East Harlem Health Outreach Partnership

2011 Annual Report
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Mission Statement

Lack of access to affordable health care affects a large proportion of the East Harlem Community. Since its creation in 2004, the East Harlem Health Outreach Partnership (EHHOP) has been committed to providing high quality primary and preventative health care at no cost to uninsured residents of East Harlem.

It is our mission to offer our patients confidential, compassionate care in a safe and respectful environment. We aim to establish collaborative relationships and shared goals with our patients. By emphasizing shared goals between patient and provider, EHHOP patients are encouraged to participate actively in their own physical and emotional well-being. We work with many partners within the Mount Sinai Medical Center (MSMC), in the East Harlem Community, and in the greater New York City area to help us achieve these patient-centered goals. As medical students, we are committed to serving our patients' health care needs in a comprehensive and holistic way, as well as to expanding our own knowledge, skills, and ability to practice patient-centered medicine.

A Message From EHHOP’s Medical & Program Directors,
Dr. David C. Thomas and Dr. Yasmin S. Meah

EHHOP set its mark in critically appraising it’s responsiveness to the healthcare needs of its community through a number of initiatives this year. Students collaborated with patients in the establishment of our first ever Patient Advisory Board (PAG). The PAG has proven critical in giving students and faculty unique insights into the problems and solutions to meet our population’s ever growing needs. EHHOP also spearheaded a landmark program, the Quality Improvement Council, from which a number of initiatives have sprung based on intense quality review of our services. Quality based research on healthcare and education continues to prosper at a feverish pace, and our Chronic Care Program treating our sickest patients has achieved a level of rigor and standard of quality that is truly exceptional and a model nationally. Finally, student members of one of our most recent additions, the Access to Care Team, has defined themselves as unique and powerful advocates for the myriad of social services that our disenfranchised population need to achieve better health.

Once again, EHHOP’s students, social workers, nurses and physicians have created an exemplary model of high quality interdisciplinary healthcare that continues to achieve remarkable heights each year.
According to the 2006 NYC Department of Health and Mental Hygiene Community Health Profile, East Harlem residents continue to experience greater challenges to attaining adequate health care than those in the rest of NYC. East Harlem adults are more likely to be uninsured (27%) than those in Manhattan (13%) and NYC overall (18%). Three out of every ten adults in East Harlem lack a regular doctor and more than 20% of East Harlem residents use the emergency department for routine health care. The average annual premature death rate in East Harlem is the second highest out of 42 NYC neighborhoods. East Harlem residents continue to experience dismally high rates of tobacco use, alcohol use and drug use and poorer than average rates of knowing their HIV status, getting help for depression and having a healthy baby.

Almost two thirds of East Harlem adults are overweight or obese; black and Hispanic residents are more likely to be obese than other residents. Complications related to chronic illnesses such as diabetes, high blood pressure and high cholesterol, respiratory disease, mental illness and drug abuse continue to top the list as leading causes of death for East Harlem adults. The lack of access to primary and preventive health care has led to poorer health outcomes in a vulnerable community where the percent of residents living below the poverty level is nearly twice that in Manhattan and NYC overall, over 20% are foreign-born, and a large proportion the population is conversant solely in Spanish.
Overview of EHHOP Clinic Structure

East Harlem Health Outreach Partnership

Medical Clinic

Gynecology Clinic
Mental Health Clinic
Nursing
Nutrition
Ophthalmology Clinic
Social Work
Year in Review

Over the past year, EHHOP has made great strides towards achieving its goal of becoming a primary medical home for its patients both through the addition of new services and through major expansion of existing programs.

Accomplishments at a Glance

• Established a new Nutrition Program with two certified Nutritionists providing counseling services to EHHOP patients in clinic

• Expanded support services for diabetic patients via the incorporation of a Nurse Practitioner who offers dedicated diabetes education visits

• Record-breaking fundraising achievements through our Annual Fastathon: $9,884 for patient services at EHHOP

• Two successful poster presentations on EHHOP’s Patient Advisory Group and on a Case Report of a False Negative Cluster in Rapid HIV Testing at the 2012 Society for General Internal Medicine Annual Meeting in Orlando, Florida

• Publication: Liberman, KM, Meah YS, Chow, A, Tornheim, J, Rolon, O, Thomas, DC. Quality of Mental Health Care at a Student-Run Clinic: Care for the Uninsured Exceeds that of Publicly and Privately Insured Populations. Journal of Community Health 2011: 733-740.

• Successful first year of the Patient Advisory Group

• Incredible expansion of the Access to Care Team to improve the referrals process

• Successful creation of a new relationship with Radiology that allowed EHHOP to secure 12 free DEXA scans per year for EHHOP patients.

• New relationship with the Mount Sinai Medical Center to expand and improve EHHOP’s website and face to the larger community in general

• Expansion of the Chronic Care Program
New Initiatives

Nutrition Program
Nutrition plays a vital role in health and wellness, particularly in patients with chronic conditions such as hypertension, diabetes, and hyperlipidemia. In keeping with the medical home model, EHHOP strives to meet the comprehensive care needs of its patients. To that end, the EHHOP Nutrition Program was re-launched in the fall of 2011. After an extensive search, EHHOP hired two excellent Mount Sinai Senior Clinical Dieticians, Ina Flores, MS, RD, and Natalie Kretzer, RD, CDN. Ina and Natalie provide six hours of individual nutrition counseling per month. In addition to offering a needed service to our patients, Ina and Natalie provide EHHOP students with the unique opportunity to observe and practice skills in dietary counseling, an area that is often under-emphasized in formal medical school curricula. In the coming year, EHHOP hopes to expand the nutrition program by offering group classes on common topics such as the diabetic diet.

Nursing Visits
In 2011, EHHOP's interdisiplinary services were further expanded with the addition of Nurse Practitioner, David Skovran. In recognition of the fact that many of our Chronic Care patients, particularly our diabetic patients, benefit from more frequent support, NP Skovran has stepped in to provide dedicated insulin, glucometer, and diabetes teaching visits, between-visit medication adjustments, and other needed services. As with nutrition, NP Skovran brings a skill set that is often under-taught in medical school curricula, and the opportunity to work with NP Skovran has been beneficial for our students and patients alike. In the coming year, EHHOP plans to further integrate NP Skovran into the Chronic Care program as a co-manager of select patients.
Access to Care Team

This year, in an effort to improve the completion of specialty referrals, the Access to Care Team (ACT) began to follow patients longitudinally, helping patients to navigate the complex process of insurance screening and referral completion. In addition to serving as patient navigators, ACT members also screened patients for other needs (dentistry, affordable housing, literacy classes, etc.) and provided information about community centers that offer these services free of charge or at a low cost. ACT members screened more than 150 patients during 2011. From September 2011 to March 2012, ACT performed over 110 benefits screenings and assisted EHHOP patients with over 70 specialty referrals. ACT leaders and members presented these changes at the National Conference for Student Run Free Clinics in Long Beach, California.

Patient Advisory Group

The Patient Advisory Group (PAG) was initiated in 2010 and held its first two meetings in 2011. Through meetings with the PAG, we were able to hear about patient experiences and to critically appraise our existing services. Changes implemented in response to patient feedback include clarification of phone communication outside of clinic, the establishment of a dental referrals process, the implementation of patient navigators to guide patients through external referrals, and the development of fitness and language exchange programs.

Chronic Care

This year, EHHOP made significant progress in the expansion and restructuring of the Chronic Care program. Approximately 42 patients received longitudinal care, through the work of 14 Chronic Care seniors, 10 Chronic Care Teaching Seniors, and EHHOP’s directors. This year, clearer protocols for documentation and transitions of care were created, which improved continuity of care. A comprehensive curriculum for MD/PhDs was created in conjunction with Student Education to provide curricular support and in-clinic training for MD/PhD chronic care students.
New Initiatives Cont’d

EHHOP Language Assistance Program
This year, the EHHOP Language Assistance Program began to provide comprehensive Spanish language services to EHHOP staff, volunteers, and patients. Interpreters work in clinic to translate not only during clinical encounters but also to patients over the phone and patients being signed in to clinic. They also work closely with the Community Outreach committee, the Access to Care Team, and Clinic Managers to translate documents necessary to communicate with patients. In 2011, the program provided at least one interpreter at almost every Saturday clinic. In the future, we hope to establish an interpreter workshop for screening and training of volunteer interpreters, recruit more volunteer interpreters from non-medical student pools, and increase use of the Pacific Interpreter phone when interpreters are not available.
Quality Improvement Council

In 2011, EHHOP piloted the Quality Improvement Council (QIC). This group of 18 students worked under the guidance of the student Steering Committee and internal medicine faculty to formally assess and test interventions to meet four challenges that EHHOP faces in delivering optimal quality care: 1. increasing completion of external specialty referrals, 2. reducing the frequency of patient no-shows to clinic, 3. expanding the pool of physician volunteers and 4. ensuring proper training and consistent usage of the foreign language interpreter phone system. QIC teams presented their findings and interventions at a special QIC Grand Rounds on March 20th, 2012.
EHHOP Vital Statistics

EHHOP served 710 patient visits this year, an increase from 624 in 2010. 522 of these were return visits. Many of the 188 individual patients treated in 2011 were young, working, Latino immigrants living below the poverty line. A significant portion of EHHOP patients are also American-born citizens who did not receive health benefits through their low-wage employment, but made too much money to qualify for Medicaid.

The average age was 43 years. Individual patients were seen in clinic an average of 4 times. The most common diagnoses at each encounter were diabetes, hyperlipidemia, health maintenance, and depression. These conditions, as in most urban primary care clinics, have consistently been the most common reasons for healthcare visits at EHHOP since its opening eight years ago.

### Patient Snapshot

<table>
<thead>
<tr>
<th># of Patients in 2010</th>
<th>188</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Patient Encounters</td>
<td>710</td>
</tr>
<tr>
<td># of Female Patients*</td>
<td>106</td>
</tr>
<tr>
<td># of Male Patients</td>
<td>81</td>
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*One patient’s gender was undetermined

### Top 5 Diagnoses

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Count</th>
</tr>
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<tbody>
<tr>
<td>Diabetes</td>
<td>154</td>
</tr>
<tr>
<td>Health Maintenance</td>
<td>153</td>
</tr>
<tr>
<td>Hypertension</td>
<td>97</td>
</tr>
<tr>
<td>Hyperlipidemia</td>
<td>84</td>
</tr>
<tr>
<td>Depression</td>
<td>55</td>
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### Encounter Types

<table>
<thead>
<tr>
<th>Encounter Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Visits</td>
<td>386</td>
</tr>
<tr>
<td>Lab Only Visits</td>
<td>127</td>
</tr>
<tr>
<td>Social Work</td>
<td>98</td>
</tr>
<tr>
<td>Mental Health (return and new)</td>
<td>61</td>
</tr>
<tr>
<td>Women’s Health</td>
<td>31</td>
</tr>
</tbody>
</table>
Financial Highlights

In the year 2011, EHHOP totaled $40,420.68 in revenue and $36,438.20 in expenditures. The main revenue sources were from the annual Fastathon, the AAMC and Atran Grants, and the Annual Letter Writing Campaign.

Due to anticipated declines in grant funding in the near future, increased efforts were placed in developing new relationships with the Alumni Office and the Development Office at Mount Sinai, as well as finding and applying for new sources of funding through grants that support free clinics in New York. Faculty, Departmental, and Alumni donations account for a significant proportion of EHHOP revenue. EHHOP also continues to receive invaluable and much appreciated support from the Mount Sinai Medical Center – The Mount Sinai School of Medicine donates administrative personnel and accounting/financial services, and the Mount Sinai Hospital’s Internal Medicine Associates, Ophthalmology, Radiology, and OB/GYN departments donate clinical space, supplies, laboratory, and radiologic services. Furthermore, numerous Mount Sinai physicians, including a large number of faculty from the Division of General Internal Medicine, offer care at no cost or at reduced costs.

The Mount Sinai Student Council and the Alumni Council donated a total of $7,900 in 2011 for volunteer development and education, which has allowed EHHOP to focus nearly all of our fundraising on patient care that includes social work, nutrition, medications, and sub-specialty referrals. In 2011, we used 97.4% of donations, fundraising earnings, and external grants for patient services and 2.6% for general operation expenses.

**EHHOP Revenue: 2011**

<table>
<thead>
<tr>
<th>Grants</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Atran Foundation Grant</td>
<td>$12,400</td>
</tr>
<tr>
<td>AAMC Caring for Community Grant</td>
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</tr>
<tr>
<td>Individual Donations</td>
<td>$23,122.66</td>
</tr>
<tr>
<td>Amazon Donations</td>
<td>$398.02</td>
</tr>
<tr>
<td>Donation from MSSM Administration</td>
<td>$2,500</td>
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<tr>
<td><strong>TOTAL REVENUES, 2011</strong></td>
<td><strong>$40,420.68</strong></td>
</tr>
</tbody>
</table>

**EHHOP Expenditures: 2011**

<table>
<thead>
<tr>
<th>Patient Services</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy</td>
<td>$22,087.07</td>
</tr>
<tr>
<td>Social Work Services</td>
<td>$12,624.35</td>
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<tr>
<td>HIV Testing</td>
<td>$787.50</td>
</tr>
<tr>
<td>General operation, supplies, misc.</td>
<td>$939.28</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES, 2011</strong></td>
<td><strong>$36,438.20</strong></td>
</tr>
</tbody>
</table>
Clinical Care

Clinical care at EHHOP became more structured and rigorous during the year 2011. Although we recognize EHHOP as a volunteer organization, we have worked to ensure that the roles in which students are fundamentally responsible for patient care are more robust, placing a special focus on improving clinical care and increasing responsibility and accountability. This is reflected in both the Teaching Senior and the Chronic Care programs at EHHOP.

The Teaching Senior Program

The Teaching Senior program expanded this year to involve 15 senior medical students. With the growth of the program and the goal to make EHHOP a patient centered medical home, the focus of the Teaching Senior program this year has been on accountability and clinical care. Teaching Seniors (TSs) prepare detailed pre-clinic plans for all patients seen in EHHOP’s Medical Clinic. They coordinate with ancillary services, such as the Access to Care Team and Social Work, and attending physicians before clinic to solidify patient plans. Moreover, TSs maintain continuity of care of patients through detailed Sign Outs at the close of each Saturday clinic. These Sign Outs are integral for interpreting patient results and solidifying plans of care. Through the Teaching Senior program at EHHOP, senior medical students have had an unprecedented opportunity to promote clinical care at EHHOP under the supervision of our physician mentors.

Quick TS Visits: To expand the care that is provided to EHHOP patients, the Quick TS Visit was amplified in the Fall of 2011. These visits are focused medical visits, conducted by the Teaching Senior with Attending supervision. Patients with chronic conditions are scheduled for these visits in between regularly scheduled chronic care appointments. This year, Teaching Seniors conducted over 20 Quick Visits, the most common of which was for diabetic fingerstick review/medication titration and blood pressure check/medication titration. Through Quick TS visits, clinical care has expanded to allow for closer monitoring and better care for EHHOP’s sickest patients.

Labs Teaching Senior: The role of the Labs TS was created in 2011. The Labs TS assists with laboratory and clinic procedures, including phlebotomy, Pap smears, and EKGs. TSs are also trained in administration of HIV Rapid Testing. Furthermore, the Labs TS serves as an educator, instructing junior medical students in select procedures. The role of the Labs TS has provided an additional avenue for teaching and clinical care for Teaching Seniors at EHHOP.
Clinical Care Cont’d

Teaching Seniors as Teachers: Through work with Dr. Rainier Soriano, the Teaching Senior program focused on teaching skills development. This year, TSs recorded and later reviewed their morning teaching sessions. These individualized sessions with Dr. Soriano were an opportunity for TSs to hone their skills and become more effective educators.

Chronic Care Program Teaching Seniors: This year, 10 TSs served as mentors in the Chronic Care Program at EHHOP. Through this program, each TS served as a mentor to 3rd year or MD/PhD Chronic Care seniors and supervised the care of 3-4 Chronic Care patients. Through the Chronic Care program, TSs have taken on additional responsibilities as mentors and providers of longitudinal care.

The Chronic Care Program

The Chronic Care program expanded this year to involve 14 Chronic Care seniors. Protocols for improved EPIC documentation and clearer hand-offs of care were created to promote continuity of care. Participants had expanded roles as Chronic Care seniors, attending the majority of clinic visits and following up with their patients between visits. With the extraordinary commitment of the Chronic Care seniors, TSs and EHHOP’s directors, patients received excellent longitudinal care and unprecedented access to care at EHHOP. These improvements in Chronic Care were reflected in both the InterACT and MD/PhD programs.

Senior Clinician performs diabetic foot exam using microfilament
Clinical Care Cont’d

**InterACT Program:** The 2011-2012 year marked EHHOP’s second year as a clinical site for the Interclerkship Ambulatory Care Track (InterACT) clerkship, Mount Sinai’s Longitudinal Ambulatory Care Clerkship for select third year medical students under the direction of Dr. Yasmin Meah. Through InterACT, a select group of 3rd year medical students participated in the longitudinal care of a panel of chronic care patients at EHHOP. The curriculum this year focused on advocacy, continuity of care, and expanding access to care for chronic care patients. The patients cared for by these students were the most complex patients at EHHOP. In InterACT’s second year of implementation, EHHOP continues to be a top-rated clinical venue for its access to direct patient care and advocacy. The InterACT program is funded by a grant from the Josiah Macy Jr Foundation.

**MD/PhD Program:** Through the MD/PhD Chronic Care program at EHHOP, pre-clinical MD/PhD students are given curricular support and in-clinic training in longitudinal primary care. In the 2011, select MD/PhD students who had participated in Chronic Care in the past continued to follow their chronic care panels. Additionally, a new group of MD/PhD students participated in the pilot year of the MD/PhD Chronic Care program. Through work with Student Education, these participants attended a series of EHHOP-focused, primary care didactic sessions. They also began to develop skills as Senior Clinician volunteers in the medical clinic. The students who completed the program are now following panels of Chronic Care patients with the supervision of TS mentors.
Ancillary Services

While 2010 was a year of rapid expansion for the clinical services provided by EHHOP, 2011 was a year where EHHOP focused on solidifying these new ancillary services and improving the quality of care they deliver.

Mental Health Clinic
This was a particularly exciting year for EHHOP’s Mental Health Clinic. In July 2011, Dr. Jessica Wiegand, a psychiatry PGY-4, joined the EHHOP Mental Health Clinic as its new Mental Health resident. She took over for Drs. Jan Schuetz-Mueller and Katherine Mallory, which left a need for one additional mental health clinic each month to effectively treat all of our patients in need of psychiatric care. With the help of Dr. Craig Katz, two fourth year medical students, Olanrewaju Dokun and Toni Martello, and the Mental Health patient coordinator, Heidi Adlman, EHHOP was able to start its first monthly student Mental Health clinic in August of 2011.

Olanrewaju and Toni have developed their own panel of patients to whom they provide monthly care under the supervision of Drs. Craig Katz and Anna Rosen. Additionally, a new referrals protocol was initiated for the mental health clinic, in which referrals from the medical clinic are screened by Olanrewaju and Toni to ensure that appropriate screening tools, such as the PHQ-9 and GAD-7, are administered. This has allowed for a more efficient use of our mental health resources. EHHOP’s weekly group therapy session, "El Grupo," which focuses on building and enhancing patients' life skills, has also continued to thrive under the leadership of Drs. Craig Katz, Hansel Arroyo, and medical student Heidi Adlman.

Ophthalmology Clinic
Under the guidance of Dr. Tamiesha Frempong and two motivated medical students, Vanessa Mallol and Brett Weinstock, the once-monthly EHHOP Ophthalmology clinic continued to flourish this year. Operational protocols and a formulary was established, a relationship is being built with ophthalmologic subspecialty clinics at MSMC, and student interest and involvement grew substantially. Additionally, this ancillary service has allowed us to provide all our diabetic patients with the appropriate yearly diabetic retinopathy screenings at no cost to the patient; almost all of our diabetic patients have been seen since the clinic opened eighteen months ago. Through a new partnership with New Eyes for the Needy, EHHOP is also now able to provide free prescription eyeglasses to our patients. New Eyes is a voucher-based program that enables those in financial need to purchase new eyeglasses. Because of this program, our patients are able to go to a local optician in East Harlem to purchase glasses at no cost. Since beginning this partnership, we have been able to provide free prescription eyeglasses to 14 of our patients.
Women’s Health Clinic
The once-monthly Women's Health Clinic has also thrived this year under the guidance of Drs. Adam Jacobs and Gizelka David-West and the leadership of medical students Cassie Bigelow, Aleha Aziz, and Sha Sha Lu. The OB/GYN faculty has shown incredible interest and enthusiasm in this clinic, with attending physicians often signing up six months in advance to volunteer as preceptors. A formal teaching curriculum for student volunteers is nearing completion, and a relationship with the gynecology clinic staff has grown. Most importantly, our patients with gynecological and reproductive health issues who cannot be managed in our primary care clinic are getting the specialty care they need.
During the 2011 term, EHHOP made a total of 216 specialty referrals. Many of these referrals were to EHHOP’s own specialty services, including the Women’s Health Clinic, the Mental Health clinic, the Ophthalmology Clinic, and Nutrition. Several external specialty referrals were offered free of charge by generous physicians and departments within the Mount Sinai Community, including Dermatology, Colonoscopy, X-Rays, Ultrasounds, and DEXA Scans. For mammogram services, EHHOP referred patients to the Breast Exam Center of Harlem. EHHOP also established a relationship with the Italian American Cancer Foundation to offer free patient mammogram screenings twice a year on-site through a Mobile Mammogram Program. Finally, the Visiting Nurse Service of New York provided our patients with discounted referral services.

All remaining referrals were obtained in collaboration with Mount Sinai’s Resource Entitlement and Advocacy Program (REAP), an office that helps clients to obtain and retain health care services in a variety of ways. They often assist EHHOP patients with referrals by helping them to determine their Charity Care level so that they can pay a reduced fee for the appointment. Many EHHOP patients fall into the lowest economic tier and receive a Charity Care 1 level. EHHOP also provides a twenty dollar voucher to help pay for a patient’s first specialty clinic visit outside of EHHOP. This year, members of the Access to Care Team acted as patient navigators to help guide EHHOP patients through the REAP process and complete specialty referrals.
Pharmacy

Through partnerships with the Mount Sinai Medical Center Employee Health Pharmacy and Metropolitan Pharmacy, we have been able to provide critical medications and medical supplies for our patients at EHHOP at no cost to the patient. Our clinic prescribes from a student-researched cost-effectiveness based EHHOP formulary.

**Total Pharmacy Expenditures for 2011:**

$22,087

EHHOP prescription expenditures in 2011 totaled $14,190 for medications obtained via the Mount Sinai Pharmacy and $7,896 for supplies obtained via Metropolitan Pharmacy. The majority of overall cost is attributable to diabetes medications for patients with chronic conditions who have made EHHOP their “medical home.”

**Total Cost of Diabetes Care for 2011:**

$9,285

In 2011, EHHOP partnered with New Eyes for the Needy to provide free prescription eyeglasses to our patients.

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Teaching Senior helps to organize and distribute patient medications.
Social Work Services

EHHOP is deeply committed to improving the psychosocial and economic well-being of its patients. Our patients’ low socioeconomic levels result in numerous hurdles to attaining good health. This year EHHOP recruited a third social worker, Maia Alejandro, to supplement the work of Omayra Rolon and Leslie Garcia. All three social workers are deeply committed to EHHOP patients and are essential to EHHOP’s ability to provide social work services during every Saturday clinic. In addition to their clinical services, the social workers serve as invaluable educators for our Access to Care Team and for all students at EHHOP. It is through their guidance and support that EHHOP student volunteers learn a more comprehensive understanding of the biopsychosocial aspects of disease.

A total of 105 social work visits were provided in 2011; a total of 62 of these visits were for new patients.
Patient Education

Junior Clinician Patient Education
This year, Junior Clinicians were trained to provide 5-minute patient education lessons on a variety of chronic diseases often seen at EHHOP, including diabetes, obesity, asthma, high cholesterol and hypertension. They were provided with pamphlets from the New York City Department of Health (NYC DOH) in clinic and expected to include an update on their patient’s intended goals in the written patient encounter note. In the future, we hope to develop more systematic ways to monitor and evaluate this to ensure that Junior Clinicians provide these lessons and that patient’s receive follow-up at their next clinic appointment.

Diabetes Education
During 2010, five hours of curriculum were developed to educate our newly diagnosed diabetic patients. Although many patients indicated interest, few were able to attend the sessions. The lessons were subsequently adapted to 30-minute lectures and pamphlets to provide one-on-one consultation for Mount Sinai School of Medicine’s annual Community Health Fair. In the future, we hope to further these efforts by collaborating with EHHOP’s two new certified Nutritionists.

Nutrition Education at the GreenMarket
From the Spring to the early Fall, the Mount Sinai Medical Center holds a GreenMarket for community members. During the GreenMarket, EHHOP provided short lessons on blood pressure, how to reduce down salt and sugar intake, how to control portions, and how to distinguish between healthy and unhealthy fats. These lessons, in collaboration with EHHOP’s Community Outreach Subcommittee, will continue into the upcoming year.

Exercise Initiative
This year, a new exercise education initiative was devised at EHHOP. This new initiative will provide EHHOP patients with a Saturday walking group, in-clinic exercise demonstrations that can easily be done in a patient’s own home, and yoga classes. The classes will start in March 2012.
Student Education

The 2011/2012 academic year was an exciting beginning for this new position on the EHHOP Steering Committee. Intended to solidify the pedagogical role EHHOP plays in the medical school, it was carved out of the Chief Teaching Senior role at the end of 2011. Specific activities included the formalization of the EHHOP Cases-of-the-Week, the Grand Rounds series, clinical skills nights, and a MD-PhD didactic series.

Case of the Week
This year, the Case of the Week Series became more formalized. The process consisted of more regular releases of the cases, more rigorous editing process, and a more collaborative approach. Cases are provided to the entire medical school community and focus on common or high-yield primary care complaints.

Grand Rounds
Last year, EHHOP held two Grand Rounds as a part of its series. The first took place on February 15th, 2011 and was titled, *A primary care approach to right upper quadrant abdominal pain* by Demetri Blanas (MS3) and Rachel Zhuk (MS3). The second took place on April 29th, 2011, and was titled *Making the call: when to send an EHHOP patient to the ED*, by Allison Kwong (MS3) and Peter Liu (MS2). Approximately 50 students attended each Grand Rounds.

Training Sessions
The senior clinician training night was conducted on July 5th, 2011 and taught approximately 80 recent third year students basic outpatient skills such as note taking and a focused history and physical exam. A clinical skills night was conducted on November 28th, 2011, and taught approximately 80 first and second year students skills in venipuncture, taking vitals, the diabetic foot exam, and intramuscular injections. Finally, eight MD-PhD didactic sessions were conducted with 5 MD-PhD students in the fall and winter of 2011. This curriculum focused on outpatient diabetes management, presenting, note-writing, and focused history and physical exam skills.
Community Outreach

During 2011, EHHOP furthered efforts to strengthen relationships with its patient population and the East Harlem community. The Community Outreach Subcommittee, comprised of 10 medical students, worked closely with Ann-Gel Palermo, Director of Operations at the Mount Sinai School of Medicine Center for Multicultural and Community Affairs, and leaders of East Harlem community health and service organizations to develop collaborative community health programming. Projects under development include classes for mothers with young children about reducing Emergency Department visits as well as sessions for uninsured East Harlem residents about the variety of free and low cost health resources available in the community.

The EHHOP Community Outreach Subcommittee ran its first two meetings of the Patient Advisory Group (PAG), a focus group in which patients talk freely about their experiences at EHHOP. The goal of the PAG is to better understand and respond to the needs of our patients. Changes to clinic have already been implemented in response to patient feedback which have improved patient-clinician communication and clinic flow. The Community Outreach Subcommittee is also working to implement a Patient Satisfaction Survey, and has begun publishing a newsletter updating patients about changes implemented in response to their feedback. The newsletter also includes information regarding events and resources in the community.

By remaining active participants in the East Harlem Community Health Committee and other local meetings and events, we increased our visibility, identified important free and low-cost community services to bolster our external resources database, and forged longstanding community partnerships. These partnerships have enabled EHHOP to facilitate patients’ access to community-based education, exercise workshops, and subsidized fruits and vegetables. Through these efforts, we hope to close the gap in health disparities and empower our patients to maintain a healthy lifestyle through prevention and self-management of chronic illnesses.
Scholarly Research

As EHHOP completes its eighth year serving the patients of East Harlem, an ongoing challenge created by the complexity and dynamism of our clinic is how to critically appraise the effectiveness of our care, to test interventions intended to improve care and to assess initiatives designed to improve the quality of student education. Research and dissemination of our model are cornerstones of our efforts and scholarship from our program continues to flourish.

Publications


Manuscripts

1. Jessica L. Taylor, Yasmin S. Meah, Jeffrey A. Tornheim, David C. Thomas. Hypertension Outcomes at a Student-Run Clinic for the Uninsured. (under review at *Journal of General Internal Medicine*)

In this assessment of hypertension care at EHHOP, we demonstrate comparable outcomes to insured practices.

2. Lindsey Stephens, Yasmin S. Meah, Nicole Bouvier, David C. Thomas. Voluntary Participation in a Medical Student-Organized Clinic for Uninsured Patients Significantly Augments the Formal Curriculum in Teaching Underrepresented Core Competencies. (Submission pending)

In this evaluation of the acquisition of core competencies, mandated by the Accreditation Council for Graduate Medical, among medical students, we show that participation in EHHOP leads to time-dependent enhancement in attainment of competencies in outpatient preventive care, health care financing and delivery, and advocacy.
Scholarly Research Cont’d

Posters


In this poster, we detailed the development and implementation of a patient panel created to provide feedback on clinic operations and patient satisfaction.


In this poster, we described incidents of false positive HIV test results using commercial rapid testing supplies and the changes in protocol that were made in response.


In this poster, we described the implementation of a formalized student unit that screens patients for access to health insurance and directs them through the specialty referrals process.
Scholarly Research Cont’d

Oral Presentations

In this poster, we characterize the establishment of an in-house mental health clinic at EHHOP to evaluate and manage patients with psychiatric diagnoses.

New and Ongoing Projects
2. Assessment on the efficacy of an EHHOP-directed clinical skills workshop for pre-clinical students.
3. Determination of the impact of the opening of the EHHOP Women’s Health Clinic on gynecological care provided by EHHOP.
4. Enumeration of the dollars in care that EHHOP and Mount Sinai provides to the East Harlem Community.
1. Expansion of Nutrition Program
As hypertension, diabetes, and hyperlipidemia are the chronic conditions that continue to impact most of patients at EHHOP, we hope to expand the new Nutrition program to help our patients improve their lifestyles and to adopt nutrition habits that will help them to control these conditions. To this end, we plan to work with our two nutritionists, Ina Flores and Natalie Kretzer, to develop group education sessions. We also hope to increase the role that medical students play both in educating EHHOP patients about nutrition and also being mentored by Ina and Natalie in the valuable skill of nutrition counseling.

2. Development
The Annual Appeal
This was the second year of the Annual Appeal fundraising drive, which allows students, alumni, parents, and friends of EHHOP to contribute to our mission. EHHOP plans on expanding this very successful endeavor in years to come.

Society of Friends
EHHOP hopes to continue to secure funding that will provide it with longevity, sustainability, and the ability to expand to both provide more comprehensive services to patients and to treat a larger number of patients. In the future, we hope to develop a strong network of individuals who feel strongly about EHHOP and want to dedicate their time, energy, and resources to helping EHHOP achieve these goals.

3. Official EHHOP Website
The EHHOP website (http://www.mssm.edu/education/medical-education/east-harlem-health-outreach-partnership) will be undergoing a massive overhaul to revamp both its appearance and content. The goal of the new design is to facilitate patient understanding of EHHOP as well as all of the medical resources available for the East Harlem community. In addition, by pairing with the marketing department at Mount Sinai, we hope to pursue a massive social campaign in the East Harlem community to raise awareness about EHHOP and the resources it has to offer. We hope to use the campaign to find more support for EHHOP to foster collaboration and new ideas for the clinic.
2011-2012 Steering Committee

**Clinic Co-Chairs**
Jessica Taylor  
Temitope Awosogba

**Operations Chair**
Anthony Andriotis

**Chief Teaching Senior and Chair of Clinical Care**
Sheila Antony

**Chief Clinical Manger and Chair of Clinic Management**
Anne Levenson

**Community Outreach Chair**
Devora Aharon

**External Development Chair**
Robert Brenner

**Information Technology Chair**
Brandon Kandarian

**Internal Development Chair**
John Chiosi

**Patient Education/ Social Work Chair**
Jillian Nickerson

**Pharmacy Chair**
Adam Phillips

**Physician Recruitment Chair**
Salina Bakshi

**Referrals Chair**
Thomas McBride

**Research Chair**
Andrew Chow

**Student Education Chair**
Demetri Blanas

**Student Recruitment Chair**
Akash Kumar

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Steering and Executive Committees

The EHHOP Steering Committee (SC) is composed of sixteen 2\textsuperscript{nd} and 4\textsuperscript{th} year medical students and MD/PhD students. Each of its thirteen student members is tasked with managing one aspect of clinic operations or patient care. Together, the group defines the future direction of the clinic and collaborates on projects and initiatives to help EHHOP improve. Many SC members also operate with the assistance of sub-committees of student volunteers. This allows EHHOP to utilize the strength of an active Mount Sinai student body. The Steering Committee officially meets once a month while it’s members collaborate with each other on a constant basis.

The Clinic Co-Chairs, Operations Chair, Chief Clinical Manager, Chief Teaching Senior, Program Director, and Medical Director compose the Executive Committee (EC). The EC meets once a month to plan new initiatives and ensure that EHHOP is appropriately integrated into the Mount Sinai School of Medicine and Hospital.
2011 Volunteers

Teaching Seniors
Shyam Amin
Anthony Andriotis
Sheila Antony
Aleha Aziz
Cassie Bigelow
Demetri Blanas
Edward Chu
Yan Epelboym
Gillian Heinecke
Allison Kwong
Andy McCullough
Noga Ravid
Lindsey Stephens
Jessica Taylor
Rachel Zhuk

Clinic Managers
Heidi Adlman
Laura Belland
Pamela Daher
Steve Dickson
Maira Fonseca
Akash Kumar
Annie Levenson
Sha Sha Lu
Vanessa Mallol
Cody Ooka
Amar Parikh
Nicolette Schlichting
Nikki Schwartzman
Celine Sparrow
Ellie Wiener

Finance Team
Annalays Garcia
Brett Marianelli
Alex Peterson

Interpreters
Beatriz Cole
Annalays Garcia
Mark Kurzrok
Guido Lancman
Jennifer Long
Wilnelly Martinez
Christian Pean
Gilberto Torrijos
Laura Veras

Mental Health Clinic Coordinators
Heidi Adlman
Olanrewaju Dokun
Toni Martello

Ophthalmology Clinic Coordinators
Alexander Barash
Vanessa Mallol
Brett Weinstock

Women’s Health Clinic Coordinators
Aleha Aziz
Cassie Bigelow
Sha Sha Lu

Community Outreach
Rachel Abbott
Joseph Blankush
Mark Kurzrok
Erin Li
Sylvia Qiu
Nathan Raines
Paul Trubin
Ann-Marie Tukpah

Access to Care Team
Devora Aharon
Temitope Awosogba
Alexandra Bachorik
William Chen
Chloe Ciccariello
Robert Conley
James Cornwall
Rajan Dang
Justin De Biasio
Allie Gips
Jennifer Li
Soo Kim
Mark Kurzrok
Claire Lewis
Hannah Oakland
Michael Pan
Siri Sastry
Joseph Scarpa
Raina Wallace
Ryan Wang

Attending Physicians
David Banach
Adi Bar-Lev
Steve Berns
Sara Bradley
Marianne Camargo
David DeLaet
Emily Gallagher
Newsha Ghodsi
Peter Gliatto
Gina Jae
Michael Kim
Katherine Krauskopf
Mikyung Lee
Jenny Lin
Khoi Luong
Rebecca Mazurkiewicz
Yasmin Meah
Jennifer Neuman
Olga Pristoupa
Jennifer Reckrey
Jonathan Ripp
Gabriela Rodriguez
Vinita Sehgal
Brijen Shah
Rainier Soriano
Theresa Soriano
David Thomas
Joseph Truglio
Rajesh Vedanthan
Eva Waite
Erika Yamada

Referrals Liaisons
Kimbia Arno
Rajan Dang
Marie Hennelly
Annie Kim
Grace Liao
James Pak
Gabrielle Phillips
Ammar Siddiqui

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Tameisha Frempong MD
Leslie Garcia LCSW
Steven Itzkowitz MD
Adam Jacobs MD
Craig Katz MD
Michelle Keane
Natalie Kretzer, RD, CDN
Jacob Levitt MD
Yasmin S. Meah MD
David Muller MD
Linda Pagan RN
Ann-Gel Palermo, PhD
Omayra Rolon LCSW
Anna Rosen MD
Michelle Sainte
David Skovran, NP
David Thomas MD
Jessica Wiegand MD

EHHOP 2011-2012 Steering Committee

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References:


Faculty Guidance

The success of our student-run clinic would not be possible without the supervision and direction provided by our phenomenal and dedicated faculty mentors. Their guidance allows EHHOP to meet organizational challenges and to maintain an extremely high standard of clinical excellence every week. Program Director Yasmin Meah, MD was awarded the prestigious 2007 AAMC Humanism in Medicine Award, while Medical Director David C. Thomas, MD has won the esteemed 2008 Mount Sinai Physician of the Year Award and the Society of General Internal Medicine’s Mid-Atlantic Region Internal Medicine Clinician-Educator Award.

Our Partners

Our endeavor would not have been possible without the generous contributions of our partners.

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Mount Sinai Internal Medicine Associates and the Visiting Doctors Program

Medications
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Metropolitan Pharmacy

Home Care
Visiting Nurse Service of New York

Laboratory Services
Mount Sinai Laboratory Services

Radiology Services
Mount Sinai Radiology Department

Mammogram Services
Italian American Cancer Foundation

Website
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