



PORTLAND STREET MEDICINE

Portland Street Medicine *Hits the Streets*

By Bill and Drew

PSM began its journey on Friday Feb 2. A team of two physicians, one RN and one social worker made it's way to Portland's famed central eastside for the first of many visits to the camps, tents, forests and bridges that too many Portlanders call home. With backpacks loaded, we met with people where they live. Our early goals were simple: build trust, assess needs and bring humanity to a tired population. While too early to make conclusions, we observed an optimistic group of rough sleepers who were not accessing medical care, were not insured despite its availability in our state and were proud, despite the mental health and addiction issues that plague them. The Cascadia Street Outreach Team is guiding us in the early phase of this pilot project. They and the Coalition of Community Healthcare Clinics are helping us bring medicine back to the streets.

Volunteers still wanted. If you have been to a meeting or sent us an email interested in volunteering or participating, we want you to know we haven't forgotten about you. We

are busy working to create a sustainable and expandable process. Our small team trialing this work is assessing needs, collecting data and forming partnerships. We are researching options for liability coverage, health record keeping, supplies and transportation. As we develop scopes of practice, practice models and care coordination tools, we plan to expand the number of providers who can deliver relational care on the street. So please, keep in touch, know we are working to expand opportunities to you all to hit the streets, and thank you for your interest.

Our February meeting is Wednesday the 28th, Westminster Presbyterian Church, 1624 NE Hancock St, Portland, OR 97212, 6-8pm. This will be a work meeting of the advisory board, open to the public. Swing by if you want to meet us, add to the conversation or have suggestions. +

Care Coordination Corner

We are interested in developing clinical partnerships. Our first priority is same day or next day clinics. Let us know of expedited pathways for referral, either urgent or primary care. Avoiding duplication and avoiding the perception that PSM is a replacement for existing care are key. Our goal is to complement existing services and by doing that, reversing an often negative healthcare experience for those living on the streets.

And speaking of community partners, our “monthly” focus is on **JOIN**. With over 1800 people sleep on our streets, under our bridges, and in our parks each night. The need for effective responses to the tragedy of homelessness in our community is clear. JOIN’s 8 Person Outreach Team addresses this urgent need by engaging homeless individuals and families with children who are physically sleeping outside or in their cars. Outreach Workers work with people to identify and overcome their barriers to housing, partnering with local agencies and advocating with local landlords to open the doors to permanent housing. JOIN’s Outreach Program strives to emphasize the strengths of the people we serve and support their efforts to move into permanent housing. +



Quote

(from Stories from the Shadows)

Jim O’Connell

I DUTIFULLY SOAKED FEET FOR ALMOST TWO MONTHS WHILE OBSERVING DEVOTED NURSES (NAMES OMITTED) WORK THEIR MAGIC AMONG WEARY BUT GRATEFUL PILGRIMS. IN KEEPING WITH THE OBVIOUS BIBLICAL ALLUSION, THE FOOTSOAK INVERTS THE USUAL POWER STRUCTURE AND PLACES THE CAREGIVER AT THE FEET OF EACH PATIENT AND FAR FROM THE HEAD. THIS GESTURE OF RESPECT FOR THE LITERAL AND FIGURATIVE PERSONAL SPACE OF EACH HOMELESS PERSON IS CRITICAL AND A MARKED CONTRAST TO HOW I WAS TAUGHT TO TAKE

CHARGE DURING CLINICAL ENCOUNTERS, INVADING PRIVACY EACH TIME I PLACED A STETHOSCOPE ON THE CHEST, PEERED AT A RETINA, OR EXAMINED A THROAT. AFTER WANDERING THE CITY FOR HOURS, SUFFERING EXPOSURE TO THE EXTREMES OF WEATHER, AND THEN STANDING IN A SERIES OF QUEUES AWAITING ENTRANCE TO THE SHELTER, A BED TICKET, AND THE EVENING MEAL, HOMELESS PERSONS RELISHED THE CHANCE TO SIT AND REST WHILE SOMEONE CLEANSED AND SOOTHED THEIR FEET. +

Needs

- van
- socks
- gloves
- hand warmers
- cell phone
- bus tickets
- cab vouchers
- feminine products
- data collection forms
- cash
- sharps container
- hygiene products
- system for hot beverages
- basic first aid supplies
- quality assurance tools



Important links:

- a) 14th Annual International Street Medicine Symposium, Oct 3-6 2018, Rotterdam:
<http://streetmedicine.org/wordpress/>
- b) Domicile Unknown: Multnomah County's annual review of homelessness associated deaths:
https://static1.squarespace.com/static/566631e8c21b864679fff4de/t/5a330ee38165f5e58a2d70cb/1513295589611/DomicileUnknown_2016.pdf
- c) Interested in joining a street team now? The Union Gospel Mission's volunteer van delivers food, blankets and kindness most evenings:
<https://ugmportland.org/>

"Our mission: Portland Street Medicine's mission is to bring quality medical care directly to Portlanders who are facing unstable housing or are sleeping on the streets. By serving patients in the streets we not only meet immediate medical needs but also collaborate with community efforts to get patients integrated into regular healthcare. As experts in both street medicine and community resources, we are central in building interdisciplinary relationships and bridging gaps between this vulnerable population and the community resources available to them. Through community engagement, our citizens will be reminded of the greatness of our city and our ability to solve problems honestly and directly."