



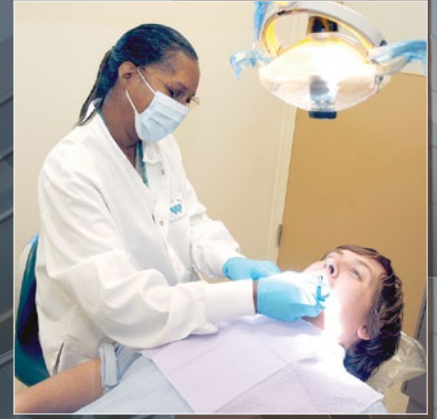
# WHITTIER STREET HEALTH CENTER

ANNUAL REPORT 2011



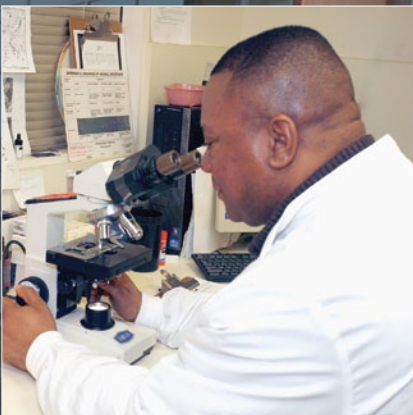
*Linking Public Health to Primary Care Services*

A Patient-Centered Approach to Wellness and Prevention



## WHITTIER STREET HEALTH CENTER

The mission of Whittier Street Health Center is to provide high quality, reliable and accessible primary health care and support services for diverse populations to promote wellness and eliminate health and social disparities.



# *Linking Public Health to Primary Care Services: A Patient-Centered Approach to Wellness and Prevention Message from Our President & CEO and Our Board Chair*

On the first Tuesday in January, we are opening the doors of our permanent home – a momentous occasion in our 78-year history of providing premier health care in the urban community.

And we are ready for the possibilities that the new 79,900 square foot, silver level LEED certified patient-centered medical home unlocks: tripling our capacity to serve our diverse populations and expanding our work in eliminating the health and social disparities in Roxbury and our surrounding neighborhoods.

We are reaching into the community to add to our patient base from the 71,000 low-income and immigrant/refugee residents living in our core service area. We are coordinating our programming to provide the comprehensive, quality care necessary to address wellness in our community.

We have designed our new building around the NCQA patient-centered medical home model to maximize the positive patient experience, increase the effectiveness of our delivery of care and cement our ongoing relationships between patient and provider team.

Wired for today's advanced technology and built using green design, our new home allows us to capitalize on our use of electronic medical records, our interoffice connectivity and our quality assurance investments to provide the best care possible.

Embracing our new potential, we are opening a Community Cancer Clinic in partnership with Dana-Farber Cancer Institute, a first-of-its-kind clinic in a health center.

Taking advantage of our new space, we are increasing capacity, efficiency and effectiveness, including expanding our urgent care center to bring people who are out of the health care system into primary care while addressing high emergency room costs.

We are geared to offer colocation opportunities to our partners and alliances because we must work together to transform an ailing community.

We are expanding our ability to link public health to primary care services. We are well positioned to deliver the patient-centered approach to wellness and convert our patient population from reactive to preventative care. We are equipped to fight the rising tide of chronic, preventable disease.

Already, Whittier is a vital part of the community, serving thousands of families with significant health and social needs.

Some 70 percent of our patients not only suffer from diabetes, hypertension, cancer, asthma or obesity, but at a higher rate than other Boston neighborhoods. Almost 30 percent of our patients have been diagnosed with two or more of these conditions.

Out of Boston's 16 neighborhoods, Roxbury has the highest rate of low birth weight, infant mortality, emergency room visits, and hospitalizations due to diabetes, heart disease and, for children under the age of 5, asthma.

Roxbury has the second highest rate of new HIV/AIDS cases, obesity and mortality due to substance abuse. Eighty percent of our patients come to us with psycho-social issues.

Forty-three percent of our patients are African American or of African descent, 41 percent are Latino and 47 percent are men. Ninety-two percent are low-income with 60 percent living below the poverty line. Forty-five percent are best served in a language other than English and 85 percent live in public housing.

Additionally, our community faces such concerns as high incarceration and recidivism rates, violence, homelessness, and oral and mental health shortages.

We are attacking these disparities with centers of excellence in diabetes prevention and management, obesity, cancer prevention and survivorship, arts therapy, men's health and asthma.

We are offering quality programs tailored to our community's needs in areas that include violence prevention, childhood obesity, prenatal health, HIV/AIDS prevention and medical services, substance abuse treatment, eye care and urgent care.

We are speaking our customers' languages: 13 altogether that include Spanish, Somali, Portuguese and Haitian Creole besides English.

We are rare in our focus on connecting with men in prison and following them with health care and services after their release, reducing recidivism rates and giving them the support they need to become productive members of society.

We are employing creative ways to teach our community self-management as the ultimate way to achieve wellness. As an example, we are approved as a CenteringPregnancy site in our effort to engage women within their first trimester of pregnancy in group visits that provide prenatal and childbirth education and, above all, support and a common bond.

Studies show that the CenteringPregnancy program promotes higher rates of prenatal care, lower rates of preterm delivery and low birth weight, greater prenatal knowledge, improvement in breast feeding numbers and parenting skills, and the ability to reach more women more cost-effectively.

We are tackling the high incidence of eye disease in our patient population: glaucoma, cataracts, diabetes-related retina disorders, cornea degeneration and eye trauma.

We are working to eliminate inappropriate emergency room visits with our urgent care/walk-in services. We are collaborating with Dana-Farber Cancer Institute to integrate cancer care and survivorship services with our primary care.

We are taking on social issues family by family with our Intensive Family Therapy. Our new Rainbow Clinic is addressing the complicated coordination of care for children with special health care

# Linking Public Health to Primary Care Services: A Patient-Centered Approach to Wellness and Prevention Message from Our President & CEO and Our Board Chair

needs. Every Tuesday, our new Adult Healthy Weight Clinic meets for nutrition education and exercise.

We are building our capacity to reduce HIV/AIDS in the community and changing our service delivery to raise awareness in an underserved population as the only health center in New England to receive CDC HIV/AIDS prevention funding.

We are out in the community, visible and welcoming, going where people are to draw them through our doors with the help of people they know and trust.

We are reaching out to the five public housing developments within a 10-minute walk as the only health center in Boston federally funded to address public housing residents' health and social service needs.

With our Building Vibrant Communities initiative, funded by the Kresge Foundation, we are staffing each housing development with an onsite social health coordinator in order to build the trusting relationships that will help residents of all ages overcome barriers to a healthy lifestyle.

Our Project ME drop-in center provides a welcoming place for people to come in for a cup of coffee and a chat while also receiving HIV/AIDS testing and prevention services as well as connection to other services they might need.

Thanks to a new Bristol Myers Squibb Foundation grant, we are finding and recruiting Black women in need of diabetes management through outreach by some of our own patients hired as health ambassadors. Living with diabetes themselves, they are ideal advocates for effective control of the disease.

Our Project 1-3-5 has connected 350 men, more than projected, to a healthier lifestyle through gym memberships and farmer's market discounts, finding them through peer ambassadors who are well known in the community and teaching them the benefits of an annual exam, and encouraging them to exercise three times a week and to eat five servings of fruits and vegetables a day.

We are linking public health to primary care with a new strategic plan for the years 2012 to 2106 that is focused on the wellbeing of our community. We are strategically planning the permanency of our new home to meet our imperative of community wellness.

We have outlined effective strategic and operational plans to ensure that our facilities, technologies, services and professional staff continue to meet the ever-expanding needs of our service population.

Sustainability; patient centeredness; quality assurance and performance improvement; brand development; clinical and programmatic excellence; continued focus on health disparities and population specific issues; patient recruitment, retention and wellness; strategic alliances and community partnership; cultural competency; and workforce development are some of the keys to

furthering our vision: To serve as the premier leader in urban health care for diverse populations.

We are continuing to define our role as partners with our patients and our strategic alliances with the transition into our new medical home. We are ramping up the momentum to build the capacity to meet the unmet needs of the community and demand for our services. We have seen an average 15-percent increase in volume annually, but know there are still members in our community who are not accessing care.

For the first time, we have established a category in our strategic plan specifically for workforce development. We are including succession planning, training and leadership development in order to create an organizational culture focused on learning and growth and aligned with our vision.

With the opening of our permanent home, we recognize and embrace our role as a catalyst for economic development, job creation and community investment. During construction, we worked with a diversity consultant to ensure the hiring of local diverse contractors and we are not stopping there with our goals of economic development in Roxbury. The vast majority of our newly created jobs within Whittier will be available to area residents. Already, 70 percent of our current staff live in the neighborhood.

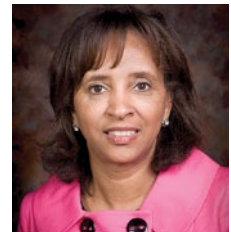
With our permanent home, we are securing our long-term viability, community presence and contribution. Incorporating green technologies into the new building further reinforces our commitment to the long-term health of the community.

As we dedicate our new building, we rededicate ourselves to our mission of providing high quality, reliable and accessible primary health care and support services for diverse populations to promote wellness and eliminate health and social disparities.

As we move forward to fulfill the potential our permanent home offers and the services our community demands, we will continue our work in linking public health to primary care services with a patient-centered approach to wellness and prevention and innovation in community health.



*Frederica M. Williams*  
**Frederica M. Williams**  
President and  
Chief Executive Officer



*Debra B. Miller*  
**Debra B. Miller**  
Board Chair

# Meeting the Health Needs of Our Community



The communities that Whittier serves face significant disparities in health care access and outcomes. Roxbury, which is Whittier's primary service area, consistently ranks poorly for health outcomes and health behaviors among Boston's 16 neighborhoods. According to the Boston Public Health Commission's 2011 Health of Boston Report, among Boston's 16 neighborhoods, Roxbury has:

- The highest infant mortality rate, which is 65% higher than the overall rate for Boston, and the highest percentage of both preterm and low birthweight births.
- The highest rate of hospitalizations due to heart disease.
- The second highest percentage of adults with asthma.
- The second highest diabetes hospitalization rate.
- The lowest percentage of adults who think their neighborhood is safe with only 22% feeling this way.

Whittier has developed a comprehensive model of care that is designed to address these significant disparities in health through a diverse approach that includes primary care, specialized clinics, social support, and empowerment. Recognizing that poverty, cultural differences, homelessness and limited resources can all impact one's ability to prioritize their health, our care is designed to treat the whole person. We help families build the capacity and resources needed to properly manage their health and make healthy decisions. Our services include:

## Primary Care

- Adult and Geriatric Medicine
- Pediatric Health
- Women's Health
- Men's Health
- Family Medicine

## Behavioral Health Services

- Mental Health Services
- Substance Abuse
- Arts Therapy

## Urgent Care

## Dental and Oral Health

## Eye Care

## Specialty Services

- Orthopedics
- Podiatry
- X-rays
- Laboratory
- Dermatology
- Mammography
- Ultrasound
- Physical Therapy

## Wellness Services and Clinics

- Nutritional counseling and cooking classes
- Acupuncture
- Adult healthy weight programs
- Asthma Clinic
- Pediatric healthy weight programs
- Community cancer clinic in partnership with Dana-Farber Cancer Institute
- Cancer Survivorship Clinic
- Developmental disability and autism screening services for children
- Women Infants and Children Nutrition Program (WIC)
- CenteringPregnancy prenatal health program
- Diabetes management and education programs

## Support Services

- Domestic violence support
- Medication co-pay assistance program
- Refugee Health Assessment Clinic
- HIV/AIDS counseling, testing and medical Services
- Post Prison Release/Re-Entry Services
- Life Coaching
- Teen Clinic

## Ensuring a Healthy Future

Ten-year-old Nyaja Childs, born with spina bifida, was unable to express her emotions over problems with friends and other issues in her young life. Until participating in Whittier's Arts Therapy program, she could not talk about how she felt. "She would shut down," reports her mother, Angela Marcelo. "She was not able to speak about things at all."

After a year in Arts Therapy, Nyaja wrote a poem that begins this way:

"I was born different from the rest  
But I learned early on that keeping  
my head up high was the best."

Arts Therapy successfully gives children a creative outlet to address the difficulties in their lives. We target children with emotional, physical and developmental challenges and guide them through positive alternatives for self-expression.

"My mother by my side through good times  
and through bad,  
Helped me through everything in my life  
that's been sad,"

Nyaja continues.

Our arts therapists meet with the child individually using a variety of modalities such as visual art, yoga and movement, role play, play therapy and creative writing to deal with stressful situations.

"People be ignorant and people be mean  
Most of the time it's because of how  
I am seen,"

Nyaja writes on.

For Nyaja, her weekly sessions are the highlight of her week. For all involved, the meetings between the arts therapist, child and parents provide proactive, forward-thinking goals. "We talk about where we're heading and where we want to go," Angela says.



Arts Therapy sessions can tackle impulse control, anger management, stress relief or, as in Nyaja's case, self-esteem and verbalization. She is now always happy – "very happy," her mother says – with the confidence of a bright future ahead of her. In so many words, she says so herself.

"So if you see someone on the street like me  
Don't think we're not someone you'd  
like to meet.  
We are smart, strong, and beautiful.  
My name is Nyaja and I'm just like you,  
only a little different."

All of our programs for children are addressing our goal of community wellbeing by looking ahead and taking on our future's most challenging health issues and disparities.

More than 2,000 children along with adults and elders receive our Arts Therapy services each year, at Whittier and in a broad range of settings including schools, community centers, shelters and nursing homes.

Our Pediatric Asthma Clinic addresses the high incidence of asthma in our youngest patient population and supports persistent asthmatics by educating them and their families on asthma management. The clinic not only improves health outcomes but other areas of a child's life as well. Academic performance, for instance, can lag when a child constantly

misses school because of chronic asthma. The long-term impacts of these limiting effects can be as debilitating as the disease itself.

We are tackling obesity in children with our Healthy Weight Clinic and Race Around Roxbury program that we have expanded to also include an all-day summer camp. To date, we have served more than 300 children, 30 percent of whom lowered their body mass index and continue to increase their activity levels. All made positive lifestyle changes.

New to Whittier this year is our monthly Rainbow Clinic, which provides comprehensive, individualized care and targets some 100 children with special health care needs. Pediatrician, arts therapist and case manager meet with families to assess needs, coordinate care among specialty providers, track and review progress, and reassess needs.

For a child with cerebral palsy, we provided referrals for appointments inside and outside of Whittier, set up therapy appointments for the mother and linked the family to legal issues counseling. We helped the child with difficulties such as balance and speech and collaborated with the school to make sure the child received all needed therapies in the classroom.

Our Intensive Family Therapy program models healthy communication for families in crisis over a catered dinner

and addresses all of their health-related needs, whether dental, pediatrics, individual therapy or eye care, in the weekly afternoon session.

One of our recent families, immigrants from an Eastern African country, whose son was extremely anxious and defiant as a result of the move, benefited tremendously from meeting with our IFT team to resolve his issues. By the end of the IFT sessions, his defiance was gone and his anxiety had significantly decreased.

A family we see today consists of a mother and two daughters who were removed from her care last summer. Our sessions with them are the mother's supervised visits. We work on parenting, parent/child interactions and family reunification. Before Intensive Family Therapy, adoption was the likely outcome. The mother, however, is improving dramatically in her parenting skills and her daughters are responding well.

In our first 20 months of IFT sessions, parents improved 25 percent on a four-point scale in depression, relationships and irritability – a dramatic outcome. The children increased their strengths and decreased their weaknesses.

At Whittier, we are bringing along the future, modeling self-management and empowering healthy outcomes.

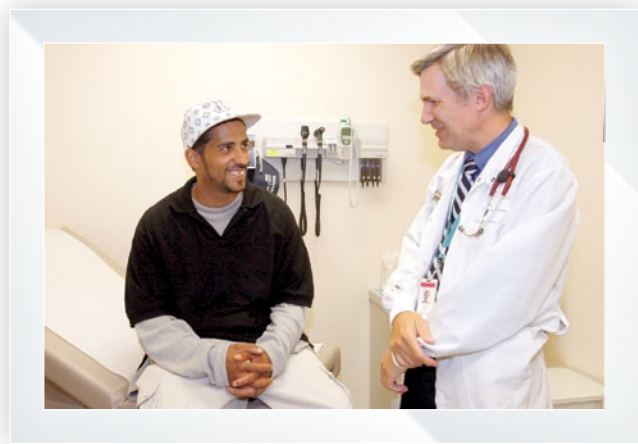


## Integrating Public Health with Primary Care

Once we bring people into our services, we keep them as patients. The challenge is to draw them through our doors when they consider health care the least of their worries. So we go out where they are, with people they know, people they can emulate.

Patient ambassadors in our Project 1-3-5 collaboration with the YMCA, for example, enrolled 350 men in the program offering free three-month gym memberships with \$10 monthly rates for the next nine months as well as half-price discounts at local farmer's markets. The "1 physical a year, 3 sessions of exercise a week, 5 servings of fruits and vegetables a day" initiative linked men who were not seeking out health care to health insurance, a supervised exercise plan, healthy eating and Whittier's Men's Health weekly education sessions.

Frank Mitchell, one of our ambassadors in Project 1-3-5, was able to attract men to the program because he is a well-known testimonial to change himself. His own ups and downs included struggling on the streets, prison time and drug abuse. When he was ready to turn himself around, Whittier was his support system.



**“Once the information is presented and people are able to understand that there is no limitation if they work towards it, anyone can change their lives and move forward.”**

FRANK MITCHELL, *Men's Health Ambassador*

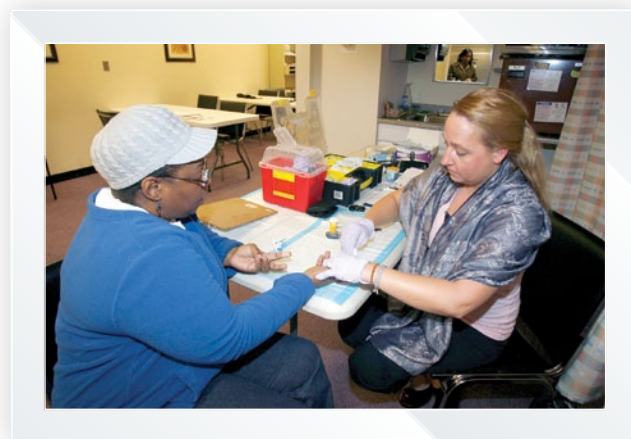
“I feel like I've lived two totally different lives,” he says. “I don't associate with the old me, though I am that person once upon a time. The way I think, my motivation and what I strive for, my objectives and goals today, it's night and day. I get out there with people who can identify with me. Once the information is presented and people are able to understand that there is no limitation if they work towards it, anyone can change their lives and move forward.”

A side benefit of Project 1-3-5: Four of the five ambassadors, Frank Mitchell included, are headed back to school. “I'm getting my financial aid together with the goal to go to the College of Public and Community Service at UMass Boston to get a degree in the human services field so I can be a real voice in the community,” he says.

Patient ambassadors are also charged with recruiting diabetic Black women to our diabetes services. Over the next two years, the three trained ambassadors are to organize 30 workshops each that can take place wherever their target audience will congregate. The object of the Bristol Myers Squibb Foundation grant is to screen women in the community in order to identify those who don't know they are diabetic or pre-diabetic or who aren't managing their care. In the process, our ambassadors will be educating the community about diabetes and spreading the word of our services.

Linking public health to primary care is also taking shape with our physical presence outside our doors.

Our Project ME drop-in center in Dudley Square, opened a year ago July, is a welcoming, unofficial point of entry to

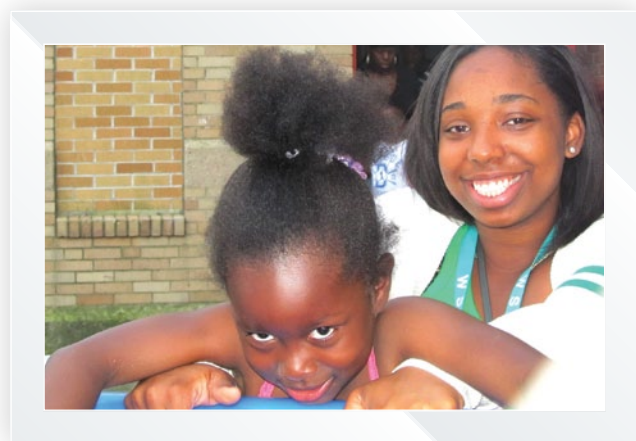


our services that begin with HIV/AIDS rapid testing and prevention outreach to those who are hard to reach and most at risk. Open Monday through Saturday from 7 a.m. to 8 p.m., the center daily averages 25 to 30 drop-ins who come in for a cup of coffee, a chat or a free shower. John Ransom is a regular. “When I walked in here, I felt like I was home, felt like I was welcomed, felt like a burden was lifted. I’m here every day, every other day,” he says.

Our goal with the drop-in center is to reduce the explosion of HIV/AIDS in Roxbury and the surrounding communities as well as develop a trusting relationship with Whittier staff.

We are incorporating the same premise of establishing trust in our Building Vibrant Communities partnership with the Boston Housing Authority. Social health coordinators in each of the five housing developments in our neighborhood are addressing community health with a particular focus on stress, depression, hypertension and pediatric obesity. Health screenings, nutrition counseling, life coaching, exercise classes and youth programming aimed at violence prevention, as well as referrals to education, workforce development and other health and social needs, are avenues to engaging residents in healthier living.

Brent Henry, a social health coordinator at the Lenox/Camden housing development, set up shop in June. Over the summer, he initiated a youth football conditioning and skills camp, which averaged 40 to 50 children under the age of 13 three days a week, two hours a day, and a summer camp program for ages 5 to 13, with 35 to 40 attending daily.



## “We’re trying to reach into the community in every way possible.”

BRENT HENRY, *Social Health Coordinator*

Now he has started an after-school component due to popular demand and is planning post-traumatic stress disorder group counseling for adults who are witnesses to urban violence. Since June, he points out that there have been several murders in the development. “They go through changes mentally and spiritually, not understanding what they’re going through,” he says. Other offerings to come: Zumba, senior yoga and cooking classes for all ages. “We’re trying to reach into the community in every possible way,” he says.

And Brent Henry is making headway. “People are starting to see my face more and more. They’re starting to embrace the Building Vibrant Communities idea. Slowly but surely, they have been coming in to ask questions, to look for referrals to various agencies as well as to Whittier.”

A positive note from the summer camp program: A camper who has continued in the after-school program related the big hug a campmate gave her when she saw her at school. “My hope is that turns into friendship,” Brent Henry says, “that they grow up together, that they grow into positive adults.”



# Closing the Gap on Health and Social Disparities

Measuring outcomes is as important to eliminating health disparities as the research, planning, coordination and outreach that we put into our programs.

We survey our patients to see how we are doing. We hold focus groups to find out from the community what services they need us to add.

We track clinical measures for diabetes; cardiovascular disease; sexually transmitted diseases, including how many HIV/AIDS patients have had their blood work done and how many cases we are managing; pediatric immunizations; and first-trimester visits by our pregnant patients. At the end of every month, we analyze our data to improve on any area that needs improvement.

We know that 88 percent of our adult patients have been screened for depression, ensuring that we are able to identify this pervasive disease in our community. We also know that 93 percent of our pediatric population over the age of six has had an eye exam, well over the target rate of 60 percent.

We also use our data to track certain diseases. Our diabetes clinical outcomes are stable, with at least 92 percent of our diabetes population coming in for testing – above our 90 percent target.

**“Whittier Street is the best thing that could have ever happened to me. I would never go anywhere else.”**

*PATRICIA SHAHEED, Whittier Street Health Center Patient*

If blood sugar is high for our diabetes patients, our diabetes educator calls patients to schedule appointments, collaborates on self-management and, if needed, sets up an appointment with our clinical pharmacist.

We are also able to track how well we are nearing our 2017 clinical outcome goals of lowering blood sugar levels and increasing the percentage of diabetic public housing patients receiving an action plan.

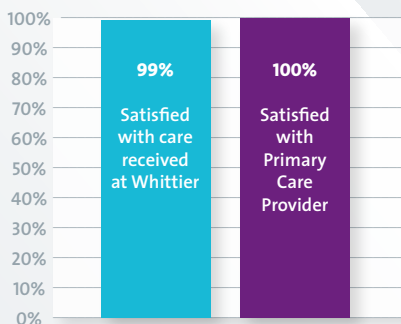
Another example: We are tracking our improvement since implementing a Cancer Survivorship Clinic in 2008. At that time, out of the 108 cancer survivors we served, only 3 percent were seen by their primary care provider. Fast forward to 2010, when we had 155 cancer survivors, with 121 (78 percent) accessing a well visit with their PCP. Today, we know that 90 percent of our Cancer Survivorship Clinic participants have a personalized plan documented in their medical record, allowing for proper follow-up.

Our investment in quality assurance and improvement supports our pursuit of excellence. With our new practice management system, for instance, we have the ability to narrow down data to characteristics such as race or ethnicity, which in turn allows us to align our resources with our needs better and establish the indicators necessary for measuring our success.

Monthly, we collect such data as the total number of primary care visits, the number of new patients, the number of appointments department by department, and the number of screenings for cervical, breast, prostate and colon cancers.

We know that, since we started offering HIV/AIDS counseling and testing in July to anyone within the sexually active age group who comes to us, we have doubled the number of people tested and increased our ability to link people with HIV/AIDS to primary care.

## Patient Satisfaction at Whittier



We can track the number of women we engage during their first trimester of pregnancy in our attempt to eliminate the disparities of low birth weight, preterm babies and infant mortality.

We know from our CenteringPregnancy patient surveys that the program is more popular than we ever anticipated. With one-on-one provider visits taking a few minutes out of the group visit, the women bond over education and peer support. Our groups cross socio-economic classes, races, languages and nationalities. Where else would the discussion of the culturally accepted wet nurse take place?

Comments from our patient surveys include: “I liked being able to learn new things about what’s happening with my body and hearing other people’s experiences,” “We all can share what we feel and discuss it” and “I learned a lot because I came to this country four years ago, not only from American culture but also from other people’s culture. I learned a lot about pregnancy as a whole.”

**“I liked being able to learn new things about what’s happening with my body and hearing other people’s experiences. We all can share what we feel.”**

CENTERINGPREGNANCY PARTICIPANT



Some of our results, however, don’t come through quantitative measurement but are qualitative and immeasurable just the same.

Take the example of the woman coming to us for eye care. Always unhappy about her prosthetic eye, the result of an accident when she lived in the Dominican Republic, she began to complain that the prosthesis was bothering her physically and mentally. Her doctor here connected with a local prosthetic company, secured an appointment for a replacement, made sure she kept the appointment and followed up – to receive a big hug, smile and heartfelt thanks for helping lift her depression.

And then there is Patricia Shaheed, who will be substance abuse free for five years on January 2. With the help of her therapist at Whittier, she says she began to learn how to love herself, to get honest, and to deal with her depression, the loss of her youngest daughter to foster care and unhealthy relationships.

“Whittier Street is the best thing that could have ever happened to me,” she says. “I feel safe going in there, even when I stop by and don’t have any business. Everyone is so welcoming. I don’t ever feel like, ‘I don’t want to be here.’ I love the clinic. I would never go anywhere else.”



# Meeting the Promise of Our Permanent Home

It is hard to believe that a year ago we were breaking ground for our new building and now we are finishing up the details in preparation for our Tuesday, January 3, opening.

We are more than eager to begin serving the community in our 59 exam rooms, four eye care lanes and nine dental operatories – more than double the size of our current clinical operations by 38 more exam rooms, another eye care lane and two more dental operatories.

We are expanding our urgent care/walk-in clinic, x-ray and lab services and adding diagnostic services such as ultrasound and mammography. In a first-of-its-kind initiative in a health center, we are opening the Community Cancer Clinic in partnership with Dana-Farber Cancer Institute.

Our new facility also offers rental space for complementary health care services, including pharmacy and physical therapy, and we have the potential for rental income with our large community education room.

Overall, the building has the capacity to deliver 220,000 visits a year based on adjustments in our hours of service delivery. Over time, we expect to increase significantly our capacity for clinical services as well as other health and social services. This coming year, for example, we'll double our eye-care provider hours. To date, we have identified 33 new positions to staff with people living in our community.

The building's layout, floor by floor, promotes our newly revised patient-centered medical home approach to primary care.

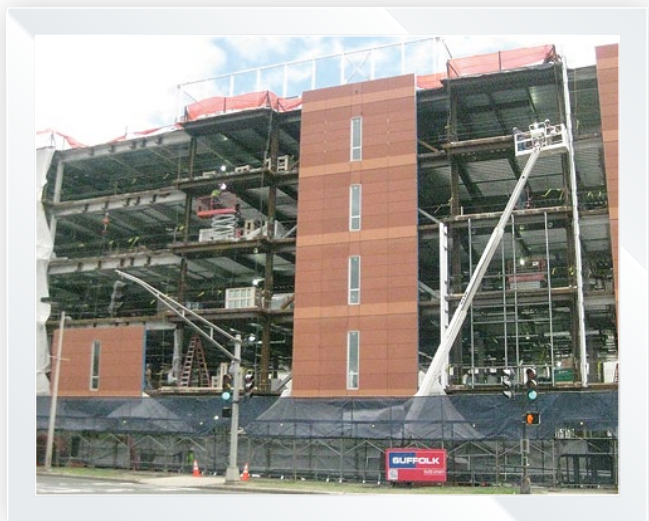
The new layout, in fact, is the last piece needed to begin our application process for NCQA accreditation. For us, patient recruitment is not just bringing people in, but retaining them as well.

In preparation for accreditation, over the past few years, we have reoriented our service delivery by assigning patients to a consistent team of primary care physician, nurse practitioner and medical assistant in our effort to provide comprehensive, personalized care. In addition, our departments work together on a patient's care, ensuring planned visits, follow-up, care coordination and immediate access.

Come January, our current cramped conditions will be a thing of the past. In our eye care clinic today, for example, we have a preliminary testing room that is crammed with four different pieces of equipment yet it is so small that we can only use one piece of equipment at a time. In our new building, we have the space to test a patient at each piece of equipment comfortably at the same time.

And no longer will our CenteringPregnancy participants write comments such as "Needs bigger space" or "I would just recommend a bigger room" on their patient surveys.

In fact, by popular demand from our CenteringPregnancy patients, we are planning a post-partum drop-in center where new mothers can meet with each other while receiving breast feeding and parenting support.



We have also begun providing counseling services to Roxbury Community College students – a need expressed by the faculty. Located directly next to Roxbury Community College, we see the new building as a way to expand our partnership. In a give-and-take, we'll be able to facilitate the enrollment of our clients who want to attend the college.

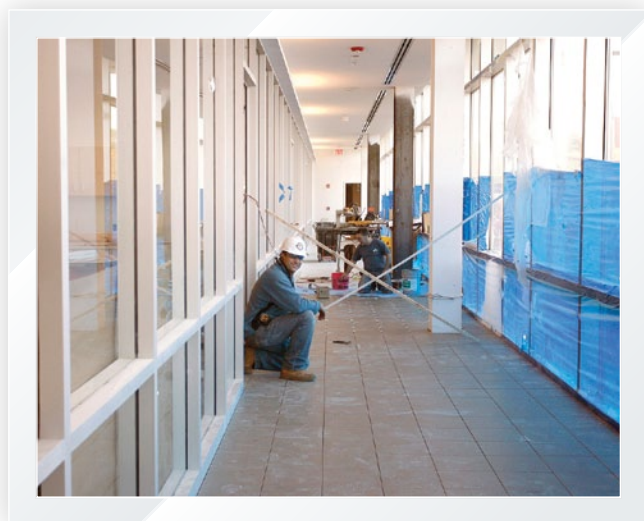
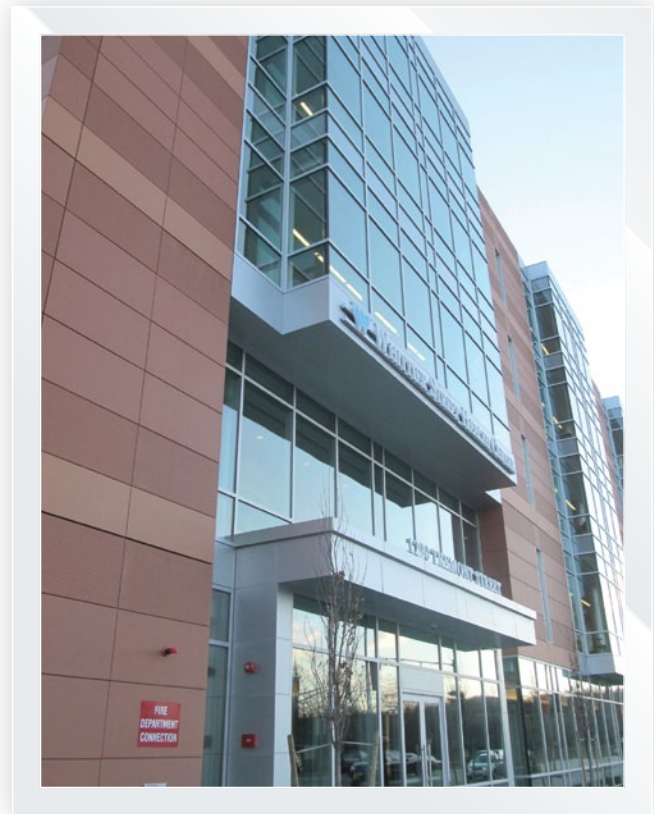
Perhaps most exciting of our new possibilities is the Community Cancer Clinic that includes a second opinion cancer clinic.

Six medical oncologists from Dana-Farber will staff the clinic to focus on our neighborhood's high incidence of breast, prostate, lung, colon and cervical cancers. We'll house our survivorship clinic here and provide cancer education resources. The clinic will work hand in hand with our providers to continue our work in linking cancer survivorship to primary care.

As we move forward, we're ready for a successful transition of employees, patients and operations from our current site to our new building. Over time, we'll capture and position the symbolism and influence of our new facility. Above all, we will continually assess and define new programs to fulfill the promise of our permanent home and use it as a magnet for community collaboration.

Steven Mays, one of our prostate cancer survivors, has been coming to Whittier Street Health Center for 54 years. He has liked us just fine. "It's a good place to come," he says. "The people are nice here."

Wait until he walks through our new doors.



# Highlights

## Topping Off



Robert Gittens, Councilor Felix Arroyo, Frederica Williams, and Mayor Thomas Menino at Whittier's Topping Off Ceremony in March.



Mayor Thomas Menino signs the final beam on Whittier's new building.

## Men's Health Summit



Dr. Christopher Lathan, Dr. Roderick King, Dr. Jacques Carter, Raul Medina, True See Allah, Fernando Domenech, Byron Barnett, John Jenkins and Richard Lynch join Frederica Williams and Roberto Clemente Jr. at the 2011 Men's Health Summit: A Healthier Me, A Stronger Us.



Roberto Clemente Jr. answers a question during the panel discussion at the 2011 Men's Health Summit with fellow panelists Patrick Healy, Dr. Robert LoNigro, Dr. Roderick King, and Cyril Ubiem



Men's Health Summit attendees listen intently to Roberto Clemente Jr.'s remarks.

# International Gospel Concert



Dr. Bobby Jones and Frederica Williams with 2010 Gospel Concert honoree, Reverend Hurmon Hamilton.



Frederica Williams with 2010 Gospel Concert honoree, Reverend Hurmon Hamilton, his wife Dr. Rhonda Hamilton and son.

# Let the Roasting Begin!



Frederica Williams and Latoyia Edwards share a laugh with Dr. Benz



Richard Walsh, Tim Benz, Dr. David Nathan, Dr. Joseph Martin, Dr. Nancy Berliner, Dr. Edward Benz, Jr., Frederica Williams and Gary Countryman at the 2011 Roast for Dr. Edward Benz: Quarterbacking Cancer Care.



Dr. Benz celebrates with son and Roaster Tim Benz, grandson Ian, and Frederica Williams

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Blue Cross Blue Shield of  
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We apologize for any and all inaccuracies or errors of omission. Please contact Timothy Potsaid at (617) 989-3071 so we can improve our lists in the future. Please note that multiyear pledges are recognized only in the year pledged. Thank you!

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Community Development Corporation of Boston  
 Earl Collier  
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**Thank you to all of  
 our other supporters!**

# Fiscal Year 2011: Audited Financial Balance Sheet

## Balance Sheet

### Assets

Current	\$	12,091,277
Restricted Cash	\$	14,895,197
Notes Receivable	\$	18,379,500
Pledges Receivable	\$	363,632
Financing Fees	\$	1,365,792
Fixed Assets	\$	1,515,508
Construction In Process	\$	22,000,551
<b>TOTAL ASSETS</b>	<b>\$</b>	<b><u>70,611,457</u></b>

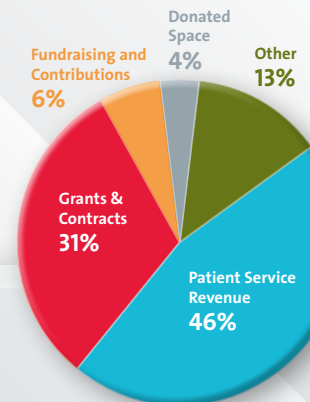
### Liabilities

Current	\$	12,299,243
Long Term	\$	39,229,605
<b>TOTAL LIABILITIES</b>	<b>\$</b>	<b><u>51,528,848</u></b>

<b>Net Assets</b>	<b>\$</b>	<b><u>19,082,609</u></b>
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<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$</b>	<b><u>70,611,457</u></b>
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### REVENUE BY SOURCE



## Statement of Operating Support and Revenues and Expenses

### Revenue

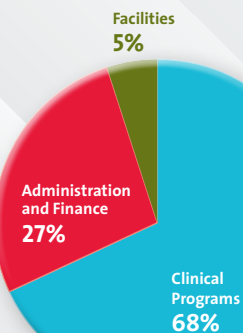
Patient Service Revenue	\$	7,986,973
Grants & Contracts	\$	5,401,926
Fundraising and Contributions	\$	1,052,786
Donated Space	\$	722,984
Other	\$	2,217,823
<b>TOTAL REVENUE</b>	<b>\$</b>	<b><u>17,382,492</u></b>

### Expenses

Clinical Programs	\$	10,646,896
Admin & Finance	\$	4,233,758
Facilities	\$	837,399
<b>TOTAL EXPENSES</b>	<b>\$</b>	<b><u>15,718,053</u></b>

<b>NET OPERATING INCOME/(LOSS)</b>	<b>\$</b>	<b><u>1,664,439</u></b>
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### EXPENSE BY CATEGORY





# WHITTIER STREET HEALTH CENTER

## SENIOR MANAGEMENT

Frederica M. Williams,  
*President and Chief Executive Officer*

Jane Brodie,  
*Director of Mental Health and  
Substance Abuse*

Dr. Mark Drews,  
*Associate Medical Director:  
Adult and Geriatric Medicine*

Dr. Laura Holland,  
*Associate Medical Director:  
Family Medicine and Quality Improvement*

Halima Mohamed,  
*Director of Quality Assurance*

John Reardon,  
*Vice President of Finance*

Nancee Swartz,  
*Director of Human Resources*

## COMMUNITY BOARD OF DIRECTORS

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Pastor Gerald Bell, *Vice Chair*  
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