was the keynote speaker. She was accompanied by a panel composed of pharmacists, medical practitioners and an elderly patient. The audience was medical practitioners, students and social workers. The forum provided practical ways for providers to improve health literacy practices.

2. **Health Literacy Resource Webpage:** The Workgroup curated a webpage, hosted on the foundation's website that consists of links to trusted articles and websites on the topic. The link is: <http://www.mwhealth.org/What-We-Do/Strengthening-the-Field/Health-Literacy>.

Community Health Improvement Plan

Following on the successful completion of the Community Health Assessment (CHA) for MetroWest, the workgroup continued to meet this past year to develop a Community Health Improvement Plan (CHIP). Four implementation groups were formed around the four areas identified in the CHA – Access to Care, Behavioral Health, Healthy Aging, and Healthy Eating/Active Living. These groups identified activities and outcome indicators for each of the goals. The final CHIP was released publicly in July of 2015.

Health Data

Through our website, the foundation maintains a comprehensive searchable database of health indicators for the region. The Health Data Center includes demographic and health data gleaned from various state and federal sources that can assist grant writers, researchers and others to better understand the health needs of the region.

This past year the site was updated to include extensive emergency room and hospitalization data for each of our 25 communities. The latest update includes town-level data on rates of injuries and poisonings, respiratory diseases, cancer incidence, metabolic conditions, such as heart disease and diabetes, and public school child obesity rates by grade level. Also new in 2015 are opioid-related overdose deaths by community.

ORGANIZATIONAL EFFECTIVENESS

Convenings

Topic	Audience	Attendees
Massachusetts Healthy Aging Data Report: Presentation of MetroWest Findings	Healthy Aging grantees and Council on Aging Directors	10
Health Literacy Community Forum	Medical Practitioners; Medical and Nursing students; Medical Administrators	72
Leadership Program Retreat & Meetings	Health Leaders accepted into program	10
Health Services and Survey Results	Staff from Advocates, EMK Health Center, and SMOC	12
Youth Mental Health First Aid	Natick youth-serving organizations and members of the MetroWest Suicide Prevention Coalition	19
Health Leadership Alumni Workshop	Graduates of Health Leadership Program	24
Successful School-Based Adolescent Health Programs	Adolescent Health Grantees	25
Cultural Competency Workshop	New Grantees	8
Fall and Spring Bidder's Conferences	Potential Grantees	46
Health Leadership Program Breakfast	Graduates and Potential Applicants to the Program	10
New Grantee Meetings	New Foundation Grantees	30
Community Health Improvement Plan Workgroup Meetings	Several Meetings	Varied

Staff Presentations

Topic	Venue	Audience	Attendees
Funder Transparency	Webinar for Associated Grant Makers	Funders	34
Nurse Power Luncheon	Holliston High School	Students interested in nursing	25
Health and the Brazilian population in Framingham	Wellesley College Sociology Class	College Students	20
Health Insurance Enrollment	Health Care for All "Healthoween" Press Conference	Local Press	N/A
Funder Panel	Clark University	Clark University Students	~30
Grant Writing Panel	Regis College	College Students	15
Health Leadership	Grantmakers in Health	Health Funders	75

MEDIA & PUBLICATIONS



ORIGINAL REPORTS

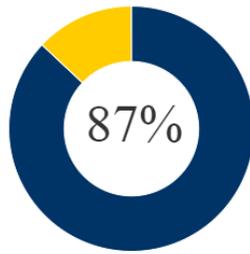
- ❖ 2014 Community Health Improvement Plan
- ❖ 2014 Annual Report
- ❖ 2014 Adolescent Health Survey Results
- ❖ Adolescent Health Initiative Report Card
- ❖ 2010-2013 Healthy Aging Grant Evaluation

FINANCIAL SNAPSHOT

FY 2015 Non-Grant Operating Budget	\$977,777
FY 2015 Actual Expenditures as a Percent of Budget	89.9%
FY 2015 Administrative Expenses as a Percentage of Assets	0.77%
One year Investment Returns as of 9/30/15	-5.2%
Endowment Liquidity	39%/daily 22%/monthly 28%/quarterly

GOVERNANCE

Board Meeting Attendance Rate



Annual Board Self-Assessment

100% of respondents find serving on the foundation board to be a satisfying and rewarding experience.

100% of respondents are satisfied with the level of commitment and involvement demonstrated by their peers on the board.

100% of respondents are satisfied with the effectiveness of the Board

25% of board members are minorities

50% of board members are female

LOOKING AHEAD

The foundation has made significant progress towards many goals over the past year. As we enter the next fiscal year, we will continue to work with our community partners to improve the health and well-being of MetroWest residents, especially the most vulnerable in our communities. The foundation is committed to continuing to make an impact in the areas of adolescent health; access to care; and healthy aging. In addition, support to initiatives that address emerging health needs in the region will be prioritized. One example is the addition of funding for programs addressing the opioid crisis in the fall 2015 Request for Proposals. The foundation is always looking for ways to better serve the community. We invite your feedback on how we can help make MetroWest a healthy place to live and work.

Appendix A



STRATEGIC PLAN OUTCOMES DASHBOARD – ACCESS TO CARE

What We Hope to Accomplish:

- 1) Increase primary and preventative care capacity within the region
- 2) Improve access to preventive services through integration with primary care
- 3) Increase health insurance coverage in disadvantaged communities

Approach:

- 1) Invest in the expansion of community health center capacity within the region
- 2) Invest in strategies that bring comprehensive care to people in need either through patient navigation or integrated models of care delivery
- 3) Invest in community outreach and engagement strategies that help people get and stay enrolled in affordable health insurance coverage

Where We Started	Definition of Success	Current Interventions	Grantee Level Outcomes	Initiative Status as of 7/1/15
7FTE Primary Care Providers (PCPs) providing care at community health centers in the region	>25% increase in the # of PCPs providing care at community based health centers	Grant to the Edward M. Kennedy Community Health Center for the creation of a satellite community health center in Milford	Construction and staffing of new satellite health center.	Site opened for patients on March 10, 2014. Currently there are five PCPs (one MD, two NPs, one DO and one PA-C). Served 2,935 patients through 8,947 visits since opening.
89.2% of adults with a personal doctor in Framingham; 89.6% in Marlborough; 90.0% in Milford	>2% increase in the % of adults with a personal doctor in Framingham, Milford, and Marlborough (to be on par with the MetroWest average)	Grants made to Health Center, Latino Health Insurance Program, Milford Regional Medical Center and SMOC to connect children and adults to primary care through use of community health workers	<ul style="list-style-type: none"> • 60% of clients will maintain regular contact with primary care provider 	<ul style="list-style-type: none"> • Health Center made new patient appointments for 118 people referred by partner agencies and Framingham schools • Milford Hospital referred 829 patients to primary care • SMOC referred 43 families to primary care • LHIP referred 1,187 individuals to primary care
4.5% rate of uninsured among children in Framingham; 4.9% for Marlborough; 3.8% for Milford. 9.4% rate of uninsured among non-elderly adults in Framingham; 10.1% for Milford	<p>≥2% decrease in the % of children without insurance</p> <p>≥2% decrease in the % of non-elderly adults without insurance</p>	Grants made to Latino Health Insurance Program, Mass. Alliance of Portuguese Speakers, and MetroWest Free Medical Program to enroll children and adults in health insurance. Special emphasis on Spanish and Portuguese-speaking residents of Framingham.	<ul style="list-style-type: none"> • # of people enrolled in health insurance 	<ul style="list-style-type: none"> • LHIP enrolled/reenrolled 1947 adults and children; MAPS enrolled 90 adults; MFMP enrolled 242 adults and children.

<p>Limited number of patients served through integrated care models.</p>	<p>Increased number of patients served through integrated care models.</p>	<p>Grant made to Advocates to place co-locate clinicians in Southboro Medical Group's Framingham pediatric practice. In addition, grants made to Community Legal Aid and MetroWest Legal Services for medical-legal partnerships in Framingham and Milford.</p>	<ul style="list-style-type: none"> • # of individuals connected to preventative care through primary care • 80% of clients will achieve improved health status due to medical-legal intervention 	<ul style="list-style-type: none"> • 137 pediatric patients received services from Advocates clinical staff, including case management and care coordination • The Framingham-based medical-legal partnership served 111 families with direct legal assistance and 100 saw improved health status as a result • The Milford-based medical-legal partnership served 63 patients, of whom 50 received a legal care plan and 6 have had their cases closed due to successful representation.
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STRATEGIC PLAN OUTCOMES DASHBOARD – ADOLESCENT MENTAL HEALTH

What We Hope to Accomplish:

1) Decrease the percent of adolescents within grantee communities reporting self-injury, suicide consideration and attempts, and depressive symptoms.

Approach:

1) Support evidence-based universal mental health curriculum and programs in local school districts
2) Support evidence- and research-based mental health intervention services and programs for at-risk students

Where We Started: Mental Health	Definition of Success	Current Interventions	Grantee Level Outcomes	Initiative Status as of 7/1/15
<p>In 2012 for high school students:</p> <ul style="list-style-type: none"> • 15.6% reported self-injury • 4.7% reported suicide attempts • 13.0% reported serious suicide consideration • 19.7% reported depressive symptoms 	<ul style="list-style-type: none"> • In 2014, a 3% decrease in the % of adolescents reporting stated mental health conditions and symptoms in grantee communities over 2012 baseline data • In 2014, a 5% decrease in the % of adolescents reporting stated mental health conditions and symptoms among grantee communities compared with non-grantee communities 	<p>Four public school systems (Framingham, Holliston, Natick & Needham) selected to participate in Children’s Hospital School Mental Health Assessment survey</p>	<ul style="list-style-type: none"> • 90% of district faculty and staff participate in the assessment • Improvement plan is created by each district 	<ul style="list-style-type: none"> • 549 Framingham, 264 Holliston, 331 Natick, and 227 Needham faculty and staff completed the assessment. • Scores provided for each school within the four districts. • Natick and Needham applied for follow-on grants to support at-risk students
<p>In 2012 for middle school students:</p> <ul style="list-style-type: none"> • 7.8% reported self-injury • 3.0% reported suicide attempts • 10.5% reported serious suicide consideration • 12.8% reported depressive symptom 		<p>Grant to Framingham Public Schools for Mental Health Coordinator at the high school</p>	<ul style="list-style-type: none"> • 20% reduction in suicidal ideation • 30% reduction in absenteeism • 20% of students report feeling safer and improved emotional wellness 	<ul style="list-style-type: none"> • 20% decrease in suicidal ideation from 2012 to 2014 • 50% reduction in absenteeism • 50% decrease in re-hospitalizations
		<p>Grant to Natick Public Schools for “Transitions” Program at the high school to assist students returning from psychiatric and other hospitalizations</p>	<ul style="list-style-type: none"> • Students achieve 80% school attendance rate • Dysfunction will decrease by 20% • Re-hospitalization rate will be less than 30% 	<ul style="list-style-type: none"> • Students achieved 85% school attendance rate • Dysfunction decreased by 36% • Re-hospitalization rate was 22%
		<p>Grant to Millis Public Schools to reduce self-injury at the middle school</p>	<ul style="list-style-type: none"> • 95% of students will improve their knowledge of coping skills • 10% decrease in referrals for self-harming behaviors 	<ul style="list-style-type: none"> • 100% of students (458) improved their DBT skills • 73% decrease in referrals for self-harming behaviors

				<ul style="list-style-type: none"> • Rate of self-injury increased from 8.7% in 2012 to 12.1% in 2014
		Grant to Natick Public Schools to provide social skills and parent competency training to 25 at-risk students and their families.	<ul style="list-style-type: none"> • 85% of students will use at least one self-calming strategy • Reduced disciplinary actions. 	<ul style="list-style-type: none"> • 100% of students taught a self-calming strategy
		Grant to Needham Public Schools to implement a “tiers of intervention” early detection and intervention program.	<ul style="list-style-type: none"> • Improved early detection and intervention of mental health issues • Increased capacity to support students with mental health issues 	Data not available
		Grants to Wayside for Rapid Assessment and Access to Treatment Program in Framingham Public Schools and Milford Student Assessment and Intervention Program in Milford Public Schools	<ul style="list-style-type: none"> • Framingham: 80 students will receive crisis intervention annually; 98% of youth screened will be seen within established time frames; and reduction in mental health symptoms • Milford: 80 students will receive services; reduction in mental health indicators 	<ul style="list-style-type: none"> • Framingham: 139 students received crisis interventions and 73 received ongoing mental health services; 100% of youth were seen within established time frames; data on mental health symptom improvement not available • Milford: 78 students received services; data not available on mental health indicators
		Grants to Assabet Valley Tech, Blackstone Valley Tech, King-Philip, and Lincoln-Sudbury to replicate the BRYT model (return from psychiatric hospitalization)	<ul style="list-style-type: none"> • Reduced hospitalization and re-hospitalization rates • Full return to classroom • Decreased mental health symptoms 	<ul style="list-style-type: none"> • AV: 0% re-hospitalized; data not available on mental health symptoms • BV: 0% re-hospitalized; 78% of students returned to regular classroom • KP: 85% classroom attendance; 42% decrease in mental health dysfunction • LS: 23% re-hospitalized; 88% able to attend 80% of classes
		Grant to Mendon-Upton School District to implement DBT and SBIRT	<ul style="list-style-type: none"> • 75% reduced behavior and discipline referrals • 75% increase in attendance • 75% of students will increase coping strategies 	Data not available
		Grant to Wellesley College to implement depression prevention, screening and referral to treatment program.	<ul style="list-style-type: none"> • 75% increase in faculty and student understanding of depression; • 60% of NHS students will participate in phone screen • 75% of eligible students will complete CATCH IT program 	In progress

STRATEGIC PLAN OUTCOMES DASHBOARD – HEALTHY AGING

What We Hope to Accomplish:

- 1) Increase the number of elders able to obtain transportation**
- 2) Decrease the number of elders who are socially isolated**
- 3) Increase the availability of MetroWest-specific information & supports available to area caregivers**

Approach:

- 1) Invest in the expansion of elder transportation options within the region**
- 2) Invest in program models that create or expand community engagement opportunities that that can reduce the risk of isolation among elders**
- 3) Support the creation of a MetroWest-centric caregiver support web portal**

	Where We Started	Definition of Success	Current Interventions	Grantee Level Outcomes	Status as of 7/1/2015
1	No regional, affordable, on-demand transportation for elders in MetroWest	50% increase in MetroWest members of ITN <i>GreaterBoston</i> over current (3/13) levels each year for the next 3 years 20% increase in total rides over current (3/13) in each of the next three years	<ul style="list-style-type: none"> • Grant (with Tufts Health Plan Foundation) to create ITN<i>GreaterBoston</i> • Continuation grant to ITN Greater Boston 	<ul style="list-style-type: none"> • Increase in the number of MetroWest members • Increase in the number of rides provided to MetroWest residents 	<ul style="list-style-type: none"> • ITN Greater Boston currently has 239 MetroWest members and 27 MetroWest drivers • Drivers have provided 10,060 rides to MetroWest residents since inception
2	No formal programs that specifically target elders at risk of social isolation	Increase the number of elders engaged in community activities so as to reduce social isolation	<ul style="list-style-type: none"> • In development 	<ul style="list-style-type: none"> • Increase the number of elders engaged in community engagement programs • Decrease in social isolation measures among those served 	N/A
3	No single point of access to comprehensive information, resources and support for MetroWest family caregivers	Creation of a MetroWest specific online resource for elder caregivers	<ul style="list-style-type: none"> • Planning grant to BayPath Elder Services in October 2012 to investigate the need for an online caregiver resource • Implementation grant to BayPath Elder Services for the MetroWest Elder Caregiver Portal 	<ul style="list-style-type: none"> • Assessment of current caregiver information and supports for MetroWest area caregivers • MetroWest Caregiver Portal to be completed and operational by April 2014 	<ul style="list-style-type: none"> • Website launched in May 2016 • 9,236 total users • 44,152 page views