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JWCH INSTITUTE, INC.:  
RADIOLOGY SERVICES FOR HOMELESS CLIENTS AT  
THE WEINGART CENTER

COMPRISING A 52-SQUARE BLOCK AREA IN THE HEART OF DOWNTOWN, L.A.'s Skid Row is the largest community in the United States that consists primarily of indigent, transient and "low-to-no"-income residents. Over 18,000 homeless men, women and children reside on the streets and in temporary single-room units there, 10,000 of whom, on any given day, cluster within one particular 10-block area hoping to access the programs and services of the nineteen agencies that exist.

Of the many daily challenges faced by Los Angeles' homeless, health care needs in particular are exceptionally severe. According to US government statistics, homeless individuals suffer from health-related maladies at more than twice the rate of people with stable housing. The vast numbers of Skid Row residents, especially those who are dually diagnosed as drug addicted and mentally ill, face a host of serious concerns including but not limited to daily exposure to preventable and treatable diseases, susceptibility to violence, inability to treat even basic injuries, and other concerns that further compromise their already precarious health. Lack of access to basic resources like clean water and hygienic supplies further exacerbate an already-critical situation; over 86% of L.A.'s Skid Row's residents for example, suffer from serious dental disease. With neither health insurance nor access to adequate clinical services, the episodic and acute health concerns of homeless people go untreated, often progressing to chronic and debilitating conditions which require inefficient, publicly-funded emergency room interventions and hospitalizations. A vicious cycle is often spurred by the lack of recuperative care after hospital discharge.

Deeply concerned for this most vulnerable of populations and in homage to the legacy of philanthropist Ben Weingart, whose fortune was earned in L.A.'s central city, in 2003 long time Weingart Foundation Trustee John Gurash encouraged his colleagues to invest in

a twofold strategy to improve life outcomes for Skid Row residents. The first strategy was support for a now-influential study by the USC / Keck School of Medicine's Dr. Michael Cousineau, who identified the need for integrated, collaborative-based health services on Los Angeles' Skid Row as an urgent priority; because Skid Row's health agencies worked in isolation from each other, Cousineau found, they were compromising – if not forfeiting – the great potential for effectiveness that a more collaborative approach could portend. Second, the Foundation would proactively develop an initiative to advance both the collaborative capacity and efficacy of Skid Row's health agencies, and promote the active partnership of philanthropic organizations, whose resources could be strategically deployed to enable measurable impacts on Skid Row service delivery.

Under the visionary leadership of Weingart Foundation President Fred Ali, the Community Clinic Association of Los Angeles was chosen to convene nineteen of the city's leading community health, human service and philanthropic agencies; together, these organizations formed the Skid Row Homeless Healthcare Initiative. SRHHI has since developed a comprehensive, integrated service delivery strategy that will: (a) assist the homeless with registering for public benefit programs that will help cover the cost of care and provide access to outpatient, inpatient, diagnostic and specialty care services; (b) assist with the provision of transportation to and from medical appointments; (c) provide step-down respite or recuperative care after discharge from hospital stays; and (d) ensure each homeless person's assignment to a medical "home" – a designated agency to assist with and coordinate care and case management for persons with chronic or otherwise severe conditions. The collaborative nature of the endeavor underscores the notion that the healthcare safety net for homeless people in Los Angeles must, by the very scope and nature of the problem, be addressed in a cooperative and coordinated fashion.

Each of the clinical partners in the SRHHI has agreed to play a lead role in providing services within their areas of greatest capacity. JWCH is one such agency. Soon to celebrate its 50th anniversary, this stalwart community health organization is distinguished by both the reach and scope of its programs, providing services to people from East to South Central Los Angeles, and conducting both comprehensive clinical services as well as important research. For several years, JWCH

has operated a Skid Row clinic at the Weingart Center Shelter, where they are the only such agency to provide desperately needed radiology and diagnostic services. The exorbitantly high occurrence of tuberculosis and pneumonia, a violent street culture that portends many a broken bone, and the reality that cancers and other tumors in the homeless often go undetected until it is too late, are but a few examples of why diagnostic services are so important. Until the advent of SHHRI however, the unfortunately long period it took to process and receive informed diagnoses on the x-rays resulted in the predictable disappearance of homeless radiology patients, whose competing priorities of seeking shelter and finding food, as well as their lack of access to transportation, often meant they were lost to the urban “jungle” before treatment could be prescribed and provided, further compromising their own health and possibly that of others.

Through involvement in SHHRI however, and with Ahmanson Foundation support, JWCH has been able to upgrade its radiology equipment to state-of-the-art digital capacity. This enables volunteer radiologists at Kaiser Permanente to electronically receive, read and report diagnoses on the x-rays within 24 hours – as opposed to the four weeks it would take without digital imagery – and immediately post them to the SRHHI’s “Virtual Private Network,” an electronic case-management system through which collaborating clinicians can review reports, prescribe quick and effective treatment, and identify a clinical partner whose responsibility that patient will become. It may be argued in fact, that the digitization of radiology on Skid Row was essentially, the missing link in a rapidly evolving healthcare continuum that will finally enable coordinated services from diagnosis to treatment and through recovery, to be most efficiently and effectively provided and managed to some of Skid Row’s most seriously injured and ill residents. The Ahmanson Foundation applauds JWCH Institute and the SHHRI for what likely has been the most dramatic advance in homeless health care that Los Angeles has seen.