



 UMass Memorial Health

# Relentlessly Pursuing Community Health

Community Benefits Report

2020

▶ During the COVID-19 pandemic, Eric Dickson, MD, President and CEO, UMass Memorial Health, above, provided vaccinations on-site at Lincoln Village public housing facility, and in the 20th anniversary year of the UMass Memorial Ronald McDonald Care Mobile, its staff pivoted to conduct COVID-19 community outreach, testing, education and vaccination.



# Our Community Benefits Mission



UMass Memorial Health is committed to improving the health status of all those it serves, and to addressing the health problems of the poor and other medically underserved populations. In addition, non-medical conditions that negatively impact the health and wellness of our community are addressed.

## What Are Community Benefits?

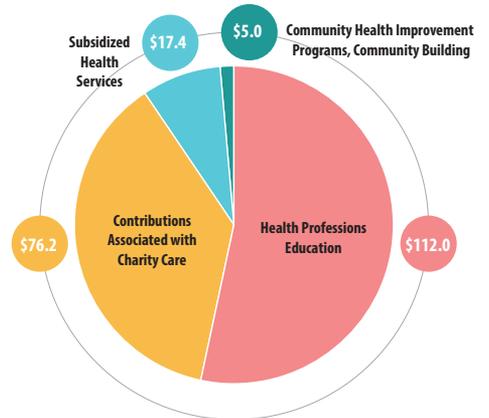
Community Benefits are programs and services provided by not-for-profit hospitals to improve community health. They are designed to respond to identified community needs and address health disparities among disadvantaged and vulnerable populations. Community Benefits are not for marketing purposes and must meet at least one of the following criteria:

- Improve access to health care services
- Enhance the health of the community
- Advance medical or health knowledge

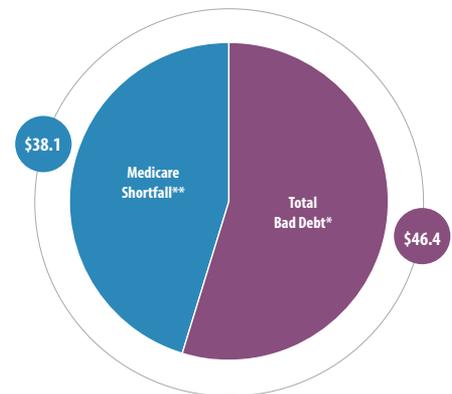
In 2020, UMass Memorial Health contributed \$210.6 million to positively impact the health and well-being of the communities we serve. Our Community Benefits contributions support charity care, subsidized health services, education of health professionals, research, community-based programming and partnerships. In addition, \$84.5 million in other non-Community Benefits expenses were absorbed through bad debt write-offs and Medicare shortfalls.

2020

Community Benefits Total: \$210.6 Million



Other Significant Expenses: \$84.5 Million



\* Bad debt: Expenses for receivables that can no longer be collected and are written off.

\*\* Medicare shortfall: Net loss incurred for the cost of providing services to Medicare patients versus income received from the Medicare program.

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## System Hospitals

### UMass Memorial Medical Center

- Michael Gustafson, MD, MBA, President
- Mónica Lowell, Vice President, Office of Community Health Transformation/Community Benefits

### UMass Memorial Health – HealthAlliance-Clinton Hospital

- Steve Roach, President and CEO
- Rosa Fernandez, Director, Community Health and Volunteer Services

### UMass Memorial Health – Marlborough Hospital

- Steve Roach, President and CEO
- Ellen Carlucci, Vice President, Development, Marketing and Communications

# Dear Community, Partners and Friends

Without question, our time this past year coming together as a community of friends, neighbors and health care providers facing the global COVID-19 pandemic, along with other critical health and equity challenges, has been unprecedented.

It is with enormous gratitude and pride that we present this year's Community Benefits Annual Report, which reflects a portion of the critical work that we have accomplished together to serve our caregivers and our most vulnerable populations during this historical time. We could not be prouder of these efforts. Working together with our deeply committed community partners, stakeholders and residents, we made great progress toward improving the health and wellbeing for all whom we serve.

In these pages, you will read about the wide range of our COVID-19 and other community health improvement efforts. Additionally, this year, UMass Memorial Health elevated our commitment to addressing racial disparities in health care delivery and diversity, equity and inclusion, in all aspects of our operations. As one example, we launched and hosted a series of Health Equity Open Forums to engage the community in developing and implementing targeted solutions to address COVID-19-related health care disparities and vaccine hesitancy. We also established a Mobile Vaccine Equity Enhancement Program to ensure the initial limited vaccine supply would reach our region's most vulnerable patient populations, particularly communities of color.

UMass Memorial Health is committed to continuing to address the root causes of health disparities and to improving equity and health outcomes through targeted approaches, joining forces with our community partners in these shared objectives.

Along with the heroic work of our systemwide caregivers during the pandemic, we want to also take this opportunity to recognize and express our sincere gratitude for the tremendous work and achievements of our community partners during this exceptionally challenging time. Without our dedicated community partners, the success of these efforts would not be possible.

With appreciation,

Eric W. Dickson, MD, MHCM, FACEP  
President and CEO  
UMass Memorial Health

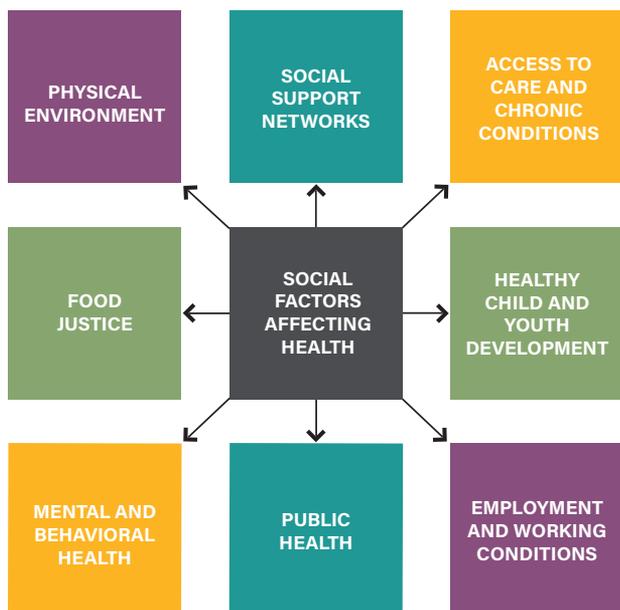
Elvira Guardiola  
Chair, Community Benefits Advisory Committee  
UMass Memorial Health



Eric W. Dickson, MD



Elvira Guardiola



## Social Determinants of Health

The UMass Memorial Community Benefits mission incorporates a broad definition of health from the World Health Organization – “a state of complete physical, mental and social well-being and not merely the absence of disease” – and recognizes that health is a product of multiple influences. Understanding the social determinants of health, (left) has been key to improving community health and health equity, particularly during the COVID-19 pandemic. Looking beyond our hospital walls to what is happening in our region has revealed complex socioeconomic problems not obvious at first glance. This strategic approach to address root cause factors would not be possible without strong partnerships with community stakeholders and grassroots organizations. Throughout this report, you will hear directly from them about the importance of our shared commitment to change the future, for the better, for thousands of residents of Central Massachusetts.



## The UMass Memorial Health DCU Center Field Hospital

As Massachusetts became a COVID-19 hotspot in March 2020, UMass Memorial Health partnered with the state of Massachusetts and the City of Worcester to create a field hospital at a downtown convention center. In eight days, 50,000 square feet of empty space were transformed into a 216-bed care facility for patients with COVID-19.

**John Broach, MD, Director, Division of Emergency Medical Services and Disaster Management:** A pandemic is a significant risk to the community and our hospitals. Our emergency management steering committee addressed the swine flu (H1N1) epidemic in 2009, and the threat of Ebola in 2015. So, although our usual focus is much more on trauma, such as mass casualty and hazmat exposure, we had some experience with highly infectious diseases.

In late 2019, we began tracking the coronavirus and knew within two months that it would be a disease of significant consequence and disruption for the world. Regionally and citywide, UMass Memorial clinicians monitored patients and sent any with suspicious symptoms to our three hospital campuses in Worcester. By mid-February, we partnered with Michael Hirsch, MD, Medical Director of the Division of Public Health, Matilde Castiel, MD, Commissioner of Health and Human Services, and St. Vincent Hospital in Worcester to understand what was needed in the community.

To prevent our hospitals from being overwhelmed, the concept of a field hospital was developed at the end of March. We had to focus on what was possible – who was going to staff it, would electronic medical records be available, and what about medications, oxygen, food, bathrooms and showers? We began set up on April 1 and the doors opened on April 9. While most patients came from Worcester County, many were sent from 44 different hospitals statewide. The field hospital was open for six weeks, and then, because of the second wave of infections in the fall, it was reopened on December 6 for 100 days.

Eric Dickson, MD, President and CEO, UMass Memorial Health, was involved in every aspect of the field hospital. He set a high expectation during its operation. He told us it was going to be difficult, it was going to be challenging and it would need a lot of creativity. He provided the resources we needed and was with us every step of the way.

**Left, during the COVID-19 pandemic, the DCU Center, a convention center in Worcester, became a field hospital. Top right, leading the transformation were, from left, Sharon Redinski, RN, Nurse Manager, John Broach, MD, Director, Division of Emergency Medical Services and Disaster Management, Pete Lancette, RN, Associate Chief Nursing Officer and Eric Dickson, MD, President and CEO, UMass Memorial Health.**



“Along with the heroic work of our system-wide caregivers during the pandemic, we want to also take this opportunity to recognize and express our sincere gratitude for the tremendous work and achievements of our community partners during this exceptionally challenging time. Without our dedicated community partners, the success of these efforts would not be possible.”

— Dr. Eric Dickson, MD, MHCM, FACEP  
President and CEO, UMass Memorial Health

▶ **900+**

Patients were admitted to the field hospital, for more than 3,000 inpatient-days of hospital care.

# Fighting for Health Equity: A System Perspective

UMass Memorial Health has long been focused on health equity. Yet, as the pandemic progressed, vulnerable populations in Worcester, particularly Latinos and Blacks, were experiencing a disproportionate rate of infection from COVID-19. In response, a Worcester Health Equity Task Force was initiated by Eric Dickson, MD, President and CEO, UMass Memorial Health, in partnership with Edward M. Augustus, Jr., City Manager, City of Worcester, to combat inequities through a mobile, data-driven, targeted campaign to educate, test and, ultimately, vaccinate populations who could not be reached through traditional means.



**Cheryl Lapriore, Chief of Staff, UMass Memorial Health and Co-Chair of the Health Equity Task Force:** Although inequity in all facets of life has existed for years, the pandemic, the murder of George Floyd and latent inequities created a “perfect storm” of mistrust as our vulnerable communities struggled to survive. As infection rate data

started to come in and the problem was laid out in front of us, we couldn’t look away. This created momentum for the task force.

Working with our Community Benefits staff and in partnership with Matilde Castiel, MD, Commissioner, Worcester Division of Health and Human Services, we convened community leaders to create strategies for education and testing in the Latinx community. (This initiative was expanded to Black and Asian communities and now includes vaccination.) There were three achievements. First, the UMass Memorial Health Office

of Clinical Integration analyzed data from all of our hospital communities to help target specific neighborhoods for outreach. Second, public service announcements were jointly created with the community for the Spanish-speaking population, and students from the Latino Education Institute participated in Feet on the Street (see page 6) to spread the word. Finally, we hadn’t realized that language barriers to care were as big as they were, but this message was loud and clear – the hospital is not a comfort zone for vulnerable communities. We had to be much more mindful of who was delivering care and where. By adopting a mobile or “pop-up” model for care – going directly to the people – we could address real concerns on the spot.

Striving for equity is not something we can simply turn on or off. Developing sustainable mechanisms for creating more preventive medicine opportunities has to be a focused effort. It means holding everyone accountable – every health entity, community leader, city official, and hospital administrator – for community healthcare. We can all commit ourselves to working in a different way.

## Pilot Program for High-Risk Mothers

To help improve health for high-risk Latina mothers and their babies, pre-and post-pregnancy, the UMass Memorial Maternal Fetal Medicine Department began a pilot program with a trilingual (Spanish, English and Portuguese) community health worker (CHW). The intervention is funded through a Racial and Ethnic Approaches to Community Health (REACH) grant from the Centers for Disease Control that was received by the Worcester Division of Public Health in 2018.

The program uses social determinants of health, such as food insecurity, to address chronic disease

(hypertension, heart disease, Type 2 diabetes and obesity) health disparities and reduce infant mortality. The CHW provided in-person and virtual breastfeeding support services including nutrition and lactation counseling.

 **100+**

Patients were enrolled and 80 referrals were made to community-based resources.

# Fighting for Health Equity: The City Perspective



**Matilde Castiel, MD**, is the Commissioner for Health and Human Services for the City of Worcester. She oversees public health, youth services, human rights and disabilities, veterans and elder affairs, and homelessness, and co-chairs the City of Worcester and UMass Memorial Health, Health Equity Task Force.

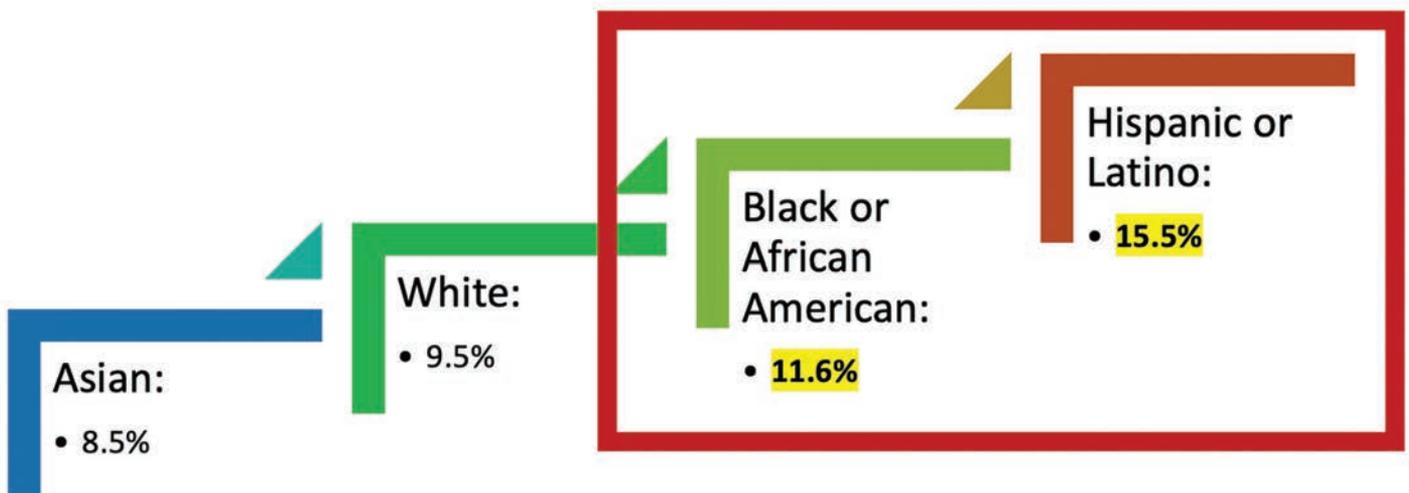
**Dr. Castiel:** For us in the Department of Health and Human Services, taking a lead role in the task force was exactly where we wanted to be. To address a large issue like the COVID-19 pandemic, one organization can't do it alone. We had to involve the entire community. Partnering with UMass Memorial, the health centers and other community leaders, we looked at COVID-19-positivity test rates, who was being affected and where, and more recently, at areas with the lowest vaccination. Some of the early efforts addressed the homeless population. We had to figure out how to connect with and test them, as well as slow the spread by reducing the number of individuals living in shelters of 100 people to about 25 per group. Our testing

with UMass Memorial in the shelters revealed that one-third were COVID-19-positive. We opened two school buildings and two churches to isolate groups with or without the disease and, in some cases, sent individuals to the field hospital (see page 3). Those early days were incredibly stressful for both people in health care as well as people in the shelters. What stands out for me is how the community came together to solve issues. Data analysis was our guiding light, with most of the data coming initially from UMass Memorial and, later, the Worcester Division of Public Health.

As we move forward with the task force, we will continue with vaccination and testing for the COVID-19 Delta variant. About one-third of Worcester's Latinx and Black populations are vaccinated and we need to evaluate who is being left behind in that effort.

We are also asking if what we have learned from the pandemic effort could be used to address, say, cardiac disease, HIV, breast and colorectal cancer. Can we increase outreach and access to health care by bringing information and on-site testing to the populations who most need it? How are we going to build trusting relationships? We will also work to involve all other health care entities in our area. We want everyone to be rowing in same direction.

## 2.3% of Worcester's total population has had COVID-19



As of 05.23.2021. Data courtesy of UMass Memorial Health Office of Clinical Integration



## COVID-19 Prevention: Feet on the Street

With the onset of the COVID-19 pandemic, patients could no longer be seen inside the UMass Memorial Ronald McDonald Care Mobile vehicle due to infection control restrictions. Its dedicated team quickly pivoted, reaching out to high-risk populations with free masks, sanitizers, education, testing and vaccines at neighborhood-based pop-up sites in Worcester and surrounding towns.



**Michelle Muller, FNP, Care Mobile Program Manager:** We selected high traffic areas such as Main Street in Worcester, food pantries, churches, day care centers, parks and supermarkets to get the word out about the importance of masks, proper hygiene and social distancing. At that time, masks and sanitizer were hard to find. We distributed

washable, fabric masks sewn by a UMass Memorial Medical Center staff member (see back cover) to adults and children, along with hand sanitizer and printed information.

As nasal test swabs became available, we piloted and staffed a successful COVID-19 testing program at a local supermarket. We also conducted larger testing events as part of Governor Charlie Baker's Stop the Spread initiative in communities across the Commonwealth. Clinics were held under canopies and tents throughout Worcester for 150 to 600 people per day. By moving

indoors as the weather turned colder, capacity increased to 800 to 1,000 daily with the help of new hires, temporary employees, public school nurses and volunteers. During the holiday season, the Mercantile Center in Worcester provided space, and we saw 1,100 to 1,500 people three days a week. The testing program will continue as long as there is a need.

In February, UMass Memorial Health initiated the Mobile Vaccine Equity Enhancement Program (MVEEP) for vulnerable populations. Statewide, the elderly were the first priority. We visited low-income housing complexes, senior centers and other community partners to assist those who had difficulty getting to mass-vaccination sites and vaccinated over 4,500 people. Now, as the initial demand is trailing off, we are trying to educate those who may be hesitant and we continue to look for groups of people who simply don't know how to access this benefit.

We visited manufacturing plants and a farm with non-English speaking employees as well as many churches, particularly in the Spanish-American, Black and African communities to provide information and offer vaccines. In some places, we received more than a 60% response rate. It has been an amazing effort.

**Foreground from left, Care Mobile staff Rafael Gonzalez, Operations Assistant Coordinator, Nardy Vega, Community Outreach Liaison, and Stacy Hampson, RDH, Dental Program Coordinator, at a pop-up testing site in Worcester.**

▶ **10%**

Of all minors tested for COVID-19, since testing began in February 2020, were COVID-positive (879 of 8,765).



**Pop-up booths, with information, sanitizer and masks, appeared in diverse communities throughout Worcester as part of Feet on the Street’s COVID-19 Educational Community Project.**

## A Church Congregation Promotes Vaccines

Covenant-St. Andrew’s United Methodist Church in Worcester is a diverse congregation – African American, Asian, Latinx, Caucasian and Native Americans – with 65 members. Yet this relatively small group had a big impact through its coordinated effort with UMass Memorial Medical Center to bring COVID-19 information, testing and vaccines to their members and to the greater community.



**Rev. Louis Bond, Pastor:** Our relationship with UMass Memorial started a long time ago. For 15 years, I was on the board of Family Health Center, and also served as president. While there, I met Mónica Lowell, Vice President of Community Health Transformation/Community Benefits. Her commitment to community is extraordinary, and we learned to trust one another.

**Sharon Henderson, Director of Outreach and Communication:** Our church was very concerned about our seniors, our “glowing light.” We felt strongly that we had to act. Mónica and I have also done a lot of community work together. She said, “I have a call into your pastor to see if we can do more.” That call was a godsend. I told her, “I have a model in my head about how this could work,” and we established health equity popup clinics at the church. We focused on getting consistent coronavirus messaging to our members who spread the word.

**Rev. Bond:** In addition to food and housing problems, our folks generally have difficulty accessing health care. The pandemic



highlighted those inequities in the system. As a church community, members of our congregation made sure people could get tests and vaccines, and hundreds of people came. They knew they were welcome and, if they had questions, they would get answers.

**Ms. Henderson:** I talked to every person, and a lot of masks and sanitizer were given away. It was about our church family being “all in.” Rev. Bond has been intently focused on health disparity and there was no doubt in his mind that guidelines and vaccines were common sense. The UMass Memorial team helped us with this Herculean effort. The next step is to address vaccine hesitancy. In our community, there is great respect for seniors. What they say, goes! They are using their influence to get younger relatives vaccinated.

## ▶ 163

People were vaccinated at Covenant-St. Andrew’s United Methodist Church in Worcester.

# Community Health Updates

## UMass Memorial Health – HealthAlliance-Clinton Hospital

### Community Grants

During 2020, local nonprofits received more than \$470,000 from UMass Memorial Health – HealthAlliance-Clinton Hospital’s determination of needs (DoN) funding attached to completion of the new Emergency Department on the Leominster Campus. “We are excited to provide these grants to our community,” commented Steve Roach, President of HealthAlliance-Clinton Hospital. “By pushing these funds out to organizations that have already identified projects and programs aligned with our Community Health Needs Assessment, we believe we can make a lasting impact in North Central Massachusetts and ultimately invest in healthier communities.” The hospital will annually distribute \$475,000 in grants through 2024 to local nonprofits that link programming and outcomes to the 2018 Community Health Needs Assessment.

### Mobile Market Addresses Food Insecurity

During the COVID-19 pandemic, HealthAlliance-Clinton Hospital partnered with Growing Places to serve local communities hardest hit by food insecurity. Through a \$5,000 grant from hospital DoN funds, more produce from local farmers was purchased to supplement the Growing Places mobile food market. The pandemic provided a unique challenge for many families in the region, and for Growing Places, as donated food became increasingly difficult to secure. The mobile food market traveled to five different locations in Clinton, Fitchburg and Leominster, focusing on communities with the greatest health disparities related to food insecurity and poor nutrition. The mobile market accepts nutrition benefits coupons from Supplemental Nutrition Assistance Program (SNAP), Health Incentives Program (HIP), Women, Infants and Children (WIC), and Senior Farmers’ Market Nutrition Program (SFMNP), allowing residents to stretch their food budget.



Through a partnership with UMass Memorial Health – HealthAlliance-Clinton Hospital, the Growing Places mobile market brought fresh produce to food-insecure communities in Clinton, Fitchburg and Leominster.



## UMass Memorial Health – Marlborough Hospital

### Caregivers Supporting Caregivers

One of the keys to good health is access to nutritious food. Recognizing that some of their own caregivers are sometimes unable to provide healthy meals for their families, UMass Memorial Health – Marlborough Hospital is opening a food pantry. “There are times when a caregiver may face unexpected expenses – a family member loses a job or becomes seriously ill, or they need to care for a grandchild or aging parent,” said Ellen Carlucci, Vice President, Development, Marketing and

Communications Department, Marlborough Hospital. “We firmly believe that no one who works at the hospital should have to struggle to eat or to feed their family.” To address this need, the food pantry will be stocked with a variety of food and items such as laundry detergent, paper products, toiletries and other items requested by staff. The pantry is organized and run by hospital caregivers, “food pantry champions,” who truly want to help other hospital caregivers by volunteering their time to stock shelves, collect and discreetly distribute food to those in need.

## UMass Memorial Medical Center

### COVID-19 Outreach and Testing

As a system, UMass Memorial Health implemented a comprehensive approach to address equity and disparities in COVID-19 testing and positivity rates utilizing both internal and community-based resources. The effort highlighted the importance of meeting people where they are, directly providing a point of contact, clear communication and outreach to vulnerable groups. The intervention to prevent the spread decreased Emergency Department (ED) use and reduced the number of boarders – those who stay for long periods in the ED – in an already taxed environment. Being in the community helped the Medical Center to connect in a tangible way as “boots on the ground” working together with neighborhoods and community leaders to tackle the crisis. The outreach and COVID-19 testing efforts were expanded to targeted areas within the Marlborough Hospital and HealthAlliance-Clinton Hospital service areas.

**A food pantry, run by Marlborough Hospital caregivers for hospital caregivers, will supply healthy meals and household items during times of unexpected need.**

### CHA & CHIP Updates

As part of a not-for-profit health care system, each hospital conducts a Community Health Needs Assessment (CHA) every three years, and as a best practice, develops a Community Health Improvement Plan (CHIP) in collaboration with local health departments and community partners. In FY20, UMass Memorial Medical Center and HealthAlliance-Clinton Hospital began the update process for the completion of the 2021 Community Health Needs Assessments and subsequent updated CHIP reports for their respective regions. Marlborough Hospital completed its most recent CHA and CHIP in 2019 and will update both reports in 2022.

### Health Insurance Enrollment

UMass Memorial Medical Center and its affiliates – HealthAlliance-Clinton and Marlborough Hospitals – provide health insurance enrollment assistance to improve access to health care for uninsured/low income populations. An average of 12,000 total people receive enrollment assistance each year.

# The UMass Memorial Ronald McDonald Care Mobile

In 2000, UMass Memorial Medical Center, in partnership with Ronald McDonald House Charities (RMHC), launched the world's first Ronald McDonald Care Mobile. Over the past 20 years, its dedicated, bilingual (English and Spanish) staff has served tens of thousands of children and their families, and its services have grown to encompass 21 public schools and ten neighborhoods in Worcester – and beyond.



**Cathy Recht, RN, MS, Vice President, Community Relations (retired):** The concept of a mobile medical unit for UMass Memorial Health began when Judge Luis Perez approached me to discuss the lack of continuity of care for foster children and adolescents in the juvenile justice system. It also became clear that many adults found health care

inaccessible because of the lack of bus service, childcare or insurance.

As we fundraised for a mobile solution, we learned that RMHC was also looking to start a mobile medical service for children. From the start, I wanted our children's services to extend to dental screening due to the lack of fluoride in city water and a high level of tooth decay. Care would also extend to their families and neighbors, creating a healthier community.

RMHC provided a unique design for us, one-half medical, one-half dental. When the Care Mobile arrived in Worcester,

convertibles from local car dealerships, filled with UMass Memorial senior staff and board members, joined a school bus full of children in a parade to City Hall. It was exciting.

The most challenging part of planning was logistics for parking, waste disposal and electrical connections at any prospective location. Initially, we parked at the Worcester Regional Airport. The staff included a medical practitioner, a dental hygienist and a couple of phlebotomists who filled multiple roles, including driving and cleaning.

We also thought about neighborhoods where the Care Mobile could have the greatest impact. Early locations included the South Worcester Neighborhood Center, Belmont Street Community School, Elm Street School, Worcester Youth Center and Lakeside Apartments. Schools provided access to children during the day, and after school, we offered a walk-in service for families. Our goal was to connect them to primary care and a medical home, usually at one of the community health centers. It's amazing to think that so many families didn't have health care, yet one of the schools was situated within walking distance of a clinic and between two UMass Memorial hospitals.

▶ **103,072**

Care Mobile patient visits (2000–2020). In addition, the dental program placed 85,562 sealants.



## Celebrating 20 Years of Excellence in Delivering Neighborhood Care



**Mónica Lowell, Vice President, Community Health Transformation/Community Benefits:**

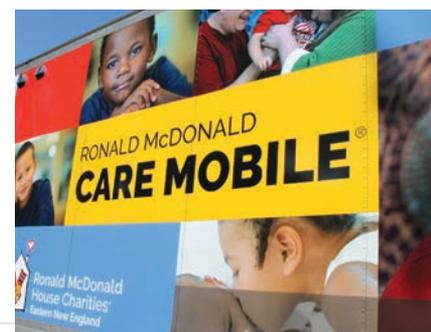
We are now on the second generation of the Care Mobile, with the arrival of a new vehicle in 2010. Our goal is the same – to provide care in economically distressed schools and neighborhoods and connect patients to a medical home. There

are several ways that Care Mobile services have been ahead of their time. One is that we have always regarded dental care as a key condition of overall health. Statistics show there is high absenteeism among students with dental pain, and children in low-income households also tend to relocate frequently. By working closely with the schools, we provide dental services for children where they are at that moment.

Health and wellness initiatives are driven by considering the social determinants of health, a practice that has been at the core of our services since the very beginning. When a patient arrives at our door, we screen for homelessness and housing conditions, food insecurity, lack of employment or insurance and other needs, and provide connections to local and state resources. We also work with a coalition of dental providers, including two

community health centers and the Worcester Public Schools, to ensure continuity of care and serve vulnerable populations that suffer inequity. We know our neighborhoods extremely well. During the COVID-19 pandemic, while the Care Mobile was shut down, its staff hit the streets in areas most affected. Armed with information in several languages, masks, sanitizers, tests and vaccines, they went where our patients live, visiting supermarkets and bodegas, churches and neighborhood centers. Looking ahead, we are expanding our preventive focus to restorative dental, which was piloted just before the pandemic. We are also developing a lead prevention program in partnership with the City of Worcester Healthy Homes Office and the public school system.

The Care Mobile is the only mobile provider of oral health in Worcester. It has visited public schools, community sites, family shelters, childcare and senior centers, food pantries, public housing and faith-based organizations. It has traveled regionally to Marlborough and North County. We are fortunate to have longtime employees who believe in the mission. When a person enters the Care Mobile, it's beautiful, bright and clean and they receive the highest level of care. Just because someone happens to be economically challenged doesn't mean they should expect any less.



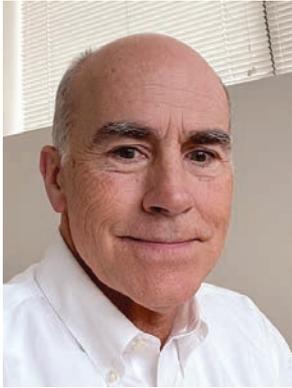
**At the 20-year milestone, the Care Mobile continues to make a difference in the lives of families and children in Worcester by providing outstanding medical and preventive dental care. Regardless of insurance status, patients of all ages are served.**

### Central Mass Oral Health Task Force

UMass Memorial Community Relations coordinates a task force to ensure the provision of preventive dental services in 42 Worcester public and charter schools. Collaborators include the UMass Memorial Ronald McDonald Care Mobile, Worcester Public Schools, Edward M. Kennedy Community Health Center, Family Health Center of Worcester, Quinsigamond Community College and Commonwealth Mobile Oral Health Services.

# Anchor Mission: An Investment in the Community

In 2018, UMass Memorial Health adopted a systemwide Anchor Mission to address social determinants of health in economically challenged neighborhoods. One of the four pillars of the mission, investment of 1% of the system's investment portfolio, strives to improve the health of vulnerable populations by addressing housing, employment, food, education and access to health care. With a total commitment of \$4 million by 2025, about \$2.4 million has already been deployed.



**Robert Feldmann, Senior Vice President of Finance and Corporate Controller (retired), UMass Memorial Health and Chair of the Anchor Mission Investment Subcommittee:**

Investment helps reduce economic disparity and revitalizes the community. Our projects are aligned with our health initiatives. The Community Benefits

team, which works extensively with the community, brings organizations to us to discuss projects that meet our guidelines.

While the Community Benefits effort is more grant and resource oriented, the Anchor Mission investment has an expectation for a modest financial return to preserve the buying power of the initial capital, allowing us to lend again.

Worcester has been going through revitalization and there are more for-profit investors buying property, renovating, and then selling or renting to higher income individuals. Unfortunately, this gentrification pushes out low-income individuals. Our strategy is to preserve real estate for first-time home buyers and those who meet low-income thresholds. The Finally Home

initiative, driven by the City of Worcester and the Health Foundation of Central Massachusetts, which received financial support from the Anchor Mission effort, will be a collection of projects providing housing for the homeless. One of these projects receiving direct support is the Tiny House Village, a development of small, individual units tailored for the elderly.

The Creative Hub at the former Boys & Girls Club in Worcester's Main South neighborhood steps beyond the housing issue. What inspired us to make this investment is the vision of revitalizing an abandoned property in a very distressed neighborhood. Developing a community for artists at this site has the potential to bring long-term benefit to an area that is economically disadvantaged, and it has significant support from the arts community, the general public and our local government. A logical extension will be a childcare center, based at the Creative Hub, to provide art-focused activities for low-income families.

For smaller organizations that are trying to get a project off the ground, the involvement of UMass Memorial Health adds a high level of support and credibility to the project. Generally, our investment project partners apply for additional funding through state, local and community development sources. Having our support for their project can make it a reality.

## Defining Anchor Mission

A commitment to consciously apply the long-term, place-based economic power of the institution, in combination with its human and intellectual resources, to better the long-term welfare of the community in which the institution is anchored. — From the Democracy Collaborative

### UMass Memorial Anchor Mission Steering Committee Co-Chairs

Douglas Brown, President, UMass Memorial Community Hospitals and Chief Administrative Officer

Cheryl Lapriore, Senior Vice President, Chief of Staff, Chief Marketing Officer, and President of UMass Memorial Health Ventures, Inc.

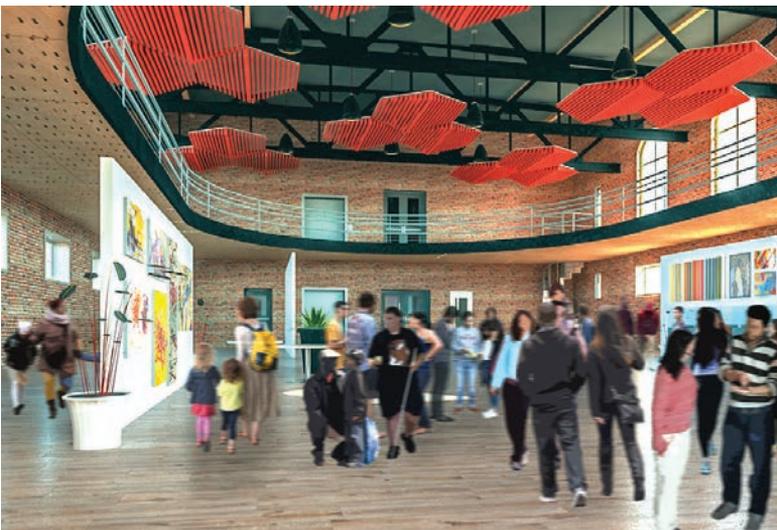
### Community Benefits Department

Mónica Lowell, Vice President, Office of Community Health Transformation/Community Benefits, UMass Memorial Health

# Anchored in Our Community

## Program Impact Quick Numbers As of July 2021

- A commitment to deploy \$4 million of the UMass Memorial Health investment portfolio to targeted place-based community investments by 2025.
- Harrington Hospital (a new member hospital of UMass Memorial Health) committed to allocate at least \$4 million of its long-term reserves or unrestricted investment funds to address the social determinants of health in its service area during the 10 years following the merger.
- \$400,000 line of credit for Worcester Common Ground to purchase vacant or blighted properties and rehabilitate them for first-time homeowners.
- \$500,000 loan to Creative Hub Worcester to support the rehabilitation and conversion of a historic building to a multi-use community center for at-risk youth and local artists.
- \$500,000 to a \$2 million Guarantee Fund for the \$6 million Finally Home Fund, to develop 103 housing units for chronically homeless individuals in Worcester.
- \$300,000 loan to the Tiny Home Village (part of the Finally Home Fund), a \$4.6 million joint venture of East Side Community Development Corporation and a for-profit developer that will create 16 tiny homes for elderly individuals who are chronically homeless.



**Top, a Worcester Common Ground home for first-time buyers. Left to right, Kate Behan, Senior Director of Clinical Affiliations and Anchor Mission strategy, Yvette Dyson, Executive Director, Worcester Common Ground, Robert Feldmann, Senior Vice President of Finance and Corporate Controller (retired) at UMass Memorial Health and Chair of the Anchor Mission Investment Subcommittee, and Mónica Lowell, Vice President, Community Health Transformation.**

**Bottom, artist's rendering of the interior of Creative Hub Worcester. The project will serve an under-resourced community, with a focus on neighborhood revitalization via creative and cultural expression.**

## ▶ \$2.4 million

Has been deployed in five different community investing projects as of July 2021.

## The Road to Care: A New Mobile Addiction Service

Opioid-related overdose deaths in Massachusetts rose by 5% from 2019 to 2020, with rates among Black non-Hispanic males making up the largest increase, according to the Massachusetts Department of Public Health. Worcester also experienced an increase, and to this end, in June 2020, UMass Memorial Health was awarded a five-year contract by the Massachusetts Department of Public Health Bureau of Substance Addiction to target opioid disorders in at-risk individuals. The Road to Care addiction service will be equipped with a vehicle from the Kraft Family Foundation.



**Michael Pepin, Project Coordinator,**

**UMass Memorial Health:** The mobile addiction service is designed to reach out to those experiencing homelessness and substance use disorder. Our goal is to reduce morbidity and mortality, and mitigate barriers such as lack of transportation or

mistrust in health care. By reaching people

where they are – in shelters or on the street – we develop rapport and provide consistent, longer-term treatment.

The program was initiated by Kavita Babu, MD, Director, Division of Toxicology, University of Massachusetts Medical School and Erik Garcia, MD, Internal Medicine, UMass Memorial Health, with inspiration from Matilde Castiel, MD, Commissioner for Health and Human Services for the City of Worcester. The vehicle, originally scheduled for delivery in January 2021, was delayed by more than eight months due to the pandemic. But our mobile electronic medical record system was ready in the spring. Operating as a street team, we have been going to various outreach sites in our own cars, three days a week, equipped with backpacks, rolling suitcases and medication boxes.

We have had about 200 encounters since our launch in mid-May and have been slowly ramping up. Patients were hesitant at first; however, as they began to see us more, they started referring others to us for substance use treatment services as well as primary care and recovery resources. Once we get the van, we'll be able to reach more areas of the city. Instead of being constrained by a brick-and-mortar clinic, we will be able to visit areas reported with a high prevalence of opioid overdoses and find those patients who might not reside in shelters or encampments.

It's important for UMass Memorial to provide comprehensive, equitable care to everyone who needs it. Anyone arriving at one of our clinics receives high quality care. But what if patients can't get there? By using a mobile service, underserved populations can receive care directly where they are.



**From left above, Michael Pepin, Project Coordinator, and Erik Garcia, MD, Internal Medicine, UMass Memorial Health, and Kavita Babu, MD, Director, Division of Toxicology, University of Massachusetts Medical School.**

**Photo right, Kate Saunders MS, RD, LDN CNSC, Director of Clinical Nutrition and Jose Yarzebski, MS, RDN, LDN, Registered Clinical Dietitian, are working to establish a food pharmacy at UMass Memorial Medical Center.**

### Mobile Addiction Services

- Acute care
- Chronic disease management
- Preventive interventions
- Sexually transmitted infections
- Behavioral screening and referral
- Case management

# The Food Pharmacy

Food insecurity, or not having enough resources to secure adequate amounts of appropriate food, is a risk factor for malnutrition. Malnutrition is linked to the development or worsening of acute illness, and chronic disease and malnourished patients, when discharged from the hospital, are more than twice as likely to be readmitted within 15 days as properly nourished patients. A new food pharmacy and multidisciplinary team at UMass Memorial Medical Center, including Community Benefits staff and Anchor Mission team members, want to change that. Patients from UMass Memorial Cancer Center will be screened for food insecurity and given a “prescription” specific to their medical history for nutritious options available for pickup. The pharmacy joins other equity efforts by the Medical Center that include Community Benefits support of community gardens and leadership on the Worcester Food Policy Council and Food is Medicine Massachusetts steering committees.

## Jose Yarzebski, MS, RDN, LDN, Registered Clinical

**Dietitian:** Nutrition is important for disease management in patients and food insecurity is often overlooked. Many people with chronic disease know that eating healthy is important, but they can’t afford it or don’t know where to turn. While traditional food banks and pantries are on the front lines, studies show that offerings can be of lower quality nutritionally – high in salt and sugar, and low in fiber. For oncology patients especially, nutrition needs to focus on the quality as well as the quantity of protein to avoid malnutrition. The food pharmacy, combined with our education effort, will be a vital resource for these patients, who may have other comorbidities.

We estimate that 150 patients and family members will participate in a six-month pilot. The initial goal is to provide, at no cost, enough to feed a family for one week a month, and we hope to expand that over time.

In addition to the Worcester County Food Bank, healthy options will be supplied through regional and local programs including the Regional Environmental Council, Community Harvest Project, Meals on Wheels, CommunityHELP (a local online resource for reduced cost health and wellness services) and Sodexo, the food service for UMass Memorial hospitals. Patients will also be linked to federal programs such as the Supplemental Nutrition Assistance Program (SNAP) and Women, Infants and Children (WIC).

## Kate Saunders, MS, RD, LDN CNSC, Director of Clinical

**Nutrition:** With knowledge gleaned from the food pharmacy at Boston Medical Center, we are looking to create a robust program adapted to Central Massachusetts. There is great support for the food pharmacy within UMass Memorial Health and we see it scaling outward, going far beyond the oncology patients who will participate in this pilot program.



## Youth Urban Agriculture Program

Grant Square Community Garden in Bell Hill, above, recently celebrated its 10th anniversary. Established in 2010 by the Regional Environmental Council (REC) in collaboration with and support from UMass Memorial Medical Center and the City of Worcester, the garden’s 34 raised beds are maintained by youth gardeners and neighborhood residents. Approximately 800 to 1,000 pounds of fresh produce is grown at the garden and distributed to the community each year, including at 15 REC mobile market stops in Bell Hill and other food insecure areas across the city.

## Coalition for a Healthy Greater Worcester

Spearheaded by UMass Memorial Medical Center and other stakeholders in 2008, the Coalition for a Healthy Greater Worcester is the primary convener of the Community Health Improvement Plan (CHIP) for five towns and cities in Central Massachusetts: Grafton, Millbury, Shrewsbury, West Boylston and Worcester. Data gathered from the 2018 Greater Worcester Community Health Needs Assessment was used to update the five-year CHIP that was released to the public in March 2021. To prepare, 35 community conversations and interviews with 97 unique key stakeholders were conducted by the coalition to deepen community engagement through an anti-racism lens. To date, more than 313 organizations have “CHIPed-In” by pledging their support of the coalition’s work to execute the CHIP or by attending its working group meetings.



**Casey Burns, Director,**  
**Coalition for a Healthy Greater Worcester:** UMass Memorial Medical Center has provided the highest level of sustained core operating support, allowing the coalition to grow into a well-established group with a defined place in the community. Our mission includes community engagement, assessment and

capacity building around public health. In 2018, we received a Racial and Ethnic Approaches to Community Health (REACH) grant from the Centers for Disease Control in partnership with the City of Worcester. With that funding, we were able to adapt racial equity training from the Boston Public Health Commission to establish the Trauma Resiliency and Racial Equity Training Institute in Worcester. The institute has been funded for the past year through the Greater Worcester Community Foundation, which provides support for the curriculum, designed to prepare local organizations to lead conversations about racial equity in the community. During the



**Coalition  
for a Healthy  
Greater Worcester**

ELIMINATING HEALTH DISPARITIES  
IMPROVING QUALITY OF LIFE  
BUILDING COMMUNITY

pandemic, trainings were adapted to video conferencing, along with work surrounding development of the 2021 CHIP.

The coalition also pivoted as part of the Worcester Together Initiative, leveraging resources and relationships, to purchase and distribute masks, sanitizer and cleaning supplies, thermometers and paper products to vulnerable communities across the city. With many food pantries closed, we established a partnership with Main South Community Development Corporation and Main South Business Association, both located in one of the hardest hit areas of the city, to deliver hot meals to COVID-19-positive households from culturally responsive restaurants using WooRides for delivery. Together with our community partners, more than 20,000 meals have been delivered to food insecure COVID-positive families.

### Partners for Meal Delivery to COVID-19-Positive Households

Coalition for a Healthy Greater Worcester  
Fuller Foundation  
Massachusetts COVID  
Main South Community Development Corporation  
Main South Business Association  
WooRides  
Worcester Community Action Council  
Worcester County Food Bank  
Worcester Together Initiative



**Pre-pandemic, the Coalition for a Healthy Greater Worcester annual meeting was attended by over 200 community members and CHIPed-In organizations.**

## Other UMass Memorial Medical Center Public Health Initiatives

### Worcester Division of Public Health

The UMass Memorial Medical Center provides funding to the Worcester Division of Public Health (WDPH) for program growth and continued development of the public health system in Worcester and the surrounding region, including the WDPH medical director role. To further this effort, the Academic Health Collaborative, a key partner of the Medical Center, engages approximately 25 student interns each year to implement strategies of the Community Health Improvement Plan (CHIP, see page 9).

### Goods for Guns

The Injury Prevention Department, along with the Worcester Police Department, the WDPH, the Worcester Office of the District Attorney and other community stakeholders, offers grocery store gift cards in exchange for unwanted firearms through Goods for Guns. Providing gun trigger locks free of charge, the educational program also works with police departments in 17 surrounding communities. In 2020, 163 guns were collected and more than 3,300 guns have been turned in since 2002.



### Hector Reyes House

The Medical Center supports the medical director position at Hector Reyes House, a residential substance abuse treatment program for Latino men that provides on-site medical care and cognitive behavioral therapy to reduce relapse and ease the transition to independent living. The program serves an average of 80 Latino men annually and offers job training and skill development at Café Reyes, photo above.

### Family Health Center of Worcester

To increase the capacity and ability to provide primary care for vulnerable populations and address a shortage of medical providers, the Medical Center grants an annual rental subsidy to Family Health Center of Worcester.



### Pediatric Asthma Intervention Task Force

UMass Memorial Health's Community Relations Department coordinates a citywide effort to address the high rate of asthma among children in Worcester. Partners include Edward M. Kennedy Community Health Center (Co-Chair), Family Health Center of Worcester, UMass Memorial Pediatric Primary Care and Pediatric Pulmonology, Worcester Public Schools and Head Start Program, Community Legal Aid and the City of Worcester Healthy Homes Office. During the pandemic, in-person home visits were transitioned to video conferencing. In 2020, 64 home and virtual visits were conducted by community health workers. In addition, 60 students with persistent asthma were enrolled in the school based AsthmaLink medication adherence program. When schools closed due to COVID-19, the Pediatric Pulmonology Department established a text messaging medication reminder and asthma status check-in intervention for high-risk patients.

### Medical-Legal Partnership

Our Medical-Legal Partnership is a collaboration between Community Legal Aid, Inc. (CLA) and the Medical Center's Legal Department. Involving CLA and private pro bono lawyers, as well as staff and clinicians in several hospital departments, the effort addresses legal needs relating to social determinants of health for low-income and Medicaid eligible families of patients. CLA staff attorneys hold on-site office hours at four clinical practices. During the pandemic, services were provided virtually. In 2020, 180 referrals were made to the program, with 114 patients receiving legal intervention, and 76 additional legal consultations provided.

# HOPE Coalition – Healthy Options for Prevention and Education

Twenty years ago, peer leaders from Healthy Options for Prevention and Education (HOPE) Coalition – a youth-adult partnership created by UMass Memorial Medical Center to reduce violence and substance abuse – met to talk about coping with stress and depression. Fueled by a needs assessment they conducted, the peer leaders worked with coalition adults to develop a model to remove the stigma and barriers associated with adolescent mental health services through counselors embedded on the staff of Worcester youth organizations. Since its inception, more than 7,000 youth have received support through one-on-one counseling, therapeutic groups and crisis intervention. Staff at participating organizations receive youth mental health training and one-on-one consultations with the embedded counselors on how to handle youth issues. In October 2020, the HOPE mental health model transitioned to YOU, Inc., a longtime community partner of the Medical Center.



**Laurie Ross, PhD, Community Benefits Department and Professor at Clark University:**

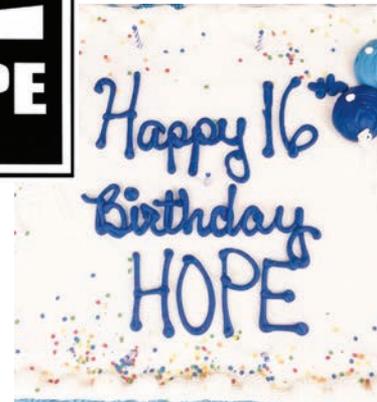
The HOPE Coalition began in 2000 with a federal grant for a two-year plan and three-year implementation. We trained youth peer leaders who then identified health service gaps in the community. Mental health

arose as a topic of concern, and through workshops offered by the Massachusetts Society for the Prevention of Cruelty to Children, a youth-designed model emerged. When youth peer leaders and a task force of clinicians discussed challenges, there was convergence in what both groups were saying: Youth want to get help discretely, at places where they are comfortable. When HOPE’s adult advisory committee heard the vision, they said, “we have places to do the work, why can’t we bring in counselors?” The HOPE model

was implemented at several youth serving organizations, with counselors and therapeutic mentors placed at the Boys & Girls Club, Girls, Inc., Friendly House and the Worcester Youth Center.

Twenty years ago, UMass Memorial Medical Center created institutional space to incubate this innovative and desperately needed youth mental health model. We are excited that YOU, Inc. has taken over as the lead organization. For years, they have hired, placed and supervised the counselors, and now they do so as lead agency and member of the YouthConnect Consortium.

Organizations want to bring more mental health services to youth. The HOPE Mental Health Model could be expanded and replicated if there was reduced grant dependency through insurance reimbursement. I remain part of the YouthConnect consortium to provide advice and oversight on this effort and hope that continued conversations will bring the model to a new level of permanent funding.



# Other UMass Memorial Medical Center Youth Initiatives

## Mental Health for At-Risk Youth

The COVID-19 pandemic forced HOPE Coalition Peer Leaders to move to a completely virtual program. Meetings and trainings were held in an online format with special attention focused on ensuring their social and emotional wellbeing during this unprecedented time of disconnection and disruption. Prior to the onset of the pandemic, 84 youth were served through one-on-one consultations and group activities in 2020.

## Worcester ACTs

Community health resilience workers in the Worcester Addresses Childhood Trauma (Worcester ACTs) program connect families with young children who have been exposed to violence to evidence based, trauma-informed interventions. Partners include the YWCA, UMass Memorial Health – Community Healthlink, UMass Medical School Child Trauma Training Center, UMass Memorial Health Child Protection Program, the Center for Health Impact, the Worcester Division of Public Health, Pernet Family Health, Clark University and Community Builders, a public housing property management company. About 80 families were enrolled in the program during the year.

## Injury Prevention

### Child Passenger Safety

The Child Passenger Safety program teaches parents and caregivers how to properly install car seats and provides free seats to families with financial need. In 2020, 100 participated in educational sessions. More than 40 car seats were distributed and an additional 30 were inspected and safely installed. The program offered 40 virtual sessions during the pandemic.

### Teen Driver Safety

Teen Drive taught 500 teens from Worcester Public Schools about safe driving and passenger habits through a hands-on interactive driving simulator experience that addresses distractions such as texting, mobile phones, peers, and substance use. Teen RIDE demonstrates the medical consequences of risky driving behaviors to teens convicted of first-time motor vehicle infractions. Approximately 20 youth participated.



▶ **7,000**

Youth have received mental health counseling support at Worcester youth organizations through the HOPE Mental Health Model since 2000.

**The HOPE Coalition's broader mission includes training in justice and advocacy for peer leaders, as well as youth workers through the Youth Worker Training Institute.**

## Awards and Acknowledgments



### Gage Award for COVID-19 Innovation

UMass Memorial Medical Center was honored by American Essential Hospitals with a Gage Award for outstanding work in responding to the COVID-19 pandemic. In particular, the Medical Center was recognized for its Feet on the Street (see page 6) community outreach and education effort and its leadership role in the Massachusetts Stop the Spread testing in areas of Worcester with high rates of infection. The hospital developed and implemented a flexible testing operation that successfully tested up to 340 people per hour. The association announced the Gage Award winners at its virtual annual meeting, VITAL2021, held in June.

### Building Brighter Futures With Youth Community Benefits Intern



Special thanks to Doherty High School student, Dhoksia Jani, who joined the Community Relations Department for a six-week internship as part of the UMass Memorial Building Brighter Futures with Youth program. During her internship Dhoksia provided support to the COVID-19 community Mobile Vaccination Equity Expansion Program (MVEEP, see page 6)

and conducted research on nutrition deficiency among school-aged children – its impact on health, school attendance, oral health and disparities among children of color.

### Twenty-Plus Years of Making a Difference

It is with gratitude for their tremendous contributions as dedicated members of the vital UMass Memorial Ronald McDonald Care Mobile staff team that we recognize Rafael Gonzalez, Operations Assistant Coordinator, for his 21 years of service and Nardy Vega, Outreach Liaison for close to 20 years of service. Both employees are cross-trained and provide a range of critical functions for the program. Mr. Gonzalez provides operation support, point of care testing, phlebotomy and Care Mobile driving, and other functions as needed. He has been part of the Care Mobile’s vital team since the program’s launch in 2000. Ms. Vega conducts community outreach, and provides phlebotomy, medical interpreting and clinical support.

### Congratulations

Louissik “Lou” Shabo retired from the UMass Memorial Medical Center Community Relations Department after 20 years of outstanding work and service. Ms. Shabo contributed greatly to the success of our Community Benefits programming, which could not have happened without her. We wish her the very best in this new and highly deserved chapter of her life.

## UMass Memorial Health System Stats

*Active Medical Staff System Total	*Hospital Discharges (excluding newborns) System Total	*UMass Memorial Ronald McDonald Care Mobile Patient Visits Total	*Licensed Beds System Total	*Outpatient Visits System Total	Life Flight Trips 2020	*Emergency Department Visits System Total
1,703	49,026	5,816	991	1,530,529	401	221,072

\*as of December 20, 2019

# ALL HANDS ON DECK ATTACKING COVID-19 IN CENTRAL MASSACHUSETTS 2020-2021



## COMMUNITY VACCINATION

### MOBILE VACCINATION EQUITY EXPANSION PROGRAM

**4,857.** Targeting people of color in low vaccination neighborhoods and home bounds, manufacturing, meat packing, food distributors, agricultural farm, faith based organizations, construction companies, subsidized housing, food pantries, neighborhood centers, ethnic bodegas and restaurants, hair salons and barbershops.

### MERCANTILE VACCINATION CENTER

**32,647.** Offered vaccines in a central location downtown Worcester for anyone in need.

### MARLBOROUGH HOSPITAL

**1,930.** Open to anyone and everyone in need.



### DCU FIELD HOSPITAL

**1,000** patients during the two surges.



 **UMass Memorial Health**



## COMMUNITY COVID STOP THE SPREAD TESTING

**61,580** tests offered in ethnic neighborhoods where data indicated high transmission and at central location downtown Worcester.



## FEET ON THE STREET EDUCATION AND OUTREACH

**101,755** masks distributed along with education and prevention against COVID at multiple sites.



## DAILY BRIEFINGS DURING THE SURGES

Dr. Michael Hirsh and Worcester City Manager Edward Augustus.

Graphic courtesy of UMass Memorial Health Marketing Department. Dots correspond to similarly colored information blocks at left and right of the map.

## Our System

- Largest not-for-profit health care system in Central New England
- Largest provider for the uninsured outside Boston
- Only Safety Net Provider in central New England and the fourth largest in the Commonwealth
- Supports a dedicated financial benefits program that connects the medically underserved and uninsured populations to health insurance and other services

## Community Benefits Partners

- Academic institutions
- Advocacy groups
- City of Worcester
- Community health centers
- Local and state health departments
- Medically underserved populations
- Neighborhood groups
- Philanthropic organizations
- Schools and community-based groups
- Community development corporations

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Page 1 (Elvira Gladiola): Elvira Guardiola  
Page 5 (top), 11 (headshot and bottom image 1),

15 (bottom left), 17, 20 (right top): Dany Pelletier  
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Page 13 (bottom): Studio Draw  
Page 16: Coalition for a Healthy Greater Worcester  
Page 18 (headshot, bottom row image 4): HOPE Coalition  
Back cover: Daisy Ramirez



## Mask Maker Extraordinaire

Thank you to Community Relations staff member Daisy Ramirez, who quickly began a handmade facial mask production when masks and personal protective equipment were scarce with the rapid onset of the pandemic in March 2020. She sewed and sterilized masks that were distributed at the Care Mobile Feet on the Street education and outreach program (see page 6). With the help of Community Health Worker Maggie Rodriguez, hundreds of handmade masks were produced through this remarkable effort.



**UMass Memorial Health** is the largest not-for-profit health care system in Central Massachusetts with more than 15,500 employees and 2,100 physicians, many of whom are members of UMass Memorial Medical Group and Harrington Physician Services. We are the clinical partner of the University of Massachusetts Medical School. Our comprehensive system includes UMass Memorial Medical Center, UMass Memorial Health – Harrington Hospital, UMass Memorial Health – HealthAlliance-Clinton Hospital, UMass Memorial Health – Marlborough Hospital, and UMass Memorial Health – Community Healthlink. Together, we impact every aspect of life in the region by making health and wellness services available to everyone, advocating for social equality and providing economic stability and opportunity. There are many ways to heal. We pursue them all. Relentlessly. Visit [www.ummhealth.org](http://www.ummhealth.org).



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