Youth Health Coordinating Council
Ward 8 Secret Health Clinic Shopper Report

A report from the Center for Health and Health Care in Schools
supported by a grant from the Horning Family Fund

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This report reflects the work and contributions of the following Youth Health Coordinating Council members: Tenisha Edwards, Wayne Thomas and Erick Davis. These three students are seniors at Friendship Collegiate Academy and Anacostia High School and live in Ward 8.
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There are over 70,000 residents in Ward 8, the poorest area of Washington, DC and along with Ward 7, it’s most geographically remote. Approximately 36% of the Ward 8 population consists of children and youth, 18 years or younger. Children in the District of Columbia are at greater risk for poorer health and life outcomes than children in other parts of the United States. This is especially true in Ward 8, where poverty, violence, and poor access to health and social services plague its residents. And despite the presence of a variety of community based health facilities in Ward 8, the adolescent health data indicates that something more or different is needed to address teen health needs and access to care. (Every Kid Counts in the District of Columbia 16th Annual Fact Book 2009).

The project.

Through the generous support and funding of the Horning Family Foundation, the Center for Health and Health Care in Schools at the George Washington University School of Public Health and Health Services has engaged young people from Ward 8 to be part of a Youth Health Coordinating Council (YHCC). The role of the YHCC has been to discuss and research the health issues that most concern young people in Ward 8 and to identify available community health resources that might respond to these issues. Where barriers and challenges are identified, the project would propose solutions and action plans to make Ward 8 health resources stronger and more youth accessible. As part of its efforts, the YHCC planned to present these concerns and solutions to policymakers and providers with the goal of improving teen access to health services in Ward 8.

The YHCC has undertaken several activities in the past year. The students identified the unmet health needs of teens in Ward 8: they identified existing community health services and reviewed their web sides, and developed the key criteria that they believe make health services more “teen friendly.”

Community clinics in Ward 8.

Seven health clinics are listed on the Internet as primary health centers in Ward 8. These include:

Anacostia Community Health Center at 1328 W Street, SE  
Congress Heights Clinic at 3720 Martin Luther King Jr. Ave, SE  
Stanton Road Health Center at 3240 Stanton Road, SE  
Woodland Terrace Health Clinic at 2041 Martin Luther King, Jr. Ave, SE  
Family and Medical Counseling at 2041 Martin Luther King, Jr. Ave, SE  
Children’s Health Center – Good Hope Road at 2501 Good Hope Road, SE  
Ballou Senior High School Health Center 3401 4th Street, SE
The students' web site review found that of these seven centers few provide information on hours available, services offered, financial/payment information, confidentiality policy, HIV/STI testing, walk-in versus appointment policies and hours, and access to bus or subway service. Where information is presented it is difficult to understand or not relevant to adolescents. For example, the limited financial information makes oblique references to sliding scale fees and family size; services do not include specific reference to teen-focused services, and the service hours (walk in/acute care visits versus appointments for health visits) are unclear. The Family and Medical Counseling Health Center web site is under construction and was not available for review. Ballou Senior High School Based Health Center is currently not open for services and does not have an active web site.

**YHCC Secret Health Shopping Report.**

An important activity of YHCC this winter was the development of a “secret health clinic shopper” project to evaluate the accessibility of Ward 8 health centers to area teens. The YHCC members developed a phone call script that began with a request to make an appointment with a doctor for a sports physical after school hours and followed up with questions about hours, services, payment, confidentiality and proximity of the center to mass transit.

The students called the targeted clinics on two separate days and at different times of the day. The first set of phone calls were made in the late afternoon (between 4 and 4:45, after school hours) and the second set of calls to the same centers a week later were placed in the late morning/early afternoon. Both days and times they placed calls to the health center numbers listed.

During the first set of calls (after school), the students dialed all seven listed centers: no calls were answered and the recorded messages for the centers stated that calls for appointments would not be taken after 4pm.

During the second set of calls, calls were made during late morning and early afternoon. Despite these earlier call times, the teens were still unable to make an appointment or have their questions answered. The reasons for their lack of success included:

- A confusing and overloaded centralized appointment call system for 4 of the seven centers with a wait for 60 - 90 minutes on hold before the call was answered
- When their call into the centralized appointment line was finally answered, they were required to identify a physician in order to make an appointment (they did not have a doctor so were unable to proceed with appointment process)
- The centralized appointment person could not provide specific information about the health centers.

In the two health centers where students were successful in reaching a staff member, the persons answering the phone were unable to answer many of the questions asked. One of the few pieces of information the YHCC teens were told about four of the seven health centers was there were no appointments for routine health exams available after school.
hours (evenings or weekends) and routine health exams were only available starting at 8 am with the last scheduled appointment of the day at 3 pm. In one instance, a teen was asked what his insurance coverage was. When that teen said he did not have insurance and asked about the cost if he did not have insurance, he was told the cost of a physical exam would be between $200 - $300.

**Reflections on Ward 8 Secret Shopping Experience and Follow-Up.**

Given the enormous health concerns for the teens in Ward 8 and in Washington DC, this secret shopper experience was surprising, alarming and as one of the YHCC members put it "demoralizing". These health centers may offer many services of value to teens in Ward 8 but they are not teen accessible in the two most common ways teens access them: their cell phones and the web.

As part of their experience on the YHCC, the teens are sharing their findings, concerns and recommendations to DC policy makers and providers in the hope that this information and insight will prompt improvements in teen access to health care in Ward 8. Meetings with DC Council members have been scheduled. YHCC members will use these meetings not only to report their findings and share their ideas for solutions but also to learn more about the role of the DC Council in setting policy and making investments in communities. DC Council members responding to requests for meetings include Council Chairman Vincent C. Gray, Ward 8 Councilmember Marion Barry, and At-Large Councilmember and Chair of the Health Committee David Catania.

The YHCC also contacted Unity Health Care, the federally qualified health center that operates four of the seven health centers called by the students. Unity Health invited the students to meet with the Anacostia Health Clinic manager. During the meeting, members of the YHCC reported on their experience and heard from her about the full range of services available. Although the array of services was great, YHCC members pointed out that teens do not know these are available and that currently there are no mechanisms for outreach to teens. The students shared their thoughts on what the clinic might do to make itself more accessible to the teens. Their suggestions included better information on the web site, complete hours of operation including when to call for an appointment, on-line appointment capacity, more understandable information on how to pay for services, lists of services teen are looking for such as HIV and STI testing, information on confidentiality of services, access to metro and bus routes, a teen hot line to call for questions and information, a teen advisory group to help make centers more teen friendly, and better ways to outreach to the teen community.

The young people who have been a part of the YHCC are preparing to graduate from high school and move on to the next phase of their lives. They have shown both dedication and commitment to this project and made an immense contribution to improving teen accessible health care in their community. The Horning Family Fund support for the project is also due to end June 30, 2010. The Center for Health and Health Care in Schools plans to seek future funding opportunities to continue this work with teens of DC around making health care more accessible. It is hoped that future funding would both build on the success of the YHCC’s current work and to support similar projects that involve young people in creating a more teen friendly health care
system and better health outcomes in DC. Finally, as Unity Health Care prepares to
break ground on their new health center in Ward 8, a teen advisory group such as the
YHCC could play a vital role in ensuring the new space and service delivery better meet
their needs.

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This report was prepared by Donna Behrens, Associate Director at the Center for Health
and Health Care in Schools on behalf of the YHCC members who participated in the
Secret Shopper project: Tenisha Edwards, Wayne Thomas and Erick Davis. All three
are residents of Ward 8 and are seniors in high school at Friendship Public Charter
School.