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#### Announcer:

In this episode of Tim Talk, Tim speaks with Cathy Bean who is passionate about making healthcare accessible and equitable for all.

# Tim Dentry:

Thank you for joining us for Tim Talk. I'm Tim Dentry, President and CEO of Northern Light Health. With this podcast, we shine a light on the critical work to bring just medical care to some of the most underserved populations here in Maine.

## Tim Dentry:

I'm pleased to have a guest on our podcast today, one of our colleagues who lives this issue. She goes into homeless shelters and travels to Maine Islands to ensure people have lifesaving flu and COVID vaccines among many other needs.

# Tim Dentry:

Please join me in welcoming Cathy Bean, registered nurse and manager of Community and Telehealth Services for Northern Light Home Care and Hospice. Cathy, thank you for being here today.

### Cathy Bean:

Thank you Tim. It's a pleasure to be here today.

### Tim Dentry:

Absolutely. Why don't we start by having you tell us a little more about your work, and more importantly, the why behind your work. Why you do it? Why you're passionate about it?

#### Cathy Bean:

Well, I've been involved in community health work since 2000 actually, and I really have focused on serving the most vulnerable of our populations, and whether that means home bound elderly people, homeless people, Mew Mainers, people who live in remote areas. I really feel like we should be removing barriers to care and making sure that they have equal access to care.

### Cathy Bean:

In the last several years, I've run a very large flu program, and one of the success stories is that we do school located vaccine clinics for flu vaccine. And the importance of these clinics is that we hold them during the school day and we make sure that every student has equal access to a vaccine. So they don't have to rely on a parent who has the time or the transportation or the understanding to bring them to an appointment. It is there during their school day so every student at that school has equal access.

## Cathy Bean:

We've also focused on bringing vaccines, as you said, to homeless shelters. We've gone to parks. We have followed food vans that deliver food to the homeless and set up on street corners to vaccinate there. We serve undocumented people without any questions asked about their insurance or their identity, their citizenship.

### Cathy Bean:

This is all really important work that we did to lay the groundwork for COVID, little did we know, but they trust us. They've seen us coming into their shelters now for several years.

# Cathy Bean:

So when they see us with our Northern Light badge and they see our faces, even though it's half a face at this point, they know that we're people that they can trust who aren't going to call ICE on them. Mind you, it's a mile down the road from our clinic in South Portland. They need to be able to trust us because there is a lot of unease among that population.

#### Tim Dentry:

That is terrific. You struck several chords with me, very, very deeply as it relates to my passion for what we do for our mission, our collective mission. Our promise, our Northern Light promise is making healthcare work for you.

## Tim Dentry:

And we talk about that all the time. We've looked at that for years. We have a bunch of examples of doing that. We're moving that needle, but what I love about what I just heard you say is that it's really related to those, these are your words, the most vulnerable and that trying to identify ways to remove barriers to care. Oftentimes I think we think of barriers to care, have to do with whatever a telephone system or a scheduling system or some system, some highfalutin system. And you're talking about just human barriers to care.

#### Tim Dentry:

And I just really, really value that because it does lead to trust because our currency in healthcare is trust. If the community trust breaks down or is shadowed by things of a health system's making or not, then the entire organization is going to suffer tremendously. And in my long career, I know of hospitals that actually folded because the community trust was just gone.

### Tim Dentry:

So we are very fortunate in Northern Light and especially through COVID, we have stepped up our efforts to remove barriers, to make healthcare work for those, including, and especially the most vulnerable. Thank you so much, Cathy, that I believe that we're building on, we're building our trust. We're earning, earning trust. So thank you so much. You're doing that day in and day out.

#### Tim Dentry:

So just this week we celebrated the birth of Dr. Martin Luther King Jr. the champion of social and medical justice of course. It is a good opportunity right now, Cathy, to discuss the numbers around the disproportionate spread of COVID-19 among communities of color here in Maine.

### Tim Dentry:

We know that African Americans make up only 1.4% of our state's population, but 3.1% of cases and 3.4% of hospitalizations. Communities of color tend to have more barriers to accessing vaccines. What have you and your team experienced? And help us understand what you all have been doing to ease some of those barriers.

### Cathy Bean:

I feel like I want to mention, it's 3.1% of cases now, but when the pandemic began in that first summer, we found that in Cumberland County, it was close to 20%. And I also chair the Cumberland District Public Health Council, which is from the Maine CDC.

#### Cathy Bean:

And so we pulled together talking groups to talk about why is this affecting this community? What are we not getting to them for information about how to keep themselves safe? It had a lot to do with where they live and work. And so getting to some of those employers and saying, here are some things you can do to keep your workforce safe were really important.

## Cathy Bean:

We've also formed relationships with elders in the communities, and not just the black and brown community, the Asian community, there's an Arab community. So by forming those relationships, they can then go to the community and say, these are trusted people, let us talk about vaccination.

## Cathy Bean:

A lot of work was done on dispelling myths related to the vaccine. As we all know, there's a lot of misinformation out there. So teaching them in their own language, through cultural brokers about these myths and that this is safe and you can come and get this, was really very successful.

## Cathy Bean:

We did a video early on in several languages that showed us going to a home and vaccinating a person of color. And it showed them here we are, we're coming to your home. We're not threatening. We're going to, we can give you a vaccine and you can trust us.

## Cathy Bean:

And again, I keep coming back to that word trust, but it really is the cornerstone of what we do, is we, as you said, earn their trust and I really like that more than building. Because we do earn it and we're honored to earn that trust and then we want to preserve that. So that's really the most important thing in what we do.

#### Tim Dentry:

That's terrific. And I'm going to ask you a question about the languages, and then you said several languages. One of my vivid memories through, let's call it the mass vax stage that we are in, mass vaccination site, going to the expo and being shown. They were right there. So it wasn't like they were hidden. They were right out front for the people from the communities that were coming in for their vaccinations.

#### Tim Dentry:

All the little binders and each binder was a different language and it explained the process. It dispelled a lot of the false information and then gave facts and data and information. I thought that is just so cool and so amazing.

#### Tim Dentry:

So for our listeners, what are the languages that you think of off the top of your head that were part of those binders?

### Cathy Bean:

Oh, we have a lot. Lingala, Somali, French, Portuguese, Spanish. Those are the major ones that we were able to have readily available. Others, we could quickly look up on the internet. We could use our Google Translate. We have a translator tablet. But if we knew ahead of time that we were getting a large Vietnamese population, then would have a cultural broker and translators there. So that was helpful.

### Cathy Bean:

We actually opened separate clinics for the Asian population early on, because if you can remember, there was a lot of Asian hate going on. People were blaming Asians for this virus, and they were really hesitant to come to mass vaccine sites.

#### Cathy Bean:

And so the Unified Asian Community in Maine reached out to us and said, how can you help us? We have people that are in their homes that won't come out. So we opened up our vaccine site just for them and we did a clinic for that group. This was really important and we were able to have their translators there with them.

### Tim Dentry:

Yeah, that's terrific. And I just want you to know Cathy that so many times through this nearly two years now, it's just hard to fathom that, but nearly two years now. I mean, I've expressed gratitude and sung the praises of everyone in Home Care and Hospice who stepped up in so many ways almost to the point where Colleen Hilton, the Senior Vice President and President of Home Care and Hospice, was saying, okay, enough already with the praise, but I can't do it enough.

# Tim Dentry:

So I just want to, with all of our listeners right now, just say, thank you for what you do and what your team does. It's terrific. And it is about building trust and earning trust, that is for sure. I believe that it's going to be something that when all of us hang up our cleats, as they say, at the end of our careers whenever that is, out in the future, we'll look back at this time and say, wow, did we step up?Did we earn people's trust? Did we make a difference in people's lives in a tremendous way? So thank you for doing that. You're living that.

#### Tim Dentry:

You and all of Northern Light Home Care and Hospice have engaged some community partners. So you can't do this alone. You mentioned some of the organizations that you did work with, and by the way, I just wanted to also state that I was thinking of one of our prior podcasts, one of our earlier ones, and this was when there was, and still is, but back then a lot more it seemed like vaccine hesitancy and that kind of thing.

## Tim Dentry:

And one of our guests was Dr. Calendar, who is a famous transplant surgeon, and realized that the supply of organs was so minimal, and he wanted to figure out why that was. So he met with

communities, and especially because a large percent of the people on the demand side that needed an organ transplant were of minority communities and communities of color, etc.

### Tim Dentry:

So he went right to them and he earned their trust. He talked about this whole way in which he did that, and he transformed the supply side of organ transplants. So it takes partners is the point. You and your team have engaged community partners who greatly improved your reach with your vaccination outreach efforts. Can you tell us more about those partnerships and the success you've realized as a result?

### Cathy Bean:

Absolutely. So we've had many community partners. The ones that come to mind, MAIN, which is the Main Access Immigrant Network. We've been there weekly since September offering flu vaccine and COVID vaccines. And again, building trust. They come every week to the center, they get to know us. And eventually they say, I'm thinking about getting this vaccine. Can you give me information?

## Cathy Bean:

We had the New England Arab American Organization with their RV out there at clinics with us, and it's a really neat little vehicle that you can set up and it gives you some visibility.

# Cathy Bean:

The Unified Asian Communities have been great partners. All of the school districts that were willing to take that leap and say, come into our buildings and vaccinate our students. That wasn't without some political turmoil for some of them, but they did it because they knew it was the right thing to do.

## Cathy Bean:

We've also engaged housing communities for senior housing sites. Some of them in Portland have a large number of different ethnic groups that live there. So we've engaged with those groups of people.

### Cathy Bean:

There's many, many more, but just to give you a sense of the groups that we've been working with.

#### Tim Dentry:

That's terrific. I think that gives a very good sense of partnerships and fun on that. What word comes to mind?

#### Cathy Bean:

There are times when it's fun. It's almost always rewarding, although exhausting. That's why I say almost because there are days when we need reminders, but I think every single day something happens that recharges us and makes us remember why.

### Cathy Bean:

Whether it's the seven year old that gives you a big hug and says, you just saved my life. And they really mean it with tears in their eyes, because they've seen people around them getting sick. Or it's the little old lady who is just beside herself, because she's finally been able to get a booster shot.

### Cathy Bean:

Something happens every single day that keeps us going in this work. Or, even the homeless teen shelter. The hesitant teen who after six months said, oh, fine, I'll get it.

### Cathy Bean:

All these things in our hearts stay there and keep us wanting to get out of bed the next day and keep doing it. As you said, it's been two years. That's a long time to keep doing it, but the people keep us going.

#### Tim Dentry:

That is beautifully stated, and as we're beginning to wrap up, those are great words to begin to end on. But before we say goodbye, do you have any other closing thoughts or anything else you'd like to share?

#### Cathy Bean:

I think the one thing I wanted to say, and you mentioned Colleen Hilton and the work of Home Care and Hospice. And I feel like the work that I do, I am empowered because I know that if I say, yes, I have the support of my organization. And my organization has the support of the home office, you and the others to say, okay, we jumped in and said, yes, we're not exactly sure how we're going to do it. We're going to think about this differently because our first thing was, no, we can't possibly, but let's think about this for a minute and figure out how we can make this work for this group of people.

## Cathy Bean:

And it's going to be okay. I know that if I say it, no one's going to come down and say, well, what do you mean you did that? It's okay. And they will support it, and they will probably roll up their sleeves and come out and work alongside me and get it done. And that really is the most important thing to keeping this work going.

### Tim Dentry:

Wow, that is fabulous. And listeners, I ask you to re-listen to what Cathy just said. That is a great description of our definition of a term that we have used a lot during the pandemic, and that is a culture of yes. And the culture of yes means, like Cathy said, and I'll give one example.

### Tim Dentry:

It was a Saturday afternoon, and I can't remember exactly the day of the week when the first vaccination arrived, but it was the Saturday before that. And I got a call from a very high government official, who said, "We're going to get these in, can you do it? Can you start to get them into arms?"

### Tim Dentry:

And I said, absolutely. I had no idea how we were going to do that. We were at our peak of patient census at the time of COVID positive and all the other things that that involved, but the answer first was yes and then we figured out how to do it.

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## Tim Dentry:

And I like a further explanation. We know we're in economics is always tied in with clinical. They're inseparable, even though clinical is the priority, but I love what one somewhat mentor of mine said, and that is, "When you look at a problem or look at an opportunity or a need or something has to happen, then what you want to be able to do is figure out the best solution and then figure out the economics."

### Tim Dentry:

So that's part of a culture of yes, too. Like you said earlier, do the right thing. It's the right thing to do. So I'm so glad that you feel that way, that everyone operates that way, that you don't have... We know there's vaccine hesitancy. We don't want to have hesitancy in the way we do the best care that we could possibly provide. So thank you so much for that.

## Tim Dentry:

And Cathy, thank you for being a guest on this show and thank you to our listeners for tuning in. Please continue to be kind to one another, embrace our culture of caring and our culture of yes. Until next time, I'm Tim Dentry wishing you all a wonderful day and a wonderful week. Thank you.

#### Announcer:

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