



Clínica Esperanza/Hope Clinic Annual Report



Clínica Esperanza/Hope Clinic
January 2017

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<http://www.aplacetobehealthy.org>

Letter from the Volunteer Medical Director

Dear Neighbor,

I am so proud of our clinic. Every day, I hear patients tell us how getting access to healthcare services at the clinic has changed their lives. I'm even more proud to say that this is possible thanks to the work of hundreds of volunteers and a small, dedicated group of clinic staff. Together, we improve our neighbors' health.

It's amazing to think that we've been doing this since 2007. By 2008, we were running clinics in church basements out of a suitcase. We wheeled our charts from temporary clinic to outreach site to health fair. In 2010, the help of funders and donors, we moved to our current location in Olneyville.

Now we have a big and bright yellow clinic where we provide care to more than 2,500 patients, while we actively engage with our community at more than 10 active outreach sites.

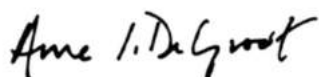
What's even more amazing is that the need for our services continues to increase. **According to pundits, the need to provide a healthcare safety net for uninsured patients would disappear with the arrival of Obamacare.** Not so, as it turns out.

In 2016, we saw 24% more patients over 61% more visits than 2015, continuing an upward trend that we began to observe in 2014. With volunteer help, we provided pre-employment physicals, immigration health screens, vaccinations, nutrition classes, diabetes prevention classes, and primary health care, and did outreach in our community, **all free of charge.** These activities are only possible thanks to the support of the Department of Health, support from the City of Providence, and the generosity of donors, local foundations and local hospitals.

We work hard, but when we go home at night, **we know that we've done something really extraordinary.** With hard work, altruism, and your support, we are able to meet the healthcare needs of our community. We are truly "a place to be healthy".

Help is what our patients need, and help is what our volunteers are glad to give. Please read on to find out how much we accomplished this past year and learn about our plans for 2017.

And thank you for your support!



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Neighbor-to-Neighbor Healthcare





Clínica Esperanza/Hope Clinic is a **volunteer-run organization**. Our volunteer group includes medical students, clinicians (MDs, RNs, RNPs and PAs, pharmacy students), and regular citizens of Rhode Island who provide free health care to the uninsured.

In a world where human contact is no longer the norm and automation is ascendant, we are reaching out. We pitch in. We extend a hand. Our own hand. To help a neighbor.

Our mission is to provide culturally sensitive and linguistically appropriate access to health care for Rhode Island residents who are uninsured and/or who cannot afford the cost of healthcare. 85% of our patients do not speak English as their first language.

We help patients from all over the world at Clínica Esperanza/Hope Clinic. Our patients are from Afghanistan and Syria, Côte d'Ivoire, Senegal, Mali and Liberia, Mexico, Costa Rica, Guatemala and South America, Haiti and the Dominican Republic and Providence, and our group of volunteers is just as diverse.



 <p>Primary Health Care for the Uninsured</p> <ul style="list-style-type: none"> • Diabetes • High Blood Pressure • Heart Disease • Obesity 	 <p>Neighborhood Health Screens</p> <ul style="list-style-type: none"> • Fasting Blood Glucose • Blood Pressure • Cholesterol • BMI • HBA1C 	 <p>Vida Sana, DPP</p> <ul style="list-style-type: none"> • Nutrition Education • Self Management • Health Literacy • Exercise classes 	 <p>CHEER Clinic (Walk-in, Non-urgent care)</p> <ul style="list-style-type: none"> • Vaccinations • Non-urgent health problems • Sexually Transmitted Diseases • Health screens
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**Comprehensive Healthcare Partnership:
Bridging the Affordable Healthcare Gap**

Bridging the Health Care Gap (BTG), 2016-2017

Addressing Health Disparities

We are well aware of the negative effects of poverty on health outcomes and the disproportionate impact of chronic diseases on individuals belonging to racial and ethnic minorities (also known as health disparities). **We are enthusiastic about the potential for the Affordable Care Act (ACA, or Obamacare) to address the healthcare gap**, but the benefits of the ACA are not accessible to many of our patients.

Clínica Esperanza/Hope Clinic (CEHC) serves a large population of **predominantly Spanish-speaking uninsured patients living in Rhode Island (RI) who are gradually transitioning to insured care as they become eligible for insurance under the Affordable Care Act**. These individuals are not eligible for income-related discounts under the 'Exchange' nor are they eligible for Medicaid, due to their residency status (five years of legal citizenship is required before discounts related to low income are available).

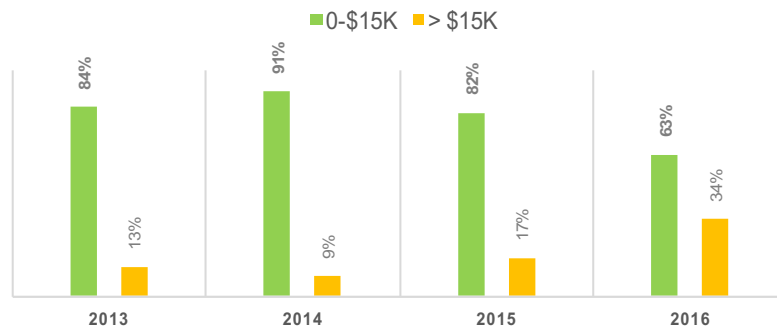
Many of the low-income individuals living in Rhode Island who fall into the ACA gap have diabetes and other chronic diseases. Our mission at CEHC is to make healthcare accessible to

these patients. We engage them in our continuity of care clinic and enroll them in disease-self-management programs.

Over the seven years that we have been providing care to this population of patients at our Olneyville location, we have documented **significant improvements in health in this population** of patients, usually as they transition to insured care (see publications describing these improvements at our website, www.aplacetobehealthy.org). And, we are seeing increasing numbers of patients who need these programs, because they are unable to access to healthcare because they are ineligible for subsidies under Obamacare (see graphic).

We are convinced that providing access to healthcare for pre-eligible (pre-insured) patients improves their health and may significantly reduce the cost of their care after they are enrolled in ACA- or Medicaid-funded health insurance.

IMPACT OF EXPANDED ACCESS TO INSURANCE UNDER MEDICAID ON CEHC PATIENT INCOME REPORTED (K/YR)



In 2015, we began to consider **reimbursement for delivery of healthy patients to insured care as a means of supporting these programs at Clínica Esperanza**. We developed a **pilot project, called Bridging the Gap**, which would document the impact of our clinic programs on the cost of care post-insurance. As of March 2016, we are now fully engaged as a group of volunteers and patients in documenting the effects of **Bridging the [Affordable Care Act] Gap**.

What is **Bridging the Gap**? It's a partnership with our patients to improve their health for the rest of their lives. All clinic patients who are engaged in comprehensive, long-term care at CEHC become participants in the health education programs offered at the clinic. Among those programs are the **Vida Sana** and the **Diabetes Prevention Project (DPP)** (see below). By tracking patients after their transition to insured care and collaborating with stakeholders at the private, public, and nonprofit level, we will develop an economic model to estimate the value of this pre-insured or pre-eligible care in the free-clinic setting. We then plan to use this model to develop a **Pay For Success (PFS) structured transaction with the State of Rhode Island**, to support the important "bridging the healthcare access gap" efforts that take place at CEHC and other free clinics in Rhode Island.

Key components of the program are described in the next few sections:

Training Community Health Workers to teach Health Literacy

In 2016, CEHC initiated an intensive 10-week training program for 15 Community Health Workers or "Navegantes" with support from Textron Foundation. These individuals received

formal training in medical translation, client management skills building, basic education on chronic diseases, and hands on training with their peers, at the clinic. 13 of the individuals completed the course in community health worker (CHW) training and of these, 12 were certified in medical translator training. All of the Navegantes in the program have now been certified by the RI DOH as CHWs due to their participation in the course. In addition to providing CHW training, CEHC opened the Medical Translator component of the CHW training to the local community; more than 20 participants became certified medical translators.

Our Navegantes are the front-line workers in the Bridging the Gap project. They enroll patients in the program and teach the health and nutrition classes. They teach patients about their medications, and the importance of healthy lifestyles, in one on one and group sessions. Since March, the Navegantes, volunteers and staff have enrolled nearly 500 participants into the program. Volunteers and staff are working with the Navegantes, keeping track of the participants, checking their health outcomes, and engaging them in ‘lifestyle change’.

We’re recruiting a new class of Navegantes in January and expect to have more front-line workers engaged in our program by June-- thanks again to Textron for their support.

Preventing – and Even Curing! Diabetes

Beyond just providing primary health care, the volunteers at CEHC believe in **preventing illness**. Since “an ounce of prevention is worth a pound of cure” we are continuously engaged in efforts to **prevent disease by any means possible**.

One way to do that is to prevent diabetes. In 2013, with the support of the Olneyville One Neighborhood Builders and the Department of Health, we initiated the evidence-based program **Diabetes Prevention Project (DPP)** at CEHC. DPP is part of a nation-wide effort by the CDC to reduce the incidence of diabetes by engaging adults in classes about healthy lifestyles. CEHC has one of the few DPPs in Rhode Island that is taught in Spanish, entirely by our Navegantes (Community Health Workers). This program is available to Medicaid patients starting in 2017, but would not be available to our patients (who are not yet Medicaid Eligible). The interim results of this program have been amazing! **Patients who are pre-diabetic have ‘cured’ their condition**. What’s the key factor? Peer-to-peer education. The Navegantes do a great job!

Have a Healthy Life (Vida Sana)

In 2012 we initiated our own healthy lifestyles program called **Vida Sana**. This program uses a low-literacy-friendly, picture-based instruction book developed by Lifespan MD Susan Oliverio to educate patients about healthy food choices, exercise and ways to reduce the risk of metabolic syndrome. We’ve seen amazing results here, too! In 2016, we conducted 8 Vida Sana program groups with a total of 139 participants. For those who completed the program we have seen:

- 72% of the chronic disease participants who were overweight, lost weight.
- 63% of the participants who were diabetic reduced their baseline glucose levels > 10%.
- 57% of the participants reduced their cholesterol levels by 5-10%.
- Scores on Health Literacy test improved for 78% of participants.
- Each of the health improvements was maintained or improved at follow up.

- 66% of the program participants improved or maintained (a good) HbA1c level.

One of our patients had uncontrolled and undiagnosed diabetes when he first started the program. His baseline HbA1c was 13.4% (a measure of blood sugar over time, normal is less than 5.7). We were able to improve his diet (and put him on medication). After some very significant weight loss (40 pounds) he was able to reduce his blood sugar and HbA1c to normal and he no longer needs to take diabetes medications. Another patient is now only on oral medications instead of having to inject insulin twice per day. Another patient (female) had a baseline HbA1C of 9.2%. At 8-weeks it was reduced to 6.8% and at her follow up visit it was reduced to 6.5%.



Childhood Obesity Project (Niño’s Sanos y Activos)

The goal of the Niño’s Sanos y Activos (NASA) program is to bring an evidence-based childhood obesity prevention program to an underserved high-risk population of parents served by Clínica Esperanza/Hope Clinic (CEHC) in South and West Providence. The NASA program utilizes an evidence-based curriculum, called Healthy Children Healthy Families; it was supported by the Blue Cross Blue Shield of Rhode Island Blue Angels program in 2015 and 2016. What did we learn? **In addition to learning healthy habits, children can correct and improve the behavior of their parents!** Funding for this program has ended but we are looking for ways to continue it, as part of “Bridging the Gap”!

Reaching beyond Clinic Walls

Community Outreach is a key component of our work. The Bridging the Gap project is reaching our target population in the following two ways: (1) Through health screens and health education outreach programs (such as Vida Sana) that take place at outreach sites in South and West Providence, and (2) through the clinic’s free walk-in “CHEER” clinic (see below).

As of March 2016 with support from the RIF Strategy grant for Bridging the Gap, we have screened more than 1,000 individuals with chronic diseases at outreach events, and actively engaged nearly 600 new patients in continuity of care, of which nearly 500 have agreed to participate in the BTG program.

Several key state- and community-based organizations affiliated with CEHC and run by members of the CEHC Community Advisory Board have been enabling this innovative initiative. They are: The Rhode Island Department of Health, Olneyville Neighborhood Builders, The City of Providence HEZ, and our local churches.

Working together, we will reduce the chance that our population of patients will develop chronic illnesses such as diabetes, heart disease, and obesity, reducing the health inequities that are faced by patients living in our neighborhood. The BTG project may become a model for reducing healthcare costs in the future.

We can think of no better way to spend our volunteer time.



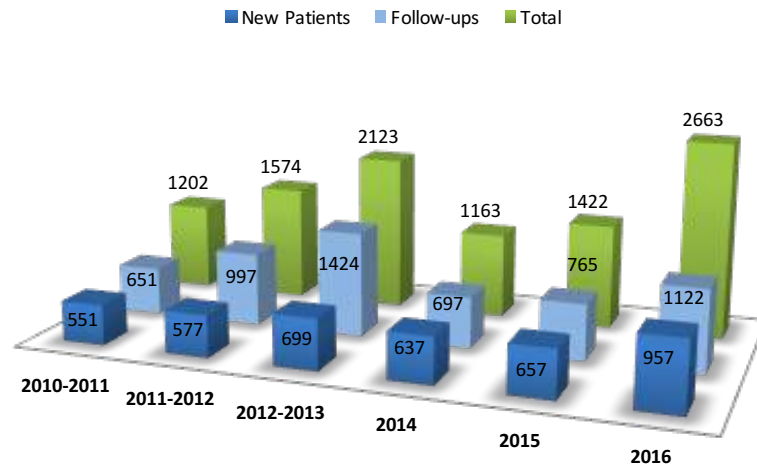
Reaching out brings in patients in need of care!

Individual CEHC Clinic Visits 2016 as compared to 2015

When we include clinic visits with outreach – we nearly doubled the volume of care provided by CEHC (as measured using paper visit forms filled out by our patients). In total, our volunteers performed more than 1000 health screens and assisted with the care of more than 2,500 patients at our walk in and continuity of care clinic.

We saw 24% more patients and had 61% more clinic visits than 2015, continuing an upward trend that we began to observe in 2014.

New, Returning, Total Patients



Leveraging the Altruism of Our Volunteers

Volunteer Hours 2012-2016

In 2012, we had about 175 volunteers in our database, and an active group of 20 at any one time. Today we have a database of more than 250 volunteers, and an active group of more than 80. The number of volunteers at CEHC continues to increase because the word gets around – Clínica Esperanza fulfills the need to help our neighbors. Many of our volunteers have been involved with the clinic since inception!

In 2016, physicians, nurses, nurse practitioners, medical students, pharmacy students, and other **volunteers provided more than 7,000 volunteer hours of service.**

As volunteers at Clínica Esperanza/Hope Clinic — we believe in laughter and joy. We celebrate health. We laugh at ourselves. We applaud our patients. We take joy in volunteering. We consider health, not wealth, to be the most valuable asset in our community.



CHEER Clinic

CHEER! For CHEER (Clinica Esperanza/Hope Clinic ER Diversion Project)

In 2012, we conceived of an important intervention to reduce out-of-pocket medical costs for our patient population. We opened a free walk-in clinic for the uninsured. Crazy? Not so crazy. Enabling patients to seek healthcare for non-urgent problems not only keeps them out of the emergency room, but it also entices them to get checked for chronic disease. CHEER is one of our most successful programs, as illustrated here.

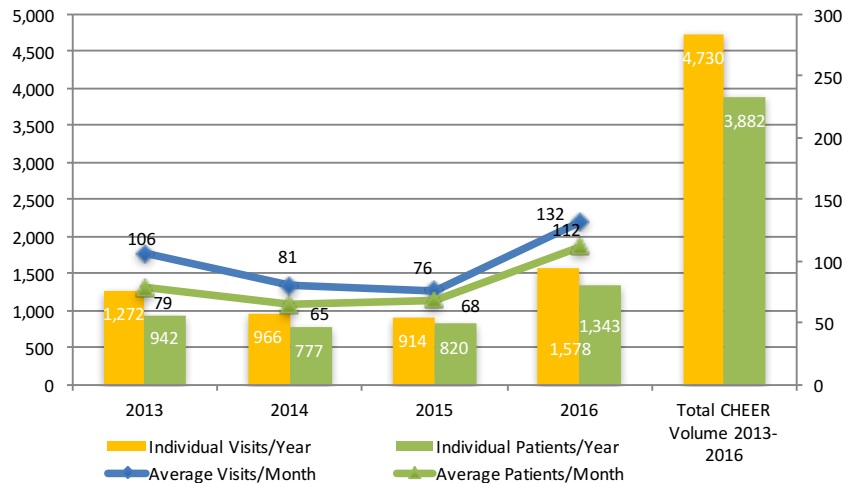
Walk in Non-Urgent Care Boosts Patient Visits in 2016

We have provided **free walk-in care since July 2012** to residents of Rhode Island that do not have health care coverage, thanks to support from Blue Cross Blue Shield of Rhode Island. The CHEER program at CEHC was developed to provide uninsured patients with easy access to a registered nurse and medical volunteers, for advice and treatment based on a set of clearly defined protocols and procedures, in a **nurse-run, walk-in clinic setting**.

In the first six months that the CHEER clinic was open (July-December 2012), more than 250 patients were evaluated and treated, and an estimated \$100,000 in potential "out of pocket" ER cost was avoided.

In 2016, we assisted 1,343 patients, and helped them save more than \$500,000 in out of pocket costs. When the value of screening for health problems on demand (blood glucose, blood pressure screens) is included in the estimate of costs saved, CHEER clinic has saved more than \$32M in quality adjusted life years or QALYS, since 2012.

CHEER Visits and Patients / Month and Year from 2013-2016 and total CHEER Volume 2013-2016



CHEER has now been in operation for 4 years. **The impact on access to healthcare and out-of-pocket healthcare expenses for our patients is tremendous.** Thank you BCBSRI and CVS Health!

Current Funding Snapshot

Funding for CEHC Operations and Programs came from a wide array of sources in 2016

Clínica Esperanza/Hope Clinic (CEHC) Funding 2017		
Source		Funding, Period
Rhode Island Foundation	Bridging the Gap Pilot: Integrating Outreach to the Community, free Walk-in Care, DPP, Vida Sana, and other interventions, now incorporated into <i>the Bridging the Gap Program</i> .	March 2016-April 2017 \$75,000
Blue Cross-Blue Shield of RI	Bridging the Gap Pilot: Integrating Outreach to the Community, free Walk-in Care, DPP, Vida Sana, and other interventions, now incorporated into <i>the Bridging the Gap Program</i> .	July 2016 –June 2017 \$50,000
Textron Foundation	Funding to support the development of a community health worker capacity at CEHC. The Navegantes are now an integral part of CEHC’s clinical operations.	December 2016-December 2018 (2 years) \$20,000
CVS-Health	CHEER – Volunteer-led ER diversion program utilizing volunteer-supported nursing staff to reduce uninsured patients’ use of ERs (\$40K) and (also supported by BCBSRI through BTG).	February 2016-January 2017 \$25,000
CDBG (Federal)	Community-Development Block Grant Program , City of Providence. Unrestricted funding to provide health care services to the uninsured. Ongoing funding: >\$200,000 total for Federal Years 34-41(current year).	July 2016-June 2017 (annual) \$25,000
RI Department of Health (State)	Rhode Island Chronic Care Collaborative Scale up of Metabolic Syndrome prevention / Statewide collaboration focusing on Quality of Care for chronic disease (Diabetes, HTN, CVD) patients	2016-2017-renewable (3yrs) \$40,000 +
Chartercare	Vida Sana Pilot Project; Health Literacy, Social Club, objective outcomes for patients who have Diabetes. Supports the Vida Sana pilot project; builds capacity at CEHC for VSP.	March 2016-April 2017 \$25,000
Funding equal to or less than \$25,000	Dexter Foundation, American Communities Trust, Carter Family Foundation, EpiVax, March of Dimes, Climb for a Cure, CEHC Board Members, Olneyville HEZ, Legislative Grants, BankRI, and many individual donors.	Small Projects and/or Unrestricted Support >\$75,000

Board of Directors

Our Board of Directors

Ellen Lynch, Secretary

Karen Kent, Treasurer

Bobby Rodriguez

Ed Quinlan

Deborah Obalil

Isaac Saul Lopez

Michal Crane, Esq.

Special thanks to former board member Frank Mancieri, CPA, who continues helps us with our financials.

How to Volunteer? Write info@aplacetobehealthy.org

How to Donate? Go to <http://www.aplacetobehealthy.org/donate/>

Profit/Loss Snapshot 2016

Ordinary Income / Expenses

Income	
Grants	\$431,269
Donations	\$16,965
Fundraiser	\$6,855
Total Income	\$455,089
Expenses (Program-related)	
	\$426,511
Gross Profit	\$28,578
Net Ordinary Income	\$28,578

We are grateful to many donors and supporters!

City of Providence, LISC and Champlin Foundation
(for supporting the build-out of our clinic)

City of Providence, CDBG
Rhode Island Foundation
Blue Cross Blue Shield of Rhode Island
CharterCare
CVS Health
United Way of Rhode Island
American Communities Trust
The Fund for Community Progress
Dexter Foundation
Warren Alpert Medical School
Climb for a Cure!
Making a Difference Grant (PC)
BankRI
State of RI Legislative grants
AIWA NE
EpiVax, Inc. and individual donors!

We are thankful for our partners!

AIWA NE and CareFree
United Methodist Church/Open Table of Christ
Gloria Dei/Vision Evangelica
Dorcas Place/Welcome Back Center
Center for Women and Enterprise / NRI AHEC
FarmFresh RI
Olneyville Collaborative / OHC
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