Due date is 12 months after signature on Grant Acknowledgment Form

Grant Report Form

The Joanna Foundation

Section 1. Organizational Information

Organization Name: CARES for the Unhoused

Mailing Address: 135 Cannon Street, Suite 405

City: Charleston State: SC Zip: 29425

Authorized Officer for this Grant: Cristin Adams

Individual's Email Address: swordsc@musc.edu

Individual's Title: Medical Director

Individual's Phone Number: (854) 222-4539

Have the grant funds been fully expended? Yes (●) No ( )

If "No," stop here and contact The Joanna Foundation for consultation.

Section 2. Grant Summary

Start Date *(date on p.1 - mm/dd/yyyy)*: 07/01/2024

Grant Amount: $ 5

Project Title: Point of Care Machines for CARES for the Unhoused

Overall Purpose *(select one)*

- Operating support [ ]
- Administrative/technical support [ ]
- Seed money/startup funds [ ]
- Specific project/program [ ] *(insert title or one sentence summary below)*
- Matching funds [ ]
- Capital campaign [ ]
- Facilities/equipment [✔]

Were major changes made to the project after the grant was received? Yes ( ) No (●)

If "Yes," please explain why and summarize the changes as part of your Summary of Impact.

Section 3. Summary of Impact

Separately, using software of your choice, write a concise summary of how the grant helped achieve the objective of the request. For example, you may mention activities to date, progress toward milestones, participation by volunteers, partners or audience members, and/or significant achievements. You may use metrics to show change or anecdotal examples to illustrate impact. You may use bullets or lists. Describe the difference that The Joanna Foundation grant made to your organization in this time frame. We recommend one page of text or less. You may add items that showcase your work, such as a photo, graphic, chart, media article, testimonial, or link to a short video.

When you are satisfied with your draft, save your Summary of Impact in pdf format, attach any additions, insert your material after this page, and submit the combined file (consisting of this 2-pg form + your materials) as a single pdf file.

SUMMARY OF IMPACT

The Medical University of South Carolina (MUSC) CARES for the Unhoused (CFU) program is dedicated to providing free, compassionate, and comprehensive healthcare to individuals experiencing homelessness or housing instability. Our mission is to bridge the gap in healthcare access for this vulnerable population through in-person, telehealth, and street medicine outreach services, ensuring no one is left without the medical care they need. Cost and transportation are the most ubiquitous barriers experienced by our patients, which often stand in the way of obtaining crucial laboratory testing to inform medical care plans. These barriers are often compounded by trepidation toward engaging with the healthcare system due to prior experiences with stigma and mistreatment. Funding from The Joanna Foundation enabled point of care testing (POCT) by purchasing an i-STAT Point of Care Blood Analyzer which truly transformed our ability to care for our patients, maximizing the impact of each patient encounter to improve patient outcomes and strengthen trust.

Over the grant period POCT was used about twice a month, and patient satisfaction for encounters where POCT was used was 100% 'Satisfied' or 'Very Satisfied.' Clinicians were invited to complete surveys after utilizing POCT and universally endorsed that the results informed their treatment plan including addition or elimination of medications for high blood pressure, congestive heart failure and diabetes as well as electrolyte supplementation.

Prior to offering POCT, among patients with high blood pressure 69.2% had a metabolic panel within the last year and after offering POCT there was an increase in the percent of patients with hypertension with a metabolic panel within the last year at 74.2%. The percentage of patients that completed needed labs increased from 42.1% to 52.6%. Mean time to completion of labs also decreased from 13 days to 8 days.

Another element of our program enhanced by this grant was our educational component. Educational material for how to utilize and document POCT as well as how to use results in clinical care was developed and continues to be utilized by all of our providers and volunteers. The i-STAT machine requires venous sampling which is a skill that is often limited in medical training. In order to increase confidence in this area, further educational experiences were organized which allowed volunteers to hone this skill which will be useful in other low resource settings.

When one of our longstanding patients with hypertension who had refused to get labs done for years due to a prior traumatic experience in the hospital was offered POCT he responded emphatically 'You mean y'all can just do it here? That's great of course I will!.' A clinician noted 'I saw a patient with uncontrolled hypertension who was already on the medications that can be used without knowing about kidney function. Getting lab testing during his clinic visit allowed me to start additional medication to help control his blood pressure without worrying I was putting him at risk.' With regard to sustainability, we received funding for additional i-STAT cartridges from the Alliance for Academic Internal Medicine as well as for other POCT for hemoglobin A1C and Hepatitis C.

Due to the transient nature of the unhoused population, it is imperative to capitalize on each point of contact. The opportunity for real-time results provided by i-STAT POCT has enhanced the quality of care we are able to provide to this vulnerable population in order to move toward health equity.