



Fall 2015

# THE VIEW FROM THE BRIDGE

Boston Health Care for the Homeless Program

The mission of Boston Health Care for the Homeless Program (BHCHP) is to provide or assure access to the highest quality health care for all homeless men, women and children in the greater Boston area.

**We Offer:** Primary Care, Behavioral Health, Oral Health, Family Services, Case Management, Substance Use Disorders Services, Medical Respite Care, and Outreach

**We Are:** Administrative Staff, Building & Maintenance Staff, Case Managers, Dental Assistants, Dentists, Food Services Staff, Behavioral Health & Substance Abuse Counselors, Community Health Workers, Benefits Enrollment Specialists, Nurse Practitioners, Physicians, Physician Assistants, Psychiatrists, Psychologists, Registered Nurses, Social Workers, Respite Aides, AmeriCorps/Community HealthCorps Members

*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: Carrie Eldridge-Dickson, Manager of Leadership Giving & Communications, ([celdridge-dickson@bhchp.org](mailto:celdridge-dickson@bhchp.org)) at 857.654.1048 or Catie Colliton, Donor Relations & Communications Coordinator, ([ccolliton@bhchp.org](mailto:ccolliton@bhchp.org)) at 857.654.1044.

### Connect With BHCHP Online

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



## A Flexible Program for Our Patients - Thanks to You

A message from Chief Executive Officer, Barry Bock, and President, Dr. Jim O'Connell



Our compassionate staff is able to meet our patients' needs—respite care, behavioral health, substance use disorder treatment, primary care, dental, and more—thanks to your support.

Our staff often says that each day at BHCHP is different. Whether it's introducing new patients to their care team, working with partner sites to staff a new clinic, or developing a housing guide with a Consumer Advisory Board member ([read more on page 3](#)), our staff is always passionate and ready for the next challenge.

As medical professionals, we are constantly innovating to deliver the very best health care for our patients. We know that integrated health care—coordinated primary care with behavioral health care and treatment for substance use disorders—is the key to the best outcomes for our vulnerable patients. The people we serve often

have multiple health and social service needs. With cohesive integrated care and supportive case management, we can address each one.

To meet the growing needs of our patients, our dynamic staff is diligently increasing the hours of operation at our Jean Yawkey Place clinic, integrating behavioral health throughout our program, and expanding our Suboxone Program with more expertise ([read more about this program on the back page](#)). In the next year, we will offer respite care at a second location in Jamaica Plain, MA.

Many of these services are not covered or are only partially covered by health insurance plans. Essential services like case management, nutritious meals for respite patients, dental care, and so much more are made possible only because of your generosity.

We hope you enjoy reading about just some of what we are up to here at BHCHP. Without your support, we would not be able to provide our patients with all the flexible and comprehensive services they so desperately need. Thank you. ■

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## OUR STORY

When you support BHCHP you reach children and adults throughout greater Boston's entire safety net community when they are not only homeless but also sick.

Founded in 1985, BHCHP employs the professional medical staff that manages the clinics and delivers the comprehensive health care at most of greater Boston's adult, family and domestic violence shelters (Pine Street Inn, The New England Center for Homeless Veterans, St. Francis House, and more than 60 others). BHCHP is the hands and face of health care for over 12,000 homeless adults and children each year at sites as diverse as Crittenton Women's Union and the crawl space under the Longfellow Bridge. BHCHP has operated in-the-black while delivering medicine that matters to Boston's most vulnerable population for 30 years.

In addition, BHCHP staffs, manages and delivers comprehensive health

care at 2 hospital-based clinics on the campuses of Massachusetts General Hospital and Boston Medical Center and at a clinic on the backstretch at Suffolk Downs Racetrack. BHCHP also staffs, manages and operates our own Barbara McInnis House at Jean Yawkey Place, a 104-bed medical respite facility for homeless adults with complex conditions like cancer, heart disease, pneumonia and diabetes who are too sick to live in a shelter or on the street and would otherwise require prolonged and costly hospitalization in the acute care rooms of Boston's hospitals.

When you support BHCHP you reach children and adults throughout greater Boston's entire safety net community when they are not only homeless but also sick.

## YOU CAN MAKE A BIG DIFFERENCE WITH A SMALL GIFT

You can make a big difference in the health and comfort of a homeless man, woman or child with a small gift. You can't imagine how much these items help our caregivers to establish and maintain contact and you can't imagine how much our patients appreciate your kindness.

We can never have too many of these items.

- new white socks
- new underwear (men's and women's)
- diapers
- sneakers or boots
- winter hats
- gloves
- winter coats
- gift cards:
  - CVS
  - Dunkin' Donuts
  - McDonald's
  - Stop & Shop

Contact Catie Colliton at 857.654.1044 or [ccolliton@bhchp.org](mailto:ccolliton@bhchp.org) to find out about other "Small Gift" needs or to make arrangements for delivery. Thank you!



Red Sox wives & families stop by Sox for Socks at Fenway Park every year to support BHCHP. From left to right Elba Rodriguez, Lindsay and Colbi Buchholz, and Meryl Masterson.

**Why Socks?** Access to socks is often limited for homeless men and women living in shelters and on the streets. Common infections such as athlete's foot thrive when damp socks are worn for days at a time. Frostbite is common in colder months, sometimes resulting in toe amputations. The best way to prevent such conditions is to keep feet clean and dry—very difficult if you spend your days outside. That's why BHCHP has a daily foot clinic at St. Francis House and regular foot care available at our other primary care sites.

We rely on sock donations from our generous supporters like you, which is why we coordinate with corporations, schools, community and faith-based groups, individuals, and even the Boston Red Sox!

As part of this effort, the Boston Red Sox have sponsored a sock drive at Fenway Park for a weekend during each baseball season for the past 10 years. This year's drive took place Friday, May 22nd–Sunday, May 24th,

2015 and resulted in the collection of 4,550 pairs of socks and nearly \$2,000 in donations! We are so grateful to the Red Sox and our generous sock drive donors.

You can join the Red Sox and coordinate your own Sox for Socks drive by contacting Alyssa Brassil at 857.654.1046 or [abrassil@bhchp.org](mailto:abrassil@bhchp.org) for more information.

# Patient and CAB Chair Creates Guide for Newly Housed Patients



Joanne Guarino, BHCHP patient, CAB chair, and board member, created the housing guide for patients like her who struggled with transitioning to housing. Pictured left to right: Lena Cardoso, Joanne Guarino, and Pooja Bhalla.

Living in shelters and on the streets can feel hopeless, shocking, and harsh. For many homeless men and women, getting housed can be a new lease on life, however, the stark transition often leaves newly housed individuals feeling lonely and at a loss. "When they become housed, they feel distanced from the program, away from their friends on the street," says Joanne Guarino, BHCHP's Consumer Advisory Board (CAB) Chair and creator of *The Housing Guide: Tips and Tools for a Successful Housing Experience*.

*The Housing Guide*, available in English and Spanish, details information on everyday tasks that many take for granted: how to meal plan and do chores, how to set up a bank account and get an identification card, how to create an email account and stay involved in the community. With *The Housing Guide*, Joanne feels that "we're holding people's hands while they're going through that ride." Lena Cardoso, BHCHP Research Assistant, who coordinates printing and distribution of *The Housing Guide* to patients says, "I hope it makes people feel supported."

Joanne's inspiration for *The Housing Guide* came in her work with the CAB, a group of homeless and formerly homeless men and women that meet monthly to develop BHCHP's advocacy agenda and to provide feedback on programs and policies. The CAB at BHCHP was the first of its kind and has

been replicated at many health care for the homeless programs across the country. After years of living on the street, Joanne realized she needed help with writing checks, managing a household, and keeping in touch with her friends. She was ashamed to ask for support with seemingly simple tasks. "If people had this information without having to ask, it would shield them from embarrassment. The intent of the book is to help."

**"We're holding people's hands while they're going through that ride [of being housed]."**

- Joanne Guarino

Joanne, who is also a member of BHCHP's Board of Directors, and Lena have been working together to distribute the books to newly housed patients throughout our program, including those transitioning out of our shelter partners like St. Francis House and Pine Street Inn. *The Housing Guide* includes information on local assistance resources, though Joanne hopes to bring *The Housing Guide* to other cities as a tool for regional organizations to use. *The Housing Guide* will likely evolve to meet the ever-changing needs of our patients, but Joanne is up for the task. "The hope is that all the states will have this book. We're just trying to help the next guy or gal." ■

## Seeing is Believing

Time after time our visitors tell us they are amazed at the care we provide our patients here at our 77,000 square foot clinical and respite facility at Jean Yawkey Place. We would love to show you our work by giving you or your group (up to 10 people) a tour.

We will be offering tours on the following dates:

**Thursday, November 19 at 12 pm**

**Friday, December 4 at 8 am**

**Monday, December 14 at 4 pm**

Please RSVP for one of these tour dates by contacting Carrie Eldridge-Dickson at [celdridge-dickson@bhchp.org](mailto:celdridge-dickson@bhchp.org) or 857.654.1048.

If these dates do not work for you, we will happily schedule a visit for another time. We await your visit! ■

### YOUR SUPPORT WILL BRING...

- ❖ the **Healing** comfort of a respite bed for a woman with severe skin abscesses with no other place to recuperate.
- ❖ the **Dignity** of a talking glucometer for a young man who is newly blind and wishes to independently manage his diabetes.
- ❖ the **Trust** developed between a nurse practitioner and her patients who attend the weekly Transgender clinic for primary care and behavioral health services.
- ❖ the **Hope** that a Community Support Worker can instill in a patient who is struggling with addiction, but seeking treatment at a local methadone clinic.

Donate now at

[WWW.BHCHP.ORG](http://WWW.BHCHP.ORG)

## Opioid Crisis...

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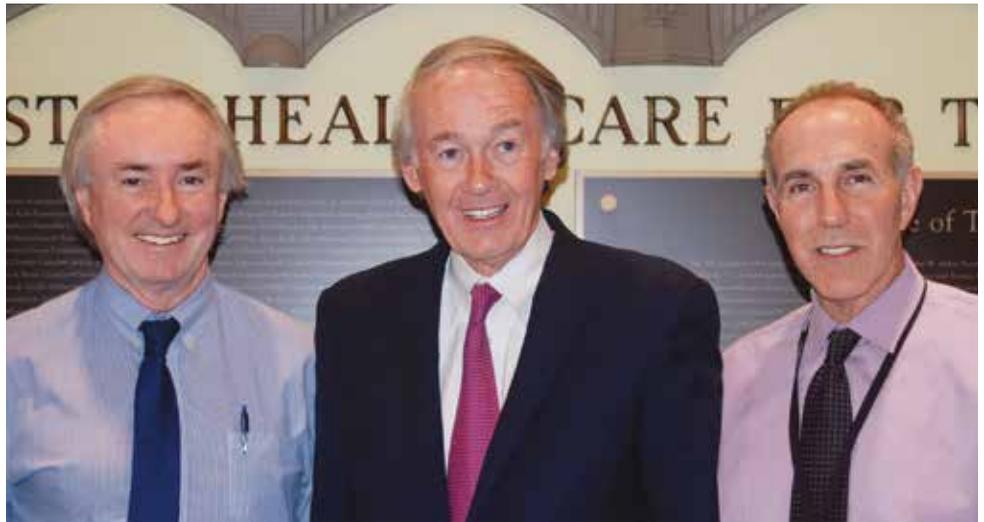
### Researching the Solution

To address this alarming rise of substance use disorder-related deaths among our patients, BHCHP and Boston Medical Center clinicians embarked on a research study in 2006. It was found that among both housed and non-housed patients, a multi-modality treatment of an opioid medication (buprenorphine-naloxone, commonly known as Suboxone) paired with intensive behavioral therapy and weekly clinic visits produced astonishingly successful results. The majority of patients were able to keep up with consistent treatment, including those frequently in shelters or on the street.

Years later, the results of the study have continued to benefit patients with opioid use disorder. Dr. Joe Wright, Suboxone Program Medical Director at BHCHP, says that the office-based opioid treatment (OBOT) program continues to be a success thanks to BHCHP's holistic and integrated approach. Patients with substance use disorders are dealing with a chronic disease—a disorder of the brain which intensely pushes the patient to satisfy the need of its opioid receptors. Suboxone, a medical opioid itself, satisfies these receptors in a safe and sustainable way.

### Treatment with Suboxone

Treating an opioid use disorder with another opioid seems counterintuitive, but Suboxone is well suited to help.



Pictured from left to right: Jim O'Connell, Senator Markey, Barry Bock

On a recent visit to BHCHP, Senator Ed Markey observed our substance use disorders treatment program, saying, "Addressing homelessness requires a comprehensive approach, one that addresses all the issues facing their patients, from substance abuse to mental health issues and chronic illnesses...the program's integrated care approach is an impressive model of efficiency and the patients offer the strongest testimony to its effectiveness."

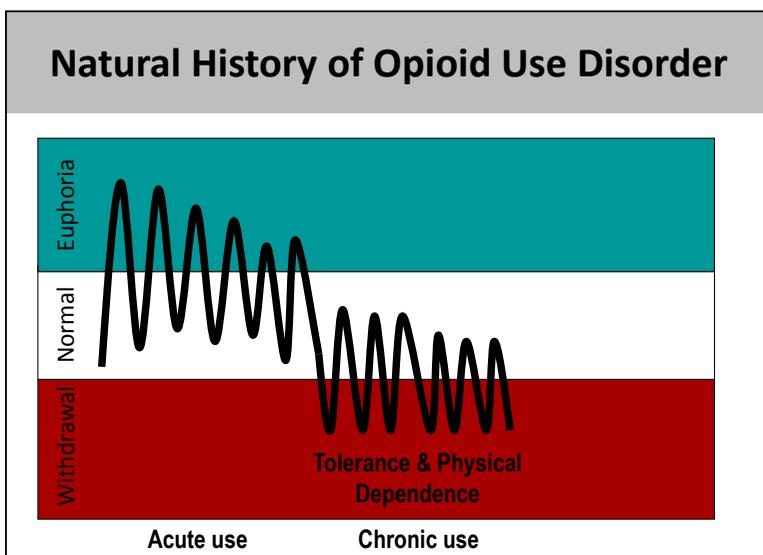
It has a unique ceiling effect that makes it safer than other opioids and unlike other opioids, such as heroin or methadone, Suboxone satisfies the brain's opioid receptor needs without giving the euphoria a patient may be looking for to cope with the trauma they've experienced.

Dr. Gaeta admits that there is still some stigma around Suboxone and other

medications that fill the opioid receptor, but the medical community and general population's views have changed as many scientific research studies have shown dramatic outcomes associated with Suboxone. "I consider this to be life-saving treatment," says Gaeta. "It's a treatment for a disease that we've seen a lot of success with, even in patients who haven't found success with non-medication treatments...like self-help groups, Narcotics Anonymous, or stopping outright." **The disease of addiction is defined as a primary, chronic brain disease characterized by compulsive drug seeking and use despite harmful consequences.** It is often relapsing and remitting, similar to other chronic diseases, and without treatment, addiction is progressive and can result in disability or premature death. It's estimated that 40-60% of the neurobiologic changes present in the brain of people with addiction are genetic, further making the case for the disease model.

### Addiction as a Chronic Disease

Sam Clark, a nurse in our OBOT program, explains that by treating



When a person starts using heroin or another opioid, they initially enjoy the feelings of highs and lows, where the low is neutral. After a while, the brain develops opioid receptors that can rarely be satisfied, so neutral becomes a user's high and their new neutral is an extreme low, physically and psychologically. Just to feel normal, users need to satisfy that receptor by using heroin or another drug.

Credit: Dan Alford, 2012

substance use disorders like other common diseases that need daily management, more patients have success staying in treatment and leading normal lives. "Viewing it as a disease, like diabetes, where it's sort of inevitable that someone is going to eat birthday cake, have a slip of medication, or go back into old habits, and in which insulin is often needed. When people are in treatment they have a chance to put recovery together and they get better. When they're not in treatment they don't really have that chance."

"There's this overwhelming mindset [in the medical community and the public] that you can't help someone who doesn't want to be helped," says Dr. Gaeta. "In my mind it's a different framework; you get to help someone figure out how they're going to cope with this, just as you would with any other disease. We should be using the science of addiction to combat stigma. This is a treatable disease"

#### **Suboxone at Work at BHCHP**

At BHCHP, patients are carefully screened before being considered for Suboxone treatment. The medication is indicated for patients with moderate to severe opioid use disorder, and lengthy precautions are taken at BHCHP to make sure that patients taking Suboxone are following through on treatment. Patients meet with their providers weekly for toxicology tests and pill counts, as well as behavioral health treatment and any other medical services they may need, such as Hepatitis C care or cancer screenings.

**"When people are in treatment they have a chance to put recovery together and they get better. When they're not in treatment they don't really have that chance."**

- Sam Clark, RN

A key part of Suboxone being a success with our patients is the integrated care unique to BHCHP. "We are always coupling Suboxone therapy with intensive individual and group behavioral health care," says Gaeta. "We have really low nurse to patient and therapist to patient ratios so that we can see patients every single week and provide as much support as possible." By integrating care, patients are able to address other health care needs, reducing trips to the emergency room and addressing other chronic diseases.

"This has been a critical issue for us for at least a decade, and we've made it a point to really gain experience and become expert in the treatment of substance use disorders," says Dr. Gaeta. BHCHP continues to expand the OBOT team to reduce the time that patients are on the waiting list for treatment. **"We're working to expand the population of people to whom we can provide this lifesaving treatment."** ■

## *Stories from the Shadows: On Sale Now*



BHCHP's president and founding physician has written his first book, *Stories from the Shadows: Reflections of a Street Doctor*. Dr. Jim O'Connell's poignant and

transformative collection of stories and essays, penned during 30 years of caring for homeless persons in Boston, gently illuminates the humanity and raw courage of those who struggle to survive and find meaning and hope while living on the streets.

The extraordinary response to Dr. O'Connell's book has meant standing room only book signings and recent radio and newspaper interviews. *Stories from the Shadows* makes a wonderful gift for loved ones with a humanitarian outlook or employees of your business or department.

Dr. O'Connell will be holding readings and book signing events of *Stories from the Shadows* at local bookstores and other venues. For more information or to purchase the book, please visit our website here: [bit.ly/1KHxGqt](http://bit.ly/1KHxGqt) ■

## Emerging Leaders

Are you or is someone you know a young professional looking to put your time, talents, and connections to good use? Would you like to have fun, grow your contacts, and contribute to a worthy cause at the same time? BHCHP is seeking individuals who share our commitment to caring for men, women and children who are homeless to join our Emerging Leaders board or ambassador group. The Emerging Leaders program unites a wide variety of professional backgrounds and is focused on aiding BHCHP's work through fundraising, networking, volunteer and educational events. We are looking to expand our Emerging Leaders group and broaden its reach into Boston's business community. If this sounds like a good fit, please save the date for an event on Thursday, November 19th. For more information and event updates, please visit [www.bhchp.org/emergingleaders](http://www.bhchp.org/emergingleaders) or contact Alyssa Brassil at [abrassil@bhchp.org](mailto:abrassil@bhchp.org). ■



Scott Cronin (left), Emerging Leaders Board Chair, discusses BHCHP at one of the group's networking events.

# Volunteer Spotlight: Noor Tell - Back for a 2nd Year with BHCHP's AmeriCorps/Community HealthCorps Team

This fall marks BHCHP's 10th year as an AmeriCorps/Community HealthCorps program site. In partnership with these two national service programs, BHCHP has been hosting bright, enthusiastic young (and young at heart!) people who give a year of their time serving patients in exchange for a very modest living stipend. Program alumni typically head off to further schooling and careers in health care. Over the years, a select few, like Noor Tell, have extended their commitment for a second year.

**"I hope to be able to give a fraction back to this community that has taught me so much about advocacy, collaboration, teamwork, and compassion than any other community I have been a part of." - Noor Tell**

Noor, a graduate of Wesleyan University and originally from California, had never heard of BHCHP prior to seeking out Community HealthCorps opportunities. She was initially astonished with the extensive services offered, but through her role as a case manager and health

educator in our women's clinic at Pine Street Inn, Noor was moved even more by the dedication of each staff member. "I feel extremely lucky to be surrounded by such an inspirational environment," says Noor. Her decision to return for a second year was an easy one. As her first year was coming to a close, she knew she could not say goodbye to her home and family at the clinic. She was already making plans and dreaming up new ideas for the next year and, bolstered by a year under her belt, she felt even more prepared to serve her patients.

While her responsibilities are varied, Noor's favorite task is escorting patients to specialty or follow-up medical appointments they have beyond BHCHP. This has been an essential step in learning more about her patients and building trusting relationships with

them and "each escort is an adventure that I feel privileged to be taking with them," says Noor. With plans to attend medical school after this service year, her experiences at BHCHP have undoubtedly solidified her commitment to become a primary care physician. In reflecting on her future, Noor offers, "I hope to be able to give a fraction back to this community that has taught me so much about advocacy, collaboration, teamwork, and compassion than any other community I have been a part of." ■



AmeriCorps/Community HealthCorps member Noor Tell (right) celebrates healthy eating success with one of her patients.



## BHCHP ANNOUNCEMENTS

### ❖ **BHCHP's Boston Marathon Team**

With the generous support of the John Hancock Non-Profit Partners Program, BHCHP will once again field a team to run the 2016 Boston Marathon, one of the most prestigious racing events across the globe, while raising critical funds to support our program.

If you are interested in applying to be a runner on our 2016 Team BHCHP, please visit [www.bhchp.org/marathon](http://www.bhchp.org/marathon). The deadline to apply is November 6, 2015.

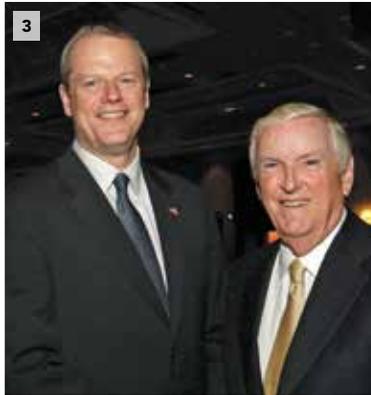
### ❖ **Giving Tuesday: December 1**

On the Tuesday after Thanksgiving, on the heels of the Black Friday and Cyber Monday deals, there is GivingTuesday—a day to support non-profit organizations by making

donations, organizing in-kind drives, or volunteering your time. On last year's GivingTuesday, donors like you helped us raise over \$11,000 for our patients, Boston's homeless men, women, and children. This year, with up to \$10,000 in matching donations from the law firm, Krokidas & Bluestein, and an anonymous donor at \$5,000 each, we hope to double this amount! Please consider making a donation to BHCHP on GivingTuesday, December 1, 2015. For more information on GivingTuesday and to make a donation, please visit our website: [bit.ly/gtbbhchp](http://bit.ly/gtbbhchp)

**#GIVINGTUESDAY™**

# The 6th Annual Medicine That Matters Gala



**1.** BHCHP's Dr. Jim O'Connell with event honorees Jim Brett, Dr. Howard Koh, and John Hailer; **2.** (l-r) Smith Denis & Alison O'Connell of Public Consulting Group; **3.** Governor Charlie Baker and Jack Connors; **4.** (l-r) Rita German, Ashley Week, Yasmin Cruz, Annie Duong, and Linda Watters of John Hancock Financial Services

This past May, we honored 30 years of providing compassionate care to Boston's homeless population from the streets of Boston to area shelters and to our home at Jean Yawkey Place. Our 6th Annual Medicine That Matters Gala raised over \$560,000 for our program, thanks to the support of generous attendees and sponsors, including our Dignity and Respect Providers—Bank of America, CVS Health, Emirates, John Hancock, Kevin Leary and Mary Kelleher, Putnam Investments, Jean C. Tempel, and Jack and Suzy Welch. This incredible act of philanthropy will improve the quality of health—as well as the quality of life—for the 12,000 homeless men, women and children that we care for throughout the year.

We were thrilled to share the evening with a number of our supporters, including Governor Charlie Baker, Mayor Marty Walsh, and honorees, Dr. Howard Koh and the leadership of The New England Council—John Hailer, Chairman of The NEC and President & CEO of Natixis Global Asset Management, and Jim Brett, President & CEO of The NEC. Dr. Koh, Professor of the Practice of Public Health Leadership at Harvard T.H. Chan School of Public Health,

received the Dr. Jim O'Connell Award for his outstanding leadership in the community and his advocacy of BHCHP since our earliest days. In recognition for playing a key role in not only raising public awareness of homelessness and health, but also in leading the way to secure critical financial resources for BHCHP's Home of our Own campaign to create Jean Yawkey Place, The New England Council received the Tim Russert Award.

**This past May, we honored 30 years of providing compassionate care to Boston's homeless population from the streets of Boston to area shelters and to our home at Jean Yawkey Place.**

Save the date! We are already planning for next year's Gala at the Renaissance Boston Waterfront Hotel on Monday, May 16, 2016. For more information on Gala tickets and sponsorships, please visit [bhchp.org/GALA-2016](http://bhchp.org/GALA-2016) in the coming months. ■

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**Connect With BHCHP Online**

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



Dr. Jessie Gaeta, photographed with a patient, is leading the charge on BHCHP's response to the opioid crisis.

## Opioid Crisis: BHCHP Responds with Lifesaving Suboxone Treatment

Reports of Boston's opioid epidemic are rampant in the news, leaving many concerned about how it got so bad and what can be done. Dr. Jessie Gaeta, BHCHP's Chief Medical Officer, is well aware of the problem. "Issues you see in the general population, we often see earlier and more intensely. We began to see this epidemic among our patients in the early 2000s." Unfortunately, homelessness and substance use disorder can often be bidirectional—opioid use can contribute to homelessness and vice versa, and in many cases it is accompanied by trauma and mental illness. Still the number one cause of death among our patients, opioid use and overdose have been on the rise since 2003. "It was the foreshadowing of what was to come in the general population," according to Gaeta.

**"In my mind it's a different framework; you get to help someone figure out how they're going to cope with this, just as you would with any other disease. We should be using the science of addiction to combat stigma. This is a treatable disease."** - Jessie Gaeta, MD

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