

Announcements

Our new **Director of Research** for the BHCHP Institute for Research, Quality, and Policy in **Homeless Health Care** is **Dr. Travis Baggett**. Travis has been associated with BHCHP for over nine years with his clinical practice at Long Island Shelter, the MGH Clinic, and the Lindemann Center, as well as doing critical research for us. Says Travis, "As the Director of Research at BHCHP, I hope to cultivate a program of high-quality, patient-centered research focused on discerning and addressing the health problems of people experiencing homelessness. My goal is for BHCHP to continue to evolve as a leader in using rigorous scientific methods to evaluate and promote evidence-based innovation in clinical practice that meets the needs of Boston's most vulnerable individuals. I look forward to collaborating with our patients and with our talented staff to achieve this goal."

In June, Sarah Ciambrone, the Director of Clinical Innovations, received the **Willie J. Mackey National Medical Respite Award** at the 2017 National HCH Conference & Policy Symposium. The award recognizes outstanding contribution to the field of medical respite care for people experiencing homelessness. Sarah founded the Respite Care Network as a way to share best practices among our partners around the country.



BHCHP consumer and Board of Directors member Larry Adams (in photo), with consumer and Board of Directors member Joanne Guarino, consumer Warren Magee, and staff from BHCHP, recently created a compelling video, entitled ***New Place, New Problems: Unanticipated Struggles with Being Newly Housed***. The creators produced the video to share their stories and raise awareness about the challenges faced by individuals who are newly housed. Learn more and view the video at: <http://www.bhchp.org/larry-adams-housing-video>.

**Save the Date for 2nd Annual Winter Walk on Sunday, February 11, 2018**, an event that works to raise awareness and help end homelessness in Greater Boston. Event proceeds will support several homeless organizations in Boston, including BHCHP. Learn more at [www.winterwalkboston.org](http://www.winterwalkboston.org).

YOU CAN MAKE A BIG DIFFERENCE WITH A SMALL GIFT

You can make a big difference in the health and comfort of a homeless family or individual with a small gift.

We can never have too many of the following items:

- new underwear (men's and women's)
- women's sports bras
- winter hats and gloves
- diapers
- toiletry kits
- \$5-10 gift cards:
  - CVS
  - Stop & Shop
  - Target
  - Walgreens
  - Dunkin' Donuts

These small gifts are used by BHCHP staff in every area of our program—from providers on our Family Team who are able to bring diapers and fresh groceries to families staying in motels and shelters in remote areas inaccessible to grocery stores, to caregivers on our Street Team

who are able to bring winter hats and gloves to some of our most vulnerable patients who sleep on the street year-round. Small gifts are especially valuable for our case managers and providers following up with recently housed patients, many of whom are settling into new living situations with very little resources and need our continued support during the transition into housing.

By donating small gifts to our program or organizing a gift drive with your community or workplace, you are directly providing dignity and compassion to our patients, and joining the ever-growing network of support within our BHCHP community.

Contact Madeline Burns at 857.654.1044 or [mburns@bhchp.org](mailto:mburns@bhchp.org) to find out about other "Small Gift" needs or check our website [www.bhchp.org/ongoing-needs](http://www.bhchp.org/ongoing-needs). Thank you!

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*The View From the Bridge* is a publication of Boston Health Care for the Homeless Program, bridging the gap between homelessness and health 24/7/365.

For additional information please contact: Linda O'Connor, Director of Development ([loconnor@bhchp.org](mailto:loconnor@bhchp.org)) at 857.654.1050 or Sara Pacelle, Associate Director of Development ([spacelle@bhchp.org](mailto:spacelle@bhchp.org)) at 857.654.1052.

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Boston Health Care for the Homeless Program is a 501(c)3 non-profit organization.



Connect With BHCHP Online

Read our patient stories and learn how to get involved at [www.bhchp.org](http://www.bhchp.org)



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THE VIEW FROM THE BRIDGE Boston Health Care for the Homeless Program

Fall 2017

Our Story

Since 1985, Boston Health Care for the Homeless Program has been delivering exceptional medical and behavioral health services to homeless individuals and families in Greater Boston. Each year, BHCHP provides care for over 11,000 patients where they are, whether in the streets and back alleys; at our over 45 clinics in adult, family, and domestic violence shelters; at our two hospital-based clinics at Massachusetts General Hospital and Boston Medical Center; and in our 124-bed medical respite facilities, the Barbara McInnis House and the Stacy Kirkpatrick House. BHCHP is proud to work alongside local, state, and federal public health and homeless advocates to respond quickly to the changing needs of our patients.

We continuously strive to understand and improve the health and health status of all homeless persons with our Institute for Research, Quality, and Policy, a collaborative center for research, quality improvement, education, advocacy, and public policy.

BHCHP is an international leader in the field of homeless medicine. When you give to BHCHP, you support the direct care of our most vulnerable neighbors and help assure the highest quality of health care for homeless persons wherever they are.

Donate now at  
[www.bhchp.org](http://www.bhchp.org)



Adapting to Meet the Needs of Our Patients

A message from CEO, Barry Bock, and President, Dr. Jim O'Connell



The flexibility to adapt to change—whether within our program, the political climate, or medical crises like the Opioid epidemic—has long been part of BHCHP's DNA. We quickly adapt to new systems, to serve new populations, or to work in new ways, to ensure we're meeting the needs of our patients. Now more than ever, flexibility is a key element of our program.

And no one knew that more than our beloved board member Sarah Anderson. Sarah, for 31 years supported us through all our stages of growth, recently passed away peacefully at home surrounded by her loved ones. We will dearly miss Sarah Anderson and BHCHP has lost our most devoted friend and soulmate. Please read more about Sarah in this newsletter.

The ability to adapt to changing needs has been vital to our success over the years. It has been and will continue to

be a key component of our partnerships with Boston Medical Center and Massachusetts General Hospital, which are unparalleled in our industry and critical to the way we deliver excellent care to our patients.

As one of our BHCHP case managers, Carlos Echevarria puts it, a big part of what helps him succeed is having the flexibility to work around patient needs. Given the medical complexity of our patients, it's essential that we continue to increase access and lower barriers to care.

When it comes to our Transgender Services, they wouldn't exist if it weren't for the flexibility of our Board, staff, patients, and you, our donors. Pam Klein, RN, identified the need for BHCHP to develop transgender services over eight years ago and thanks to her insight and ingenuity, BHCHP has a robust transgender practice.

As we look back and remember Sarah Anderson for her friendship, fierce advocacy, focus on excellence, we are eternally grateful for all that she has done for BHCHP, and we are proud that we will see her influence on the program for years to come. We will keep Sarah and her family in our thoughts and prayers.

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that Matters Gala





BHCHP's case managers who work in the BMC clinic, including Carlos Echevarria (center, in plaid).

## Case Management: Enabling Patient Success

Carlos Echevarria, a case manager at BHCHP, was standing in the kitchen of a recently housed patient's studio apartment, trying to make a defective can opener work. His patient, "John" had been proudly showing off the groceries he had in his cabinets and how clean he was keeping his kitchen when he remembered the tuna fish he hadn't been able to eat, because his new can opener was giving him trouble. Eventually Carlos got the device to work, and after the third can of tuna, Carlos laughed, "I can't wait to write the notes on this."

When people think of Boston Health Care for the Homeless Program, they typically consider our medical or behavioral health work on the street or in over 45 shelter or hospital locations in Boston. Case management is one of the vital parts of our work that focuses on supporting the important social circumstances of our patients, which can be critical to their overall good health.

Carlos is visiting "John" in his new home as part of the outreach portion of his case manager role. Carlos had noted that John was having difficulty meeting deadlines and appointments so he brought along a calendar and mounted it on the wall. Whenever they discuss commitments, Carlos or John writes them on the calendar. They planned a supermarket trip, making a list and scheduling it on the calendar on the day John's food stamps became available. John is appreciative, saying that before he met Carlos, he was spending half his budget for food at the convenience store, where prices have a significant markup.

It's these small touches that can make all the difference for someone to successfully transition from a life on the street to an independent life in their own housing, sometimes for the first time in decades.

"We see our patients in their new apartments, in the hospitals, in our clinics, and on the streets. Wherever they are, we're there," says Carlos. We work with patients with a range of complex medical issues, from congestive heart failure to schizophrenia. This can often involve coordinating care with our partner hospitals to ensure that the providers are on the same page and our patients are able to navigate these interconnected systems during what is an overwhelming time.

Accessibility for our patients to excellent support services is key to their wellbeing, sometimes an essential piece of their ability to participate in medical and behavioral health services.

Each case manager works with 25 patients as part of BHCHP's patient-centered care teams. "When we come in each morning, we never know what to expect. It could be immigration-related issues, it could be housing, it could be someone who needs clothing," Carlos shared. But regardless of the need, the case managers of BHCHP work compassionately and diligently to meet it.

As Diana Aycinena, our Director of Case Management, says, "case managers do really brilliant work in really hard circumstances, largely outside of the spotlight."

"Every patient is different." As Carlos says, "it's all dependent on what the individual patient needs." What works with one person may upset another, so the best case managers are patient, mindful, empathic, intuitive, and extremely good listeners, like Carlos. Luckily, he and his colleagues are also very resourceful, keeping up with the ever-changing nature of the complex web of services our patients need to access, from housing opportunities to immigration possibilities.

And Carlos is just one of the more than 40 case managers throughout the program. They work in SPOT (Supportive Place for Observation and Treatment), OBOT (Office Based Opioid Treatment), medical respite program, street outreach, and in other clinical settings. Essentially, anywhere a patient would need assistance, from navigating complex medical systems to helping with day-to-day tasks, case management is there. The time they spend with our patients maximizes our clinicians' time with the patient to focus on medical and behavioral health issues. Case managers' invaluable services recognize the impact that issues like shelter, employment, immigration status, and the ability to buy groceries or keep medical appointments can have on one's overall health, particularly for those living on the street or in shelter.

Which brings us back to the cans of tuna. Carlos's patient was right: the can opener was frustrating. For someone like John who has so many challenges to deal with each day, a simple setback like paying for a nonfunctional can opener and then not being able to eat some of your own groceries can become a big deal, particularly if there's not much room to spare in the budget, and nothing else to eat in the cabinet. But tuna is a better lunch than convenience store food, so they decided that Carlos should open enough cans for the next few days until they could go to the store to get a new one. John put the tuna in the refrigerator and his dishes in the sink, making jokes to Carlos the whole time. This afternoon came after weeks of building trust, and BHCHP's patients like John can count on Carlos and his fellow case managers to continue to guide them on their way.



Dr. Jim O'Connell and CEO Barry Bock with Dr. Jim O'Connell Awardees: Kate Walsh, CEO of Boston Medical Center and Dr. Peter Slavin, CEO of Massachusetts General Hospital.

## Recognizing a Partnership with Patients at the Center

At no time in these past three decades have we felt more blessed by the two hospitals that have been our bedrock partners since 1985.

Our relationships with Boston Medical Center and Massachusetts General Hospital are unique and distinguish BHCHP from the 250 other health care for the homeless programs nationwide.

By sharing our mission, these teaching hospitals have incorporated our patients into the fabric of their own daily clinical missions. The quiet legacy of BMC and MGH, two world-class institutions, to serve our patients is a truly singular commitment.

Our extraordinary partnerships with BMC and MGH helped us survive the early crucible of AIDS and tuberculosis in the 1980s that devastated those in shelters and on the streets. Together, we took great pride in working side by side with the staff of the BMC multidisciplinary HIV clinic and with the BMC pulmonary doctors and the staff of the City of Boston's Communicable Diseases Division in our shelter clinics.

As we expanded the number of our clinics within Boston's shelter network, coordination of care across clinic sites became crucial. MGH stepped in to create for us the first electronic medical record for homeless folks in 1995, which set a national standard and presaged the future of mainstream medicine.

As we witnessed the premature mortality rates of our street patients, MGH opened a clinic space for us to care for our rough sleepers and helped us fully integrate medical and psychiatric care for this sub-group of the homeless population with funding for a fulltime psychiatrist to go to the streets with our team.

The care of people struggling with homelessness along with the complex burdens of co-occurring medical, psychiatric, and substance use issues has emerged as a formidable challenge in the evolving world of health care financing. BMC and MGH recognize the challenges we face and have always saved a seat for us at the table in discussions about complicated health care financing issues. We have embraced their compassion and generosity with profound gratitude and deep pride, and are keenly aware of how fortunate we are to work as their partner.

We were overjoyed to recognize this inspiring leadership at our *Medicine That Matters* Gala in May by giving the Dr. Jim O'Connell Award to Kate Walsh, President & CEO, BMC and Peter L. Slavin, MD, President, MGH. The Dr. Jim O'Connell Award is presented to a unique individual in the health care field who embodies the spirit of BHCHP and assures excellence, dignity, and compassion in the medical care of homeless individuals and families in Boston.

We are so grateful to BMC and MGH for sharing our mission to bring the best in health care to the very fringes of our communities, and we continue to work tirelessly with them for our patients.

## Emerging Leaders Hit it Out of the Park

Our BHCHP's enthusiastic Emerging Leaders Board (ELB) is excited for their third year and have planned lots of engaging educational, social and networking events open to all of Boston's young professionals. They also welcomed seven new Board members this year.

In June, as part of their **Speakers Series**, the ELB was at Fenway Park hosting Mark Lev of Fenway Sports Management. Lev spoke to a packed room about his fascinating career managing Lebron James and his charitable efforts. Lev now works closely with the Red Sox and the Red Sox Foundation to garner support and raise money for organizations working in the Boston community—including BHCHP! In October, the ELB was at the Cambridge Innovation Center hearing from a panel of BHCHP staff members working on innovative programs here. In December, they will host Dr. Monica Bharel, former BHCHP Medical Director and current Massachusetts Commissioner of Public Health.

The ELB held their second annual Fall Soiree fundraising event on October 19th at the New England Aquarium. The crowd enjoyed a lively evening of music and great food along with awards given to young professionals in Greater Boston who embody our mission.

The Emerging Leaders Board and Ambassadors host monthly volunteer events including bingo games with our respite patients and Sox for Socks drives through their companies and communities.

To learn more about the BHCHP Emerging Leaders group and to get involved, check out [www.bhchp.org/emergingleaders](http://www.bhchp.org/emergingleaders) or email [abrazil@bhchp.org](mailto:abrazil@bhchp.org).



Members of the Emerging Leaders Board with Mark Lev at a recent Speaker Series.

## SPOT AT YEAR 1

BHCHP SERVES CLOSE TO  
**11,000** »   
PATIENTS/YEAR

» **DRUG OVERDOSE IS THE LEADING CAUSE OF PATIENT DEATH;**  
» **OPIOIDS IMPLICATED IN 81% OF OVERDOSE DEATHS.**

### SPOT MAKEUP

#### 10 CHAIRS + STAFF:

- » **Addiction Specialist** Registered Nurse monitors vital signs
- » **Harm Reduction Specialist** builds relationships, provides education, and links people to treatment and other services
- » **Peers** who are in recovery offer support
- » **Rapid response clinician (MD/NP/PA)** available for immediate consultation

### SPOT STATS FIRST YEAR (APRIL 2016–APRIL 2017):

**~1,200**  
EMERGENCY ROOM VISITS WERE AVOIDED

**3,852 VISITS** | **32%** of visitors are women

**13.5%** visitors connected to treatment\* (up from 10% as of 1/17)

\*This figure underestimates the total number of visitors who are connected to treatment, as it only includes those connected directly from a SPOT visit, and excludes those connected anytime thereafter.

## Trans Medicine: Ahead of the Curve



Pam Klein (back, second from left) and Sara Reid (back right) lobbying for trans medicine in Washington, DC.

Transgender health care is considered an emerging field, but at BHCHP it has been part of our practice since 2008, when nurse Pam Klein launched a pilot program based on her experience working in transgender health in San Francisco. Among other services, we offer primary care, behavioral health, a support group, and hormone replacement therapy at our South End location, and can connect patients to Boston Medical Center (BMC) for medical treatments to help patients live healthier lives. We also offer services at several of our other locations, like Pine Street Inn, Bridge over Troubled Waters, and the New England Center and Home for Veterans.

As the Project Manager of Transgender Services, Pam Klein manages BHCHP's services across all sites within the program. Sara Reid is a consumer and advocate, serving on BHCHP's Consumer Advisory Board and Board of Directors. Together Sara and Pam have worked tirelessly to advocate for the trans community, both within BHCHP and beyond, speaking at national conferences about transgender medicine.

LGBTQ people are overrepresented in the homeless population, and trans women face a disturbing level of violence, with 20 violent deaths of trans women in the US so far this year. As Pam explains, trans patients face the same obstacles as the rest of our patients, but with an additional layer of stigma. Sara put it another way: for trans people, no matter how many years you've been off the streets, no matter how stable your life feels, it can all be gone in the matter of an afternoon and then you're back on the street.

But why is that? Sara explains what she and so many other trans people have felt: the need to prove who they are and their inherent value, over and over again. Many transgender patients who are homeless or marginally housed are disconnected from primary medical care. Their isolation and feelings of mistrust may be magnified by prior negative experiences within the mainstream health care system.

**A component of the trans team's success is how their work has always been informed by trans patients. Pam and her cross-discipline team are continuously surveying their patients to assess their needs in order to update or improve services.**

The future of trans medicine at BHCHP is hopeful: Pam and Sara both work with our partner, Boston Medical Center, on their Center for Transgender Medicine and Surgery, to consolidate the variety of services, train clinicians, and make it easier for patients to access care. Beyond that, BHCHP is working toward certification as a leader in LGBTQ health care equality. Because if we want our medicine to truly matter, it must be inclusive.



Sarah Anderson.

Read Dr. Jim O'Connell's full remembrance at [www.bhchp.org/sarahanderson](http://www.bhchp.org/sarahanderson).