

# STRATEGIC PLAN

FISCAL YEARS 2022-2023 (JULY 2021 – JUNE 2023)



# CALLEN-LORDE

Introduction

Community Health Project, Inc. dba Callen-Lorde Community Health Center (Callen-Lorde) was established when two volunteer-based clinics that provided screening and treatment for sexually-transmitted diseases merged to create a mostly volunteer-staffed, episodic care program housing the nation’s first community-based HIV primary care clinic. Callen-Lorde’s grassroots beginnings over 50 years ago rendered the organization that exists today: the global leader in lesbian, gay, bisexual, transgender and queer (LGBTQ) health care, transforming lives in our communities through excellent comprehensive care, provided with cultural and clinical knowledge and free of judgment. We are welcoming to all, regardless of ability to pay.

After nearly a decade of growth and strong financial performance, 2020 marked a turning point for Callen-Lorde. Like so many in the health care sector, Callen-Lorde’s patient services revenue was decimated by the impact of the coronavirus pandemic. Early in the pandemic, we provided around-the-clock medical respite services at a hotel in Queens, caring for people who would otherwise have been living in New York’s City’s shelter system and had known or suspected COVID-19. At the same time, our staff and patients took to the streets to protest police violence and the state-sanctioned murder of George Floyd, Breonna Taylor and too many other Black lives. The long-term impact of the events of the last year upon the health of the communities we serve is likely to be profound. As we, and the nation, begin to build our way back, we expect that the next several years may be marked by continued increases in the number of uninsured patients, increased prevalence of mental health and substance use disorders and health disparities, trauma and untreated chronic illnesses.

This new era is challenging, but it isn’t unprecedented in Callen-Lorde’s history – we lived through many acute years in the HIV epidemic as well as the epidemics of racist and transphobic violence against our communities throughout our history. And, we have endured many financially lean years. Callen-Lorde’s mission is as critical as ever, and it will remain – we may be transformed, and we may be challenged, but when our communities are in crisis, we respond. We persevere.

The Fiscal Year 2022-23 Strategic Plan provides a framework to guide Callen-Lorde through this pivotal period. Building on pillars that were set forth in prior planning efforts, this plan lays out a series of actions responsive to the imperatives of the moment with an ever-focused eye on the future.

Prior Strategic Plans

During the past five years, Callen-Lorde has undertaken important strategic planning efforts to provide a roadmap for the next phase of the organization’s growth. This process began in 2013 with a large-scale values assessment that engaged various stakeholders over an eight-month process. Ratified in 2014, the plan recommended that Callen-Lorde pursue five strategic priorities to drive business decision making.

<b>Near-term: Financial Sustainability</b>	Sustainable Payer Mix Collaborate with LGBTQ-serving partners
<b>Mid-term: Increase Patients Served &amp; Expand Capacity</b>	Capacity Expansion Homeless Services
<b>Long-term: Increase impact</b>	Model for LGBTQ healthcare

These priorities were arrived at through an inclusive values assessment process collected through surveys, focus groups and key informant interviews. The process revisited and ultimately reaffirmed Callen-Lorde's mission and service delivery model – the board, staff and planning committee unanimously agreed that Callen-Lorde should continue to provide primary medical, dental and mental health care focused on LGBTQ communities. The priorities that resulted articulate a strategy for Callen-Lorde to continue meeting its core mission by remaining financially viable, and to expand capacity in order to respond to ever increasing demand from the communities we serve.

In the ensuing years, Callen-Lorde took important steps towards advancing these strategic pillars, adopting planning efforts that translated these priorities into tactical strategies. In our most recently concluded phase of planning, Callen-Lorde found ourselves at an important moment, on the precipice of opening Callen-Lorde Brooklyn, a new site that aimed to resolve some of the capacity issues that have resulted in waitlists and frustration from patients wanting access for years. Our priorities in the FY 2019-2021 strategic plan were ratified by the Board and adopted as follows:

- I. Becoming the size that our communities need us to be
- II. Ensuring ongoing sustainability
- III. Continuing our multi-year diversity, equity and inclusion initiative, with a focus on anti-racism
- IV. Expanding our global impact by sharing our expertise in LGBTQ health

## Strategic Plan for FY 2022 - 2023

The overarching pillars that were ratified in 2019 remain relevant today, with a focus on meeting the needs of our communities, financial stability, imbuing our work with values of diversity, equity and inclusion and increasing our impact in LGBTQ health. Accordingly, we propose to build clearly upon the work outlined in our previous plan, guiding the organization through this tumultuous time in the local, national and global health care environment.

When we finally opened the doors to Callen-Lorde Brooklyn in May 2020, it was in a world upturned by the dual pandemics of COVID-19 and chronic, systemic racism. Our in-person care was quite limited at that point; patients were afraid to travel or take public transportation and our most vulnerable patients – the homeless, the uninsured – faced risks unlike those seen since the flu pandemic of 1918. For months, almost 90% of our care was delivered virtually, via telehealth or telephone. At the height of the crisis, an inter-disciplinary team of tireless Callen-Lorde staff began a 24-hour respite care program based in temporary hotels housing homeless patients with COVID-19, many of whom were very sick and facing hospitals already over capacity. In the wake of the murder of George Floyd, staff joined protesters in voicing their anguish over centuries of oppression and police violence; Callen-Lorde began a Google Docs spreadsheet Crowd Sourcing Suggestions for Racial Justice, disseminated tips for staying safe during the protests, and provided donor-funded medical and other supplies to folks doing first aid at protest sites.

It is in this context that Callen-Lorde must attempt to pivot from a context of crisis response to resume the daily work of caring for our communities hand-in-hand with preparing for a future with many uncertainties. Our plan must remain flexible enough to allow for the emerging realities of a world in the midst of an evolving pandemic, while at the same time providing a much-needed roadmap for growth and a pathway to maintaining financial sustainability. The urgent anti-racist movement taking place on streets and protests across the country must be further integrated into Callen-Lorde's work, continuing a multi-year initiative aimed at transforming our organizational culture. And finally, we must continue to be the hopeful and striving "little health center that could" by advocating against powerful forces that seek to roll back advances in LGBTQ health, building our research work and dreaming of innovative ways to further our mission and impact. As we have done many times over the years, we will continue to reinvent ourselves for the current moment.

## **Under the FY 2022 – 2023 Strategic Plan, the four pillars guiding Callen-Lorde remain largely intact, updated to reflect current needs:**

- I. Responding to community need
- II. Ensuring ongoing sustainability
- III. Continuing our multi-year diversity, equity and inclusion initiative, with a focus on anti-racism
- IV. Expanding our global impact in LGBTQ health

### **PILLAR 1: RESPONDING TO COMMUNITY NEED**

In our past strategic plans, Callen-Lorde had our sights set upon becoming the right size for our communities: foremost in mind was the successful launching of a new 25,000 square foot site in Downtown Brooklyn. While we remain attentive to physical expansion opportunities, we have reframed this pillar to reflect the reality that, in today's environment, not all expansion efforts will be tied to physical facilities. The impact of the coronavirus pandemic has made clear that remote and virtual health care will be a lasting component of the work of primary care, behavioral health and dental care, long after the emergency subsidies.

In the next several years, Callen-Lorde will pursue strategies of growth to respond to community need under three broad focus areas: A) Expanding the scale of current services; B) Strengthening access to comprehensive care, either directly or through partnerships; and C) Providing care with the appropriate service modalities. An important note: while laid out separately here, these focus areas necessarily overlap and interrelate with one another, and with other focus areas explored in subsequent sections.

#### **A. Focus Area 1A) Strategies of Scale: Offering Patients More of What We Do**

Under this focus area, Callen-Lorde will explore the strategic imperative to scale up select services, based on demonstrated community need, patient demand and financial impact. In the current environment, these factors point clearly to a need to expand behavioral health services and to expand our operations in the South Bronx.

As a Federally Qualified Health Center, Callen-Lorde conducts a comprehensive needs assessment of our service area every three years, identifying the health needs and disparities experienced by our communities. This assessment helps to provide a blueprint for services planning, validating our current service delivery methodology and pointing to the need for changes, as observed through data about our communities' health. As will be discussed at length under Focus Area 2A) Economies of Scale, Callen-Lorde also operates within a healthcare environment that encourages growth as a pathway to greater financial stability, which is of the particular importance as the health center looks to recover from the enormous financial strain that resulted from the coronavirus pandemic and its impact on New York City as the initial epicenter of the virus' spread in the US.

As both the most recent community needs assessment and observation of trends in patient data reveal, behavioral health services are highly in demand at Callen-Lorde. The Behavioral Health Department is presently and chronically on a waitlist to admit new clients, in spite of the recent expansion in Brooklyn. In addition to community demand to expand these services, there is also evidence that expansion of virtual behavioral health services, without the cost of additional real estate, could provide some financial margin, creating a dual missional and financial imperative for service expansion. Demand for behavioral health care continues to outpace our capacity, but there



are several factors that will help us to address this mismatch over the next strategic planning period: the continued growth of behavioral health services at Callen-Lorde Brooklyn; the operation of satellite behavioral health sites; and the increased use of telehealth, which offers the possibility to further expand these highly sought after services without the rate-limiting factor of costly physical space.

During the 2020-2021 COVID-19 pandemic, Callen-Lorde shifted behavioral health services almost entirely to virtual care. We anticipate ongoing need for some volume of on-site services in the future but believe that a majority of behavioral health services may be provided remotely for the long term. Based on these premises, Callen-Lorde will put in place an infrastructure to significantly expand the capacity for behavioral health services by late 2023. This includes building a clinical, technological, and management infrastructure that allows for such expansion while at the same time continuing to improve upon clinical quality.

To achieve successful expansion of behavioral health services, Callen-Lorde has created new Behavioral Health leadership positions to oversee key departmental focus areas, in alignment with the department's strategic plan. These include Associate Director positions focused on Education, Training, and DEI; Health Information Technology & Telehealth Services; Primary Care Integration; and Compliance, Regulation and Specialty. Callen-Lorde's work is currently informed by the input of a Behavioral Health Community Advisory Board, in order to arrive at a model of behavioral health care delivery that is responsive to community needs, while at the same time answering organizational imperatives for sustainability and staff buy-in.

Beyond Behavioral Health, recent data also reveal that Callen-Lorde Bronx is also reaching the limits of the facility's capacity. Callen-Lorde Bronx is home to 6 exam rooms and a small onsite pharmacy. In order to offer the full continuum of primary care and essential supportive services, a dedicated care team occupies every available inch of the small clinic space. In order to best meet the needs of our Bronx patients and community members, we believe that it will be necessary to expand operations in the borough over the next several years. Given the complex health care regulatory and real estate environment in New York City, we will begin to plan for this expansion over the next strategic planning period. This will include the development of a Bronx expansion planning team and the scheduling of regular planning meetings, as well as the identification of key milestones and a projected timeline for an expansion project.

#### **Outcomes to be Tracked**

- Finalize BH strategic plan (Spring 2022)
- Onboard BH Associate Directors (Summer 2022)
- Implement BH expansion activities (Summer 2022)
- Conduct Bronx expansion planning (Winter 2022/Spring 2023)

#### **B. Focus Area 1B) Strengthening access to holistic care and expanding our reach into underserved communities**

The second focus area under Pillar One: Responding to Community Need builds upon conversations of scale to discuss how we will work across sectors to strengthen access to the services that our patients need, while expanding our reach to underserved communities. At a time when critical safety net services are threatened, this work is especially important. We will achieve our objectives through strategic partnerships with complementary safety net providers, offering coordinated referrals and, in some cases, by establishing satellite services delivered at partner sites.





### *Strengthening access across the safety net*

In today's tumultuous health care environment, community health centers have an important role as safety net providers, while facing unprecedented pressures related to growth and sustainability. Social services agencies are also called upon to play an integral role in public health, with growing focus upon collaborative community ventures and evidence-based practices. Competition for resources continues to be fierce in this environment, with reimbursement increasingly tied to demonstrated efficiency and outcomes. In this context, the most successful models for service delivery occur in collaboration and partnership to increase community impact and conserve precious resources. LGBTQ healthcare and community-based services are no exception.



With the push over the last decade to link payment to value and outcome, care management and coordination of care for the most vulnerable and high cost patients has become one of the most important strategies that health care entities – from hospitals to FQHCs to clinically integrated networks and beyond – have at their fingertips. As there is growing recognition about the essential link between health outcomes and social determinants of health (SDOH) such as housing status, income and education level, access to healthy foods and proximity to green spaces, broadening the scope of Callen-Lorde's services, whether through direct provision or well-coordinated referral, is critical.

Joining with community partners to bring our patients more of what they need has long been a priority for the health center, cited as a continuing priority in our strategic planning documents over the past 10 years. As a health center with a focus on serving homeless and unstably housed patients, Callen-Lorde will endeavor during this period to significantly enhance our housing services. With funding support from the American Rescue Plan of 2021, Callen-Lorde will create a new housing team, staffed by housing coordinators. These staff will directly assist Callen-Lorde patients to access housing supports, as well as coordinate access to these services in close collaboration with community partners providing culturally affirming services.

Other potential partners under this model include those offering other critical services to our patients and communities, including but not limited to substance abuse services, food access, workforce development and other programs to address our patients' social determinants of health, which are most often the impacts of systemic racism with intersecting transphobia and/or homophobia. Callen-Lorde will seek meaningful collaboration with partners to achieve a better integrated continuum of care for our patients across the health and social services safety net. This work serves the broader aim to develop a more holistic system of healthcare services for LGBTQ individuals and families across the lifecycle, a goal that will be furthered through the proposed work by identifying gaps and services needed.

### *Expanding our reach through satellite services*

The provision of satellite services co-located within spaces operated by strategic partners are a means by which Callen-Lorde seeks to deepen our reach into historically underserved communities. Callen-Lorde will strategically locate satellite sites within partner organization sites whose clients represent populations that are historically overlooked and underserved (for example, LGBTQ elders, homeless and street-involved LGBTQ youth, TGNB persons of color), located in high need geographic areas or who otherwise serve populations for whom Callen-Lorde has a mission to serve.

This work is a continuation of the priority set forth in previous strategic plans, which noted that satellite sites represent an opportunity to achieve expansion goals without the additional challenge and expense of independently obtaining real estate. By co-locating services within partnering organizations with shared missions and target populations, Callen-Lorde can reach and serve additional patients, furthering

our mission, strengthening partnerships and meeting community need - without considerable start-up or capital expense to the organization.

During the upcoming planning period, Callen-Lorde will develop a decision-making framework related to the regulatory pathways for satellite expansion. Historically, satellites established under NYS Department of Health Article 28 licensure were subject to far more stringent facility requirements than those established under NYS Office of Mental Health Article 31 mental health licensure. New York State has initiated a number of regulatory reforms in recent years that may ease the burden of establishing new sites under the NYS Department of Health and virtual care expansion may lessen the need for physical satellite sites. In order to better understand the possible pathways, Callen-Lorde will consult with fellow FQHCs, experts and planning documents to develop a chart to guide decision-making related to the regulatory environment for future expansions.

Callen-Lorde has plans to provide behavioral health services within two newly opened sites with SAGE and the Brooklyn Community Pride Center, targeted to reach the clients of the partnering organizations, but open to all. These opportunities will not only expand access to care for our targeted communities, but also grow Callen-Lorde's presence and impact in Brooklyn at a key moment when we are attempting to scale up services at our Downtown site. The pandemic delayed the timeline for implementation of in-person services at both sites, and it is not clear yet when these services will be able to safely commence. Callen-Lorde has initiated the process to gain approval from NYS Department of Health and Office of Mental Health to operate within these sites. It is possible that these sites will come online during the fall of 2021 - when the timeline is established, Callen-Lorde will seek federal approval to open the sites under the scope of our federally qualified health center project. Callen-Lorde will continue to build upon this valuable work over the next several years, as we continue to identify opportunities to better meet community need through partnerships and satellite expansion.

Callen-Lorde will also explore partnerships that further the strategic imperative for growth to achieve economies of scale, including merging or consolidating with like partners.

#### **Outcomes to be Tracked**

- Identify strategic partnership opportunities (In process and ongoing)
- Develop regulatory guide for facilities and licensure to aid in decision-making (Spring 2022)
- Launch satellite sites at SAGE and BCPC (Winter 2021/22)

#### **C. Focus Area 1C: Service Modality: Offering Patients More Avenues to Care**

The third and final element under Pillar 1: Responding to Community Need is service modality, or the methods we use to reach and care for our patients. This includes the provision of virtual care and treatment and mobile medical services.



*Virtual health services.* The first modality of focus is medical, dental and behavioral health services provided via telehealth and telephonic consult. Like many health care providers, Callen-Lorde pivoted almost overnight to implement virtual technologies in the spring of 2020. While this effort has been successfully launched, additional investments in technology and patient education are required to ensure the stability and efficacy of these services and to arrive at a model of virtual care delivery that is responsive to the needs of LGBTQ and BIPOC communities.

Callen-Lorde's strategic imperative over the next two years will be to explore the potential for virtual care models that best meet patient needs for these services, which, while ramped up due to necessity during the height of the pandemic, are now here to stay. We believe that virtual care modalities have the potential to greatly expand access to needed services, as well as to replicate the same excellence in quality that we expect from in-person services.

Callen-Lorde will be converting our Electronic Medical Record (EMR) system during the upcoming strategic planning period, which will enhance our ability to provide virtual care. We have struggled with inefficiencies in our current system and are moving to a new system (Epic) that appears to offer significant opportunity for improved data capture and documentation, improved workflows, and fewer end user challenges. This will help Callen-Lorde to decrease staff frustration with the EMR, improve quality measurement activities, and improve billing and claims management. The Epic EMR is widely used by community health centers across the nation and by the hospitals to which we most commonly refer. Achieving HIT compatibility with these partners will ensure that we are able to offer the most responsive care for our patients.

Callen-Lorde will engage patients and the community to inform the implementation of a culturally and clinically competent virtual environment of care through the organization's Community Advisory Boards. Callen-Lorde facilitates four CABs, composed of Callen-Lorde patients and community members who offer valuable input and feedback on our work. Callen-Lorde will also continue to deploy creative media and communications materials to inform and engage patients in virtual care modalities.

*Mobile medical services.* The second modality to be monitored under strategic planning efforts over the next several years is Callen-Lorde's mobile medical services, which are provided via a mobile medical unit (MMU). The MMU vehicle, purchased in 2019 with the support of the New York City Council and the Office of the Manhattan Borough President, is fully outfitted with an exam room, testing and private counseling area and waiting area.

Historically, Callen-Lorde's mobile health services have been deployed as a part of the Health Outreach to Teens (HOTT) program through a licensed mobile medical van that travels to locations throughout New York City where LGBTQ+ youth experiencing homelessness gather. As the needs of the organization and the health care environment evolve, it will be helpful to take a step back and assess the current usage and delineate useful ways to expand upon mobile health activities.

While the MMU has historically targeted youth under the age of 25, recent programming has included outreach to adults via the MMU. In 2020 Callen-Lorde launched the COIN (Cecilia's Occupational Inclusion Network) Clinic, a program created to provide free care to people engaged in sex work, deploying the MMU on a monthly basis in addition to in-clinic care. In the coming planning period, Callen-Lorde will assess further expansion of MMU programming for adults, particularly the provision of dedicated outreach to homeless adults, given Callen-Lorde's status as a Healthcare for the Homeless grantee. There may as well be other patient populations that would benefit from access to mobile health services. As a part of the next wave of strategic planning, Callen-Lorde will endeavor to enact a roadmap for the next iteration of MMU services, one that honors our history while also moving forward towards the needs of the next generation.

#### **Outcomes to be Tracked**

- Develop creative media to engage patients in telehealth services (Early 2022)
- Convert EMR system to Epic (Summer/Fall 2022)
- Create an MMU Operations Plan (Fall 2022/Winter 2023)





## PILLAR TWO: ENSURING ONGOING SUSTAINABILITY

Like so many safety net providers, Callen-Lorde finds itself at perhaps the most difficult financial moment in the organization's recent history. After nearly a decade of strong financial performance, there are several immediate financial challenges that will make it difficult to achieve a budget surplus or breakeven in the near term. These include threats to pharmacy revenue, rising personnel expenses and real estate challenges.

Perhaps the most important financial challenge facing the organization over the next planning period is that Callen-Lorde's most critical revenue stream – our pharmacy, which relies on the 340B Drug Pricing Program – is facing significant changes in the regulatory sphere and pharmaceutical market. The 340B Drug Pricing Program is a US federal government program that requires drug manufacturers to provide outpatient drugs to eligible providers at significantly reduced prices, facilitating access to deeply discounted pharmaceuticals for low-income and uninsured patients. A core intent of the 340B program is to generate savings which can be reinvested to grow and improve services. In New York's Medicaid program, these savings have since 2012 directly benefitted the "covered entity" – the organization that is dispensing the drug. However, there has been increasing interest from NYS Department of Health in reforming this system to maximize savings for the state. The NYS Department of Health planned to "carve out" the 340B managed care pharmacy program in spring 2021, which would see covered entities reimbursed at drug acquisition cost, diverting savings instead to the State's Medicaid program. The majority (71%) of Callen-Lorde's pharmacy revenue is attributable to 340B Medicaid savings; if lost, it would account for millions in lost revenue each year.

Callen-Lorde's patient population and staff, who are reflective of the communities we serve, have unique needs relevant to the challenges described. The Medicaid pharmacy carve out would disproportionately affect Callen-Lorde's revenue streams because of our high reliance on margins from the federal 340B program. This, in turn, means that Callen-Lorde faces a larger financial loss respective to FQHCs overall as a result of the proposed changes.

After fiercely advocating alongside a strong coalition of fellow health centers, the pharmacy carve out has been delayed – a huge advocacy victory. However, the work is not over. NYS Department of Health still plans to implement the pharmacy carve out in 2023. Over the upcoming planning period, Callen-Lorde will continue to work alongside the advocacy coalition to keep this policy change from being enacted, in order to avoid decimating the financial security of hundreds of safety net health care providers across New York.

Unfortunately, the delayed carve out is not the only threat to the pharmacy program at Callen-Lorde. We also have started to see and anticipate further reductions in pharmacy profitability due to the onset of patent expirations for commonly prescribed drugs. It is expected that more generic HIV medications will enter the market over the next several years due to patent expirations. Truvada, the Gilead drug prescribed as pre-exposure prophylaxis, is set to expire in 2021, and new injectable drugs are in the FDA approval pipeline. Callen-Lorde is at the forefront of state and national efforts to eradicate HIV and has provided access to PrEP for over 4,000 patients since the therapy became available. Callen-Lorde also garners significant savings in the dispensing of HIV medications, which, due to their high cost yield significant income when purchased at discounted pricing. This effort has proven to be a marriage of mission and sustainability, with the savings generated applied towards additional supports for high risk populations. Callen-Lorde's commitment to maintaining these supports means that we must identify strategies to generate new revenue in the face of anticipated diminishing pharmacy profits.



Compounding challenges related to the financial profitability of our pharmacy program, over the next planning period Callen-Lorde anticipates significant financial losses from operations. Callen-Lorde is experiencing a critical loss of revenue in the face of rising expenses, with further losses projected in coming years due to anticipated regulatory changes. Routine care delivery was significantly disrupted during the pandemic: Callen-Lorde temporarily closed all locations outside of our main site for in-person care and was forced to furlough staff. For months on end, the health center observed drastically reduced patient visit volume. We are still finding our way back from this massive disruption of routine care delivery.

In addition, costly real estate expenses and rising personnel and benefits costs remain significant issues for the organization. The profits generated by operation of the pharmacy will no longer be sufficient to offset operational losses from patient care. One-time subsidies made available for nonprofits during the pandemic will temporarily assist in addressing these losses. Over the next several years, it will be essential for the organization to enact sustainable financial strategies that help to counteract the impact of these global and local challenges.

There are two primary means through which Callen-Lorde will seek to address these challenges to achieve financial stability and growth in the coming strategic planning period: through revenue growth, and through achieving cost savings related to economies of scale and real estate planning.

A. Focus Area 2A: Enhancing Revenue and Generating Savings

Growth continues to serve the strategic priority to enhance the organization's sustainability by improving economies of scale. Callen-Lorde's financial model benefits from growth. In today's competitive healthcare environment, there is still an imperative to maximize patient and service volume to the greatest extent possible. With increased scale, the organization safeguards against potential challenges related to outlier events and unanticipated shifts in payer mix. In addition, attaining increased scale may advantage Callen-Lorde with regard to hospital and payer negotiations, as well as value-based payment arrangements. Becoming a larger organization renders Callen-Lorde a more desirable partner in potential merger or consolidation discussions, a factor that must be considered in the current health care environment.

It is important to note that there is the possibility that scale is simply not attainable or sufficient to achieve long term sustainability under our current model. In this case, Callen-Lorde may face the difficult decision that joining a larger network offers the most benefit for the communities we serve or that it is the only viable solution for ongoing viability. Even in this scenario, the stated strategy to pursue growth and diversification remains well founded – in cases of consolidation, the larger and more diverse the organization, the greater Callen-Lorde's leverage in negotiations with potential larger partners. Over the FY 2022 – 2023 strategic planning period, Callen-Lorde will explore revenue generation and savings through three primary means: services expansion, partnership and, if necessary, scaling down of select services.

Growth through service expansion. Scaling up services that are in-demand and financially sustainable will be the primary driver of growth over the next two years. Given the unpredictability of the regulatory environment, it is impossible to fully plan for changes that may impact the sustainability of providing certain services. Given our current knowledge, we believe service expansion efforts will be achieved through the following three methods:

- Growing the Callen-Lorde behavioral health practice, through satellite behavioral health practices and virtual care
- Growing virtual health care services across the organization, while advocating for their ongoing sustainability
- Expanding access to services in partnership with mission-aligned organizations

A significant revenue source for Callen-Lorde comes from reimbursement from third party payers. We are closely tracking regulatory changes with regard to reimbursement for virtual models of care, which have been greatly expanded in reaction to the pandemic. In the spring of 2020, the Centers for Medicare and Medicaid Services (CMS) enacted changes that would allow for greater flexibility for providers to seek reimbursement of telehealth and telephonic (audio-only) visits for Medicare patients, including allowing providers and patients to access services from “distant sites” rather than requiring in-clinic settings. In August 2020, CMS followed up with a proposed rule to render some of these flexibilities permanent and extend others until the end of the federal emergency declaration.

The New York State Medicaid Office has similarly expanded flexibilities during the pandemic, and, at the time of this writing, provides reimbursement for both telehealth and telephonic (audio-only) visits. Further, New York State promulgated reimbursement guidelines in 2019 that allow for the provision of medical and behavioral health services to patients in their homes or other non-clinical locations. Previously, telehealth offerings were limited to mental health services provided in a hub-and-spoke model, meaning that patients could only receive telehealth services at a licensed clinical facility provided by another licensed clinical site or facility.

This regulatory change offers Callen-Lorde the opportunity to address clinical needs of patients for whom travel poses hardship, including post-surgical (including gender affirming surgery) care; patients who face violence on the streets and public transit; and, patients who travel long distances for Callen-Lorde’s niche clinical competencies. However, unlike some states, New York State has not implemented a reimbursement structure that requires parity of reimbursement equal to in-person billing in either the Medicaid program or the commercial payor environment.

Despite some recent progress in telehealth policy, several barriers remain. For one, it remains uncertain whether the temporary policies enacted during the pandemic will be made permanent. If these policies revert to pre-pandemic positions when the state of emergency is lifted, reimbursement for virtual care will decrease significantly. Advocacy for the continuation of regulatory relief in this arena will remain essential.

In addition, Callen-Lorde faces uncertainty with regards to caring for patients from outside of New York. We have always been able - and remain able - to see patients who reside out-of-state for in-person care. One of the beauties of telehealth is that it has, thus far, allowed us to continue to care for patients who have left New York State in the course of the last year or were never NYS residents but could no longer travel to us for in-person care. However, the state of emergency protections for providers offering virtual care to patients who are permanently or temporarily outside of New York State at the time of the virtual visit may be coming to an end. A majority of Callen-Lorde’s out-of-state patients reside in New Jersey. We are exploring temporary clinician licensure in New Jersey and may be able to continue to provide virtual care for these patients. However, this solution is likely not achievable for all 49 states other than New York. Regulatory relief on these issues will be essential in order to maintain sustainable virtual health services.

It is likely that other avenues may open up over the next several years, due to changes, both anticipated and unforeseen, in today’s tumultuous regulatory healthcare environment. Part of this work will mean continuing to have conversations with key partners regarding opportunities for growth, as well as maintaining strong internal infrastructure to track and understand the shifting regulatory framework under which we operate. Activities during the upcoming planning period will necessarily include conducting advocacy for regulatory changes to enact parity in virtual care reimbursement for federally qualified health centers and make temporarily enacted flexibilities permanent. In addition, we will advocate for protections for providers caring for patients from across state lines.



*Growth through partnership.* To further this strategy over the course of the upcoming strategic planning period, Callen-Lorde will conduct analysis and preparatory planning related to strategic partnerships. This will include an examination of the financial impact of anticipated partnership ventures such as satellite sites and shared programming. In addition, Callen-Lorde will prepare a multi-year fiscal analysis to test various financial scenarios.

*Scaling down unsustainable services.* Lastly, in addition to scaling up services that prove to be profitable and respond to community need, we may need to make difficult decisions to scale down or eliminate services that are not financially sustainable. To accomplish the goals laid out in this focus area, Callen-Lorde will enlist consultant support to conduct in-depth analysis of in-scope services and develop a decision-making framework to guide our path forward (as integrated within the multi-year analysis discussed above).

#### **Outcomes to be Tracked**

- Tracking and analysis of telehealth regulations on the national, state and local levels (Ongoing)
- Multi-year analysis and scenario-planning complete (Fall 2022)

#### **B. Focus Area 2B: Real Estate and Remote Work Planning**

The second Focus Area calls upon Callen-Lorde to plan and implement a sustainable model for balancing in-person and virtual care, one that supports the organization's real estate needs as well as the changing needs of patients and staff from a technological perspective.

*Real estate planning.* One of the driving fiscal challenges for Callen-Lorde historically has been the extremely competitive New York City real estate market. In order to expand, we had to compete in a market that rendered any growth in services an extremely costly endeavor. The expense of leasing and outfitting space rendered the margin of error exceedingly slim for any new venture.

At the time of this writing, the calculus has changed. In a pandemic and post-pandemic world, there is greater uncertainty within the commercial real estate market in New York, as companies pivot to models of long-term remote work. Further, Callen-Lorde's own shift to virtual care models has decreased our reliance on access to real estate to implement expansion. It may now or soon be possible to achieve significant growth in revenue-generating services without acquiring additional space. Further, in the coming years, the cost of acquiring space to grow in person services may become less prohibitive.

Callen-Lorde owns our main site located at 356 West 18th Street in Chelsea neighborhood of lower Manhattan. All other administrative and service delivery sites in the Callen-Lorde network are leased. Among leased properties, renegotiation will be required on all sites (other than Brooklyn) within the next five years: the lease at the Thea Spyer Center for Integrated Care in Manhattan will be up for renewal in early 2023 and the lease for our Bronx clinic will expire the following year, in 2025. In addition to lease issues, Callen-Lorde faces critical capital improvement needs at its owned property. While Callen-Lorde has been awarded capital grant funding to conduct a portion of these repairs, the total capital budget for renovation and repairs needed far exceeds the funds awarded.

Given these factors, further near and long-term planning in the realm of real estate is needed to ensure that the organization can continue to grow as needed to meet community demand, as well as tackle long term capital improvement needs. In fall 2020, Callen-Lorde made the decision to sublease





our medical clinic space located on the 4th floor of 230 West 17th Street, negotiating a yearlong, renewable sub-lease for the space with a non-profit partner. Administrative sites may need to close in the coming year, in order to further lessen the organization's lease burden. There are also questions as to what physical infrastructure and real estate is needed to enhance staff experience and provision of virtual care services. Callen-Lorde will also seek to renegotiate or refinance the terms of our existing loan for Callen-Lorde Brooklyn capital costs. If current rates are able to be accessed, Callen-Lorde anticipates substantial savings over the life of the loan.

*Remote work infrastructure.* In order to achieve the savings described above with regard to real estate, Callen-Lorde must build sufficient infrastructure for some staff to provide virtual care to ensure that we are equipped to sustain and increase the level of virtual services available for our patients.



Research suggests that there are many benefits to remote work arrangements for staff: the reduced commuting time and expense and increased flexibility and autonomy often translate into greater job satisfaction, lower absenteeism and higher employee retention.<sup>1</sup> However, there are also challenges; chief among them for employees is workplace isolation and the perception that opportunities for advancement are more limited. Some employees may not have privacy or adequate workspace in their home environments. For employers, challenges include a loss of organizational culture, concerns about data security and reduced oversight of remote employees.<sup>2</sup>

To accompany the environment of care planning that must occur on the patient side of virtual care (see Focus Area 1C), Callen-Lorde seeks to develop a healthy workplace culture and environment for telework for a portion of our staff. To that end, over the next two years we anticipate the development of comprehensive policies and procedures to inform our virtual care delivery standards.

#### **Outcomes to be Tracked**

- Brooklyn Loan refinanced (Fall/Winter 2021-2022)
- Real estate plan developed and updated as needed (Fall 2022)
- Remote work policies, procedures and trainings disseminated (Late 2021/Early 2022)

### **PILLAR THREE: CONTINUING OUR MULTI-YEAR DIVERSITY, EQUITY AND INCLUSION INITIATIVE, WITH A FOCUS ON ANTI-RACISM**

The third component of Callen-Lorde's strategic planning for FY 2022 - 2023 is the essential and ongoing work to assess and improve the agency's efforts to foster an inclusive and affirming environment for staff and patients. This effort began under an earlier plan in order to improve organizational culture, as well as further Callen-Lorde's organizational goal to reach the most underserved members of LGBTQ communities.

The organization is investing in this work during a time of tremendous growth. Since 2014, Callen-Lorde has grown from about 200 staff and one clinical location to more than 370 staff working across five clinical sites. Our organizational culture is evolving, with multiple and distinct clinical and administrative sites that are increasingly geographically dispersed. The ideals of honoring staff diversity and fostering an environment of equity and inclusion are mission-imperative for Callen-Lorde, in addition to being sound ethical and business practice. As the organization follows the previously described strategic pillars of responding to community need and ensuring ongoing sustainability, we are taking the necessary steps to ensure that staff, patients and community members continue to feel Callen-Lorde is a welcoming and affirmative place to work and to receive services. In addition, we continue to prioritize work that will

<sup>1</sup>Jay Mulki, Fleura Bardhi, Felicia Lassk and Jayne Nanavaty-Dahl. Set up remote workers to thrive. MIT Sloan Management Review. VOL. 51 NO. 1: Fall 2009.

<sup>2</sup> Ibid.

ensure the organization is best positioned to care for communities who experience the effects of stress and oppression as a barrier to achieving health and wellness.

#### *Background and Work Completed To Date*

Callen-Lorde worked with Pipeline Consulting to complete the first phase, which included in-depth organizational assessment via an all staff survey, staff focus groups, and work with a staff committee that resulted in a series of high level recommendations. The recommendations are categorized into five areas: Leadership, Employment Processes, Training and Education, Services and Programming, and Assessment, Evaluation and Accountability. We then hired Mary Pender Greene Consulting (MPGC) to work with us to implement the next phase of this important work.

Diversity, Equity and Inclusion (DEI) Phase II began in 2018 and is expected to continue throughout the duration of the strategic planning period described herein, given that the culture change that Callen-Lorde seeks to achieve must be built over time and requires significant ongoing commitment and attention. The investment in DEI work is ongoing and evolving, with the goal of driving continued institutional change and improvement.

It is Callen-Lorde's overarching goal to honor diversity and embed the principles of equity and inclusion within all of the work that we do. One example of this was seen in Callen-Lorde's system for distributing COVID vaccines. Callen-Lorde sought to ensure the equity in terms of which of our patients received COVID vaccines first, due to limited supply. Callen-Lorde developed an algorithm to assign each patient a vaccine access score, based on age, health issues, race and housing status. This scoring was then used to prioritize vaccination for the highest need patients, and guided patient outreach efforts. In addition, Callen-Lorde created the VEEC (Vaccine Education and Engagement Committee) to directly address the systemic influences that create health disparities – in this case related to COVID-19, but always in the larger context of community health and wellness – in order to work toward health equity and justice. The focus of the group is to always uplift, recognize and appreciate the diverse collection of identities, experiences, perspectives, and abilities of our communities.

#### *DEI Phase II Work to Be Completed*

During the upcoming planning period, Callen-Lorde will continue to work with MPGC to implement the following projects:

**Board Diversity.** Callen-Lorde prioritizes diversity, equity and inclusion across all levels of the organization, including amongst board leadership. The board will continue to prioritize recruitment of board members who reflect the diversity of the communities we serve.

**Improving Employment Processes.** In the upcoming strategic planning period, DEI work will also continue within the realm of Human Resources, to enhance diversity among our staff and improve hiring, retention and advancement opportunities by standardizing related policies and procedures using a DEI framework. The team will also implement staff racial affinity groups to make dedicated space for processing and furtherance of anti-racist practices among peers.

In the first year, Callen-Lorde will focus on revising the recruitment and hiring process in line with the Recommendations from the organizational assessment. Callen-Lorde's Human Resources Department will review current recruiting, hiring, retention, evaluations, development and promotion policies and practices using a DEI lens. This includes working with Human Resources and a DEI Partner Committee to revise and standardize key policies and protocols.



By late 2021, Callen-Lorde, with the assistance of MPGC, will initiate Employee Resource Groups (ERGs)/ Affinity Groups that will provide staff processing spaces and opportunities for collaborative input. These ERG's will be composed of three groups for Black identified staff, staff of color writ large, and white staff striving toward anti-racist allyship. The ERGs/Affinity Groups will take place monthly and will assist in further disseminating anti-racism practices and mindset among the staff at large.

*Staff Training.* In 2019, Callen-Lorde started to provide in-person, 2-day Undoing Racism training to staff in order to provide a historical perspective on how racism is systemically woven into policies and practices in the United States and to provide a shared analysis and language in order to carry forward anti-racism work within the organization. As of February 2020, approximately 75% of staff had participated in the training. When COVID hit, the trainings were paused. Our consultant partners have now iterated the training to a virtual model, and the trainings will restart in late 2021. Additionally, a brief module on anti-racism is incorporated into new staff orientations, and the Callen-Lorde management team participated in trainings about having difficult conversations and restorative practices in the Winter of 2020.

During this strategic planning period, Callen-Lorde, with MPG Consulting, will offer staff training on recognizing and interrupting microaggressions/microbehaviors by Spring 2022 as well as assess for additional staff training priorities. Throughout 2021, Callen-Lorde will pilot a comprehensive management training for our clinical site leadership teams as well as provide management training resources and infrastructure through LinkedIn Learning.

**Improving Staff and Patient Experience.** Callen-Lorde will undertake a number of steps over the next several years to assess the current level of patient and staff satisfaction with regards to DEI initiatives and experience. The DEI Committee will be tasked to provide the general direction for evaluating patient experience of DEI, with support from MPGC. Callen-Lorde will also offer a number of opportunities for staff to take the lead on changing the culture of the organization, by developing DEI workshops; developing staff-led racial affinity groups as well as building and fostering cross-racial dialogues.

#### **Outcomes to be Tracked**

- Maintain board representation reflective of the demographic composition of patient population (as reported in annual UDS data), in keeping with HRSA health center board requirements (Ongoing)
- Review of HR policies and procedures completed (Spring 2022)
- Standardization of academic requirements for jobs, hiring protocols and onboarding completed (Summer 2022)
- Staff engagement survey developed and administered (Fall 2022)
- Racial affinity and cross racial dialog groups formed (Fall 2021)

#### **PILLAR FOUR: EXPANDING OUR GLOBAL IMPACT IN LGBTQ HEALTH**

The final pillar of Callen-Lorde's FY 2022-2023 Strategic Plan is to advance Callen-Lorde's mission to be a model of excellence in LGBTQ health, at the same time expanding access to culturally affirming, clinically knowledgeable health care for LGBTQ patients. The strategies described below are focused on exploring exciting and timely ways to further our mission, in the face of historic setbacks to the progress that has been gained in LGBTQ health and rights in recent years. In order to advance this pillar, Callen-Lorde proposes strategies to expand our impact in two different areas: through dedicated advocacy work that will amplify the voices of our communities on a local, state and national level; and



by expanding our mission to include strategic ventures that fall outside of the scope of our health center service delivery model.

#### A. Focus Area 4A: Advocacy

The volatility of today's healthcare landscape has required Callen-Lorde to ramp up advocacy efforts on behalf of our patients. Callen-Lorde's Senior Director of Policy and Advocacy has the goal of leveraging our rich clinical and programmatic expertise to advance LGBTQ health equity with progressive public policy, funding, agency and health planning. The Policy and Advocacy staff lead organizational efforts that include the development of policy priorities, ongoing work with external coalitions on issues that impact our patients, a monthly internal, multi-disciplinary Advocacy Meeting, coordinated social media and public awareness campaigns as well as building relationships with, and educating, elected officials and decision makers about our priorities.

After four intense years of threats against health equity and LGBTQ rights on the federal level, Callen-Lorde is optimistic about the current administration's policies with regard to our ability to carry out our mission. The Department of Justice is now taking steps to protect the Affordable Care Act and protect health care coverage for millions. On President Biden's first day in office, he signed an executive order prohibiting discrimination based on sexual orientation and gender identity in employment, housing, health care, education, and other areas. In May 2021, the Department of Health and Human Services announced that the Office for Civil Rights will enforce the ACA's non-discrimination protections under Section 1557, prohibiting discrimination based on sexual orientation and gender identity and reversing the Trump administration's policy to allow health care providers to deny access to health care on the basis of a person's sexual orientation or gender identity. And on March 31, 2021, President Biden issued the first presidential proclamation recognizing a Transgender Day of Visibility.

Callen-Lorde is hopeful that resources for health centers and safety net providers will flow in a way that we haven't seen since the Affordable Care Act was signed in 2010. The American Rescue Plan, passed in March 2021, provided \$6.1 billion in one-time funding for the nation's health centers to prevent, mitigate, and respond to COVID-19, and \$1 billion in capital funding to repair the aging infrastructure of these health centers. Callen-Lorde will continue to track federal and state legislation to ensure that we are prepared to respond to funding opportunities as they are announced.

Callen-Lorde also celebrates a number of recent advocacy victories on the state and local levels: in 2019 we again led advocacy to pass legislation that enables victims of sexual assault, who are minors, access to a 28-day regimen of PEP without parental consent. We worked with allies and partners in coalition to pass numerous important bills for our community including the Gender Expression Non-Discrimination Act, the Ban on Conversion Therapy (both in 2019) and the Repeal of Walking While Trans (2021). As previously mentioned, Callen-Lorde also led a year-long campaign to Save New York's Safety Net and delay the transition of the Medicaid pharmacy benefit from Managed Care to Fee for Service. This move would have eliminated our ability to access millions of dollars in savings from the 340B federal drug discount program, dollars which are in turn reinvested in our care and services.

In spite of all this good news, the need for continued advocacy is clear. Among our priorities for the next planning period are the cancellation of the pharmacy carve out plan that is now slated for 2023; the permanent expansion of the flexibilities in virtual care at a time when these services have proven to be essential to ensuring access to care; regulatory relief to protect licensed providers in the provision of interstate telehealth services; and continued advocacy to protect funding for non-profit health centers in the face of historic budget deficits in the City budget, including protection of City Council Expense funding initiatives that currently provide over \$1.3





million in annual support for Callen-Lorde's services for uninsured and underserved patients. In order to advance the increasingly important advocacy work of the department, Callen-Lorde plans to hire a Manager of Policy and Advocacy to carry out departmental priorities and support the Senior Director. In the coming strategic planning period, Callen-Lorde will also launch Care with Action, a new initiative that will engage patients and community members digitally and in-person. The Advocacy team seeks to foster community and build power by encouraging patients to 'show up, speak out and/or tell your story.' Digital and physical signage will be placed in our clinics and pushed out through social media. Patients and community members will be invited to sign-up for periodic alerts about important LGBTQ health (and related) topics, advocacy initiatives and opportunities and will be offered space to share personal stories and testimonies to grow a community of people who will amplify Callen-Lorde's communal voice and help bring about change. The soft launch of this initiative is projected for Fall 2021.

#### **Outcomes to be Tracked**

- Hold monthly Advocacy Meetings and annual Advocacy Day activities (Ongoing)
- Soft launch of Care with Action (Fall 2021)
- Hire and onboard Manager of Policy and Advocacy (Winter 2021)

#### **B. Focus Area 4B: Research**

In addition to providing high-quality, culturally competent healthcare and supportive services targeted to LGBTQ communities and people living with HIV/AIDS, Callen-Lorde also serves as a center of excellence – helping to train the future leaders in LGBTQ health while blazing new trails through research and other strategic partnerships. Learning more about our patients, their health, and their health care needs is essential to providing patient-centered, evidence-based care and research. Callen-Lorde's research seeks to understand how to implement interventions and introduce new tools to our unique communities, furthering our mission to providing the best care to the LGBTQ community.

Callen-Lorde's dedicated Research team is comprised of the following positions:

- Senior Director of Research & Education
- Clinical Research Manager
- Clinical Research Coordinator
- Research Assistants
- Associate Medical Director, TGNB Health
- Associate Medical Director, Adolescent Medicine

Supporting their work is the Research Operations team, which meets on a monthly basis to discuss all things research at Callen-Lorde. This group is unique in that it is not restricted to research staff but welcomes representatives from all departments to participate. Building openness and collaboration soundly within our research framework, Callen-Lorde seeks to further a research agenda that is reflective of the diversity of our staff and patients and receptive to community needs.



Given the importance of staff input within the Research Department, in February 2020, Callen-Lorde's research team launched an anonymous quantitative survey (via Qualtrics) to assess:

- Staff familiarity of studies at Callen-Lorde
- Staff attitudes towards research projects
- Staff training needs on research topics
- Staff research questions and ideas for studies
- Staff preferences for dissemination of research findings
- Staff recommendations to improve research communications at Callen-Lorde



The survey yielded valuable feedback, through which staff conveyed a desire for more communication about research studies and priorities, sought opportunities to learn, participate and present research and offered suggestions for research questions. As a result, Callen-Lorde's research team will develop a plan to address the survey results to improve staff knowledge and involvement in research at Callen-Lorde. During the upcoming strategic planning period, Callen-Lorde will conduct the following activities:

1. Research team will conduct informational meetings with each department to explore research collaboration opportunities
2. Research team will develop a way to regularly "check-in" with each department to foster more collaboration and ensure more opportunities to propose research questions
3. Research team will review recommended study ideas and explore viability for funding
4. A bibliography of publications arising from studies at Callen-Lorde will be maintained on the organization's website

Callen-Lorde is currently participating in a number of research studies under sub-awards from collaborating institutions, which include City of New York – Hunter College, Columbia University, Fenway Health, and Johns Hopkins University. Outcomes from data-driven patient interventions have also been presented at the International AIDS Conference, World Professional Association of Transgender Health (WPATH), United States Conference on AIDS, IAPAC among others.

The COVID-19 pandemic forced all of Callen-Lorde to adapt quickly, and Research was no exception. Research staff and all research studies shifted to a virtual basis. The LITE study, still our largest study, which looks at HIV incidence among transgender women, was modified to allow participants to do all their study visits at home including HIV self-testing. All cash stipends changed to gift cards. The TURNNT study (working with Columbia University), which investigates determinates of health, PrEP uptake and sleep among transgender women of color, also shifted to remote, with participants doing online assessments and home HIV testing. For the Legacy Study (collaboration with Fenway Health), we added a series of questions about COVID, including about COVID infection and viral syndromes and COVID vaccination. Although it has been challenging to pivot to remote work, the team has been very successful at meeting all grant timelines.

Despite the challenges presented by the ever-changing environment, Callen-Lorde's research portfolio continues to grow. Our newest study, SMASH, examines how cisgender MSM receive prevention messaging about PrEP. Callen-Lorde's research department also recently initiated an international survey about surgeons' requirements before gender affirming surgeries. We have submitted an abstract to the European Professional Association of Transgender Health, and plan to attend a conference to be held in August 2021.

In the coming strategic planning period, Callen-Lorde seeks to assess the advantages of pursuing independent funding. Obtaining a direct grant from the National Institutes of Health (NIH) or the Centers for Disease Control would undoubtedly result in larger awards. However, these grants are extremely complex to administer, and Callen-Lorde has limited in-house infrastructure to perform this oversight. One possibility for growth may be to pursue independent funding from a non-federal entity and/or R21 smaller NIH grants. In addition, Callen-Lorde's research team plans to apply for grants that will investigate vaccine hesitancy among LGBTQ individuals, as well as uptake of PrEP among youth.

#### **Outcomes to be Tracked**

- Hold monthly Research sub-committee meetings (Ongoing)
- Assess viability of independent research funding (Spring 2023)

#### **C. Focus Area 4C: New Strategic Ventures**

The third and final focus area under Pillar 4 is the pursuit of strategic ventures that would fall outside of the scope of Callen-Lorde's current service delivery model, which is focused upon direct patient care through the delivery of primary care, medical care, dental and pharmacy services, alongside fundraising and advocacy work to advance this model. These ventures represent innovative or creative ways for Callen-Lorde to reach new patients, advance our mission to be a global leader in LGBTQ health and expand our impact geographically. Following is a list of potential ventures to be explored.

**Emergency Response Teams.** Over the past five years, Callen-Lorde has acted on numerous occasions to respond to emergencies, demonstrating a gift for the nimbleness, innovation and problem-solving necessary in rapid response. In October 2017, under an effort organized by and governed by New York State in collaboration with the Puerto Rico Department of Health, Callen-Lorde sent a team of medical providers and nursing staff to Puerto Rico to provide emergency medical relief following the devastation of Hurricane Maria. In the spring of 2020, Callen-Lorde again rose to the moment to create a rapid response team to provide 24/7 medical care for homeless patients with COVID-19 who were temporarily isolated in hotels under an initiative of the Department of Homeless Services of the City of New York.

Through these experiences, Callen-Lorde has gained valuable insights and capabilities related to rapid mobilization of emergency medical care. In the upcoming strategic planning period, we will explore the viability of formalizing this deep-seated knowledge within a dedicated program, building upon the strength and commitment of our passionate staff, who have never shied away from a challenge.

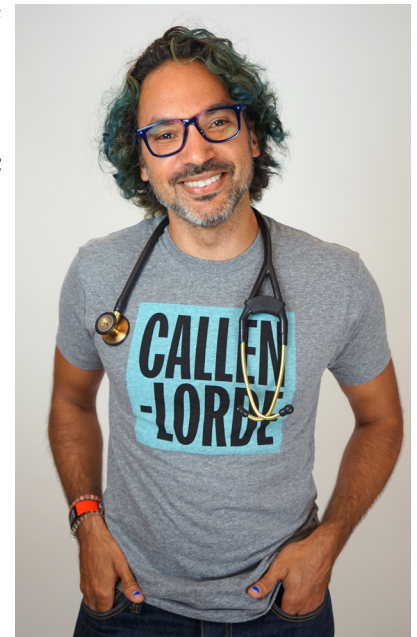
**Occupational Health Services/Employee Assistance Program.** Callen-Lorde has long grappled with how best to meet the medical needs of our staff. Historically we have declined to treat staff as patients, in order to avoid potential conflicts of interest or potential privacy issues. Instead, we offer generous health benefits, including additional coverage for staff who identify as transgender and/or gender non-binary (TGNB) to counteract coverage challenges. With the onset of the coronavirus crisis and resultant barriers to community-based care, Callen-Lorde launched an Occupational Health (OH) program that tiptoed into this space. The OH program was started to assess staff for coronavirus exposure, but soon thereafter began offering basic services for our staff during a time when they are likely unable to see their usual provider for primary care needs.



The pandemic has had a particularly negative effect on the mental health of our frontline healthcare workers. A recent survey conducted by Mental Health America found that 93% of healthcare workers were experiencing stress; 86% reported experiencing anxiety; 76% reported exhaustion and burnout; 75% said they were overwhelmed; 70% are having trouble sleeping; and 68% are experiencing work-related dread. For Callen-Lorde staff, these stressors are compounded by the repeated trauma that systemic racism, transphobia, and homophobia plays in our institutions and our country.

In order to address these challenges, Callen-Lorde and several mission-aligned partners plan to pursue the overarching goal of addressing the increased impact of trauma in our workforce by exploring our collective capacity to create a competent anti-racist LGBTQ focused Employee Assistance Program (EAP) or employee health and wellness program.

This access was and is particularly important in the face of the lack of accessible, culturally affirmative transgender healthcare, as a significant number of Callen-Lorde identify as transgender or non-binary. Over the next planning period, Callen-Lorde will assess staff interest in a further expansion of this program, as well as the program's financial sustainability.



EAPs in general assist employees in resolving personal problems – and, we believe, have the potential to increase wellness in the context of systemic racism, transphobia, and homophobia that may be adversely affecting their lives and work. In addition to the personal experiences of employees in direct service roles, vicarious trauma from patient/client experiences often creates additional stressors/barriers to continued employment, and the care our staff and healthcare/social services staff writ large are providing in the COVID pandemic have rendered unsustainable levels of stress.

Over the next planning period, Callen-Lorde will assess staff interest in a further expansion of an Occupational Health/EAP program, as well develop analysis of the program's financial sustainability. In addition, we will explore funding opportunities to support the exploration of this program model. Telehealth Beyond Borders. Given the rapidly changing regulatory environment for virtual health care, Callen-Lorde seeks to explore the potential to reach patients that reside outside of our service area, some of whom reside in communities with an enormous deficit in culturally or clinically competent LGBTQ health care providers. We know that the demand is present: over 10% of our patients typically come to us from outside of New York City, some traveling long distances to access care. In the coming strategic planning period, Callen-Lorde will monitor the regulatory environment and assess the possibility of providing virtual care for patients across state or even national boundaries.

In the upcoming planning period, Callen-Lorde will meet with contacts at the National Association of Community Health Centers and other sister health centers in LGBTQ health to gain knowledge and explore the potential structure for a sustainable telehealth program across state lines. Following knowledge gathering, Callen-Lorde may decide to work with a consultant to develop a business and implementation plan for either or both of these ventures.

### **Outcomes to be Tracked**

- Develop feasibility brief on Emergency Response Teams (Fall 2022)
- Submit funding application(s) to support Occupational Health/Employee Assistance Program (Ongoing)
- Track regulatory landscape with regards to telehealth across state lines (Ongoing)