WSJ: Health Care Reaches Homeless on Streets

Medical team searches for New York City homeless to deliver treatment, offer advice and make referrals to clinics

Richard Thomas, who is homeless, gets help from nurse practitioner Bonnie Coover in Harlem. PHOTO: BESS ADLER FOR THE WALL STREET JOURNAL

By HANNAH FURFARO

Aug. 14, 2016 9:21 p.m. ET

In the shadow of a Metro-North Railroad overpass in Harlem, Richard Thomas keeps his right leg propped up on an old stationary exercise bike. Two white medical bands on his wrist hint at his latest hospital stint.

Mr. Thomas is one of an estimated 200 homeless New Yorkers who will receive an unconventional form of
health care over the next year: immediate professional medical treatment wherever they can be found, including street corners, underpasses or park benches. The care is delivered by a medical team that makes rounds with backpacks filled with stethoscopes, blood pressure cuffs, antibiotic ointment and bandages.

“Do you have the medicine, did they fill it for you?” asks Bonnie Coover, 37 years old, a family nurse practitioner who visited Mr. Thomas one day last week, along with registered nurse Ella Cantrell, 35.

Mr. Thomas, 54, is being treated for a blood clot and has other vascular problems that make it painful to walk. Ms. Coover reminds him that his prescription thins his blood. If he takes a fall, Ms. Cantrell says, he should get checked out at the hospital.

“That’s why I like ya’ll,” says Mr. Thomas. “You give good advice.”

For the past month, the duo has traveled around Manhattan for days each week, seeking out homeless men and women known to be at high medical risk. Along with routine medical care, like cleaning and dressing wounds, the team gives medical advice and makes referrals to nearby clinics.

Run through the Center for Urban Community Services, the street team has a $400,000 contract from the city’s Department of Homeless Services.

The nonprofit offers employment help, runs other street outreach programs and provides supportive housing for the homeless, which includes shelter and social services. After approaching city officials about also taking a medically focused approach, one modeled on similar programs in Boston and Pittsburgh, it received the go-ahead to form the street medicine program.

“It’s something I would love to see us be able to do citywide,” said Danielle Minellipagnotta, associate
commissioner for street homelessness at the Department of Homeless Services.

Of the city’s estimated 61,000 homeless people, about 3,000 don’t use shelters and live primarily on the street, city officials said. The city is involved in other health efforts, including working with hospitals to keep track of people who may have sought out emergency care.

People who have been resistant to other outreach methods tend to let their guard down around the medical professionals, said Ms. Minelli Pagnotta.

Building trust and providing care regardless if someone has addiction problems is part of the work done by the street team. Again and again, Ms. Coover said, colleagues say they are impressed she has made headway with people who are typically reluctant to receive help.

“I’m starting to believe there really is something special about engaging people medically,” Ms. Coover said.

A social worker, Amelia Yankey, 29, helps the street team track down people who already have been in contact with the Center for Urban Community Services and are known to need medical care.

Finding the patients can be a mission in itself. On Wednesday, the trio wound through Marcus Garvey Park in Harlem searching for a man who frequents that spot. They didn’t see him, so they moved on to a nearby railroad underpass. They thought they might find others on their list.

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“Sometimes we have to wait for someone to have a good day, when they’re feeling ready to talk with us,” said Ms. Yankey. “Sometimes we have to wait for someone to be less intoxicated. But we’re just really persistent.”

The team finds workarounds to basic challenges, like getting medications to people like Mr. Thomas. His leg pain has made him relatively immobile.

“Certainly for the patients I’m prescribing for, even though pharmacies will deliver, they won’t deliver to a street corner,” Ms. Coover said. Instead, the medications for some patients are sent to her, and she gives them out.

Mr. Thomas said he had been homeless since his wife died of cancer more than a year and half ago. Although his belongings are now few, he still wears his wedding ring.

He is relatively organized when it comes to his health. He knows to take his pills each night, to only drink in moderation and to stay off his foot.

The street medicine team helps him stay on top of it all.

“They’re openhearted,” Mr. Thomas said. “That’s beautiful.”