

LANE COUNTY MEDICAL SOCIETY | JANUARY 2022

MEDICAL MATTERS

Caring for All

Dr. Ransom shares
about creating positive
impacts through
emergency medicine.



LCMS Annual Meeting
*Medical Misinformation:
How to Diagnose & Treat*
Wednesday, January 12th



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Dr. Kunigelis joins us after completing neurosurgery training at University of Colorado Denver followed by fellowship at Moffitt Cancer Center in Tampa, Florida. She is excited to join Oregon Neurosurgery and looks forward to treating a full spectrum of neurosurgical patients in Oregon.

Dr. Katherine Kunigelis enjoys all aspects of neurosurgery with a special interest in brain tumors. She performs surgeries for brain and spine tumors, neurosurgical trauma, degenerative spine disease, hydrocephalus and peripheral nerve disorders.

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MEDICAL MATTERS

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Confidential Counseling
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From the 2022 Board President

Dr. Kevin Modeste with Northwest Surgical Specialists is our 2022 Board of Trustees president.



Tell us a little about yourself.

I am from a twin island republic in the Caribbean called Trinidad and Tobago. Ten years ago, I arrived in Eugene, and operate at both PeaceHealth Sacred Heart and McKenzie-Willamette Medical Center. I am a double boarded surgeon – general surgery and critical care, and my surgical interests lie in robotic surgery and skin cancer.

I am married to an amazing and talented pediatric surgeon, Dr. Kimberly Ruscher, and we have two lovely kids that keep us busy. In the case of pets, we have a dog and for some unknown reason a lot of cats – last count was 5.

What do you enjoy about working and living in Lane County?

Having lived here for almost 10 years, I love the small-town feel that can suddenly become super alive for football or athletics. The running trails, hiking, and camping is second to none.

Working in Eugene is enjoyable as I love my patient mix as well as the interesting degrees of pathology. Another benefit is the strong physician community that has expanded with more specialties allowing patients to find care within this community.

What inspired you to become part of LCMS?

I felt a need to connect with other physicians in the community that worked in a different specialty than my own –to find physicians with similar interests and in simple terms, “people who are fun to be around.” LCMS has more than provided that opportunity as well as helped with networking and finding

common goals for the community that are multi-specialty based.

I was also inspired to be part of the executive committee by my two predecessors Dr. Mark Mueller and Dr. Alice Horrell. They had such invigorating and fun ideas to make LCMS more dynamic and modern; their energy was contagious. It is a place to not only form long lasting friendships, but to help each other with different transitions through life.

What did you take away from this past year as vice president?

The last two years, 2020 and 2021, have been life altering, not only for myself, but I am sure for a lot of other physicians as well. These were trying times where passion was taken to the streets and the science that we as physicians believe in was questioned at a level we have not seen before.

From the LCMS standpoint, I think Mark and Alice, as well as Shondra, Kianna, and Pam have come together to keep LCMS not only a viable entity, but have converted it into a more modern society. I think the topics that we had to deal with over the past two years have been controversial, and more importantly, thought-provoking. I was proud to see physician wellness being addressed and the development of the program to involve more help for physicians.

I was also impressed by the diversity, equity, and inclusion initiatives that were done at the major hospitals, PeaceHealth and McKenzie-Willamette, but also some of the major medical groups, especially Oregon Medical Group. I would also like to personally thank PeaceHealth for allowing CME accreditation for LCMS DEI meetings; I hope these have been educational and thought provoking for the people who have attended.

What do you hope to accomplish in 2022?

- How to deal with Medical

Misinformation – I think it is one of the biggest problems that we face as a medical community, with no clear-cut solutions. Prior to COVID, we may have all seen it in our clinics with patients as one-off incidents, but the pandemic has made us realize that this is something that has increased among our patients and permeated into caregivers, nurses, and even the medical community. I think our membership is diverse, dynamic, and powerful enough to lead in analyzing the problems as well as develop solutions.

- Making LCMS more accessible and enjoyable to members – I would like to see a return of in-person events once it is safe to do so. These used to be a big attraction, and it was nice to meet friends as well as new physicians outside of the work environment. Another project that I would like to see is round table discussions where we bring in local experts from our community. I have attended one of these in the past that brought such an interesting discussion and new viewpoints to the topic. I was blown away. I would also like to see LCMS with a bigger digital footprint with the development of more online physicians’ meetings or clubs where we can share our hobbies such as book reading, hiking, cycling, and gardening to name a few.
- Strengthen the DEI program that we are currently doing – The current meetings are ground-breaking in this community. I am really impressed by not only the breadth of experiences of some of my peer physicians, but also their approach to uncomfortable topics. I also like that topics are examined in a non-confrontational way, and I encourage any physician that may be interested in attending or contributing to this to contact LCMS. ♦



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Chart Notes

“One of my favorite things about emergency medicine is that it does not matter who you are when you walk in the door. We see people based solely on why they are there... [We] try and provide the best care to everyone, regardless of their income or housing status.”

– DR. CHARLOTTE RANSOM
ON WORKING WITH PATIENTS
AT PEACEHEALTH
UNIVERSITY DISTRICT
TO READ MORE, VISIT HER
PROFILE ON PAGE 12



January 12th from 6-8pm via Zoom CME Available

This year's meeting is based on *Medical Misinformation: How to Diagnose & Treat*. Receiving medical information from sources other than medical providers can result in receiving MISINFORMATION. As we know, perception is REALITY so it can be helpful to understand and better prepare for discussions with patients to achieve the best possible outcomes.

Learning Objectives:

- Identify common reasons behind patient treatment hesitations, including distrust in the healthcare system and social media influence.
- Describe and implement effective, compassionate interviewing skills when discussing treatment
- Improve relationship between patients and physicians, building (or rebuilding) trust.
- Help patients distinguish between medical advice based on science versus misinformation.
- Identify ways to depersonalize interactions when patients refuse best practice treatments.

Accreditation: This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of PeaceHealth SacredHeart Medical Center and The Lane County Medical Society and is accredited by the ACCME to provide continuing medical education for physicians.

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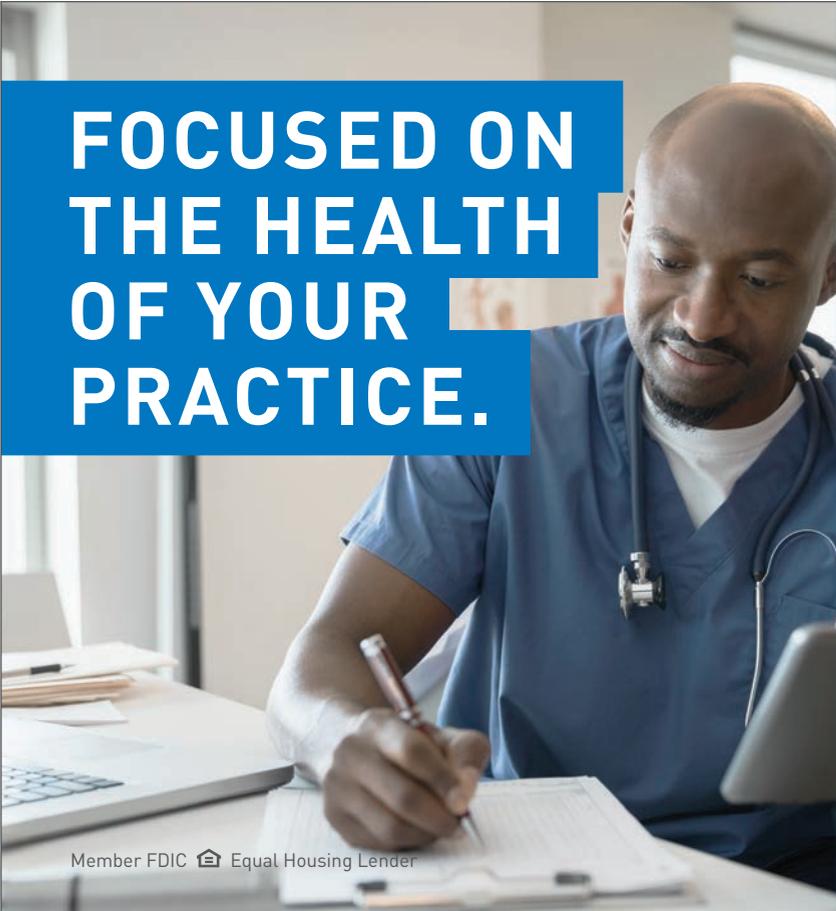
UPCOMING EVENTS

Save the Date! February 3rd is National Women Physicians Day. To celebrate, LCMS is hosting a panel of local women physician leaders to discuss their roles in healthcare, impacts they've created, and more. All members are welcome! More information and registration will be on our website.

Physician Wellness Program provider, Amy Trezona, is leading an 8-week mindfulness based stress reduction course via Zoom beginning January 12th from 6-8pm.

The class is limited to 15 participants. For more information, contact Amy at amy@wholeheartcommunications.com.

To view upcoming events, news, and more, visit www.lcmedsociety.com or request to join our members only Facebook group, Lane County Medical Society.



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LCMS's PWP Celebrates 10 Years

Each month in 2022, LCMS will feature a message from our Physician Wellness Program providers as a way of celebrating the 10 year anniversary of this program.

When I started facilitating the Women Physician Group through the Lane County Medical Society in 2017, I quickly discovered that although these dedicated female medical professionals worked tirelessly to treat and heal their patients, the same emphasis on health and self-care was generally not afforded them. The reimbursement model has been based upon production. How ironic that the healers do not have enough time for their own well-being.

If they need surgery, give birth or add a family member, or have any extended illness that takes them away from their practice, it costs them. Typically, this results in being away from their practice the minimum amount of time. Of course, these issues are not unique to female physicians.

This same principle spills into other aspects of work life. With an increased emphasis on the bottom line, more stringent governmental and insurance regulations affecting medical record-keeping, reimbursements, and ever-increasing evidence-based medical protocols to learn and incorporate into practice, pressures keeps mounting.

Physicians have shared with me that what they experience is not burnout as much as a sense of moral injury. This feeling is engendered every time they are forced to make a decision that contravenes their patients' best interests.

When is there even time to have a life outside of work? These mental and emotional stresses spill into one's personal life throwing work-life balance off kilter. It adds strain to family needs and intentions for life fulfillment outside of work.

I reflected on these observations with

then Executive Director Marty Wilde and Deputy Director Shondra Holliday. They recognized the value that coaching focused on learning how to deal effectively with work issues would have to help alleviate the stress and strain that many physicians experience. As a certified trainer, organization development practitioner, and executive coach, I was ready to offer help and hope. Having an extensive management background in New York City and other major metropolitan areas working for and with major corporations, I could relate to many if not all the challenges physicians face from an organizational standpoint.

Coaching is about improvement, going to the next level, achieving aspirations, and identifying ways to live to one's fullest capacity and potential.

Sessions focus on increasing skills not normally taught in medical school:

- Developing leadership and business management skills
- Onboarding and transitioning successfully to new roles
- Applying time management techniques that translate to job efficiency
- Augmenting interpersonal communication skills—with personal life benefits
- Expanding impact and influence internally and with patients
- Learning and applying Emotional Intelligence to everything!

We start with the client's current situation. What's working? What could improve? What are the goals? What is the gap between reality and the desired outcome? What are the obstacles?

From there we determine together what behaviors or skills to select and then it's up to the client to utilize them. An important part of the coaching is to report back on how the application went and if any adjustments are warranted.

A lot of these skills require greater awareness of self and others, without

judgment. This breeds self-confidence, greater tolerance, compassion, understanding of people (including self) and situations, and a win-win attitude.

When physicians are able to apply these skills to their already extensive repertoire of talents, they feel a sense of relief and renewed vigor for their work. Often their love of medicine returns.

Surprisingly the top tool to reduce physician stress is mindfulness/meditation. Yogis and doctors both agree that meditating—even a few minutes of deep breathing—relaxes the brain, reduces anxiety, and decreases depression. I encourage some kind of daily meditation practice with every client. The benefits are immeasurable. Clients share that they have the experience of spaciousness, distancing from constant mind chatter, and a greater sense of inner peace and self-worth in short order.

Once work wellness is restored, personal wellness increases. There is time and energy to focus

on family and other interests outside of work. Having this life balance is essential to maximizing effectiveness on the job. With a sense of renewal and creative expression, physicians can maintain their enthusiasm and commitment to the art and craft of medicine without losing themselves.

The LCMS Physician Wellness Program has provided many a physician with much needed support, encouragement, and new skill sets to face the ever-increasing demands of medicine today.

Won't you contribute today as a way to support your colleagues? The need is now—more than ever.

Thank you.

*Shannon O'Leary
Executive/Life Coach and Organization
Development Consultant for the LCMS
Physician Wellness Program
541-255-2669 | www.CBCandC.com*

Winter is Here: Egan Warming Center is Ready

BY TIM BLACK
WINTER STRATEGIES
& EMERGENCY
RESPONSE
COORDINATOR FOR
ST. VINCENT DE PAUL
OF LANE COUNTY



Egan Warming Center, operated by the nonprofit St. Vincent de Paul Society of Lane County (SVdP), is in place to protect local unsheltered residents when sub-freezing overnight temperatures descend on Eugene-Springfield. The lifesaving program's 2021-22 operational season formally began Nov. 15 and ends March 31.

Egan is our community's low-barrier emergency winter program. Low barrier means all seeking shelter are welcome, as they are, so long as they abide by shelter rules and support a safe environment for all. Egan's mission is simple: provide warm, safe shelter when it's dangerously cold outside, saving lives one cold night at a time.

Today, like its first winter in 2009, Egan Warming Center fulfills that

mission because of thousands of trained volunteers and support from a broad coalition of community members, service providers, nonprofits, health providers, faith and activist communities, and local government.

Everyone Has a Story

Imagine...you have no permanent home – no bed, no bathroom, no refrigerator, no key to a door that opens into a warm room. Days and nights pass with worry, hunger, and danger. Judgement – both subtle and blatant follows you everywhere – averted eyes and cold stares, people crossing the street to avoid you – making it impossible to escape the feeling that you're unwelcome.

You're from Eugene or Springfield, or maybe from an outlying rural area where there are no services. Where are you supposed to go? Maybe you lost your job, or got sick, or suffer from mental-health or substance-abuse issues that led you to burn whatever bridges remained in your

life. Or, you're a youth who decided that life on the street is actually safer than life in the abusive place you once called home.

Hard to imagine? What if it was a sibling, parent, former co-worker, distant relative, a friend of a friend of someone you used to know? We all have people in our lives who need help at some point, even if we're fortunate enough that it is never ourselves.

Thomas Egan was that person.

Egan, who was from New York, received an undergraduate degree in American history at Quinnipac College (later Quinnipac University) in Connecticut, was commissioned as a second lieutenant through the ROTC program at Yale in 1971, and served in Korea as an infantry officer. He moved west and joined the Oregon National Guard upon his return, and earned his master's degree in journalism at the University of Oregon.

We learn from his obituary that he was an avid reader and horseman, an accomplished carpenter and meat butcher, loved classical music and hated country and western. He also liked to drink. Despite many friends and options for support, he lived on the streets.

In mid-December 2008 temperatures dropped quickly and dramatically. On Saturday the 13th, the last day Major Egan was seen alive, the low was 33 degrees Fahrenheit. By Monday it had dropped to 19 and by Tuesday, Dec. 16, it was 11 degrees. A passerby found his frozen body that evening, partially covered with snow, an empty liquor bottle in reach. Egan died at the end of Blair Boulevard in the Whiteaker neighborhood, just one block from the Eugene Mission, where he was always welcome – at least when he wasn't drinking.

“Imagine...you have no permanent home – no bed, no bathroom, no refrigerator, no key to a door that opens into a warm room. Days and nights pass with worry, hunger, and danger. Judgement – both subtle and blatant follows you everywhere...making it impossible to escape the feeling that you're unwelcome...We all have people in our lives who need help at some point, even if we're fortunate enough that it is never ourselves.”

Warming Center’s Evolution

Dan Bryant is founder and executive director of SquareOne Villages, which creates self-managed communities of cost-effective living for people in need of housing. Before that he served as lead pastor at First Christian Church, which for years served as the hub for homeless shelter and services in downtown Eugene.

Pastor Bryant recalls it this way: “I remember clearly when Marion Malcolm called me up with this wild idea, said she had a ‘small’ favor to ask, and then chuckled and said maybe it wasn’t so small. She told me about Egan’s death and how they had been housing some folk at First Baptist in Springfield and wanted to expand to create a larger warming shelter, so would we be willing to host?”

And so Egan Warming Center was born. These citizen activists worked with Lane County to secure funding, and

soon after SVdP was asked to manage the program. First Christian Church indeed hosted a warming center and served as a hub for the homeless in downtown Eugene, until the fire marshal and a lack of fire-suppression sprinklers in the old building made Egan Warming Center look elsewhere for help. First Baptist Church, then Ebbert United Methodist Church, served as the Springfield hub.

Over time the warming program added and changed sites, used shuttle buses to take guests from downtown to outlying sites, and grew its volunteer ranks from hundreds to thousands.

Then came COVID-19. Last winter Egan lost many of its volunteers because of their high-risk age, and lost most of its previous host sites. Entering the second winter of the pandemic, however, volunteer numbers are expected to increase because of vaccinations and established safety protocols, and several

faith communities have again offered up their facilities as warming centers. The largest and most prominent Egan warming site, at least when it’s available, will be the Lane Events Center at the fairgrounds in Eugene.

Pandemic or no, the mission is the same. Egan Warming Center will be there if you need it, whether you’re drunk, high or sick, or just cold.

Keep Egan’s Legacy Warm

Each winter as you celebrate the holiday season, when you walk the dog before sunrise and wish you had remembered your hat and gloves, when you open a door and welcome the warm rushing air, remember Thomas Egan, and what his legacy means to our community.

Call it what you want: redemption, poetic justice, a silver lining, a tribute to a friend. Imagine if it were your friend. ♦



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MEMBER PROFILE

Caring for All

Dr. Ransom helps ensure equal care for students, the unhoused, and those with mental health needs at University District.

BY ALAN SYLVESTRE
FOR LANE COUNTY MEDICAL SOCIETY

For Dr. Charlotte Ransom, an Emergency Medical physician and Emergency Department Medical Director at PeaceHealth Sacred Heart Medical Center University District, every day is different. And no day is dull.

“It’s not boring. You never know what you’re going to get,” Ransom says. “Sometimes that’s not always great, but it certainly keeps things interesting.”

Ransom says she likes emergency medicine because it gives her a taste of all forms of medicine.

“Every rotation in medical school was interesting to me,” Ransom says. “So I found that with emergency medicine that I got a little bit of it all.”

After having practiced emergency medicine in the area for over 14 years, she says one of the reasons she continues is because even though it can be emotionally hard to treat someone with severe problems, they need someone to comfort them during their time of need.

“People come into the hospital on one of the worst days of their lives,” Ransom says. “Being able to positively influence that and have a positive impact on somebody on that day is really a good feeling.”





Equal Care

“One of my favorite things about emergency medicine is that it does not matter who you are when you walk in the door,” Ransom says. “We see people based solely on why they are there.”

It’s a system designed to prioritize patients based on what they need; and to turn nobody away.

“One of the things we do is to try and provide the best care to everyone, regardless of their income or housing status,” Ransom says.

Given the rising unhoused population in the region, her emergency department sees a mix of patients from higher-income to homeless.

“We do treat a lot of people in the area who are suffering from mental health problems,” Ransom says. “At the University District we are more accessible to the unhoused population and many of these individuals suffer from mental health issues.”

And she says that although this is something her department deals with, it is not specifically unique to Eugene. It’s something that emergency medicine physicians are trained to deal with.

“Emergency physicians are trained to treat mental health problems,” Ransom says. “Our residency programs are often located in centers with high mental health needs.”

And given its downtown location, Ransom says they’ve added extra

“Our medical community here is amazing, and it’s really great to be able to interact with the medical staff outside of work and the hospital.”

measures to protect their patients.

“I think our emergency department is safe,” Ransom says. “We have security measures to keep everyone safe so we can focus on treating patients.”

A Growing Epidemic

In August of 2021, the Eugene Chamber of Commerce conducted and released a study about the surge in homeless and low-income population in the Lane County area.

They found that there is an average of 3,100 people living without homes.

And in September 2021, the Eugene City Council voted 7-1 to approve three new Safe Sleep sites around the region which would provide approximately 150 spaces for a mix of tents and vehicles. The goal of this move is to prevent the unhoused from parking and camping illegally within the city.

“Eugene does have one of the highest homeless populations per capita in the country,” Ransom says. “We do see a lot of homeless come through the emergency department.”

Given the downtown hospital’s location only a few blocks away from the University of Oregon campus, Ransom says they also see a lot of university students who come to the emergency department in addition to other members of the community.

The University of Oregon has an on-campus health center that offers primary care, mental health counseling services, dentistry, STI screening and sexual well-being, endocrinology and immunizations.

“The health center does a great job and takes really good care of their students,” Ransom says. “But there are times they have patients who need more than they can offer, and often they send them to us.”

Ransom says both departments communicate well to ensure the best patient care.

“They will often call us and send paperwork over, and they will follow-up with patients after they leave our emergency department to continue their care,” Ransom says.

“People come into the hospital on one of the worst days of their lives. Being able to positively influence that and have a positive impact on somebody on that day is a really good feeling.”

Her Path to Oregon

In short, it’s because of family. Ransom has family in Southern Oregon and enjoys the close proximity to her relatives.

And after visiting Oregon, she says she simply fell in love with the area.

“I just think Oregon is a beautiful state and there’s so much to do,” Ransom says. “I love to hike, and there are so many hiking opportunities so close. I came here out of residency in 2007, and I’ve been here ever since.”

She also enjoys living and practicing medicine in the area because of what she considers a strong and talented medical community. And being a member of LCMS gives her that opportunity.

“Our medical community here is amazing and it’s really great to be able to interact with the medical staff outside of work and the hospital,” Ransom says.

And within the hospital, she says her department is always focused on a patient-first model to provide the best care for all.

“One thing I will say about the University District Emergency department is that we are a very close-knit group of people who advocate for good patient care,” Ransom says. “Our department is centered around patient-first care and I think that’s what makes the University District a special place.” ♦



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Community Supported Shelters

BY TOD SCHNEIDER
EXECUTIVE DIRECTOR
COMMUNITY SUPPORTED SHELTERS

Last September, our local governments turned to us with an unusual proposal: build exceptionally good Safe Spot homeless camps, really fast, all over town, and we'll cover the costs. We jumped on this, building non-stop from last December through early Spring. As a result, we now support eight Safe Spot intentional communities, a few micro-sites and dozens of individual huts scattered throughout Eugene. Altogether, they now shelter over 80 previously unhoused people. Next year, when we reach maximum capacity, that number will top out at 139.

LCMS members have recognized homelessness as a crisis for years now, and have stepped up to help us do something about it. You even helped buy us a truck in 2018, for which we thank you profusely! The truck has proven handy for hauling everything from firewood and gravel to peanut butter and solar panels.

I like to think the Community Supported Shelters model caught your eye because of our track record. CSS

“Key components of our approach have been safety, connectivity, and empowerment. Together, these make a big difference in the lives of the people we serve.”

actually works! From early on, we have delivered far more than basic shelter. We establish intentional communities that genuinely help people rebuild their lives. Key components of our approach have been safety, connectivity, and empowerment. Together, these make a big difference in the lives of the people we serve. The mutually reinforcing physical environment and positive culture help people feel safe and connected. Our staff help them rediscover their personal power and apply it in rebuilding their lives.

We've helped all kinds of people, including more than a few who you may have met as patients. Current residents are fighting congestive heart failure, liver disease, arthritis, cancer, depression, schizophrenia, diabetes, seizures, brain damage, COPD, TBI – and that's just a sampling. Imagine the challenge of tackling those issues while sleeping along the riverbanks or in our streets. Long-time supporter and CSS Board Vice President Dr. Douglas Bovee has long recognized the connection between your work and ours, noting that “CSS has sheltered and supported hundreds of people over the past eight years, helping them rebuild their lives and take big steps towards improved health.”

For most, a safe, peaceful place in which to recover is a huge first step, but often something more is needed. As just one example, some of our new clients this year needed CPAP machines in order to sleep at night, and our off-grid camps had no means of powering the devices. Fortunately, our shop crew rose to the challenge; they installed recharge stations for CPAP batteries, now available 24/7 at our centrally located warehouse.

What's on the horizon?

- **Stabilization.** Long-term, reliable funding would ensure that the basics were covered, giving us breathing room to expand our vision and our services.

- **Internet access.** Thanks to the Eugene Public Library, we're experimenting with wireless Wi-Fi hubs for each Safe Spot, empowering clients to seek out resources and reconnect with the wider world.
- **Expressway Safe Spot restoration.** This is one of our three oldest, under-funded sites, currently in serious disrepair.
- **Food.** Most of our clients eat only once or twice a day, and not particularly well. This year we'll provide some basic groceries and some simple meals, along with guidance and mentorship in kitchen management, cooking, nutrition and gardening.
- **Mental health support.** A modest expansion in staff training and support in trauma-informed care and broader mental health concerns will launch in 2022.

CSS efforts are a never-ending journey. We're always looking for ways to improve our services and expand our reach. Community support makes all the difference; empowering us to keep moving forward. Have no doubt that your help is greatly appreciated. We could never have gotten this far without the support of community members such as yourselves. ♦

For more information, visit www.communitysupportedshelters.org



CSS's Camp Bluesky
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ACTIVE

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ShelterCare Focuses on Housing First

BY CATRINA MATHEWSON, MNM
DEVELOPMENT DIRECTOR
FOR SHELTERCARE

ShelterCare is a nonprofit organization, local to the Eugene-Springfield area, that provides housing for individuals and families who are at risk of becoming homeless or who are currently experiencing homelessness. We are a housing-first focused organization, meaning that we focus on low-barrier housing. We help individuals first get into housing, then we provide them with wrap-around services to help them meet their goals, such as sobriety, education, and mental and physical health.

We believe housing is healthcare. Often, an individual is unable to focus on their personal health and needs when they are experiencing homelessness and living in crisis mode. ShelterCare partners with several local landlords to help people get into and retain their housing. By providing a community member with housing, we are not only increasing their quality of life, but extending their life expectancy. The average life expectancy of someone

living on the streets is 50 years old (<https://nationalhomeless.org/>). Those living on the streets are exposed to harsh living conditions, trauma, safety concerns, greater risk of infection, poor mental health, and substance abuse, among other dangerous situations.

“This housing crisis has become more visible during the pandemic; we have seen the crisis overflow into our community parks and shared public spaces.”

In 2019, ShelterCare was selected to provide services for residents of The Commons on MLK- a 51-unit and 24-hour staffed permanent supported housing

program for individuals who have been chronically homeless. The new program opened in February of 2021 with a focus on serving the FUSE (Frequent Users of Systems Engagement) population – community members who are unhoused and the highest utilizers of emergency services. This housing community has been developed by Homes for Good and Lane County in partnership with local healthcare providers. Kaiser Permanente Northwest and PeaceHealth contributed \$750,000 each toward the development; Pacific Health Associates, a tax-exempt organization that works in conjunction with PacificSource, provided \$500,000, the PacificSource Foundation for Health Improvement provided a \$180,000 programmatic grant; and Trillium Community Health Plan donated \$500,000. Homes for Good used the Low-Income Housing Tax Credit Program through Oregon Housing and Community Services Agency to fund construction of The Commons on MLK.

Quantum Residential provides onsite property management services. All individuals in the program pay 30% of



The Commons on MLK pictured above.
Photo provided by ShelterCare



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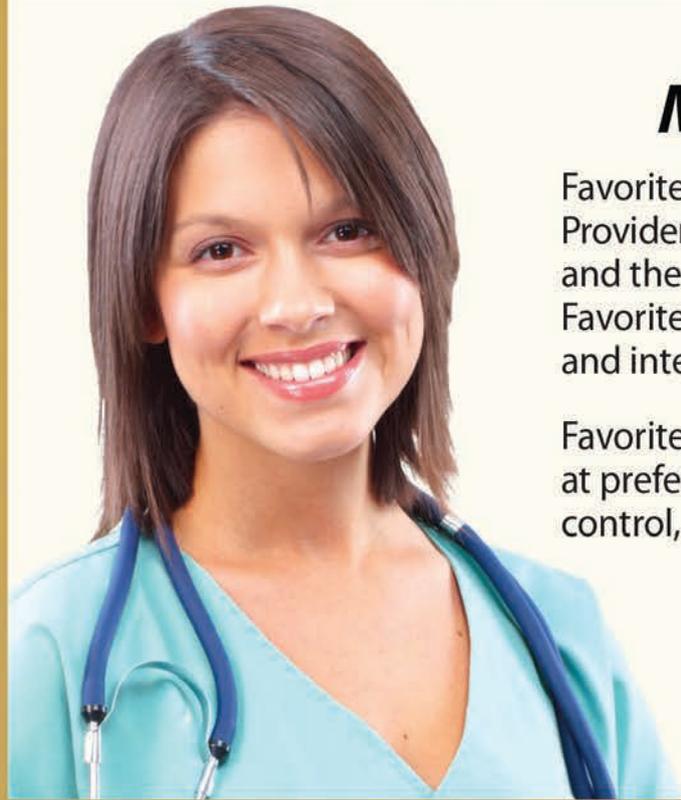
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their income towards their rent and also have a case management team to assist them in becoming more independent. “By providing housing, case management, and peer support specialists with lived experience in addiction and homelessness, we are helping these people much more than just getting them a job,” says Willamette, Housing Specialist at The Commons on MLK. Housing Specialists are a big part of ShelterCare’s implementation of the Housing First approach. They are the supports that help secure and maintain the base need of housing so people can begin to focus on other life goals such as their personal health, addiction, relationships, or jobs.

The Commons on MLK is the first of its type of housing in Lane County. The building itself was designed with trauma-informed care in mind, with lots of natural light, large windows, wide hallways, clear exits, quiet spaces, and a large courtyard that is full of natural

elements. The ultimate goal of permanent supportive housing communities, like The Commons on MLK, is to help program participants become independent

“By providing a community member with housing, we are not only increasing their quality of life, but extending their life expectancy.”

enough to transition into holding their own lease in the community.

One of our biggest struggles at ShelterCare is finding available housing units that are affordable to move program participants into. We are so

appreciative of the property owners that we partner with, however, our community is experiencing a housing crisis. If we had more units available, we could move people off the street and into independent living situations quicker. This housing crisis has become more visible during the pandemic; we have seen the crisis overflow into our community parks and shared public spaces. Solving this crisis will be a team effort between nonprofits like ShelterCare, Lane County, Homes for Good, and individuals in the community working together – we cannot do it alone. ♦

ShelterCare has been in the Eugene-Springfield community since 1970. The organization was initially founded as Eugene Emergency Housing and started off as a small family shelter. Over the years, ShelterCare has adapted and grown to meet the needs of the community, serving over 2,600 community members last year! Learn more or donate at www.sheltercare.org.

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Announcements

Events

Be sure to RSVP for the LCMS Annual Meeting on January 12th from 6-8pm featuring a panel discussion on *Medical Misinformation: How to Diagnose & Treat.*

For more information and learning objectives, see page 7. To register, visit www.lcmedsociety.com/events.

Dr. Brick Lantz is hosting a presentation by Dr. Mike Chupp Sunday, January 23rd at 6:30pm. Dr. Chupp is the CEO of Christian Medical and Dental Association and was a long-term missionary surgeon in Africa. For more information, contact Dr. Lantz at bricklantz@comcast.net.

Save the Date, February 3rd, for a Women Physicians Day panel celebrating a few of our local women physician leaders. More information and registration will be posted to our website soon.

ParentingNow is hosting a Night of Hope fundraising gala March 4th to help sustain their programs throughout the year. For more information or sponsorship inquiries, contact Sona Hodaie at sonah@parentingnow.org.

Notes

The LCMS Board proudly endorses the YMCA and their campaign for a new Y. The Board feels this is a positive connection in our

community, especially since the Y helps promote a healthy lifestyle, provides programs for children, and supports health initiatives such as their Diabetes Prevention Program. We will be sharing more about their community efforts, connections, and programs throughout the year. To learn more, visit eugeneymca.org/new-y.

2022 Directory pre-order forms are on our website at www.lcmedsociety.com/Directory. Order yours now for prompt delivery once they arrive.

Upcoming magazine themes include nutrition, autism awareness, and

arts & music. If you would like to share with the Society, know a colleague who fits into one of these themes, or have a recommendation for a future issue, email kianna@lcmedsociety.com.

Thank you all for your patience and flexibility with our events schedule. We hope to bring in-person events back at some point this year once it is safe and we get approval from the LCMS Board. We have many ideas and much in the works. Thank you so much for your tireless efforts throughout the pandemic and we hope to see you soon!

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Here's how we plan to enhance our wellness programs in 2022:

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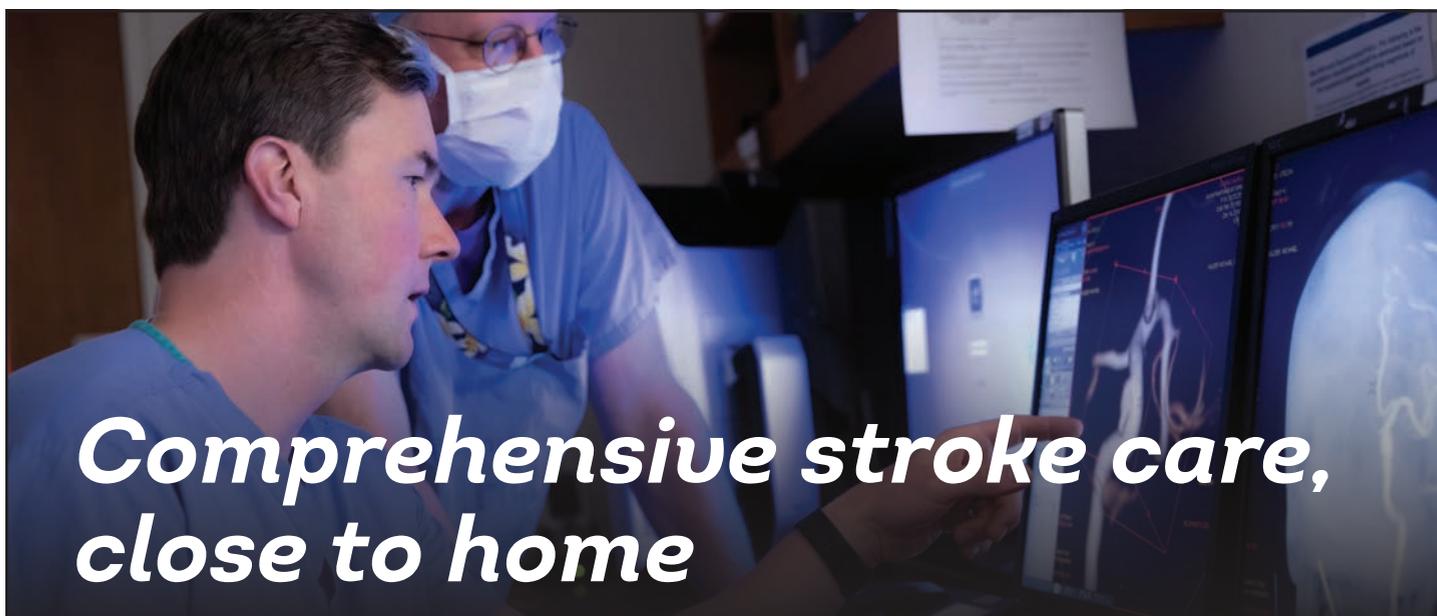
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