LEAVING A MARK

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

As we anticipate our 30th year of caring for Boston’s homeless community in 2015, we find ourselves reflecting a lot on the years gone by. Particularly on our minds of late is an early highlight of the relationship we had with Robin Williams. He, Billy Crystal and Whoopi Goldberg (in the days before they were household names), were good friends to BHCHP through the partnership that their charity, Comic Relief, had with the National Health Care for the Homeless Council. We received critical financial support from their nationally televised comedy specials, helping us grow into the organization we are today. We’ll never forget the day Robin spent with us on the streets and at Long Island Shelter in 1988. He was quiet and thoughtful, but once you got him going he had us, and the shelter guests, rolling with laughter. We are grateful for the memories of this brilliant and caring man who felt a special closeness to the most vulnerable among us.

We’ve come a long way since those startup days thanks to you, our community of supporters and collaborators. We’ve grown from a staff of six people with a big dream to more than 300 staff and 100 volunteers who keep that dream alive every day: to provide or assure access to the highest quality health care for all homeless men, women and children in the greater Boston area. Today, we care for more than 12,000 men, women and children at 70+ locations.

Your attention, your financial support, your involvement and your spreading the word has sustained us for three decades and we thank you from the bottom of our hearts.

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MOVING PALLIATIVE CARE FROM THE McINNIS HOUSE TO PATIENT HOME

If you’ve been reading our newsletters and emails in recent years, you will likely remember stories about Kervin, Jorge, Tommy, and “Celine”—all patients who received palliative care at the Barbara McInnis House at the end of their lives. As the need for more specialized services and greater dignity in death has emerged, clinicians at the McInnis House have become adept at caring for our patients who are dying and your support has made this level of care possible. And while most of our patients stay in shelters or on the streets, BHCHP continues health services to those of our patients who have been able to secure housing, often with our help. Until this summer, however, we had never provided palliative care to any patient outside of the Barbara McInnis House.

“Irina” was a 75-year-old Eastern European immigrant who at one point in her life had lived on the streets and in shelter with her adult daughter, “Katya”, before moving into housing. Having fled an abusive situation, they had been each other’s sole companion and support and their love was palpable. Irina communicated with her BHCHP caregiving team solely through Katya, who was a strong advocate for her.

Katya was intelligent and articulate, but had a difficult time accepting how ill her mother was. Early this summer, Irina had been diagnosed with metastatic breast cancer and her decline was precipitous. Too ill to remain at home, she shuttled between the McInnis House and a nearby hospital over the next couple of months. At the McInnis House, we would manage her symptoms and keep her comfortable. But invariably, her fever would spike or she would experience other severe cancer symptoms and we would have to send her back to the hospital.

“It’s a basic human right to be able to die in a dignified way, surrounded by people who know you and care about you.”

During Irina’s last hospital stay, she took a turn for the worse and Katya, now acknowledging that her mother was terminal, told us that it was very important that her mother die at home. “It’s a basic human right to be able to die in a dignified way, surrounded by people who know you and care about you,” says McInnis House Director of Nursing, Cheryl Kane, who was very involved in Irina’s case. “The challenge here was that up until now, we had cared for patients only at the McInnis House; we had never done end-of-life care at home.”

With Irina actively dying, our team here sprang into action. They readied the small apartment for her care, negotiated the necessary paperwork, and coordinated the details to bring in hospice services. Upon discharge from the hospital, Irina was in terrible pain and lay clutching her daughter in the small bed they were sharing, afraid to let her go. Our medical director, Dr. Jessie Gaeta, consulted with MGH palliative care expert, Erica Wilson, MD, about the best pain medication and once administered by our nurses, Irina’s pain and agitation were reduced. The next morning, not much more than 24 hours after she left the hospital, Irina died, with her beloved daughter Katya lying beside her.

“For all of us who were involved, this was a powerful experience,” says Kane. “It reminded us about why we went into this profession, to care for patients and families compassionately, right up to the very end.”

THE NEXT GENERATION OF LEADERS: BHCHP’S YOUNG PROFESSIONALS BOARD

What does an organization do when it knows that its impact in the future depends, in large part, on its relevance to the region’s next generation of professional leaders?

Boston Health Care for the Homeless Program (BHCHP) is very fortunate to partner with a growing group of these leaders; smart, talented and compassionate women and men who offer their diverse body of professional knowledge in service to BHCHP’s present and future. The group works together to plan events, increase awareness about our work throughout the community and educate other young professional’s on the issues of health and homelessness.

The Young Professionals Board at BHCHP unites a wide variety of professional backgrounds and is focused on aiding BHCHP’s work through fundraising, networking, volunteer and educational events. The Board is seeking to expand its reach into the world of Boston’s future leaders and is currently seeking to add new members who will bring additional skills of influence and knowledge to BHCHP.

BHCHP is keenly aware that the hands that will help shape the future are already laboring to ease the pains of the present. This generous gift of time and talents is enlightening the paths of change that lie ahead.

If you or someone you know may be interested in joining our program’s Young Professionals Board, please contact Alyssa Brassil at a brassil@bhchp.org or 857-654-1046.
BHCHP was the grateful beneficiary of much support at our annual Medicine that Matters gala held on May 12th at the Seaport Hotel. With meaningful awardees and a spontaneous act of generosity, this was an event that showcased our work, our partners, and, most importantly, our patients.

Covidien received the 5th Annual Tim Russert Award for its philanthropic leadership and loyal partnership. The global health care products pioneer has been supporting BHCHP for more than a decade. From its early support of our capital campaign that helped us reach our ambitious goal of “a home of our own” in the South End to its provision of medical supplies and employee volunteerism—Covidien has worked alongside BHCHP in delivering medicine that matters to those who need it most. Chairman, President, and CEO, José (Joe) Almeida, accepted the award on Covidien’s behalf.

Founding director of the Division of Public and Community Psychiatry and the inaugural incumbent of the Michele and Howard J. Kessler Chair in Public and Community Psychiatry at Massachusetts General Hospital, Derri Shtasel, MD, MPH, was also honored at the event, receiving BHCHP’s Dr. Jim O’Connell Award. An Associate Professor of Psychiatry at Harvard Medical School, Dr. Shtasel is also the Executive Director of the Kraft Family National Center for Leadership and Training in Community Health at Partners HealthCare.

Dr. Shtasel is passionately committed to the care of poor and homeless persons suffering from severe and persistent mental illness. For the past five years she has cared directly for patients at our St. Francis House Clinic. Dr. Shtasel has helped us improve services for those suffering from co-occurring mental health and substance use disorders, devoting hours each month to meeting with our clinicians and assisting us with treatment plans for our most challenging patients.

Perhaps the highlight of the evening was hearing from two of our Family Team patients, Jason and Samantha, who attended the event with their three young sons and their doctor, Summer Bartholomew, MD. Becoming homeless after Jason lost his job as a sheet metal worker, the family was placed in a motel for more than a year. After sharing their story of hardship and perseverance, event guests gave a standing ovation and a small group of long-time donors joined forces to secure a new apartment for the family, rent paid for three years, and to help Jason get a job. They have made good on these promises and this young family is now settled in their new home.

With more than 520 people in attendance, the gala raised a remarkable $650,000 that will be used to care for the complex medical and behavioral health needs of the 12,000 patients BHCHP cares for each year. Special thanks to the evening’s chairs, David Giunta and Edmund Murphy III, as well as “Presenting Sponsor” Natixis Global Asset Management.

#GIVINGTUESDAY

PLEASE SUPPORT BHCHP ON GIVINGTUESDAY—DECEMBER 2

What is #GivingTuesday?
We have a day for giving thanks. We have two for getting deals. Now we have #GivingTuesday, a global day dedicated to giving back. #GivingTuesday is a simple idea bringing non-profits, businesses, individuals, and community groups together for one common purpose: to celebrate generosity and to give.

Make a Donation to Make a Difference
Looking for a way to contribute to a cause with deep meaning amidst the barrage of holiday ads and Black Friday deals? BHCHP is joining the world-wide #GivingTuesday campaign and is inviting our supporters—and those who might be new to our work—to make a donation to make a difference on December 2.

How YOU Can Help
Please consider making a gift of any amount to BHCHP on Tuesday, December 2 by going online at http://www.bhchp.org/donatenow.htm.

Thank you all for your generous support!
In another case, “Grace” and her two children had recently moved to the Boston area. The children were without a pediatrician and the younger child had chronic health conditions and was about to run out of medication. Grace was struggling with depression and in desperate need of help. Dr. Bartholomew saw the family in the motel where they are living and gave both children the physicals they would need in time to start school. The team tracked down vaccination records from previous doctors, got medication refilled for the younger child and is now connecting him to specialty care at Boston Medical Center. Dr. Bartholomew and the team are also seeking behavioral health resources for Grace.

40
Number of sites where the family team has delivered care (includes motels and hotels, domestic violence and family shelters)

Dr. Bartholomew is also working with “Leah” who lives in a shelter with her 1-year old. Leah struggles with depression and asthma, but she is getting her primary care and behavioral health counseling from BHCHP and her conditions are well managed. The Family Team recently added a psychiatry fellow from MGH to their team and Leah has made a really positive connection with her, thanks in part to her doctor’s referral.

Moving From Episodic to Comprehensive Care

A lack of affordable housing has been one of the main drivers of the State’s family homelessness crisis. While in the past, families might live in a shelter or motel for several months before they moved into permanent housing, today these stays are dragging on for as long as two years in some cases.

With length of stay on the rise and the need for well-coordinated and comprehensive primary care at an all-time high, the Family Team opened clinics at Brighton’s Crittenton Women’s Union and Dorchester’s St. Mary’s Center for Women and Children in the past year. “Our team used to do exclusively outreach care. We walked around with a suitcase of supplies and saw people in their rooms,” explains Dr. Bartholomew. When BHCHP opened the Crittenton clinic last October, suddenly family team staffers could deliver a wider range of services, including preventative care like immunizations, some diagnostic testing, developmental screening for children, parent education, oral health screenings and smoking cessation. “The families are taking advantage of the services and are really appreciative,” comments Dr. Bartholomew. “That’s been rewarding.”

7,500
Number of family visits in FY14
(1,600 families served)

The Crittenton clinic has been so successful that it has now expanded to a second room where case managers, counselors and nurses can meet with patients. As the team shifts to provide more services on site, they also plan to expand services for families to BHCHP’s main site, Jean Yawkey Place, one evening each week for appointments and walk-in care.

18
Members of the family team (includes 1 AmeriCorps/Community HealthCorps® member, 5 case managers, 1 director, 2 MYCHILD family partners, 2 MYCHILD mental health clinicians, 2 nurses, 1 nurse practitioner, 2 physicians, and 2 therapists)

Looking to the future, the family team will be focusing on: improved integration of behavioral health with medical care and monitoring key quality measures such as vaccinations, cancer screenings and weight management. It has been the support of our donors that makes it possible for BHCHP’s Family Team to so nimbly respond to the ever-growing and more long-term needs of the families in our care. Without this support, Sandra, Grace, and Leah and their children would not be getting the health care they need. Dr. Bartholomew finds her work incredibly rewarding and loves the philosophy of family medicine. “For the children to be healthy, the parents have to be healthy too,” she says.
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 70 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 almost 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.

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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 abrassil@bhchp.org or call Alyssa Brassil at 857.654.1046 for more information, to find out about other “Small Gift” needs or to make arrangements for delivery.
There are countless reasons why it’s hard to be homeless, but the challenges increase tenfold when you are homeless with children. In Massachusetts, about 4,400 families are homeless: half stay in family and domestic violence shelters and the other half in hotels and motels. Living in a motel, especially, often means an entire family sharing one room with no way to prepare nutritious meals and no place for children to play. It can also mean limited transportation options and long walks down busy streets to get anywhere. Family homelessness can also mean a mighty struggle just to take care of your children’s health needs and, even more often, your own.

BHCHP Family Team physician, Summer Bartholomew, MD, sees these realities every day, and together with her colleagues, works hard to alleviate some of the burdens. In one such example, Dr. Bartholomew has been caring for “Sandra”, a woman with type 1 diabetes living in a family shelter with her toddler. In addition to connecting this young mother with an endocrinologist, Dr. Bartholomew is providing Sandra’s primary care and helping to manage her diabetes and has referred her to BHCHP’s behavioral health team.

FAMILY TEAM Responds TO LONGER SHELTER STAYS WITH TWO NEW PRIMARY CARE CLINICS

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