

simply

neighbors

a community benefit report



Penn Medicine

University of Pennsylvania School of Medicine
University of Pennsylvania Health System



Our responsibility to the community is growing stronger and reaching farther

Creating powerful programs to benefit the community starts with a belief that good health care is a fundamental right shared by all. By doing our part to make people healthier, we're helping to build a stronger foundation within the community – a foundation from which opportunities emerge and a brighter future comes into focus.

Within this context, Penn Medicine's responsibility is greater than ever. As the economy has declined, a record number of people in our community are left with limited or no resources for medical care. In these circumstances, our mission becomes more important than ever, and we mobilize with greater intensity to do what we always have: provide underserved communities with access to care. Our efforts expanded further beyond the walls of our hospitals and clinics, as we strengthened our commitment to low-income residents, the elderly, the homeless, isolated communities and other vulnerable populations.

Our guiding principle is unchanged: to provide quality care without compromise. *Need* is the only prerequisite.

Because we can make a difference

Dedicated to the related missions of medical education, biomedical research and quality patient care, Penn Medicine consists of the University of Pennsylvania School of Medicine and the University of Pennsylvania Health System. For the 12th consecutive year, the School of Medicine has been ranked among the top five in the nation in *U.S. News and World Report's* survey of top research-oriented medical schools. In addition, many of our specialty research training programs were judged among the nation's best. The Health System includes three renowned hospitals: the Hospital of the University of Pennsylvania (HUP); Pennsylvania Hospital (the nation's first hospital); and Penn Presbyterian Medical Center.

With these credentials, we have the means to make a difference. We achieve our goal of making health care accessible to the underserved and uninsured through a variety of community-based programs – many of which have helped influence or change public policy. On any given day, you'll find the physicians, nurses, medical students and volunteers of Penn Medicine sharing their skills, their talents and, most important, themselves for the betterment of the community.

This report details just a few of the initiatives and programs we supported in 2009, and the people who helped us fulfill our responsibility to bring better health within reach for everyone.

Our responsibility
starts with recognizing a need





When it comes to health and healing, a simple truth prevails: all the technology in the world cannot measure up to the power of caring. While Penn Medicine prides itself in being state-of-the-art in the services we provide, we recognize that kindness and empathy are what patients appreciate and respond to most. Building trust and sharing knowledge are paramount to the success of our commitment to the community.

Filling a growing need

As the number of uninsured residents in the Philadelphia region continues to soar, Penn Medicine rises to the challenge. The Health System's emergency and trauma facilities treat well over 100,000 patients yearly. At clinics around the city and region, Penn physicians, nurses and medical students join together to provide preventive and follow-up care.

Located in Penn Presbyterian Medical Center, **Penn Family Care** provides affordable routine care and helps patients address medical issues before they develop into more serious problems. Today more than 35,000 community residents visit the center. The center's staff is equipped to treat heart disease and other chronic conditions, and help patients keep potentially high-risk conditions – such as high blood pressure, diabetes and obesity – in check. The practice consistently sees patients on a same-day basis – including those in need of acute care.

Walk-ins more than welcome

The **United Community Clinic (UCC)** is a free health clinic coordinated by University of Pennsylvania students from the schools of Medicine, Nursing, and Social Work. Located in the basement of a church at 42nd and Girard in the East Parkside community of West Philadelphia, UCC draws upon the resources and expertise of this multi-disciplinary group of physicians, nurses, medical students and social workers in order to offer a wide range of services to the surrounding community. On Tuesday nights, as many as 25 walk-in patients arrive at the clinic for physicals, HIV testing, cholesterol and vision screenings, blood pressure testing and medication, information about chronic diseases, and referrals.



“Man, this is like the 60s”

Arthur was impressed by the “vibe” of the clinic. As his wife and daughter sat behind the white linen screen that created a makeshift exam room, Arthur looked around and smiled. Here he was in the basement of a 200-year-old West Philadelphia church, watching medical professionals volunteering their time to provide care to the residents of an underserved community. He thought about all of the people who had walked through the doors of the clinic, and all the good that had been done here. “Man, this feels like the 60s,” he observed.





“One of the most engaged audiences I have ever seen...”

Homeless men are not your typical audience for a wellness lecture. Yet, that is who have been benefiting from regular lunch lectures at **Old St. Joseph's Church** in Old City. Once a month a team of nurses from Pennsylvania Hospital spend an afternoon at the church educating homeless men on a variety of health topics. The nurses had been seeking a new way to reach out to the community and the church expressed a desire to team up with them. They met with church leaders and together decided to offer a monthly lecture series, featuring topics chosen by the men.

“These gentlemen come for the lunch and stay for the lecture. I have to say they are one of the most engaged audiences I have ever seen,” says Michelle Conley, Clinical Director for Women's Health and Psychiatry. “It is very clear they are thirsty for the information and have little resource to obtain it.”

Each month a different nurse leads the discussion, based on the lecture topic. Nurses from a variety of disciplines have participated, including psychiatry, ER, cardiology, diabetes and others. Michelle adds: “It is remarkably rewarding to me listening to our nurses present each month. They have all done a tremendous job, not only in delivering the content but also in engaging the guys.”

“Who really cares about someone like me?”

Last summer a gentleman approached me after the lecture to thank us for coming every month. After talking for a few minutes he told me how he had gone to a doctor after our last meeting – because after hearing our lecture he thought maybe he had a “heart problem.” He said he had been concerned about it for a while, but had not pursued care. He felt that no one really cared about someone in his situation.

But in our education sessions with these men, we stress that everyone deserves to be treated equally, and deserves quality health care. He told me how those words resonated with him and he decided to seek out medical care. “After all,” he said, “here are these nice nurses coming here and you seem to care.” He then revealed that he had indeed had a heart attack and was now on medicine for his blood pressure.

I have to tell you that is exactly why I love being a nurse. The smallest of gestures can make a profound difference for people.

Michelle Conley
Clinical Director for Women's Health and Psychiatry

Taking it to the streets

Thanks to various Penn programs, the homeless men and women of Philadelphia have more support options than ever. The **Hall-Mercer Homeless Program** provides care and resources for people who live on the streets or in shelters, or have a history of homelessness. As the behavioral arm of Pennsylvania Hospital, Hall-Mercer offers a full range of services to the city's mentally-ill or displaced population.

With its outreach initiative, Hall-Mercer Homeless Services staff members go out onto the streets of Philadelphia to seek out and talk to homeless men and women, encouraging them to get the help they need. “This is a ‘front-line’ program,” says Will Sassaman, Director of Targeted Case Management at Hall-Mercer. “We talk to anyone who appears to be homeless, whether they're living on the streets, in shelters or encampments. We try to connect with people who have discontinued care and get them back on track with the services they need.”

In the late 1990s, the City of Philadelphia joined in partnership with Hall-Mercer to address the needs of the city's homeless population. The program also trains members of the police force and various city agencies on how to work with the homeless in getting the support and services they deserve.





On a frigid night 25 years ago, a homeless man often seen on the campus of the University of Pennsylvania fell asleep near 38th street. He never awakened... because he had frozen to death. Upon hearing of this tragedy, a small group of caring students, clergy and local residents formed the University City Hospitality Coalition – offering one “meal of hospitality” per week to anyone who chose to accept. Volunteers were recruited from neighborhood organizations and donations were informally solicited. As the program gained popularity, the meal program was expanded to include more evening meals and lunches. Within a few short years, UCHC was incorporated and became a federally recognized nonprofit organization.

Being without a home should not mean going without food

Since the mid 1980s, the **University City Hospitality Coalition (UCHC)** has been dedicated to fighting hunger and homelessness in the University City neighborhood of West Philadelphia. To this end, UCHC provides meals to homeless and hungry individuals in University City six days a week. UCHC is much more than a soup kitchen, however. Its mission is to provide a variety of support services for the poor and homeless. For instance, during the Wednesday meal, a medical clinic staffed by doctors and medical students from the University of Pennsylvania School of Medicine offers medical advice, vaccinations, screening tests, and referrals.

The University City Hospitality Coalition relies entirely on the donated time and energy of concerned individuals, health care professionals and organizations.





Ease Up On
Portable Grap



“What will this mean to my family?”

Hector Padraza was in his early 30s when he moved with his wife and two small children from Mexico to South Philadelphia. He took a job in a restaurant and quickly settled into his new life in the United States. That new life came with indulgences that were not a part of his previous life in rural Mexico – such as unhealthy food choices. He had also become more sedentary. In less than a year, he gained 150 pounds. But that wasn't what brought Hector to the Puentes de Salud clinic to see Dr. Matt O'Brien. He had begun to experience excessive thirst and a frequent need to urinate, and was concerned about the possible cause.

Dr. O'Brien immediately recognized that Hector was experiencing common symptoms of diabetes. Hector's obesity – the primary cause of Type 2 diabetes – supported Dr. O'Brien's hunch. When tests revealed that Hector was in fact diabetic, he began to weep and wondered aloud: “What will this mean to my family?” A hardworking and devoted family man, Hector was concerned that his illness might hinder his ability to earn a living – and that caring for his illness might place demands on his loved ones. There was a history of diabetes in Hector's family, so he had seen first-hand how the illness can affect the lives of others.

Dr. O'Brien then spent nearly an hour talking to Hector about diabetes, how to keep it under control and how to monitor blood sugar. “Diabetes is a complicated disease,” explains Dr. O'Brien. “It can't be fully addressed in 10-minute office visits.”

Hector was placed on a treatment program that included dietary changes, exercise and medication. Over the course of the next several months, Hector and his family became interested and engaged in his care. His wife began cooking healthier meals. He started riding his bike to work. He played soccer. As a result of these lifestyle changes, Hector's weight began to drop dramatically. Within just three months, his medication dosage was cut back as his blood sugar dropped. After nine months, Hector lost nearly 100 pounds. Moreover, his diabetes was cured and he no longer required medication.

Hector was so grateful for the help and care he received at Puentes de Salud, he has offered his time to help other diabetic patients. “You've given something to me,” he says, “and now I want to give back.” Hector has been selected by Puentes as a potential Peer Educator, to share his experience to help inspire others. In this role, Hector would serve as a “community health worker,” trained to provide basic health information to others in the Latino community who suffer from diabetes.

Special needs create a new approach to delivering care

Several years ago, a team of Penn doctors began their mission of better serving the health care needs of the undocumented Hispanic population. After conducting a series of town meetings, health fairs and screenings, the doctors were armed with the information they needed to spearhead the formation of **Puentes de Salud**, a non-profit organization serving South Philadelphia's growing Latino population.

“Puentes de Salud” means Bridges To Health – an apt name, given its goal of bringing low-cost, high-quality health care and social services to the community. Volunteers consisting of Penn physicians, nurses and social workers provide care to more than 800 patients, roughly 15% of whom are diabetic. Puentes de Salud also provides community members with access to health education programs, while addressing social factors that influence community health.

Overcoming barriers to provide needed care

An important part of any community program is reaching out to isolated communities. The **Unity Clinic** does exactly that – by providing primary care services to low-income Asian immigrants. The clinic's patients consist mostly of non-English speaking Indonesians, as well as Vietnamese patients. Despite linguistic barriers and a lack of health insurance, patients receive the care they need to help manage chronic illnesses. In addition, the clinic provides the opportunity for students from Penn's Asian Pacific American Medical Student Association to obtain meaningful experience in providing health care to this underserved community.

Penn's Asian Health Initiatives are spearheaded by the School of Medicine's Department of Family Medicine and Community Health. In partnership with the Philadelphia Department of Public Health and several community and faith-based organizations, the Penn team has been providing free influenza and pneumonia vaccinations to low-income Asian communities since 2004. At the same time, the program has been an educational resource for students pursuing health care professions from other institutions, including Drexel University, Thomas Jefferson University Hospital and Temple University.



“One of the luxuries of volunteering at Puentes is that we can spend the time necessary to provide patients with the information and tools they need to get better. We don't have to be confined to schedules.”

Matt O'Brien, MD
Co-Director of Puentes de Salud

Helping the mentally ill integrate into the community

For people with serious mental illness, the world can seem like another planet, making it a challenge to relate to their surroundings or their peers. But like everyone else, people with mental illness deserve the chance to live in the community – to be valued for their abilities and for what makes them unique. That’s what community integration is all about – and it’s the mission of the **UPenn Collaborative On Community Integration**.

As part of the University of Pennsylvania’s Department of Psychiatry, the UPenn Collaborative is conducted in partnership with The Clearinghouse at the Mental Health Association of Southeastern Pennsylvania and Horizon House, Inc. This project is among the first of its kind to focus on community integration of people with psychiatric disabilities.

“People would consider this program cutting-edge in psychiatric treatment,” says Mark Salzer, PhD, Associate Professor of Psychology in Psychiatry at the Hospital of the University of Pennsylvania. “The program is unique because it focuses on community integration. Our objective is to help mentally ill people have high-quality lives beyond medication.

We want to get the word out that people with serious mental illnesses can go to school, can develop friendships, can date and get married, can vote. We develop programs that help them to be successful.”

To accomplish its mission the Collaborative works to identify obstacles that prevent people with mental illness from being full members of their communities. Staff members work with agencies and local government to support community integration and expand the range of opportunities for people with mental illnesses – to enable them to be active, equal members of society. What’s more, many mentally ill people have been led to believe they cannot succeed in school. With the Collaborative’s education support program, they gain the guidance and support they need to return to high school or college... and graduate.

From rock bottom to self-assured professional

Toward the end of her abusive 22-year marriage, Karen – a mother of three young adults – hit rock bottom. She isolated herself in her home for three years, barely seeing anyone outside of her family. She attempted suicide more than once. Her first step toward recovering her life was a decision to attend a class at Community College of Philadelphia (CCP). Upon discovering she was a good student, Karen enrolled in Horizon House’s Education Plus program. Working in conjunction with the UPenn Collaborative On Community Integration, this program provided Karen with the supportive educational services she needed to stay in school. She even joined a Horizon House trauma group for abused women and began sessions with an outpatient therapist to treat her depression.

Karen thrived in college, earning high grades and beginning to work part time, first in the CCP Center on Disability (where she had received services), and then for K-Mart, where she soon became a supervisor. Initially, she had difficulty being around people, but she gained confidence as she began to recognize her capabilities. This confidence, in turn, led to new achievements. She attained her Associate’s degree and now works full time as a secretary for a government agency, while continuing to take classes. Perhaps most important, Karen’s recovery has enriched her relationships with her children.

With the help of Horizon House and the UPenn Collaborative, Karen found the courage to leave her damaging marriage and has rebuilt her life as a self-assured professional woman.



Transitioning from hospital to home

Far too often, patients who are released from the hospital find themselves going back for additional care. In fact, in recent years, hospital re-admission rates have been rising at an alarming rate. In response to this trend, Penn Medicine initiated **Transitions in Care** – a program that improves hospital-to-home transitions and reduces re-admission rates in our hospitals.

In particular, Transitions in Care benefits older patients and the chronically ill. To qualify for the program, patients must be 65 or older and have a specific chronic disease, such as diabetes or heart failure. Patients qualify regardless of income level or insurance status. Each patient is assigned a specially trained nurse practitioner, who tends to the patient each day while hospitalized. Then, once the patient is discharged, the assigned nurse practitioner continually monitors his or her recovery through regular home visits and 7-day-a-week phone contact. In many cases the nurses will accompany their patients on follow-up visits to the doctor. This monitoring continues for up to three months after a patient's release from the hospital. It's a process that helps patients stay connected to their physicians and in compliance with their discharge orders. While recovering at home, patients continue to receive the attention and care they need to stay out of the hospital or emergency department.

Mary Anne Daley, Associate Director of Penn Care At Home, says the Transitions In Care program helps patients become their own advocate and improves outcomes. "It's all about being proactive," she explains. "What I love about this program is that it empowers the patient. They know what to ask their doctors. They know what they need to do to take care of their chronic illness – today, tomorrow and down the road."

Her wheelchair is "collecting dust"

When 72-year-old Irene Sisco, a resident of the Salvation Army Booth Manor in West Philadelphia, was hospitalized with heart failure, her legs had become so swollen she could no longer walk. To make matters worse, she had no knowledge of how to care for her condition. Through the Transitions In Care program, Irene learned how to take care of herself after her release from the hospital. "She's completely turned her life around," says Irene's TIC nurse, Charlotte Allen O'Brien. "She's very proud of herself." Irene gradually became more vibrant and able to get around on her own. Her motorized wheelchair is now "collecting dust."



Taking STEPS to build stronger families

Facing parenthood is daunting for anyone. For a teenager, it can be overwhelming. A little respect, support and compassion can help a teenaged mother-to-be through a challenging time.

The staff at **Women and Children's Health Services (WCHS)** understand. Located at Pennsylvania Hospital, WCHS is a non-profit ambulatory health care facility that specializes in the provision of obstetrical, gynecological and family planning services. As a community based practice, WCHS services extend well beyond traditional medical care with programs that address the diverse and changing needs of its patients and partners.

For instance, STEPS (Strategies to Encourage Parental Self-Sufficiency) is a program that provides counseling, education clinical care, social services and family planning to pregnant teens and their partners. WCHS also offers programs for those infected with HIV and other sexually transmitted diseases. Two examples are Loop of Love, which provides assistance to HIV-infected women and their partners, and Male Partners Services, a program for treating the male partners of female patients who have tested positive for sexually transmitted diseases.

In addition, WCHS offers Childbirth Education classes, covering a range of topics from how to recognize labor to early infant care. With its Healthy Woman Program (HWP), WCHS provides free breast and cervical cancer screenings and other services to uninsured women.

As a community grows, its health care needs grow, too

Several years ago an increasing number of Hispanic women began showing up in the Health System's emergency departments in need of obstetrical care. As part of the city's rapidly growing undocumented Latino population, these women had no insurance. It quickly became clear that there was a need to establish a way to provide quality health care to this underserved community. This need was fulfilled last September when Penn Medicine volunteers created **Latina Community Health Services (LCHS)**.

Led by Pennsylvania Hospital's Department of Obstetrics and Gynecology, LCHS focuses on delivering quality, free health care to women who have limited access to prenatal, gynecological and family planning services. Dr. Jack Ludmir, Professor and Chair of Pennsylvania Hospital's Department of Obstetrics and Gynecology, notes that Hispanic women have a higher incidence of diabetes and hypertension, creating a need for high-risk obstetrical care to prevent complications. "These women deserve the best care we can provide," he says.

Latina Community Health Services takes a "multidisciplinary" approach to care that blends the talents of medical students, nurses, nurse practitioners, social workers and doctors. Those who volunteer with the program are also able to evaluate how their participation has enhanced their understanding of the challenges facing the Latina immigrant population, and provide suggestions for improving the program.



"Every woman deserves prenatal care. Every woman, regardless of her situation, should be treated with dignity and respect. The reason I'm so proud of this program is that we do it because it's the right thing."

Dr. Jack Ludmir, MD
Department of Obstetrics and Gynecology
Pennsylvania Hospital





Through **collaboration,**
our reach and impact grow





Fostering specialized health care professionals

Located at 58th and Walnut, the **Sayre Health Center** epitomizes teamwork. Penn Medicine and Penn's Center for Community Partnerships have joined forces with Sayre High School in bringing a state-of-the-art health care facility to a West Philadelphia neighborhood. The center offers a range of services to students, parents and the community at large. Patients come in for primary and preventive care; immunizations; family planning; ob-gyn services; hearing, vision and dental screenings; and more – all provided by physicians in Penn's Department of Family Medicine and Community Health. The center also provides outreach, eligibility assistance and case management to young people and their families.

What is truly special about the Sayre Health Center is that Sayre students and staff actively work in partnership with Penn medical students, learning how to perform basic medical services. These include blood pressure readings, height and weight measurements and vision recordings. Students have the opportunity to shadow doctors and nurses, getting a head start on the pursuit of a career in the medical profession.

Pooling resources to achieve greater results

The challenges we face in bringing quality health care to isolated and underserved communities are varied and often daunting – and may be too great to be addressed by any one entity. Some of our most successful initiatives and accomplishments result from applying the collective resources of community residents and organizations; health care professionals; educational institutions; public health agencies; and local businesses – with the common goal of addressing a community problem. Through these partnerships we are able to support initiatives that truly change the health of the communities we serve.

“Bridging the Gap” between learning and doing

Collaboration is the essence of Penn Medicine's **Bridging the Gaps (BTG)** program. A partnership of the area's five academic health centers, BTG links the training of health and service professionals with the provision of health care to economically disadvantaged populations. The program gives medical students the opportunity to gain first-hand insight into the complex health care issues affecting the well-being of underserved urban communities. Faced with the realities of a community's profound needs – and the accompanying gaps in health care – students acquire the kind of experience that instills and cultivates a spirit of community service.

Through its various programs, which include the Community Health Internship Program (BTG CHIP), BTG Seminar Series and the BTG Clinical Program, students from more than a dozen health-related disciplines take part in BTG each academic year. The program has been recognized locally and nationally by a variety of community-based and corporate entities, including the City of Philadelphia, the Pennsylvania Department of Health, the Senate of the Commonwealth of Pennsylvania, the American Red Cross and others.

A new curriculum helps teachers *and* students

In classrooms throughout Philadelphia, teachers have faced frustration trying to find meaningful ways to connect with autistic children. A powerful solution evolved when teachers began working with Penn School of Medicine's AIMS (Autism Instructional Methods Study) program. Under the AIMS program, a new curriculum called STAR (Strategies for Teaching based on Autism Research) was implemented in kindergarten through second-grade classrooms throughout the city. The STAR program was developed at Portland State University in Oregon, and the collaboration with Penn represents the first and largest study of the program in an urban school district.

Based on the principles of Applied Behavior Analysis, the STAR program uses positive reinforcement to influence desired behavior. But it's not as simple as that may sound. The program encourages teachers to break certain skills down into smaller segments, helping the child to learn a larger skill in pieces or steps.

Rachel Coleman, a K-2 teacher at Birney Elementary has been using the STAR curriculum since September of 2008. She recalls how the program resulted in tremendous progress for one of her autistic students. "I began teaching receptive language first. This student learned to imitate the words I said when giving him a reward." Eventually the child was able to learn more words by associating them with pictures on a card. Through this technique, the child added 50 nouns to his vocabulary and, to the delight of his parents, began speaking much more at home.

"With this program, you can't just hand it off to teachers and say 'have at it,'" says Dr. David Mandell, Assistant Professor of Mental Health Services Research in Psychiatry. "The success of the program depends on the coaching and feedback we provide." Currently, 120 educators in the Philadelphia school district are working with Penn's AIMS program in using the STAR curriculum to teach about 400 students.

"Last year we had teachers who were ready to quit. They felt so defeated, they were crying in the classroom. Now, thanks to this curriculum, these same teachers have become our best teachers."

David Mandell, ScD
Assistant Professor of Mental Health Services Research in Psychiatry

Making great strides

I teach in a full-time K-2 autistic support classroom in West Philadelphia and have been using the STAR curriculum for the past year and a half. This curriculum requires a lot of training, planning, and organization in order to run effectively; however, the benefits are remarkable to the students in my classroom. The Penn AIMS program has assisted greatly in providing training and materials that make this curriculum possible. Each student's quality of life has been greatly improved by learning to complete some of the daily tasks we would normally take for granted.

One of my students who started this program two school years ago while in kindergarten used to have difficulty staying in one location for an extended period of time. He would attempt to run out of the classroom, out of the school building, and even try to run into the street, with no sense of danger. He always had to be under close supervision. Using a STAR program called "Come Here," we were able to help the child stay in one place until he was asked to respond to a simple command to move forward. That student can now stay in designated areas and come to an adult when asked – and more importantly, can remain safe when at home, in school, and in the community. And he can do it independently

This is one example of how the quality of life has been greatly improved for a student and family. I look forward to continuing to work with Penn's AIMS program and continuing to see my students grow with the STAR curriculum.

Megan Rodgers
Autistic Support Teacher
James Rhoads Elementary School



Autistic... and artistic

Several Philadelphia school children who have been taught with the STAR curriculum created paintings that now hang permanently in the entranceway of the Center for Autism Research at the Children's Hospital of Philadelphia. This is a compelling – and beautiful – testament to the program's success.



Aging gracefully

With its own proud history of aiding those less fortunate, Ralston House is home to Penn's geriatric health programs. These include the **Institute on Aging**, a consortium of Penn practitioners and programs advancing healthy aging; **Penn Geriatric Medicine Practice**; the **Penn Low Vision Center**; and the **Penn Memory Center**, which is the only Alzheimer's disease research center in the tri-state area designated by the National Institute on Aging. In addition, the **Ralston Wellness Program**, founded in 1991, gives older adults access to health and wellness programs, while helping them to enjoy a greater quality of life.

For many geriatric patients, physical limitations make it difficult, if not impossible, to visit a doctor's office or clinic for care. That's when the care comes to them. The **Truman Schnabel House Calls Program** allows patients to receive the care of Penn medical professionals in the comfort of their own homes. Nurse practitioners and physicians provide complete primary care for homebound patients – on a temporary or permanent basis, depending upon the needs of each individual case. To add to the overall success of a patient's home care program, experienced geriatric medicine practitioners coordinate care with other agencies, medical equipment providers and social workers.

Understanding and educating about Alzheimer's... and helping families cope

As the Baby Boom generation ages, a health care crisis looms. Today more than 5 million Americans suffer from Alzheimer's disease, and that number will soon increase dramatically.

This will not only put a tremendous strain on health care systems, but also on the caregivers and family members of those who suffer from the illness. Despite this harsh reality, Alzheimer's disease lags behind in research funding compared to cancer, heart disease and AIDS.

How could I say “no?”

“It is an honor, life-affirming, and honestly fun to be in this research. I feel valued and appreciated in every interaction I have here. My mother died from Alzheimer's. If my participation now could help produce knowledge so that someday, no other daughter will have to lose her mother that way, how could I say 'no?’”

Clarrise Allyne
Penn Memory Center Control Volunteer for more than a decade

That's why the **Penn Memory Center** has taken the initiative to create awareness of this heartbreaking illness. The Center's doctors and researchers are using a unique approach to gaining a better understanding of Alzheimer's: studying elderly people with *healthy* brain function, who participate as “normal controls” in vital studies. Why do some people maintain normal brain health into their 90s, and even beyond, while others develop dementia in their 60s or 70s? What makes some of us so resilient and resistant to brain failure?

Penn research has documented that the onset of dementia among Puerto Ricans occurs an average of eight years earlier than in the overall population. For this reason, the Penn Memory Center's outreach initiatives routinely include free Spanish language screenings in North Philadelphia's Puerto Rican community. Also, through Caregiver Education Groups in both English and Spanish, those who have a loved one with Alzheimer's learn ways to effectively cope with stress.

Support and information increases awareness

The **Abramson Cancer Center (ACC)** at Penn hosts a wide range of activities that provide education and support to address key areas of concern for cancer patients and their loved ones. Faculty and staff from the ACC develop and implement community education symposia designed to translate findings generated through cancer center research to community stakeholders. The ACC also has been an active partner in a wide range of programs and community events to address the needs of underserved populations and help raise awareness about the importance of cancer prevention, outreach, screening, and early detection. Periodic free screenings are held for skin, prostate and oral, head and neck cancers. In addition, the ACC is responsible for OncoLink (www.oncolink.org), an award-winning website with a mission to provide accurate cancer-related information at no charge.

An ounce of Prevention...

Injection drug use is one of the most significant causes of HIV and hepatitis C infection. That harsh reality resulted in the creation of **Prevention Point**, a non-profit group that works within the city to provide free, safe needle exchange. Every Wednesday morning, faculty from Penn's Internal Medicine Residency Program donate their time at the Prevention Point clinic at 13th and Washington – one of four such clinics throughout the city – where they provide medical care to anywhere from four to twelve individuals each session.

The type of care ranges from treating infections, abscesses, asthma and other conditions, to flu shots and vaccines for hepatitis and tetanus. For people with more chronic issues, the clinic provides referrals to primary care in the city. Prevention Point also offers HIV and hepatitis C testing, and many patients come to the clinic seeking rehabilitation programs to help them kick drug addiction.

According to attending physician, Dr. Karen Goldstein, Community Outreach Director for the Internal Medicine Residency Program, “Sometimes it’s just a matter of reaching out to individuals who are incredibly marginalized by the system and don’t have any other access to care. If we can help bring them into care or at least do some prevention and counseling, that is a great success. For many of them, the only other option they have is to go to the emergency room.”

The presence of Penn doctors at Prevention Point has helped the clinic build a word-of-mouth reputation within the community. “If people expect us to be there,” says Dr. Goldstein, “they are more likely to come.” Not only are they coming to the clinic, more and more patients are returning for follow-up care.

“This clinic is important because it allows us to reach a vulnerable and marginalized population in need of care. The work being done at Prevention Point in harm reduction is important and life-saving. We hope to help these efforts through acute medical management, getting people into continuity care and prevention.”

Karen M. Goldstein, MD, MSPH
Clinical Assistant Professor
Community Outreach Director for the Internal Medicine Residency Program
Division of General Internal Medicine

FIGHTing back against the spread of disease

The spread of infectious disease continues to be a concern – and nowhere more than in our own backyard. West Philadelphia has the area's highest rates for new HIV cases. Fortunately, the local HIV community has a resource devoted to the care and prevention of these diseases.

That's the primary mission of the **Penn Community Practice** at Penn Presbyterian. Led by infectious disease specialists, this clinic is heading up the cause for care and preventive education in the Philadelphia HIV community. The practice sees more than 1,000 patients annually, ranging from age 18 to 70 years – many of whom are underinsured. Patients receive a variety of services – from primary care to nutrition and pastoral counseling. In addition, all high-risk patients who come to the Penn Presbyterian emergency department receive immediate HIV testing at the clinic.

The work of Penn Community Practice reflects the University of Pennsylvania School of Medicine's commitment to stemming the spread of HIV. That commitment is also the reason for the practice's collaborative relationship with the Jonathon Lax Treatment Center. The Lax Center is part of Philadelphia FIGHT (Field Initiating Group for HIV Trials), a program that offers primary care, vaccines, and support to those living with or at high risk of developing HIV. When Lax Center patients need hospitalization, they are referred to Penn Presbyterian for care. In turn, Penn Presbyterian doctors spend time at the Lax Center for training in treating HIV patients.









As we teach, **we learn** at the same time

Shaping the future by sharing knowledge

Penn Medicine's devotion to teaching and learning extends to our community programs, where we place a premium on enriching tomorrow's health care professionals. As one of the nation's top research-oriented schools, the University of Pennsylvania's School of Medicine has gained renown for educating and training the next generation of leaders in academic medicine. Here, some of the nation's brightest students are taught to combine knowledge of intricate medical science with the humane delivery of care.

Through all of our endeavors, we continually share knowledge with the next generation of medical and scientific leaders. The school's research initiatives encompass an ever-expanding array of disciplines.

Raising the “health IQ” of high school students

Penn's Department of Family Medicine and Community Health continues its work with the **Drew Health Collaborative**, which brings real-world learning to students at Charles Drew High School in West Philadelphia. Family practice residents, medical students and Penn undergraduates teach health classes and run summer camps and after-school programs about health for children in kindergarten through eighth grade.

In the past year, particular focus was placed on two programs at Drew:

Health Ambassadors is an after-school health promotion project that educates Drew students on a variety of health-related topics – including smoking, obesity, exercise, asthma, hygiene, drug and alcohol use and healthy relationships.

Drew PREVENT is an intervention program for 6th and 7th grade students addressing the sensitive issues of interpersonal and intimate youth violence. The objective of the program is to teach self-esteem; peaceful conflict resolution; recognition of unhealthy and unsafe situations; methods of healing from traumatic experiences and violence prevention.

Through its various programs with the Drew Health Collaborative, Penn Medicine seeks to raise the “health IQ” of high school students, while promoting healthier lifestyles and disease prevention.





Through the eyes of the patient

While there is power in knowledge, there is *enlightenment* in understanding of what it truly feels like to be the patient. Created by the University of Pennsylvania School of Medicine, **Longitudinal Experience to Appreciate Patient Perspectives (LEAPP)** is a program that helps students develop a personal understanding of how chronic diseases affect the daily lives of patients and their families.

First-year medical students are given the experience of being matched with chronically ill patients. They visit their patients at home, talk to them on the phone, stay in touch by e-mail and even accompany them on doctor visits. In so doing, medical students acquire a type of meaningful education one can only obtain outside the walls of a classroom or laboratory.

The Lessons of LEAPP

Here are excerpts from essays written by former LEAPP students, recounting their experiences with the program:

“In short, my experience with my LEAPP patient has been incredible. She took me under her wing and really invited me in to experience her life and what she faces on daily basis. My experience with her was not limited by her illness and that made the whole experience much more powerful. She offered me a unique perspective into what it means to carry an illness and not let the illness carry you.”

“I never dreamt that my LEAPP session would turn into a teaching session. It was strange, because even though we were the ones in front of the patient in our white coats, it was him who was educating us about his disease. I realized at that moment how important it is to learn from your patients... In order to be a great doctor, I should always remember that my patients have invaluable pearls to teach me about their illness.”

“My lessons with our LEAPP patient have expanded to my greater medical school experience. For much of my first year in the clinics, I was ever-conscious of my position as a student when working with a patient... I realize now that there is a certain healthy humility in this dynamic. Each patient is capable of humbling us if we pay attention to their strengths, and when open to these lessons, we become better doctors. I am thankful for the time that our patient has given us and it is my hope that I can, one day, become as good a teacher as she.”

“I don’t consider myself an emotional person. Yet at that moment of uncertainty, when I was forced to face my fear that our young patient might be lost, I was completely overcome by that fear... I never supposed this baptism of fire was an intended part of LEAPP, but regardless, I’m glad it happened. I’m not as tough as I like to think I am, and for where my path is headed, I need to remember that.”

Bringing diabetes education to multiple communities

Keeping diabetes in check can be a challenge for anyone. For persons with intellectual and developmental disabilities – and those who care for them – the challenge is magnified. For this reason, Pennsylvania Hospital’s **Diabetes Education Center** created a program that provides caregivers with the training and resources necessary to better meet their patients’ special needs.

The Caregiver Diabetes Education and Training Program is designed to help caregivers to better assist patients with their diabetes management. Training sessions are conducted for groups of up to ten, covering topics such as blood sugar testing, meal planning and weight management, exercise, proper use of oral medications and insulin and more. Each Caregiver receives practical, hands-on skills training based on the specific needs of the person in their care.

Established in 1990, the Diabetes Education Center is recognized by the American Diabetes Association. Among its many training and outreach programs, the Center also provides diabetes education to homeless men, in conjunction with the homeless education program at Old St. Joseph’s church. Due to poor diet and family history, many homeless people are at risk of developing diabetes. Once a week, nurses and dieticians visit St. Joe’s to provide diabetes information to help homeless men better manage their health.

Recently the Diabetes Education Center began working with Latina Community Health Services (LCHS). An alarming 25% of Hispanic women have gestational diabetes – and to make matters worse, many of them do not have health insurance. As part of its “Expecting the Best” program, Diabetes Education Center nurses volunteer their time one day a week to provide care and information for Hispanic women with gestational diabetes.





Simulating real-life medical scenarios

Responding quickly to a critical patient event is often a matter of life and death. In such a situation, health care professionals' training triggers the necessary action to ensure the best possible outcome. But what if they've never encountered the situation in real life before?

That's where the **Penn Medicine Clinical Simulation Center (SIMS)** comes in. Located in a 22,000 square-foot facility at Penn Medicine at Rittenhouse, the SIMS center uses state-of-the-art medical simulation technology to assist in the training of physicians, students, and health care professionals throughout the region. The Center features human patient simulators – mannequins and anatomical models – set in realistic hospital settings. The simulators are used for training on a wide range of procedures – from CPR to infant delivery to major surgery – and help to sharpen the skills of the medical professionals who staff our clinics and community programs.

Staff and students from Penn's obstetrics department use the SIMS Center on a weekly basis, for training with infant and birthing mannequins. The Center also features “virtual reality” training, much like a video game, to replicate procedures such as colonoscopy and endoscopy.

Trainers can also use SIMS technology to create “worst-case” scenarios, in which trainees are presented with an unexpected negative outcome to a procedure or situation. After the training session, faculty members will conduct a review of the results and discuss with participants what could or should have been done differently.

The SIMS Center offers invaluable training beyond the Penn medical community – including the training of paramedics. In addition, classes in CPR are offered to anyone interested, including infant CPR for expectant parents. Since its opening in July of 2008, more than 5,000 people have used the SIMS Center for training.

Responding to the call

Since 1998, the Emergency Department of the Hospital of the University of Pennsylvania has been providing medical direction for the City of Philadelphia's **Emergency Medical System (EMS)**. That's an enormous task, given the number of 911 calls received each day — anywhere from 550 to 700 citywide. That translates to roughly a quarter million ambulance dispatches every year.

Penn's EMS team helps oversee the medical training of the city fire department's 240 certified paramedics. “There are the medical and fire aspects,” says Crawford Mechem, MD, Associate Professor of Emergency Medicine at the Hospital of the University of Pennsylvania. “All firefighters are trained to be EMTs.” Paramedic training includes a rigorous physical fitness regimen, as well as ride-along time with an Advanced Life Support (ALS) Unit in the city.

The EMS team is responsible for providing pre-hospital emergency medical care and transport — including ALS Units, Basic Life Support (BLS) Units, and First Responder Engine and Ladder Companies. Moreover, Penn-trained paramedics assist Emergency Medicine physicians with patient triage and treatment when responding to medical emergencies.





PAIN LEVEL

7	8	9	10

Extreme Pain



Improving emergency and trauma care through research

With more than 100,000 patient visits per year in the Health System's three emergency departments, Penn Medicine continually seeks new and better ways to respond to urgent medical matters. Recently researchers at the University of Pennsylvania School of Medicine determined that computerized tomographic angiography (CTA) is an effective way to rule out serious coronary disease in patients who come to the emergency department with chest pain. The ability to quickly determine which patients require treatment for a serious condition helps reduce overcrowding in the Health System's emergency departments.

Penn's School of Medicine is also pioneering research that could lead to the creation of a comprehensive emergency care system, in which acutely ill patients are delivered to the facility best prepared to care for them. The study encourages hospitals and EMS providers to collaborate in providing the most efficient and effective emergency care.

In addition to victims of accident or sudden trauma, the Emergency Department provides recourse for those with chronic conditions who may not have access to primary care. On any given shift, an ED physician could address a major trauma or medical resuscitation... deliver a baby... tend to a broken limb... or provide on-site advice and assistance to a paramedic.

“She fell into my arms and cried.”

I remember one particular patient who really influenced how I view my job. I had just returned from vacation and this woman had come to the ED in sickle-cell crisis. She received treatment, but left suddenly and mysteriously. A short time later she came in again, but using a different name. I asked her why she had left the last time, but she was very guarded with her answer. Once again she left abruptly. She continued to come in a few more times after that, and every time she used a different name. I treated her each time, but she would never open up to me. So I found myself getting angry inside and was troubled by those feelings.

Some time later, when her partner was admitted to the hospital with a serious health care issue, she immediately came up to me and just stood there, looking at me. I was the familiar face she knew. She looked desperate, so I offered her a hug. The look on her face was startling, like no one had ever offered her such kindness. She fell into my arms and cried. After that, while her partner was hospitalized, she came down to the ED many times to see me. My experience with this patient reminded me that people have many issues. Sometimes we tend to only look at their medical problems, but the other problems can be just as painful.

Sarah Lansangan, RN
Emergency Department

By the numbers:

Quantifying our commitment

Penn Medicine's commitment to the community is fulfilled through a wide range of programs and services, ultimately touching the lives of countless people. While the true success of these programs is immeasurable, there is a quantifiable aspect to our community work. Here is a look at some of the numbers that reflect the "cost of caring."



Support in FY09

Charity and underfunded care for Medicaid families:	\$101.4 million
Physician training support:	\$99.6 million
Research support:	\$532.5 million
Total:	\$733.5 million

Infant Deliveries

Pennsylvania Hospital:	4,872
Hospital of the University of Pennsylvania:	4,292

Many of the women giving birth were underinsured, uninsured or covered by Medicaid and many were also undocumented immigrants.

Emergency Department Visits

Hospital of the University of Pennsylvania:	59,207
Penn Presbyterian Medical Center:	36,353
Pennsylvania Hospital:	20,771



Taking the time to care

The scope of Penn Medicine's community work is expansive and requires many hands. It encompasses virtually every department of our hospitals and requires a significant investment of time from those who contribute their talents to the success of our programs.

For instance, in the one-year period from June 2008 to June 2009, the community-oriented programs and activities conducted by Department of Family Medicine and Community Health Programs alone benefited from over 11,200 hours of time volunteered by faculty, residents and staff.

Beyond a doctor office or hospital room

In the past year, we carried our commitment into the community by supporting health awareness activities, disease screenings, home visits, patient and family support groups, and health care career development. We've also sponsored health conferences covering a wide array of topics, from breast cancer to caregiving to healthy living.

For example, through our regular free cancer screenings — including prostate, colorectal and skin — we've helped hundreds of individuals take an important first step toward keeping potential health issues in check.

Through these programs and others like them, we have been able to touch the lives of thousands of patients, family members and residents in our community.





Healthier communities lead to
a brighter future



As our programs expand and new initiatives are introduced, there is reason to feel optimism about what lies ahead. To an outside observer, the number of lives we touch each year may seem remarkable. But we know that it is merely a reflection of the commitment we've made to helping people become healthier, happier, and more productive.

To strengthen the future for the families of our communities, we must provide individuals of all ages with the tools they need to live healthy lifestyles. Here is a snapshot of some of the programs that are helping us lay the groundwork for a healthier tomorrow.

Better health leads to better achievements

In the Carroll Park section of West Philadelphia, the Bach Fund is supporting Penn Family Medicine's partnership with the **Neighborhood Youth Achievement Program**. This new community-based initiative has been launched in the 2009-2010 academic year. Its objective is to improve childhood and adolescent health development with a curriculum that focuses on reducing obesity and sedentary lifestyles. Medical students from the University of Pennsylvania School of Medicine and residents of Penn Family Medicine conduct education sessions, targeting nutrition and healthy behavior.

CHANGE is good

In partnership with the Neighborhood Youth Achievement Program, Penn faculty and residents developed **Community Health Advancement through Neighborhood Grassroots Education (CHANGE)**. This neighborhood-run after-school program in West Philly teaches children and their families how to lead healthier lifestyles. The program provides a unique opportunity for students to directly serve families from our surrounding community, while learning how to teach healthy lifestyle choices and skills.

Helping the young through times of sorrow

Penn faculty and residents volunteer their time at **Camp Erin** – a “grief camp” for children ages 6-17 who have experienced the death of a parent, friend or loved one. Grieving children spend a weekend participating in traditional camp activities – such as arts and crafts, a ropes course, campfires, swimming and more – combined with grief education and emotional support, facilitated by licensed social workers and trained volunteers. Located at Diamond Ridge Camps in Bucks County, Camp Erin is named for Erin Metcalf, a remarkable young woman who died of liver cancer at the age of 17. The camp was developed in partnership with The Moyer Foundation, established by Philadelphia Phillies pitcher Jamie Moyer and his wife, Karen. Camp Erin is open to children in the Philadelphia area, ages 6-17, who have lost someone in their life due to a death.

Play ball!

Teams of faculty, resident physicians, and medical and nursing students from **Penn's Department of Family Medicine and Community Health** provide free physicals for under-privileged children of any age who need medical clearance to participate in sports, summer camp or other enrichment programs.



Looking ahead... realistically

Our community mission made great strides in 2009 and we continue to build momentum. The state of the economy, however, often makes our progress feel a bit like standing still, as more and more community members need our help.

Nevertheless, the troubled economy has not daunted our commitment, our ethic, or our spirit. We will continue to invest our resources – both financial and human – in the Philadelphia area, to help ensure that the best health care is available to our communities.

As national health care reform comes into focus and the changes begin to evolve, gaps will still remain in accessing care – and we will do our best to fill those gaps.

The bottom line is this: when a need arises, we'll create a solution. We've become adept at putting our collective talents to use in the unlikeliest of places. Give us a small amount of space and we'll find a way to turn it into a functioning clinic... or a classroom for hosting wellness lectures. After all, change has a more dynamic, lasting effect when it's part of the community. By prudently managing our resources, we can stay true to our values and mission.

More important, we can continue to make a positive difference in the lives of those we serve.





In their own words: the rewards of caring

Giving back to the community has obvious benefits to those who are the most vulnerable to hardship. But it can be equally as fulfilling to the health care professionals, students and volunteers who offer their time and talent to those in need. While each individual may express it differently, the rewards of caring are profound. Here are some thoughts and observations from a few of the many dedicated people who serve on the “front line” of our community benefit endeavors.

“Working in the free health clinic gives me the opportunity to walk to work and see in concrete terms that I’m doing something really positive to improve the lives of my neighbors and my community. The clinic wouldn’t exist if it wasn’t for this exuberance. And it’s not just me. It’s a feeling all the students and doctors share, that by working together we are making a real difference.”

David G.

“For me, working with people from the community helps me connect to my patients, to myself, and to the larger world. In my own small way I feel that I’m correcting some of the inequalities in our society, and that’s always been important to me. The good I hope I am doing in the community reaches well beyond the health outcomes of my patients to help improve their lives over all. I know I can’t change the world, but I think I am helping change a little piece of it.”

Heather K.

“I came from a big family and before we moved into the clinic we treated patients from a van. Patients would just stop by – we knew them, and they knew us. We’d listen and help. There were no snow days. Whatever was necessary, whenever they’d need our help, we’d be their advocates. Now that we’re working out of a clinic, it’s still very personal for me. It’s still a big family.”

Poune S.

“It is very difficult to effectively treat the Asian immigrant community in Philadelphia without addressing the many social and cultural issues specific to this population. Practicing medicine beyond the borders of Penn’s campus helps me better understand the realities of their lives. It is this knowledge that enhances the preventive health care I provide and the new interventions I am creating to address the unique health care barriers facing this community.”

Giang N.

“Primary care providers are the first line of defense many of these people have in securing adequate health care, and we’ve designed our programs to address that need. The reward I get from helping train physicians and overseeing these clinics, I feel on two levels. It’s reflected in the faces and medical outcomes of the patients who are being served by our health care advocates, as well as the bonds of trust I see being strengthened between our health system and the community it serves.”

Peter C.

“It’s the intimacy I’m able to give my patients at the clinic that I find most rewarding. I see it in their faces even before I begin an examination. We sit down together and I just listen. Sometimes, that’s the best medicine.”

Patrick G.



Penn Medicine

University of Pennsylvania School of Medicine

University of Pennsylvania Health System:


- Hospital of the University of Pennsylvania
- Pennsylvania Hospital
- Penn Presbyterian Medical Center
- Penn Home Care and Hospice Services
- Clinical Care Associates

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Our mission is a simple one: we intend to be the very best we can be. We pursue this mission in service to our scholarship, our obligation to teach others and our commitment to caring for those we can help. At PENN Medicine, we see the future every day through discovery, learning gained and shared, and lives made better. Those who join us in this mission are grateful for the privilege and accept the many responsibilities such privilege conveys.



Penn Medicine

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