



Dear Project Access Community

What a difference a year makes.

What a difference a single year makes. During this time last year, the state of Connecticut, and the rest of the world for that matter, had just begun the process of shutting down non-essential services due to the increasing dangers of the virus that we'd come to know as COVID-19. Just one year ago—none of us could have imagined the difficult months ahead. The sorrow, the pain, and the unease that so many have felt because of this pandemic is unconscionable.

In the face of the dark days that would follow, the staff at Project Access, rather than stand idly by, continued to serve its mission by supporting our patients social and medical needs that for some time seemed to be exponentially growing. Our team of Patient Navigators and Community Health workers worked tirelessly to ensure that the thousands of underserved clients in New Haven and its neighboring towns were not left behind.

As a result, I could not be any prouder of what this team accomplished in the past year. In the year 2020, despite the many obstacles we faced, we were able to serve over 1,700 individuals with urgent medical and/or social needs. We navigated over 3000 medical appointments despite the vast amount delays and cancellations in the ambulatory setting. We educated each of our patients throughout the year regarding the most up to date guidelines on COVID-19 prevention. We compounded these efforts with flu vaccine messages in the fall, and partnered with Access Health CT to provide information and assistance to those needing help with their health insurance application. Throughout this time, we heard the stories of grief and sorrow firsthand. But we also heard the relief of maintaining a human connection during a time of great isolation and despair. These stories grew our resolve, and determination, to continue fighting for those most in need.

Now, as we look ahead to warmer weather, we are beginning to see a light at the end of the tunnel. Millions have already been vaccinated, and millions more will be vaccinated in the coming months. Our mission to ensure equitable access to the vaccine, and other health resources, has never been more important. As members of our community have begun to increase their social contacts, we are pressing on with our information drive of promoting the importance of getting the COVID-19 vaccine, while continuing to follow CDC guidelines on appropriate use of face masks and social distancing. As we look back, we also look forward, and we are determined to continue adapting to the current needs of our patients. That has always been our goal. It will continue to be our goal for as long as it takes to ensure our community members receive the equitable access to resources that they deserve.

Be well,

Giselle Carlotta - McDonald, MBA
Executive Director

PROJECT ACCESS NEWSLETTER

PA-NH Board Member, Dr. Marcella Nunez- Smith, Chairs Biden-Harris U.S. COVID-19 Health Equity Task Force

By: Sheryl Gay Stolberg

Feb. 12, 2021

WASHINGTON – President Biden has said repeatedly that racial equity will be at the core of his coronavirus response. Dr. Marcella Nunez-Smith is in charge of making that happen.

A Yale epidemiologist who grew up in the U.S. Virgin Islands, Dr. Nunez-Smith is the chairwoman of Mr. Biden's coronavirus equity task force, charged with advising the president on how to allocate resources and reach out to underserved populations to fight a pandemic that has taken a devastating toll on people of color.



**PA-NH BOARD MEMBER CHAIRS
BIDEN-HARRIS COVID-19
HEALTH EQUITY TASK FORCE.**

Dr. Marcella Nunez-Smith



Dr. Marcella Nunez-Smith, center, selected to lead the White House's equity task force, addressing a news conference in December as President-elect Biden and Vice President-elect Kamala Harris look on. Credit...Kevin Lamarque/Reuters

WASHINGTON — President Biden has said repeatedly that racial equity will be at the core of his coronavirus response. Dr. Marcella Nunez-Smith is in charge of making that happen.

A Yale epidemiologist who grew up in the U.S. Virgin Islands, Dr. Nunez-Smith is the chairwoman of Mr. Biden's coronavirus equity task force, charged with advising the president on how to allocate resources and reach out to underserved populations to fight a pandemic that has taken a devastating toll on people of color.

Black and Latino people have been nearly twice as likely as white people to die from Covid-19. Though data on disparities in vaccination are incomplete, early reports from the Centers for Disease Control and Prevention show that while Black people make up more than 13 percent of the U.S. population, just 5.4 percent of vaccine recipients are Black. Latinos make up 18.5 percent of the population but are 11.5 percent of those vaccinated.

"Make no mistake about it — beating this pandemic is hard work," Dr. Nunez-Smith told reporters on Wednesday, after the White House named the members of the task force. "And beating this pandemic while making sure that everyone in every community has a fair chance to stay safe or to regain their health, well, that's the hard work and the right work."

Dr. Nunez-Smith spoke to The New York Times about the challenges ahead. This interview is edited and condensed for clarity.

Q. You've been in office just a few weeks. What have you learned?

A. What's great about this is being public-facing. I hear from everyday Americans, every day. People write all the time with their own experiences.

What do they say?

People might write and say it's great that you're getting older people vaccinated, but one person wrote — they were Hispanic — and said, 'Culturally we keep our older family members at home, and it's a multigenerational household.' Or, 'I am an 82-year-old person living in X place and I can't figure out how to register for my vaccine.'

So what do you do when you get that kind of letter?

We're going to set up a system to respond formally, but in that transition period, I would write back and just tell them, "Thanks." And we'd try to connect folks with their local resources. And people write out of gratitude, though I haven't done anything for them yet.

What do they say when they write out of gratitude?

A lot of people say that they are really happy there is a commitment to equity. That is far and away the dominant message I get. I did not expect that.

Obviously, you cannot cure racial disparities in health care overnight, so what are you aiming for, at least in the near term? And then in the long term.

We're charged with rapid response recommendations, and then paving the way for equity in the recovery. We talk a lot about vaccines. But we can't forget about everything else. We think about frontline essential workers and others who still have challenges in terms of having inadequate protection in the workplace. Access to testing is also uneven. It's exciting to see new technologies emerge, but we also have to make sure that everybody can benefit from all of the scientific discoveries.

The C.D.C. recently released a report showing it has data on race and ethnicity for just 52 percent of vaccine recipients. Were you surprised by that?

I can't say I was surprised. This is a lot of my academic reality.

Is tackling the data issue the thing you can do most immediately to get the biggest impact in the fastest time?

It is foundational for us. We can't track or intervene on what we can't see. The absence of the data is itself a reflection on choices that we're making. In an equity march, you have to have data to guide that work. That is just a first principle.

What are you going to do, then, to make it better?

I often say, "Race and place matter a lot for health outcomes in our country." So we think about things like ZIP codes, about areas with socially vulnerable geographic markers, and about bringing in our rural communities as well. The idea is for us to be able to have a tool kit of different metrics that we are able to use and follow. We are never going to hang our hat entirely on one data point.

I'm optimistic that we are going to get to a place where we are able to execute in a data-driven way. I am very optimistic and confident about that.

Gov. Andrew Cuomo said that in New York, among hospital workers, the vaccine hesitancy that they see among African-Americans is through the roof. What are you doing about that? I know that must be on your mind.

It is very much on my mind. And, you know, the governor is correct in that observation, and it is playing out across the country, both in terms of hospitals but also long-term care facilities. We see about a 38 percent uptake in the workers in long-term care facilities who identify as Black and brown.

But there are no transportation barriers, because the vaccine is being given at work.

There are structural barriers. I've heard many stories that invitations to register for the vaccination went out over email, and they have never even activated their email account because they've been working in environmental services or they're working in dietary services. So they weren't even aware that they were being invited. Or there were others who would say that after the second shot, you might want to take a day off or something, but maybe they didn't have any sick days. And they didn't want to feel unwell after getting vaccinated. So I think that in every conversation around vaccine hesitancy or confidence, we are obligated to think a little deeper. I have family members who write me and say they think it causes infertility.

Your own family members?

Oh sure! On the internet it's bad. The misinformation is out there and traveling quickly, and so we're going to be really intentional about that. At the end of the day, you have to figure out who people trust. My cousin didn't write me because I have a role with the administration. She was just, like, you're my cousin and you're in health care. I've had a fair share of these incoming texts.

How often do you get to see the president, and what is his message to you?

We brief the president regularly, the Covid-19 response team. His message is clear and consistent: that we have to lead with equity in the work. It's a clarion call from the president and the vice president. I value how frequently they want to hear directly from us.

Is there any special reward for you in being a Black woman and working for an administration that has made history by putting the first Black woman in the vice president's office?

It's phenomenal. I'm a parent. I have three young children who are biracial and they were thrilled when we had our first biracial president. And now, seeing her making history in this way, it's amazing.

So for now, are you splitting your time between Yale and Washington? What is your plan?

That is the plan. I'm honored to chair the task force, and I'm trying to work myself out of this role.

Sheryl Gay Stolberg is a Washington Correspondent covering health policy. In more than two decades at The Times, she has also covered the White House, Congress and national politics. Previously, at The Los Angeles Times, she shared in two Pulitzer Prizes won by that newspaper's Metro staff. @SherylNYT

PA-NH Supports COVID-19 Vaccine Education & Access in Greater New Haven

In early February, PA-NH launched a COVID-19 vaccine "trusted messenger" initiative that aims to expand COVID vaccination awareness, education, and uptake in communities of color. We are also using our established patient navigation model to connect individuals with COVID vaccine appointments and address access barriers.

THANK YOU to the Connecticut Health Foundation, Harvard Pilgrim Health Care Foundation, and Tufts Health Plan Foundation for providing grant funding to support our work as a "COVID-19 Vaccine Trusted Messenger" in Greater New Haven. With the support of our partners and funders, PA-NH launched a COVID-19 vaccine messaging initiative in February that aims to expand COVID vaccination awareness, education, and uptake in communities of color. We are also using our established patient navigation model to connect individuals with COVID vaccine appointments and address access barriers.



Janet Moran, SCSU MSW Intern & PA-NH CHW Fellow; Juan Carmona, PA-NH Patient Navigator; and Josh Wells, PA-NH Special Projects Consultant schedule community members for COVID-19 vaccine appointments during pantry hours at Downtown Evening Soup Kitchen in New Haven.



PA-NH in the NEWS

With Demand For Community Health Workers Rising, So Does Need For Sustainable Funding

By: *Cara Rosner*

March 29, 2021

New Haven Community Health Worker (CHW) Katia Astudillo helps dozens of her clients navigate the logistics of getting vaccinated and connects them with other health services. She even helps them find rental assistance.

In and around New London, CHW Lizbeth Polo-Smith hands out flyers about COVID-19 safety and vaccinations at churches, laundromats, stores, warming centers for the homeless—anywhere she can. As COVID-19 laid bare Connecticut's health care deserts, it now highlights the efforts of CHWs who labored in forgotten neighborhoods for years. In many ways, they have become a key factor in the state's public health response for marginalized communities during the pandemic.



Millie Landock, Lead Community Health Worker at Project Access New Haven, talks to a client on the phone while doing outreach to connect residents to health providers.

“We need an army of CHWs. The capacity is just overwhelming right now,” said Giselle Carlotta-McDonald, executive director of Project Access-New Haven, which employs CHWs in a partnership with Yale New Haven Hospital.

But the pandemic has raised serious concerns about whether their work is sustainable in the long run. CHWs typically are funded by grant money, which advocates say is problematic.

“We are fully funded by grants and donations,” Carlotta-McDonald said. “I spend most of my time just looking for new funds for next year. Through the pandemic, we’ve lost grants that were scheduled to come this year. Without the funding, I can’t sustain it. It’s just not sustainable. It limits, really, how much we can do.”

Lifelines For Underserved Communities

Astudillo, a CHW at Project Access-New Haven, spends a lot of her time lately doing vaccine-related outreach.



Millie Landock, lead CHW, and Katia Astudillo, Community Health Worker, stand in the lobby of Project Access New Haven. Landock and Astudillo work to close health disparities among residents by connecting them to health providers and social services.

“A lot of our clients are very hesitant of taking” a COVID-19 vaccine, she said. “They don’t know a lot about it. Some of our clients cannot read or write. There is a lot of education; our calls went from being 20 minutes to maybe 40 minutes.”

She’s also seen a surge in the number of people needing rental assistance. Many of the organization’s clients are undocumented and don’t qualify for federal resources, Astudillo said. She connects them with local organizations that can help.

Often, clients will share information with a CHW that they won’t tell a medical provider or another professional, said Millie Landock, lead CHW at Project Access.

“We are one of them,” said Landock, who has been a CHW for almost 15 years. “We speak what they speak. I know what you’re going through because I was there. They see us as one of them. When we call them, they share the personal stuff—their personal struggles, their personal life.”

She adds: “The needs were still there [before COVID-19]. Now it’s just, like, everywhere. The volume is just unbearable.”

Polo-Smith, who works as a CHW at Ledge Light Health District in New London, also educates people about the vaccines and helps them book and get to vaccine appointments. She spends part of her week passing out information in her community to anyone she can.

“I deliver flyers everywhere that people can reach,” she said. “Everybody trusts me. I enjoy what I do.” CHWs live in the communities they serve, which is a crucial factor in their effectiveness, proponents say.



Certified Community Health Worker Donnie Rose, of Alliance for Living, meets with community members at a New London park.

“This is not about us telling folks what to do,” said Jennifer Muggeo, deputy director of Ledge Light Health District. “This is about someone from their community who has trusted relationships and connections, and who knows how to navigate the different systems, and who knows what the barriers are, and can hear what people are hoping for and can help them achieve it.”

CHWs are especially critical in vaccine-related efforts, Muggeo said, as vaccination rates among people of color have trailed those of their white counterparts.

“We are really able to address the barriers that have existed for black, Hispanic and indigenous folks to get the vaccine,” Muggeo said, including lack of computer or internet access, transportation hardships, and trouble understanding English-only forms and websites. “We have worked hard to take those pieces down as much as we can.”

A Question Of Funding

CHWs have various titles and employment structures. Some are employed by health departments or health districts, some by community-based organizations, and some by health centers or hospitals.

“They really are on-the-ground individuals that are helping to guide patients, especially those who have complex issues, language barriers and other social determinant barriers,” said Tiffany Donelson, president and CEO of the Connecticut Health Foundation.

“CHWs were so instrumental in getting to hard-to-reach populations and doing so in order to educate them” in the pandemic’s early days, Donelson said. “They were instrumental in doing the contact tracing. For those who did get COVID, they were exceptionally helpful in getting them to the needed resources. They are so needed as it relates to educating around the vaccine because they are trusted in their community.”



Certified Community Health Worker Donnie Rose, of Alliance for Living, meets with community members at a New London park.

The Connecticut Health Foundation, through grants and in partnership with the nonprofit 4-CT, is funding 45 CHW positions throughout the state: in Bridgeport, Hartford, New Haven, Norwalk, Stamford and New London. Before COVID-19, CHWs focused on various health-related issues. The Ledge Light Health District formed several years ago to address the opioid epidemic and social determinants related to asthma. Project Access started in 2009 to connect recently hospitalized patients with specialty care.

Now, CHWs are taking on a broader scope of work with no sustainable way to fund it. Project Access has six full-time CHWs, in addition to four full-time and two per-diem patient navigators who help uninsured patients access specialty care and address social health determinants, according to Carlotta-McDonald.

CHWs “are doing very, very important work, and we are constantly in a cycle of stressing and looking for the next grant funding to support their time,” Muggeo said. Some recent developments could help.

President Joe Biden’s American Rescue Plan pledges to fund 100,000 public health workers who will work in local communities. According to the plan, they will provide services like vaccine outreach and contract tracing in the short term and then transition to long-term public health roles. The Centers for Disease Control and Prevention (CDC) expects to award grants to approximately 75 organizations through the program. But the grants will be awarded on a competitive basis, and not all entities will be funded.

Geralynn McGee, policy director of the Connecticut Health Foundation, said, “The support in the American Rescue Plan is helpful, but we should continue to consider how we can sustainably fund CHWs,” she said. “This one-time cash infusion is still more like a grant.”

About a year and a half ago, the Connecticut Department of Public Health created a certification for CHWs, which Muggeo said is an encouraging step in getting CHWs the recognition—and funding—they deserve. To date, 120 people have earned the optional certification.

“I hope, as a state, we’re able to look in a broader way” at funding opportunities, Muggeo said.

State lawmakers are debating the next biennial budget amid a challenging financial climate. State Rep. Patricia Dillon (D-New Haven), a deputy majority leader who sits on the Appropriations Committee and co-chairs its subcommittee on public health, said a bipartisan staff is researching if and how the budget may affect CHWs.

Donelson said that steady funding would make CHWs even more effective.

“We need to continue to figure out how we can support this workforce so they can really help us. We really need people who are boots on the ground. It’s a question of funding them,” Donelson said.

WELCOME NEW BOARD MEMBERS



Rabbi Herbert Brockman

Herbert "Herb" Brockman is Rabbi Emeritus at Congregation Mishkan Israel in Hamden. Herb believes his work is not only caring for the spiritual health of the congregation but the community as a whole. Herb has taught at the Yale Divinity School and is involved in building interfaith and interracial relations in the community. He was chair for the Interfaith Cooperative Ministries and recently facilitated a coalition of clergy in the greater New Haven area. They produced an interfaith memorial for the 400,000 plus victims of the covid pandemic. Herb earned an AB in psychology and physical sciences, a BHL and MAHL (Bachelors and Masters in Hebrew Letters), and a PhD from St Marys Seminary and University. He was awarded honorary degrees DD Doctor of Divinity and DHL Doctor of Humane Letters. He is a contributor to the text, *SAFE PASSAGES, A Global Spiritual Sourcebook for Care at the End of Life* (2014, Oxford University Press). Herb founded the PEAH Project that continues to raise over 2000 pounds of vegetables for the local soup kitchens every summer. He was co-founder of the New Sanctuary Movement CT which supports and protects undocumented immigrants from deportation. He also worked with the Jewish community to form JCARR that works with IRIS sponsoring Refugees here in CT. When Herb is not working, he enjoys being with his family, reading, walking, playing tennis and spending time in the woods in Nova Scotia every summer.



Tim Elwell, PhD.

Tim Elwell is the owner of the healthcare consulting company, Timothy Elwell, PhD, LLC. His company works with organizations on: management, leadership and strategic development; due diligence support; proposal development and review; corporate cultural assessments; change management; and operational efficiency. Having held previous CEO/President and other senior executive roles in not-for-profit and for-profit organizations and multiple boards, he understands the impact of good leadership on company culture, employee satisfaction, and innovation. He is passionate about helping the next generation of healthcare leaders develop authentic, stewardship leadership skills. With a PhD in Organizational Leadership, Tim's research passion lies in the area of emotional intelligence assessment and development as well as trust building. He earned his PhD from Indiana Wesleyan University and his MBA from Baruch College. Tim has been happily married to Joy Elwell, DNP, for 37 years and they have three adult children, two grandchildren, and two adopted cats. When not working, Tim and Joy enjoy international travel and lived intercultural experiences.



Michael Virata MD, FACP, AAHIVS

Michael Virata, MD, is an infectious disease specialist who has focused his career to caring for people with human immunodeficiency virus (HIV) infection or acquired immune deficiency syndrome (AIDS). He is the medical director of HIV clinical services at Yale New Haven Hospital-Saint Raphael Campus, and has worked with Yale New Haven Health and the state of Connecticut to end HIV infections—a goal he hopes to achieve in his lifetime.

Special Enrollment Extended

February 15, 2021 >
April 15, 2021

**SE HABLA
ESPAÑOL**

FOR MORE INFORMATION
– Visit Access Health CT or
call the PA-NH office AT
203.773.0838 to schedule an
appointment with a bilingual
Certified Application
Counselor (CAC).

Access Health CT has opened a Special Enrollment Period for residents who currently do not have coverage

Special Enrollment Period
February 15 - March 15, 2021

access health CT

EXTENSION IS FROM FEBRUARY 15, 2021 THROUGH APRIL 15, 2021. CALL TODAY TO SCHEDULE YOUR APPOINTMENT.

PA-NH - 1.203.773.0838

Project Access is Hiring

Two Full-Time Community Health Workers

To Learn More About the Position and to Apply, Please Contact Us at 1.203.773.0838 or Visit Us on the Web @ <https://PA-NH.org>. Thank You and We Look Forward to Meeting You!

Project Access Welcomes Our Newest Interns



Janet Moran, SCSU MSW Student, REACH CHW Fellow and Morgan Horbal, SCSU MSW Student, REACH CHW Fellow


THE great Give[®]
MAY 4-5, 2021
A 36-hour, online-giving event
to support local nonprofits

 The **COMMUNITY** Foundation
for Greater New Haven

 VALLEY COMMUNITY
FOUNDATION

Support Project Access New Haven

May 4 - 5 2021

The Great Give, Greater New Haven's largest, online community-wide giving event, has officially started! Visit our Prizes page above to see all the matching funds and prize incentives provided by the event's sponsors. Donate to your favorite nonprofits serving Greater New Haven, then find new ones to help. Every gift, no matter the size, helps our region get that much closer to emerging stronger from the pandemic. Give now through 8:00 p.m. on May 5. Happy Giving!

To Donate:

PA-NH.ORG

THANK YOU!

