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Health care providers have role in helping human trafficking victims

HEALTH PULSE TEAM 

New York health care providers are working together to better train their staff to help trafficked persons when they seek care.

More than 30 experts in the fields of medicine, social services and criminal justice gathered on Thursday in Lower Manhattan to discuss ways they could collaborate to stop sex trafficking and labor trafficking.

"We want to help this discussion as health care providers are evolving and thinking about how to implement this," said Cecile Noel, commissioner of the Mayor's Office to End Domestic and Gender-Based Violence, which hosted the forum. "Our response as a city, as city entities and hospitals, will be stronger because of our collaboration."

New York state enacted a law in November 2017 that requires hospitals and clinics to create policies to identify, treat and refer victims of human trafficking. The state Department of Health [published regulations](#) last month that require hospitals to post the national hotline number and train clinicians and security staff.

One element of training is teaching physicians and other providers that helping people who have been trafficked can be a drawn-out process, said Dr. Veronica Ades, director of the Empower Clinic for Survivors of Sex Trafficking and Sexual Violence at Gouverneur Health in Manhattan.

"As health care providers we want to solve the problem really quickly and want to ride in on a white horse," she said. "We need to think about providing information but not expecting someone to disclose immediately."

In a survey of 76 respondents who had experienced human trafficking, 28 said they had accessed health care while being trafficked, according to a [report compiled](#) by the nonprofit Restore NYC. Half of those individuals said their health care provider could have done something differently. Among their top recommendations were that health providers offer information about human trafficking, ask better questions about their experience and establish a rapport with patients.

There were 2,245 people trafficked in New York from December 2012 to December 2016, **according** to U.S. Department of Health and Human Services figures.

Better sharing of electronic medical records by hospitals could improve providers' efforts to combat sex trafficking, said Dr. Peter Sherman, chairman of pediatrics at BronxCare Health System, formerly Bronx-Lebanon Hospital Center.

Monefa Anderson, senior assistant vice president of nursing at NYC Health + Hospitals, said she is looking for a standard tool that could provide training across the health system's thousands of employees.

"I'm sitting here with palpitations thinking at the health-system level. The ED is just one point of entry," she said, referring to the emergency department. "I'm thinking about all our ambulatory care clinics and school-based health clinics. It's not just about the EDs."

Northwell Health formed its Human Trafficking Response Program in May 2017, starting at Huntington Hospital on Long Island. It has since begun training people at Lenox Hill Hospital in Manhattan and Phelps Hospital in Sleepy Hollow. About 2,000 employees have been trained, and Huntington Hospital has intervened in nine cases of human trafficking so far.

Staff members complete a computer module and a live training course through a collaboration with Restore NYC. Several staff members opt to complete further training and become facility champions. After a four-question primary screening, these champions conduct a more extensive screening for patients who present signs that they might be involved in trafficking, said Dr. Santhosh Paulus, leader of the systemwide task force.

"It's not just physicians, nurses and social workers. We train everybody. It's the phlebotomy team, front desk registration, the security team and transport," Paulus said. "Our goal is to have all 68,000 employees trained." —Jonathan LaMantia

Lawyers, doctors addressing lack of medical care in immigrant detention

The combined efforts of physicians, lawyers and community-based advocates are needed to address the lack of access to medical care for immigrant detainees in the U.S.

There are about 440,000 immigrant detainees across the country, and reports from the U.S. Department of Homeland Security and other entities have raised questions about whether many of these individuals are receiving adequate care for acute, chronic and mental health

conditions. In New York, areas of concern have included lack of access to blood pressure medication and pregnancy care, according to the New York State Health Foundation.

"I still think none of us really know the scale or the size of this," said Dr. Joseph Shin, co-medical director of the Weill Cornell Center for Human Rights, speaking at a panel discussion hosted by New York Lawyers for the Public Interest and the health foundation Thursday.

But, he said, working with community and legal partners can aid in better understanding and addressing the dangerous problem.

Shin said he and other physicians are working with immigration lawyers to gather evidence, such as previous health records, evidence of trauma or untreated conditions in detention facilities, and mental health evaluations.

"Our role is to be able to educate the courts," he said.

Lauren Quijano, community organizer for the health justice program at the New York Lawyers for the Public Interest, said she is now working with about 60 physicians to address the issue and raise awareness of the conditions in detention facilities.

It is part of a much broader issue of "denial of health care to those that need it and are entitled to have it," said Brian Byrd, program officer at the health foundation. —Jennifer Henderson

NYP partners with Philips on remote monitoring

New York-Presbyterian has partnered with the Dutch health technology company Philips to provide software to physicians at Weill Cornell Medicine to monitor patients outside the hospital.

Philips' eCareCoordinator allows physicians to track patients' vital signs, ask them questions about their care and conduct live video chats. Another software program, eCareCompanion, lets patients push health data, such as blood pressure or glucose levels, through connected medical devices.

The partnership builds on New York-Presbyterian's existing virtual care programs. The health system has used telemedicine to make its psychiatrists and neurologists available to patients at more facilities. Patients are also able to request a telehealth visit from home through software powered by American Well.

The health system conducted about 110,000 telehealth encounters last year, up from 1,000 in 2016, said Dr. Peter Fleischut, senior vice president and chief transformation officer at New York-Presbyterian. He said the ability to conduct video visits will help the system avoid unnecessary hospitalization when the Philips system detects a problem.

"Now that we've done more than 100,000 telehealth encounters we think we have a good care model and team to take care of the patient at home," he said.

New York-Presbyterian started using the software to monitor patients with hyperglycemia, and it recently started offering it to those patients with congestive heart failure and to new mothers with high blood pressure. The health system is interested in expanding its use for other patients in maternal health and diabetes care.

Insurers are not currently reimbursing the health system for the service. Patients will not be responsible for paying for monitoring out of pocket. —J.L.

NYU Langone launches environmental exposure center

NYU Langone Health is looking to advance the study of how environmental and social exposures affect the public's health.

Dr. Leonardo Trasande, director of the Division of Environmental Pediatrics, has been tapped to lead the new Center for the Investigation of Environmental Hazards, NYU Langone said. The center will focus on advancing technologies and other tools to measure the effects of environmental exposure and translate that research into understandable health information the public can use.

"We're trying to bring scientists to the table that haven't otherwise been part of the conversation," Trasande said.

The center will focus on the way environmental exposures affect conditions, including brain development, obesity and cancer, NYU Langone said.

The center will have a core team of about 15 to 20 scientists, Trasande said, with other scientists and clinicians contributing to different research and initiatives.

It will host its first symposium, "Environment and the Brain," in May. —J.H.

AT A GLANCE

DSH CUTS: The Medicaid and CHIP Payment and Access Commission, a federal advisory panel, voted 16-1 on Thursday to slow down funding cuts to hospitals that provide a disproportionate share of services to Medicaid and uninsured patients, [Modern Healthcare reported](#). MACPAC recommended Congress authorize a \$2 billion cut, down from the \$4 billion reduction that is planned for Oct. 1. The Greater New York Hospital Association said earlier this month it expects New York facilities to receive \$1.3 billion less, starting in October, if Congress doesn't act.

PHILANTHROPY: Some nonprofit hospitals conduct nightly wealth screenings, using public data to determine which patients are the most likely to contribute large donations, [The New York Times reported](#). NYU Langone Health was listed among the health systems that use the practice to generate philanthropy leads.

FLU FAIL: People's own immune systems may be to blame when they get the flu after receiving a vaccination, [STAT News reported](#).

GET A ROOM, ALEXA: You can now buy a modular hospital room from EIR Healthcare on Amazon, starting at \$814 a square foot, [CNBC reported](#).

ER BILLS: After Vox reported on a patient's \$20,243 emergency-room bill following a bike crash, Zuckerberg San Francisco General Hospital [reduced it](#) to \$200. The hospital is not in-network with any private insurer.

Inline Play

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