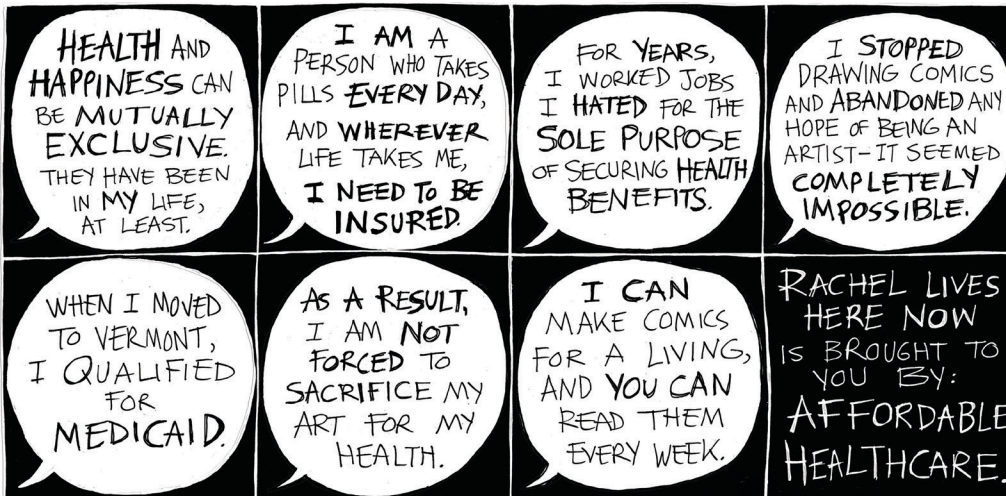


Empowering Art Through Accessible Care



■ When local cartoonist Rachel Lindsay began coming to CHCB, she noticed a significant difference in patient/provider relationships compared to those she'd had in the past. No stranger to the complexities of health care, Rachel's recently published book, *Rx: A Graphic Memoir*, recounts a period in her life when she was involuntarily hospitalized after the stress of working for a pharmaceutical ad campaign triggered a severe manic episode. The high stress job was, ironically, something she took in order to secure employer-sponsored health coverage in the interest of managing bipolar disorder.

When Rachel moved from New York to Vermont to pursue comics, she was paying more than her rent in Cobra

carry-over coverage until another cartoonist suggested she apply for Medicaid. Medicaid not only offered financial relief, but freedom to focus on her comics career (she now has a successful weekly strip), more health care options, and ultimately greater autonomy in her care management.

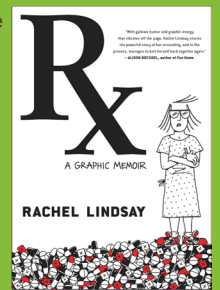
"To have a place in town where I can have a conversation and ask questions and feel like I'm maturing in my understanding of what's going on with me...there's a level of empowerment that comes from being informed," Rachel says of her experiences with CHCB. "I generally trust the doctors there in a way I haven't really trusted other doctors," she adds, noting that experiences like those in her book left her feeling a need to be very guarded.

Graphic Medicine: Comics as a Health Care Tool

"Graphic Medicine" denotes the role that comics can play in the study and delivery of health care. It is an increasingly popular medium for making educational materials more fun and accessible

for patients of all ages and backgrounds.

CHCB will be bringing Graphic Medicine tools to our Pearl Street Youth Health Center thanks to a generous donor!



Since the publication of her book, Rachel has been traveling and speaking at conferences, including a recent talk at Columbia University as part of their Narrative Medicine Program. Narrative Medicine focuses on co-creating a medical narrative between the patient and provider.

"I feel like that's already what I experience with my doctors at CHCB, especially my psychiatrist," she says of their patient/provider partnership. "Given how sensitive my medical situation is and the level of PTSD I have from previous experiences, to have a psychiatrist be an ally to me has made my life easier."

"It's nice to feel that I can have an actual relationship with my providers. I don't feel like they have somewhere else to be - they're present with me in a way that isn't something I've experienced before."

-Rachel Lindsay, CHCB Patient

A Note from Alison

"...our true work is building relationships."

- Alison Calderara, CHCB CEO



The new language of health care is complex and technology driven. We're no longer a doctor's office, we're an "enterprise." The electronic medical record, heralded as a timesaver and quality innovation, draws caregivers to a screen and away from the patients in front of them. Checking boxes means quality and data drives health care decision-making. While these new technologies are essential to manage in a modern health care environment, we can't ever forget our

true work is building relationships.

We open our doors to people facing what could be the worst day of their lives. We greet them with a smile, welcome them with kindness, and do our best to meet a variety of needs which are often complex and delicate. From our Front Desk staff and Schedulers to our Medical Assistants, Nurses and Providers, we strive to be a compassionate, trauma-informed organization across the board.

Our bedside manner can't be manufactured; it only comes from health care providers delivering our care through the lens of our mission.

We're always grateful for the community's support as we continue to develop innovative, welcoming initiatives to make sure no one is left uncared for. Look at all we're doing, just in this newsletter.

Thank you!

A handwritten signature in black ink that reads "Alison".

A Q&A with our Shelter Manager

We sat down with Anne Leaver to talk about our third season operating Burlington's only Low-Barrier Homeless Shelter, where guests are accepted regardless of sobriety or mental health challenges.

■ **CHCB:** What do you think guests appreciate most about the shelter?

Anne: We're accepting of them. Because it's low-barrier, we don't sanction people if they come in inebriated. If needed, we help them get to ACT 1 or the emergency room, but we don't ostracize them or hold it against them when they come back.

CHCB: How do shelter guests spend their time during a typical evening?

Anne: Because of the cold, there's usually a rush when we first open, then everyone gets in and settled. A small group likes to watch videos, another group likes to play cards together, and we even have a guest that makes videos which is pretty

cool. There's a meal each night so people mill around and socialize while they have dinner and then it gets quiet.

CHCB: What do you think guests wish people understood about homelessness?

Anne: That they're regular people who fell through the cracks. A lot of us, when you really think about it, are just as close to that cliff. Many of our guests are really hard working but still don't make enough money to pay rent. We even have some guests in their sixties and seventies. Most people experiencing homelessness don't want to be stigmatized. There's really a wide variety, there isn't a caricature of homelessness.



CHCB: What do most guests do when the shelter closes for the season?

Anne: I think a lot of people will go back to camping or outside living. Some guests are hikers, so will go off and hike during the warmer months. Our goal that we help them with is that they move on to some kind of housing program.

CHCB: Are there any creature comforts that donors could easily provide?

Anne: We go through a lot of decaf coffee, powdered creamer, and sugar, so there's an ongoing need for those things. Everyone would appreciate it!

Part-Time Work with Full-Time Impact

CHCB knows that the need for dental care is **simple, yet profound...**

Since 2004, CHCB's Dental Center has been the central point of access to oral health services, especially for low-income and/or uninsured kids. In 2018, CHCB was fortunate enough to receive funding from the United Way of Northwest Vermont to hire Devan Bevins in a brand new Dental Case Manager position. With a background in social services, this position is designed to address crucial dental issues that would otherwise go untreated. Providing support 10 hours per week, Devan works with our highest-risk families to break down barriers in order to get their children in for the critical dental appointments they need.



Since September, Devan has been able to provide support to **36** children.



Devan works to prevent DCF reporting, proactively manage cases, and ensure connection to other CHCB services such as addiction treatment or child psychiatry. Devan also works with parents/guardians who don't have the luxury of paid time off during typical dentist hours, do not possess a personal vehicle, lack English language skills, or face other complications. CHCB knows that the need for dental care is simple, yet profound, which is why Devan's support is so valued. Now there's something to smile about!

Stepping Up to Deliver Peace of Mind for Children



CHCB child psychiatrists, Dr. Harris Strokoff and Dr. Margaret Spottswood, perform consultations and evaluations as part of overseeing the Child Psychiatry Consultation Clinic.

■ CHCB took an innovative approach to the critical shortage of child psychiatrists in the State of Vermont by launching a Child Psychiatry Consultation Clinic (CPCC) last year. The shortage of specialists in our state has led to lengthy wait times for a child or adolescent to receive a psychiatric evaluation. Improved

access to child psychiatry leads to earlier intervention, which can significantly improve outcomes in youths struggling with psychiatric illness. Undertreated psychiatric conditions can increase the risk of suicidality, school refusal or delinquency, substance use, and chronic medical illness.

CPCC is a novel pilot project for CHCB, in that it addresses the needs of Vermont children across the state who

"Facing the alternative of an 8-10 month wait to see another child psychiatrist in the area was unbearable as a parent. The CHCB psychiatrist was able to assess my daughter's diagnosis, confirm her prescription, and consult with her pediatrician to ensure accurate, high quality continuity of care. **CHCB was there when no other provider could be. This was of immeasurable value to us.**"

-Parent of CPCC Patient

receive care from Medical Homes other than CHCB. By providing this support, waitlists for child psychiatry in the region will hopefully shorten and allow for improved access for children in need of more specialized assessment and/or ongoing psychiatric care. In the span of just one year, CPCC has already helped 40 children and families receive the care they need in order to promote optimal mental health.



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Community Health Centers of Burlington's Seventh Annual

Salud

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Thursday, April 11 at 6:30 pm
The Essex, Vermont's Culinary Resort & Spa

"Salud" is the premiere local auction of upscale wines, craft beers and unique experiences with a food and wine pairing.

Tickets on sale now: www.chcb.org/donate/salud

The Community Health Centers of Burlington is a 501(c)(3) non-profit and Federally Qualified Health Center funded in part through a grant from the U.S. Department of Health & Human Services and generous community support. CHCB is a Health Center Program grantee under 42 U.S.C. 254b, and a deemed Public Health Service employee under 42 U.S.C. 233(g)-(n).

All CHCB programs and services are accessible to people with disabilities. This newsletter is available in alternative formats upon request.

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