Our Mission: 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, Medical Respite Care, and Outreach

We Are: Physicians, Dentists, Registered Nurses, Social Workers, Building & Maintenance Staff, Physician Assistants, Nurse Practitioners, Administrative Staff, Psychiatrists, Mental Health and Substance Abuse Counselors, Food Services Staff, Case Managers, and Dental Assistants

A message from BHCHP’s Executive Director, Bob Taube, PhD, MPH and President, Jim O’Connell, MD

Many of us here at BHCHP recently attended the National Health Care for the Homeless Council’s annual conference in Kansas City. As usual, it was an inspiring three-day whirlwind of learning and networking. BHCHP staff led or co-led eight different educational sessions on everything from patient-centered medical homes to reducing the high use of emergency departments by a segment of homeless patients. It was gratifying to see how much BHCHP has become a leader in the field of homeless medicine. We are deeply grateful to you, our community of supporters, for enabling us to disseminate the lessons we’ve learned to our counterparts across the country.

But our influence goes even further.

Over the years, BHCHP has forged a close relationship with our colleagues who work in the most distinguished mainstream institutions in the country and many BHCHP caregivers keep a foot in both worlds. We learn from them and they learn from us.

As health care reform has shone an ever brighter light on the need to contain costs while improving outcomes, we have become a model for how to take care of the most medically needy patients in the most cost-effective way. And our mainstream medicine colleagues have noticed. More and more they are asking us to teach them how we treat such sick patients so efficiently, yet so compassionately.

It is because of supporters like you that we have been able to provide or assure access to the highest quality healthcare for homeless men, women and children in the greater Boston area—and to share our expertise with our colleagues who care for sheltered patients. We are deeply grateful to you for your investment in our program and in the patients we are so honored to care for.

“...we have become a model for how to take care of the most medically needy patients in the most cost-effective way.”
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 80 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 Horizons for Homeless Children 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 over 27 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.

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As Donor Relations Manager, Tom McCormack has been for many years the voice of BHCHP, bringing to life the work and the people of our extended family—the medical practitioners and administrators as well as our patients and nonprofit partners. Now, as Tom moves on to retirement, we wanted to use our newsletter—really his newsletter—to publicly thank him.

His genuine commitment to BHCHP’s mission, his remarkable ability to tell our story to a variety of audiences, and his love for his work have won him the deep admiration and respect of his colleagues throughout the organization. We know, too, that many of you feel the same about Tom. His capacity to bring the BHCHP story to life, with words and images that are touching and compelling, has been a unique gift to all of us. If you have been inspired by what you have read in these newsletters, in our annual appeals, in the stories on our website...you have Tom to thank!

And now we thank him. We are grateful to have been at the receiving end, as he shared abundantly his gifts of creativity, communications...friendship and unfailing hope.

Tom, on behalf of our patients, donors, staff and volunteers, thank you for conveying the positive impact people have and the difference they can—and do—make in the lives of our patients. You have made all the difference!
HIV TEAM DELIVERS HIGH QUALITY CARE WITH A HIGH DOSE OF COMPASSION

Editor’s Note: Many of you who have supported our work over the years are familiar with the lifesaving work of our HIV Team. Over the Team’s 25 year history, there have been many changes in the treatment of HIV and the outcomes of our patients. We thought you would find this update on the HIV Team’s work both interesting and inspiring.

Antiviral medications have revolutionized the treatment of HIV, transforming the disease from a potential death sentence to a treatable chronic illness for many patients.

But for homeless patients who are HIV positive, the disease remains a devastating diagnosis. “Taking care of yourself is very hard for anyone, and extremely challenging if your life is chaotic,” says Carole Hohl, MHS, PA-C, director of HIV services at BHCHP. “Even with the new drugs, it’s still a very complicated illness, requiring lots of blood work, daily medication, frequent visits to providers and intense monitoring.”

The nationally recognized program—the first of its type in the country—began as a small group of caregivers in 1987, treating what was still a relatively new disease. Hohl’s interdisciplinary team of 16 caregivers, case managers and counselors do everything they can to keep their patients in care: tracking them down when they drift away; connecting them with services like housing, food stamps and addiction treatment; reminding them to take their medications; and building trusting relationships. Three specialists in prevention and screening urge patients to be tested and educate them about ways to reduce the risk of infection. The knowledge and experience of our staff is complemented by the invaluable advice and input of the HIV Subcommittee of our program’s Consumer Advisory Board.

Their patients triumph over unimaginable adversity: being infected unknowingly by an unfaithful spouse…living with a young child in a motel with no cooking facilities or space to play…and losing a job, then a home, followed by a perfect storm of devastating illnesses.

The HIV team recently received a grant from the Health Resources and Services Administration to care for some of the HIV team’s most medically fragile patients, those who are also infected with Hepatitis C. Because the treatment for Hepatitis C has such horrible side effects the disease typically goes untreated in most homeless patients. As a result, many of them die from liver disease.

“The treatment is so daunting to people without other supports,” says Hohl. “Think about having the flu in a shelter or being in constant gastrointestinal distress without a bathroom nearby. These patients will now be able to be treated in our medical respite facility, the Barbara McInnis House, and receive the nursing support they so desperately need.”

In addition to well-coordinated, high quality medical care, BHCHP patients with HIV—about 300 in all—also receive something equally valuable: compassion.” I spend a lot of time just listening to my patients,” says case manager Ted Berg. “For many of them, this is the only place where they can share their stories and talk about their illness. Outside in the world, they have to be as tough and closed as possible. Sometimes just having a friend or advocate is the best medicine.”

How is the work of the HIV Team supported?*

Total Budget $1,192,059

- Federal Funding $490,368
- State/Local Government Funding $278,000
- General Operating Funds and Philanthropic Gifts & Grants $291,691
- Third-Party Billing $132,000

* As a recipient of federal grant funds, BHCHP is providing these financial details as required by the HHS Appropriations Act.

“In addition to well-coordinated, high quality medical care, BHCHP patients with HIV—about 300 in all—also receive something equally valuable: compassion.”
MYCHILD Provides Behavioral Health Services and Mentoring to Vulnerable Children and Families

Homelessness, exposure to violence and parental addiction take a terrible toll on young children. A new program based at BHCHP is seeking to address this.

Now in its second year, MyCHIlD works with homeless families whose young children—ages six and under—have significant social, emotional and behavioral needs. Its goal is to intervene early, so when these children enter kindergarten or first grade they are on firmer emotional ground. BHCHP’s mental health clinician Rachel Harrington-levey conducts weekly therapy with the families, while family partner Candace Keshwar helps them out with a wide range of other needs. BHCHP is one of four MyCHIlD sites funded by the Boston Public Health Commission.

“The program works on a wraparound model—based on the idea that psychotherapy services can be more effective when a client’s other needs are met,” explains Harrington-Levey. “Those needs may be housing, social support, medical care. What’s most important is that they’re client-driven. Clients make the choice about what they want and don’t want.”

Currently, the MYCHILD team, which also includes administrator Barbara Cocci and primary care provider Karen Friedman, NP, works with about a dozen families. Their children have lost homes and other familiar supports; witnessed violence; and in some cases been separated from, then reunited with mothers who struggle with addiction or mental illness. The youngsters suffer from anxiety and depression, act out and often feel unsafe in the world.

Harrington-Levey does psychotherapy with the families, as well as treatment focused on behavioral change in children who are acting out. She offers play therapy to youngsters who have experienced trauma, giving them “an unstructured way to work out themes and scary ideas,” she says. Harrington-Levey has even seen a few infants, who often express their mothers’ anxiety through sleeping and feeding problems. In these cases, Harrington-Levey helps the mothers learn how to soothe themselves and better recognize and respond to their babies’ cues.

CARING FOR FAMILIES SO THEY CAN CARE FOR THEMSELVES

Jothy Rosenberg escapes from Alcatraz once a year.

Thanks to his chilly 1.5 mile swim through rough waters, Rosenberg raises about $5,000 annually for BHCHP’s HIV team, which is headed up by his physician assistant wife, Carole Hohl.

“Carole has spent her entire career taking care of HIV patients, and before the arrival of antiviral HIV medications, she went to a lot of funerals,” says Rosenberg, a serial high tech entrepreneur and motivational speaker, who lost his right leg to cancer as a teenager. “Fundraising for BHCHP allows me to experience a vicarious connection to her patients and to her work. And it’s for a cause that has always mattered to me.”

Rosenberg does not swim the Alcatraz to San Francisco route alone. Every summer since 1993, he and hundreds of other hardy souls have braved the 60 degree waters of San Francisco Bay as part of a swim called Sharkfest. The name is strictly tongue-in-cheek, as no swimmer has yet encountered a shark.

“When you’re swimming along and a dark shape goes underneath you, your heart stops and you start to freeze up,” explains Rosenberg. “But then your brain clicks in and you realize it’s just a harbor seal.”

If you would like to feel more connected to the work of our HIV Team, please consider donating to: Rosenberg’s Alcatraz Sharkfest swim benefiting BHCHP, by visiting www.whosaysicant.org/donate.

In between the weekly therapy sessions, Keshwar works her magic. A mother of two special needs daughters, Keshwar has experienced first hand how demoralizing it can be when one is low-income and asking for help. She helps coordinate the many moving pieces of each family’s care team; mentors the mothers; accompanies them to appointments when they need moral support; and does whatever else she can to prepare them for becoming capable self-advocates.

“Families often don’t realize their own strengths because they live such stressful, difficult lives,” says Keshwar. “It’s so satisfying to see the parents and the kids develop new skills and evolve into people who are very capable of handling their own lives.”

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MYCHILD team members Candace Keshwar and Rachel Harrington-Levey

SWIMMING FOR THE HIV TEAM TO HELP SAVE LIVES

Jothy Rosenberg exits the water after finishing the Sharkfest swim

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BOSTONIAN GROUP PARTNERS WITH BHCHP IN MANY WAYS

If organizations had BFFs*, the Bostonian Group would be one of Boston Health Care for the Homeless Program's.

The Bostonian Group, one of the leading insurance advisory firms in New England, made BHCHP’s acquaintance six years ago, when BHCHP was embarking on a capital campaign to raise funds for a new home. The Bostonian Group became a generous supporter of the campaign and helped BHCHP forge many relationships with the business sector and the community at large. Over the years, the Bostonian Group has raised close to $200,000 to support BHCHP’s work.

“We depend on partnerships with corporate leaders like the Bostonian Group not only for financial support but also to raise awareness of our work,” says BHCHP Executive Director Bob Taube, PhD, MPH. “It’s been a mutually gratifying relationship that we hope endures for a long, long time.”

That relationship has deepened over the years: the Bostonian Group employees have hosted cookouts for patients, led tree-trimming events, spearheaded sock and toiletry drives and designated BHCHP as one of the main beneficiaries of its foundation’s annual Charitable Golf Classic. One employee’s elderly mother knits hats and scarves for BHCHP patients and another’s young son asked for new socks and gift cards for BHCHP patients instead of birthday presents. Senior Vice President Peter Pedro serves on BHCHP’s board of directors.

A Culture of Compassion

“We’ve tried to create a culture of giving and caring at the Bostonian Group and our employees have embraced it wholeheartedly,” says CEO Jim Blue. “Our relationship with BHCHP is very rewarding for our staff while at the same time benefiting our most vulnerable men, women and children. They deserve the best health care possible, just like the rest of us.”

John Gaffney, who works in sales development for the Bostonian Group, has volunteered to help run several events for BHCHP patients, most recently a holiday decorating party. It was a touching afternoon for many reasons, according to Gaffney.

“So many of us take something like decorating a Christmas tree for granted, but not the patients who participated,” says Gaffney. “They took ownership of the project and wanted the perfect tree. They were proud to be involved.” One grateful patient commented that it had been more than 15 years since he had trimmed a tree.

TEAM BHCHP LACES UP SNEAKERS TO BENEFIT HOMELESS PATIENTS

One member of Team BHCHP was a medical assistant for the organization and knew its work first-hand. The other three were acquainted with BHCHP through their work or family members. And although they put on their Boston Marathon bib for different reasons, the four ended up doing a tremendous job of fundraising and completing the course, despite the punishing temperatures.

David Concannon, Marcus Duck, Patricia McQuade and Kevin Shaughnessy raised $26,673, more than $1,000 for every mile they ran. Thanks to the generous contribution of charity bibs by John Hancock, Boston Health Care for the Homeless Program fielded a marathon team for the second year.

“We are so proud of David, Marcus, Trisha and Kevin for their impressive feat of fundraising and physical endurance,” said BHCHP Executive Director Bob Taube. “We know they enjoyed getting to know BHCHP as much as we delighted in getting to know them.”

The runners were treated to a pre-race pep rally at Jean Yawkey Place by BHCHP staff members. They also presided over a BINGO night for patients that was a big hit for everyone involved.

“Even on days I didn’t feel like running, I always had it in the back of my mind, that the team and this honor were more important than how I felt about running that day,” said Concannon.

One important thing Gaffney has learned from his time volunteering with BHCHP is how on the deepest level, the homeless people he has met are not that different from him. “The biggest difference is that they fell on tough times and then it snowballed,” he says.

In 2010, Boston Business Journal recognized Bostonian Group and Boston Health Care for the Homeless Program’s unique relationship by honoring them as Partners of the Year in the health care industry. ■

* Best Friends Forever

Post-holiday decorating celebration with Bostonian Group CEO Jim Blue (far left), staff and patients
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)
- new sneakers
- new flip flops
- diapers
- gift cards:
  - CVS ($5 and up)
  - McDonald’s ($5 and up)
  - Dunkin’ Donuts ($5 and up)
  - Target ($5 and up)
  - Stop & Shop ($20 and up)

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 regularly scheduled foot clinics at other primary care sites. Contact volunteer@bhchp.org or call Carrie Eldridge-Dickson at 857.654.1048 for more information, to find out about other “Small Gift” needs or to make arrangements for delivery.

Cecilia Ibeabuchi, RN, received an honorary doctorate of public service from Tufts University. Ibeabuchi is nurse manager of Boston Health Care for the Homeless Program’s clinic at St. Francis House, a Boston day shelter that provides a range of services to its homeless clients. Ibeabuchi was recommended to receive this honor by Tufts students who have volunteered at the clinic under her leadership.

James O’Connell, MD, President of Boston Health Care for the Homeless Program, was honored by the Massachusetts Medical Society with its Special Award for Excellence in Medical Service. The award, one of the most prestigious presented by the Society, honors a physician who has provided exceptional care and dedication to the medical needs of his or her patients and the general public. In nominating him for the honor, his colleagues remarked that Dr. O’Connell’s ability to raise funds, encourage volunteerism, and enlighten public awareness is without equal. His nominators also recognized his impact on medical students. “He makes realistic the idealism students bring to the profession,” they wrote.

Dr. O’Connell also received an honorary doctorate of humanities from Stonehill College and was the commencement speaker at Laboré College’s graduation.

The Red Sox Foundation and NESN will team up for the seventh year to collect new white athletic socks for BHCHP’s patients during the Sox vs. Royals games Friday, Aug. 24 and Saturday, August 25. The Sox for Socks games are great fun and great benefit to BHCHP, with thousands of socks collected and distributed each year. Our caregivers and patients send a heartfelt thanks to these two great sponsoring organizations.

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Your Support Will Bring...

the Dignity of dentures for a 42-year-old man who had forgotten what a difference a smile can make.

the Trust that a therapist can bring to a deeply depressed 46-year-old man who cries at each of his medical visits to our Pine Street Inn clinic.

the Hope of a respite bed at Barbara McInnis house for a 56 year-old woman experiencing the pain of chronic arthritis and the exhausting side effects of the only medicine that will keep her out of a wheel chair.

the Healing comfort of a family physician’s visit to a mother and her 2 children coping with the trauma of losing their home.
For more than a decade, the McInnis House—BHCHP’s medical respite care facility for patients who aren’t ill enough to be hospitalized but are too sick for the streets or shelter—has cared for a number of patients who have wished to spend their final days with us. But as patient demand has grown, the organization has begun to develop a specialized and comprehensive system of end-of-life care. Erica Wilson, MD, a palliative care specialist at Massachusetts General Hospital, acts as a consultant to the program and leads trainings on topics ranging from advanced care planning to pain and symptom management.

Training in End-of-Life Care
A multi-disciplinary team—comprising physicians, nurse practitioners, physician assistants, nurses, and aides—have been attending trainings in end-of-life care and now offer guidance to other McInnis House staff on issues arising with their dying patients. Care teams conduct rounds weekly on dying patients to discuss their treatment, with members of the palliative care team in attendance.

“Symptom management is a huge issue in end of life care—teaching caregivers how to deal with patients’ pain, constipation, shortness of breath, restlessness and delirium,” explains Kane, a member of the palliative care team. “If you’re not trained in end-of-life care, you don’t even know how to name these things.”

Comfort beyond the physical
But end-of-life care at McInnis House goes far beyond the medical. Staff bring in home-cooked meals for patients; sit vigil at bedides even when their shifts are over; and help fulfill dying wishes, in many cases facilitating reunions with estranged family members. In Celine’s case, her team has been working with local officials to get an expedited visa for her mother—with whom she is very close—to see her one last time. The team has also helped arrange a visit from Celine’s brother, who lives out-of-state. He is sleeping in a cot in her room, so they can spend as much time as possible together. Other family members traveled regularly from New York City to spend a couple of hours at her bedside.

“It’s been humbling to care for her,” says April Donahue, RN. “She is so grateful for everything we do for her and so stoic. She has strong faith-based beliefs and says she is not afraid to die. You always wish you could do more.”

The Tommy Molinaro Palliative Care Cart
Keeping palliative care patients comfortable requires a team of dedicated and compassionate caregivers. But there are also many small things that can make a big difference in patients’ comfort level, including skin lotion, eye drops, heel protecting booties and fans. The Barbara McInnis House would like to create a palliative care cart stocked with the most frequently requested non-medical necessities. The Tommy Molinaro Cart, named after a beloved patient who spent his final days at the facility, will save nurses time chasing down these items for their end-of-life patients. For donors interested in sponsoring this $5,000 giving opportunity, please contact Linda O’Connor at 857.654.1050.

Tommy Molinaro visits with his favorite filly, Southern Advice, at Suffolk Downs.
No mother should ever have to face her dilemma: what will happen to her five-year-old daughter when she dies? “Céline” has stage four breast cancer and has run out of treatment options. She is receiving palliative care at BHCHP’s Barbara McInnis House. Palliative care focuses on addressing the physical, emotional, spiritual, and social concerns that arise with a life-threatening illness.

The father of Céline’s daughter cared for their child during her months-long cancer treatment, but decided suddenly that he no longer wanted her. Fortunately, an out-of-state relative agreed to take her and now brings the little girl to the McInnis House regularly to visit her mother.

“Often our patients don’t have family and friends to care for them and they ask us if they can stay with us at the end of their lives,” says McInnis House Director of Nursing Cheryl Kane, RN. “Every person should have the right to die in a dignified way, with people who really know them and care about them.”

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