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IT Helps the Homeless

LEE COWGILL

brings more than IT skills to his work of supporting healthcare services for Boston's homeless.

I'll have gone from homeless to homeowner in 21 years. Now I want to settle back and appreciate all the good things that have happened in my life.

PHOTOGRAPH BY LEAH FASTEN

Lee Cowgill, technology infrastructure manager at the Boston Health Care for the Homeless Program (BHCHP), has a very personal perspective on the organization's mission: He was once homeless himself. Founded in 1985, BHCHP serves homeless adults and families who stay in the city's emergency shelter system, eat in soup kitchens, or visit drop-in centers.

The organization also cares for formerly homeless people who have progressed into transitional and supportive housing projects or who sleep on the streets or in makeshift shelters. All told, BHCHP serves about 10,000 patients in more than 70,000 outpatient medical, dental, and mental health encounters.

Cowgill, 50, has been with BHCHP for eight years, helping to build its IT infrastructure from what he describes as "a CIO plus eight servers and me in a room the size of a closet" to one with 35 servers and wireless communications.

ON asked him to tell his and the organization's story.

You live in Boston now, but what about your earlier life—where are you from and how did you find your way here?

I was born in Alabama and grew up there. I went to college for four years, with a different major every year, but never graduated. In my 20s, I moved to Louisville, Kentucky, and then Boston. My first job here was as a cook.

How did you become homeless?

When I was younger, I moved around a lot, trying to figure out what to do with my life. I was a pretty naïve Southern boy. By the time I was 28, I was working in restaurants and drinking way too much. I had two alcoholic roommates, I didn't have health insurance, and I couldn't pay the rent. Before long, I was homeless. I got very sick and tried to quit drinking, but I had no idea where to go for help.

I ended up in the emergency room at Mass General [Hospital] and met a social worker who got me into detox. Eventually I got sober and started working part time, first at a methadone clinic, then at the Pine Street Inn homeless shelter.

How did you end up working in IT and how did you find your way to BHCHP?

I'd always been interested in computers. Most of Pine Street's systems were on paper, so I worked with the John W. McCormack Institute of Public Affairs at UMass to develop the first homeless information system for shelters and the homeless. Eventually, I became a supervisor at Pine Street.

I left Pine Street in 1999 to do temporary IT assignments. I had a couple of full-time temporary jobs, including one here at BHCHP. In 2000, I accepted a permanent position here on the IT staff. At the time, the department consisted of a CIO, eight servers, and me in a closet-size office. There was a LAN, but there wasn't any e-mail or Internet access.

Today we have 35 servers and 40 applications including medical records, practice management, and VoIP. We're starting to add more complex systems, such as server virtualization.

Along the way, I've taken IT courses, so by now I must have six years of college—but still no degree!

What are the special challenges IT faces with a transient population like BHCHP's?

The people we serve usually have complicated medical histories. Most of them don't have a single medical issue, they have many. If you ask them what medications they're on, they'll say, "a blue pill and a yellow pill." Without computerized medical records, there is no way to know what they're taking.

Because these people are homeless, they tend to move around. We provide health-care in more than 80 shelters and sites. We even have one at Suffolk Downs Racetrack for the men who live and work in the horse barns. We also have a family outreach team that goes into shelters and follows families when they find homes.

Our medical people can't haul around file cabinets, but they need access to patient information. We've looked for more ways to securely deliver information and services. For instance, we now have handheld devices that a nurse on Boston Common can use to send a prescription directly to a pharmacy. We're also looking at ways to give the area's homeless access to their own medical records.

Do Bostonians know the scope of homelessness here?

No, they don't. People think of "the homeless" as that guy on the corner holding up a cardboard sign asking for money and they pass him by. Their stories are a lot more complex than that and there are many successes you never hear about.

Obviously, you are one of them. You sound like a happy man today.

I am. I'm about to close on a condo—my first home that I will own. I'll have gone from homeless to homeowner in 21 years. Now I want to settle back and appreciate all the good things that have happened in my life. ■