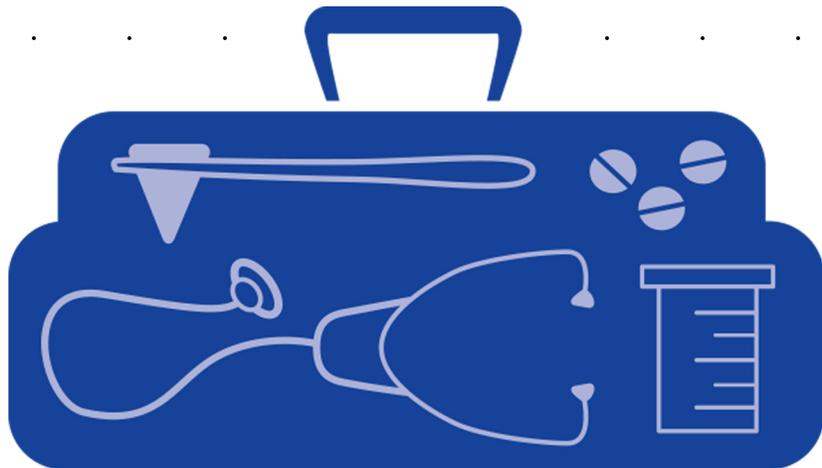


# W F C C Q4 2020 NEWSLETTER

A DISPATCH OF THE WORCESTER FREE CARE COLLABORATIVE



*accessible healthcare for central Massachusetts*



MEMBER PROGRAMS

- Epworth (Mon 6-8pm)  
64 Salisbury St, Worcester
- St. Anne's (Tues 6-8pm)  
130 Boston TrnPk, Shrewsbury
- Greenwood (Wed 6-8pm)  
215 E. Mountain St, Worcester
- Free Health Stop (Wed 6-8pm)  
152 Main St, Shrewsbury
- Akwaaba (Thurs 6-8pm)  
67 Vernon St, Worcester
- Worcester Islamic Center  
Social Services (Thurs 6-8pm)  
248 E. Mountain St, Worcester
- St. Peter's (Thurs 6-8pm)  
929 Main St, Worcester

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- Ashvin Antony
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- Hannah Caringal
- Jane Lochrie, MD

ILLUSTRATOR

Zubin Nawab

The Worcester Free Care Collaborative is a group of free medical programs that provide health care services to uninsured or underinsured patients in the greater Worcester area. All programs welcome anyone in need of services, regardless of age, race, gender identity, sexual orientation, or citizenship.

The opinions, beliefs, and viewpoints presented in this publication are not necessarily those of the sponsoring organizations. For personal health issues, the WFCC encourages readers to consult with qualified health professionals, whether through free medical programs or otherwise.

Letter from the Editor

The year 2020 has presented incredible challenges and hardships. The COVID pandemic swiftly upended the entire world and resulted in a prompt shift in healthcare methods and delivery. Healthcare institutions began focusing on treating the devastating symptoms of COVID patients and learning about the then-unknown disease progression. This shared trial brought to the surface and exacerbated several issues that plague society. Many faced severe consequences, including financial uncertainty, social isolation, and difficulty accessing appropriate healthcare. This pandemic has left an indelible mark on society.

It is the mission of the Worcester Free Care Collaborative to support healthcare initiatives that serve the uninsured and underinsured population in central Massachusetts. While the pandemic has made limiting in-person visits a necessary precaution to protect the community, especially vulnerable populations such as the elderly, clinic volunteers have risen to the occasion through measures such as telehealth, appointment-based visits, and patient outreach.

Patients can reach the telehealth service via Zoom on PC, Mac, iOS, or Android at the following address: <https://uso2web.zoom.us/j/6484747585>

Alternatively, patients can call +1 646 876 9923 (US Toll) and enter the following Meeting ID: 648 474 7585 #

After extensive research and development efforts, COVID vaccines are now beginning to roll out across the country in several phases. Infectious disease experts have noted their outstanding safety and efficacy. Despite this promising news, it is important to continue to follow safety precautions, including wearing a mask, maintaining appropriate physical distance, practicing proper hand washing and hygiene, and regularly cleaning frequented areas. Vaccines are a critical tool for fighting deadly infectious diseases, but are just one part of the measures to stop COVID.

Through this shared trial, we can recognize the commonality of the human condition. The struggle of the pandemic should be utilized as a catalyst to build a stronger foundation for society where more people are treated with respect and dignity, more people are included and cared for, and more people have access to the healthcare that they need.

As the year comes to a close, we look forward to a new year where hope, kindness, and compassion prevail. The Worcester Free Care Collaborative gives our warmest wishes to each and every patient and volunteer. We sincerely hope that 2021 brings meaningful change and good health for all.

Thank you for supporting this critical mission,  
Sahil

SAHIL A. NAWAB  
Media Coordinator, WFCC

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## Insider Perspective on Telehealth at the Worcester Free Care Collaborative

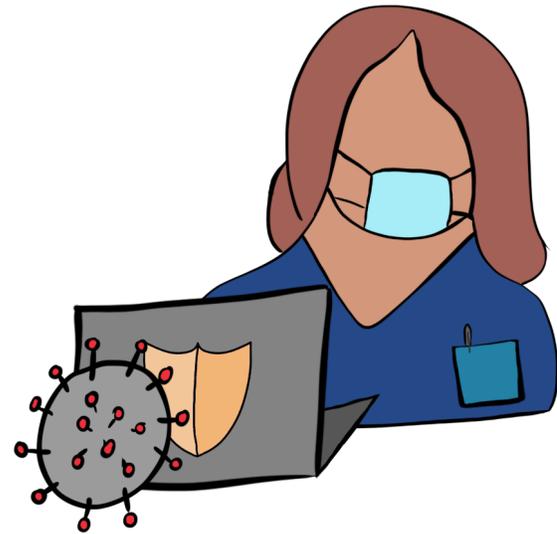
By Mina Botros  
WFCC Co-President and Telehealth Lead

The COVID pandemic has affected our community in countless ways. Not least of these is the impact it has had on our ability to provide healthcare to those who need it most. As the necessary social-distancing, screening, and mask-wearing precautions are taken to minimize the spread of the virus, healthcare facilities, including the free medical programs in Worcester, have had to adapt. During the first peak, many of our programs acknowledged that it was in the best interest of both volunteers and patients to close down, but as cases came down, some were able to re-open. Doing so meant continued evaluation of our protocols and the surrounding situation. As the winter came in, many of these same clinics found it wise to pause in-person services in order to minimize the risk of spreading the virus. UMass students, the clinic directors, and their teams kept patients and their welfare on their minds, however. Telehealth services were implemented and augmented as our teams grew more experienced with providing patients with quality care from the safety and comfort of their homes and offices.

Two things have been clear throughout the pandemic: acute and chronic medical needs continue to affect our patients during this time, and our volunteers are eager to help their neighbors.

Much like at any other time, those who are uninsured or underinsured continue to struggle accessing basic medical, let alone personal, needs; if anything, this time has exacerbated many of those needs. People still need insulin management and hypertension medications. Amidst the rising uncertainties, patients need to know that their concerns are not falling on deaf ears, that they have not been forgotten by the medical community.

The UMass medical students, in cooperation with the program medical directors and university administration, have set up a successful Telehealth model. We invite any and all patients in need of care to join us virtually via Zoom or over the phone to voice their medical concerns. A team of students accompanied by a physician preceptor take a history, determine an



appropriate plan of action, and put the patient's medical care in motion. Our dedicated case management team ensures that they have access to the resources they need in between visits. It is clear from our patients' responses just how appreciative they are that these services are still being provided. One such patient wrote to us saying:

“Thank you so much for being here for all the people that society doesn't want to acknowledge, [you're] saving lives and helping families. Your service is deeply appreciated. I pray for all of you”

There are other tangible benefits to our work as well. Whether we like it or not, Telehealth is a growing part of the future of medical care. It's important to acknowledge that it has its place, especially in times like these. Hopefully, these will be few and far between. Our efforts with the virtual free clinics provide an opportunity for both current physicians and medical students in their first and second years to interact with Telehealth in a manner that was previously unavailable to them. In addition to its core purpose, it offers a positive learning environment for all who are involved.

In these ever-changing times, it's important to come together for such meaningful community efforts.

## Volunteer Highlights

Omar Taweh and Danielle Heims-Waldron, UMass Medical Students

“Given the COVID pandemic, the Epworth clinic has been closely monitoring the situation to remain open to patients as much as possible. Per the recommendations of the University of Massachusetts Medical School, only fourth-year medical students are allowed to volunteer at clinics in-person. Since mid-December, the Epworth Free Medical Program has been employing a hybrid virtual/in-person clinic. Medical students in their clinical years work with Dr. James Ledwith, a family medicine physician closely tied with the clinic, to provide care to the local Worcester population. Currently, preclinical medical students are managing the logistics of the clinic virtually by scheduling doctors for shifts, calling patients with test results, and scheduling follow ups. Earlier this year, we transitioned from paper to electronic documentation for patient encounters and the incoming PCCs (Primary Clinic Coordinators) and CCs (Clinic Coordinators) are currently being trained to use the new EHR.

One of the challenges we have faced over the past few months is the variability in the number of patients the clinic sees each night. Epworth fortunately accepts both pre-scheduled and walk-in patients. However, due to the constantly changing COVID-19 situation and the needs of the Worcester community, anticipating patient volume has become difficult. As a result, we have run into some difficulty by sometimes overestimating the number of patients and enlisting the support of too many on-site volunteers and students.

We have also run into some issues with some patients misunderstanding the written COVID screening questionnaire, and subsequently presenting to the onsite care provider with symptoms that they had not mentioned via the screen. That being said, these issues have been resolved after we began screening most patients at their vehicles.

The clinic, while operating a little differently now, is

determined to provide great patient care, and aims to broaden the scope of its services in the near future. Our team is looking forward to engaging in more patient-facing work in the spring, once there is a reduction in COVID cases and the vaccine is more accessible to the local community.”

Jennifer Sohn, UMass Medical Student

“Despite how unusual this year has been, the needs of patients who use the free medical programs have not changed. People still need medical advice, prescription refills, and work or school physicals. While volunteering with the WFCC telehealth initiative I have seen that we are still able to help patients with these necessities, despite the logistical challenges posed by delivering care online. In particular, volunteering with our case management team has felt especially important. What has changed for many of our patients is their employment status, with many laid off or furloughed during the pandemic. With the loss of a job can come the loss of access to insurance. The fact that we can still try, even over Zoom, to help folks navigate MassHealth is wonderful. We can also refer those in need of work physicals to local health centers or to one of our clinics that remain open, hopefully helping these individuals secure their new job. Overall, I've felt that even though telehealth clinics can't meet every need of our community, they at least help us do the best that we can under these challenging circumstances.”



For additional information about volunteering at the free clinics, please visit: [worcesterfreeclinics.org/volunteer.html](http://worcesterfreeclinics.org/volunteer.html) or send an email to [worcesterfreeclinics@gmail.com](mailto:worcesterfreeclinics@gmail.com)

## Featurette: Telehealth for Free Medical Programs, Now and in the Future

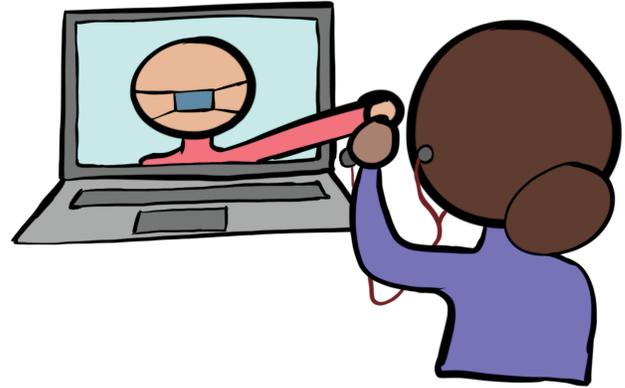
By Sahil Nawab

This year, we have seen radical shifts in the way that healthcare is delivered. Early on, the COVID pandemic forced many non-urgent medical visits to be cancelled, including at the free clinics, helping healthcare institutions reduce the strain on limited resources. Almost immediately, the WFCC embraced the idea of virtual visits by setting up a free telehealth program. This idea was born out of the need to continue treating patients who would otherwise be almost completely disenfranchised from the healthcare system. Their ailments and conditions did not simply disappear overnight. Instead, telehealth became a lifeline for the uninsured and underinsured population in central Massachusetts.

The gravity of the COVID pandemic has rendered telehealth a necessary compromise to in-person visits for the time being. Even as recently as last year, telehealth was seen as cold and impersonal. However, the rapid adoption of the technology has shown that the most important aspect of care is the depth of focus and quality of communication. This type of compassionate care is one of the hallmarks of free medical programs, where physicians are not restricted by administrative overhead and can instead focus on developing a warm connection with patients. Dr. Jessica Zitter, a palliative care physician, explains that “it’s not about the medium, it’s about the message, and the way it’s delivered.” Through the telehealth program, the volunteer physicians have been able to continue to reach patients despite the challenging circumstances.

In fact, there are a number of surprising benefits to telehealth. Dr. Emil Baccash, a geriatric physician, explains that physicians get most of the information they need from their conversations with patients. When patients are in a comfortable environment, such as their own homes, they are likely to be “more relaxed and feel less rushed.” Virtual visits allow physicians to interact more warmly, without having to don frightening personal protective equipment that would be necessary for an in-person visit.

Prior to the COVID pandemic, telehealth was seen primarily as a method to reduce costs. However, for



free medical programs, telehealth should instead be seen as a method to increase access to care. It erases geographic boundaries and allows patients to not worry about transportation or scheduling time off from work or from childcare responsibilities. Looking at telehealth technology through this lens leads to a mindset that encourages the build-out of necessary infrastructure to reach patients and break down barriers to healthcare for disenfranchised populations. It becomes easy to justify the need to invest resources in public facilities, such as keeping public libraries open for longer hours or providing dedicated equipment and tutorials in multiple languages.

However, free medical programs in particular must face the reality that some patients face serious difficulties accessing healthcare services virtually. Some may not have a capable device or an internet connection, while others may not speak English or may not understand how to operate their devices adequately. Addressing this need is an intense area of focus for many organizations, including the Worcester Free Care Collaborative. However, this cannot be a solitary endeavor. It requires a concerted effort from local governments and organizations to invest in public infrastructure and encourage more flexible workplace policies that allow employees to visit healthcare providers and care for their children and families. Solving these root problems will immediately improve the healthcare of the entire population.

Ultimately, telehealth is not a substitute for in-person visits. While the circumstances may force virtual

## Featurette: Telehealth for Free Medical Programs, Now and in the Future (continued)

visits to continue throughout the foreseeable future, it is not sustainable for all types of conditions. Some simply cannot be treated through telehealth. Healthcare institutions should determine where telehealth can be an effective way to help increase care, for example, in treating conditions such as depression, hypertension, or diabetes.

“Telemedicine was a solution to an immediate problem,” says Dr. Ateev Mahrotra, but perhaps it can become part of the long term solution too. When in-person visits return, telehealth can be used to augment the care that free medical programs provide and get more patients access to the care that they need. To do so requires defining a comprehensive telehealth policy that addresses the needs of both patients and providers with the explicit goal of increasing access to healthcare. Patients who still require in-person care or do not have access to telehealth services can still come in. Others, particularly for follow ups where it can be challenging to get patients to come back, may instead opt for a virtual visit. Setting up the facilities to provide this level of effective telehealth services at the free clinics requires funding and up-front investment from the community, local governments, and other institutions.

Continuing the use of telehealth, even well after the COVID pandemic ends, opens many potential avenues to bring free healthcare to the people that need it most. With the help of the local community and government, it is necessary to commit resources to bringing the idea of digital health to as many patients as possible. Telehealth is poised to be a transformative technology to increase access to healthcare for disenfranchised populations. However, it requires commitment and investment to make sure that patients are not forgotten about or left out as a result of structural deficiencies. Taking this avenue requires the support of the community and policymakers to turn this vision into a reality.

### Dossier

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