

Rural Health Equity

The Medical-Legal Partnership Model

Year One Report: 12/13/17 – 12/12/18



A Partnership of California Rural Legal Assistance, Inc.
and the Monterey County Health Department



The featured stories in this report have been de-identified to protect patient confidentiality.

Executive Summary

By the Numbers

Total Number of Patients Served: 170

Total Number of Legal Issues Addressed: 244*

Number of on-site MLP Days: 45 MLP days

Average Intakes per MLP Day: 3.8 intakes per MLP Day

Average Intakes per Month: 14.2 intakes per month

*Some patients have multiple legal issues.

Highlights

- Provided approximately \$165,763 in financial benefits to clinic patients, including:
 - Winning health insurance coverage for \$91,873 in services
 - Securing \$46,502 in public benefits
 - Overturning \$24,888 in unlawful rent charges
 - Recouping \$2,500 in unpaid wages
- Improved access to paid time off, job-protected leave, and reasonable accommodations for 11 pregnant farmworker women
- Helped 18 survivors of domestic violence access legal and social services, including no-cost or low-cost legal services to apply for a U-Visa
- Successfully compelled landlords to fix uninhabitable housing conditions for 4 patients, while assisting 6 more patients with pro per legal support to fix uninhabitable conditions
- Obtained Individualized Education Plans (IEPs) for 4 children at the clinic to help them overcome their disability at school and improve learning outcomes, and provided advice and counsel to 10 more families about how to obtain an IEP for their child
- Assisted 18 patients unable to work due to a medical condition in applying for State Disability Insurance replacement income
- Connected 13 patients injured on the job with legal services for workers' compensation
- Provided 7 patients facing homelessness or housing insecurity with community resources that may lead to transitional or permanent housing
- Referred 52 patients for immigration legal services

What is a Medical-Legal Partnership (MLP)?



The foundation of health begins in homes, schools, workplaces, and neighborhoods. Integrating legal services with the healthcare system can be a means to disrupt a cycle of returning people to the unhealthy conditions that would otherwise bring them right back to the clinic or hospital.

Medical-legal partnership (MLP) is an approach to health that integrates healthcare and legal services to improve social determinants of health. **Legal professionals meet with patients on-site in the**

healthcare setting to provide legal services that can improve social determinants of health like income, housing, education, workplace safety, and physical environment. Lawyers can directly resolve specific problems for individual patients, while also helping clinical and non-clinical staff navigate system and policy barriers and transform institutional practices.

Healthcare can benefit from legal interventions to improve social determinants of health, which can account for 60% of health outcomes¹. MLPs provide healthcare professionals with a mechanism to address social determinants of health that directly impact their patients. They reflect the shift in healthcare from the traditional fee-for-service payment model toward value-based care, allowing health care organizations to invest in outcomes and cultivate population health strategies.

How does the MLP work in practice?

The MLP between California Rural Legal Assistance, Inc. (CRLA) and the Monterey County Health Department started in December, 2017. It serves patients at the Alisal Health Center in East Salinas, a federally qualified health center (FQHC) that provides healthcare to a largely farmworker community, regardless of ability to pay. Healthcare providers identify patients with health harming legal needs and make referrals via the electronic medical record system for an on-site legal consultation. The MLP is staffed by one CRLA attorney. The attorney comes to the clinic every week to conduct consultations, then works with other CRLA attorneys and service providers to offer a range of services, including:

Direct Legal Services

- CRLA offers patients free legal consultations, advice and counsel for discrete legal needs, brief services such as drafting documents or contacting third-parties, and continuous representation such as litigation and administrative proceedings.

Referrals

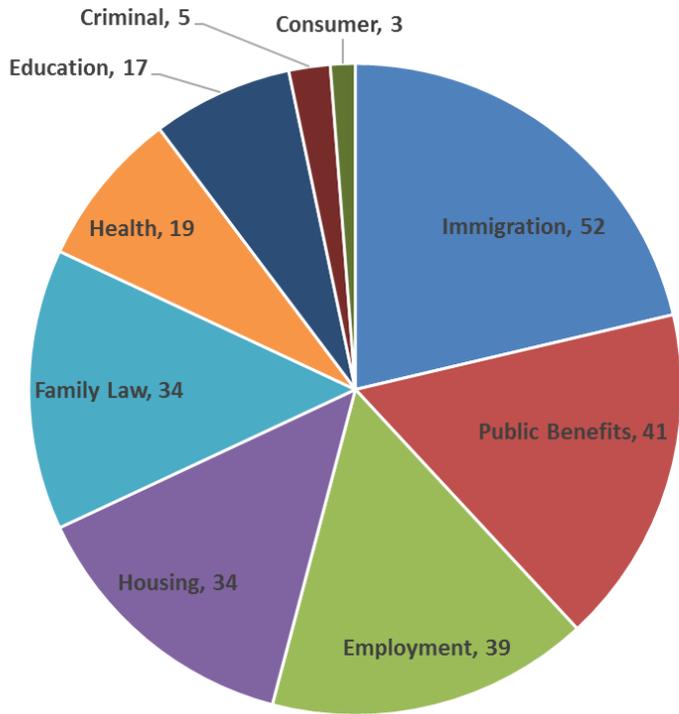
- CRLA connects patients to other legal services that can serve their legal needs when CRLA is unable to do so.

Policy Advocacy

- CRLA learns from the experiences of healthcare providers and patients to advocate for systemic solutions to improve social determinants of health.

¹ Research from The American Health Care Paradox (2015), by Elizabeth Bradley and Lauren Tailor.

Number of Legal Issues Addressed, by Legal Area



| | |
|--------------------|------------|
| Immigration | 52 |
| Public Benefits | 41 |
| Employment | 39 |
| Housing | 34 |
| Family Law | 34 |
| Health | 19 |
| Education | 17 |
| Criminal | 5 |
| Consumer | 3 |
| Grand Total | 244 |

Housing Highlight

Marta* lives in a 3-bedroom apartment in Salinas with her husband, three children, and in-laws. She brought her 9-year-old son, Pedro, to the clinic because he had an eye infection. Their home was infested with bed bugs. Everyone in the family had bites. A bed bug bit Pedro in the eye and it became infected. He was in pain, couldn't pay attention in school, and had trouble sleeping. The family had asked their landlord to fumigate the apartment, but the landlord refused.



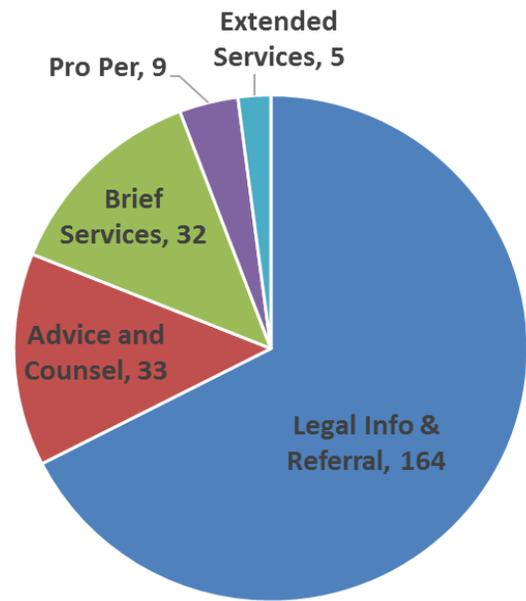
When Pedro's doctor discovered the cause of his patient's eye infection, he referred the family to the Medical-Legal Partnership. An attorney from California Rural Legal Assistance wrote a demand letter to the landlord informing him of his duty to maintain the apartment in a habitable condition, which means free from bed bug infestations. The letter instructed the landlord to fumigate the apartment immediately and take any other necessary steps to get rid of the bed bugs. Within one week of the letter, the landlord agreed to fumigate the unit. The family's home is no longer infested with bed bugs, Pedro's eye has healed, and he has the opportunity to be healthy that every kid deserves.

*Names in this report have been changed for client confidentiality.

Level of Service Provided

| | |
|-----------------------|-------------|
| Legal Info & Referral | 164 |
| Advice and Counsel | 33 |
| Brief Services | 32 |
| Pro Per | 9 |
| Extended Services | 5 |
| Grand Total | 243* |

*Currently one pending matter. So while there are 244 matters, only 243 have a level of service.



Legal Info & Referral

Connect patients to other legal services organizations that can serve their legal needs

Pro Per Assistance

Provide patients with the resources and tools they need to solve their own legal matters

Advice and Counsel

Initial consultation to evaluate patient’s legal rights and possibly suggest a course of action

Brief Services

Discrete and time-limited service, such as drafting documents or contacting third-parties on behalf of the client

Extended Services

Continuous representation such as in litigation and administrative proceedings

Education Highlight

Guillermo is a 5-year old boy who was born with a cleft palate. He has severe speech difficulties. However, his doctor made several unsuccessful attempts to refer him to speech therapy. That’s because



speech therapy is most easily accessed through the school district, but Guillermo wasn’t enrolled in school. His parents are indigenous migrant farmworkers that follow the harvest up and down California. They tried to enroll Guillermo in school, but couldn’t navigate the system to prove they met the requirements.

With representation from a CRLA attorney, Guillermo’s parents were able to prove that he was eligible for the migrant education preschool program. Guillermo is now attending preschool and receives weekly speech therapy sessions.

Reducing Pesticide Exposure for Pregnant Farmworker Women

Gloria is a single mom with four children. For over a decade she supported her family picking strawberries in the Salinas Valley. But not anymore. That's because one morning when she was picking strawberries, a tractor in a neighboring field sprayed a cocktail of dangerous pesticides that drifted onto the field where she was working. Gloria became nauseous, started vomiting, then fainted. She woke up in the hospital. The attending doctor told Gloria to stop breastfeeding her infant baby. Her severe acute reaction kept her bedridden for days to come.



Pregnant women are most vulnerable to pesticide exposure, and children exposed in the womb are more likely to suffer from delays in development, increased risks of ADHD, and pervasive developmental disorder problems.² Despite these risks, pregnant farmworker women often work in the fields well into their pregnancy. That's in part because State Disability Insurance (SDI), California's program that provides replacement income for pregnant women who are unable to work or face an undue risk in the workplace, was not created with farmworker mothers in mind. Women generally aren't eligible to receive SDI replacement income for missed work until 4 weeks prior to giving birth. So pregnant farmworker women face difficult decisions between their source of income and the health of their child.

Through our Medical-Legal Partnership, pregnant farmworker women can now access SDI replacement income earlier in their pregnancy, reducing harmful exposures for them and their unborn children. First, we help the clinic better identify and understand this vulnerable population. Second, we provide legal trainings and resources to doctors and medical staff so that they better understand SDI law. Finally, we provide direct legal services to pregnant farmworker patients to help them access SDI replacement income, learn about their rights to leave and reasonable accommodation, and prevent discrimination.

These services weren't available to Gloria before she was exposed. But Gloria is fighting to change that for other women. This past July, CRLA and a coalition of pesticide safety advocates helped broker a meeting with Gloria and the Department of Pesticide Regulation, which oversees pesticide safety investigations and enforcement state-wide. Gloria spoke with them about her harrowing experience. She implored them to protect mothers and children from pesticide exposure and increase their outreach to healthcare providers in farmworker communities so that more farmworker women can learn about the risks of pesticide exposure and access programs to protect themselves and their children.

² The UC Berkeley CHAMACOS Study (1999-Present), UC Davis CHARGE Study (2014), and Columbia University CCCEH Study (2011).

Breakdown of Legal Issues Served by Legal Area

| Legal Issue | Grand Total | Legal Issue | Grand Total |
|----------------------------------|-------------|---------------------------|-------------|
| Immigration | | Family Law | |
| Immigration - Other | 25 | Child Custody | 12 |
| U-Visa | 18 | Domestic Violence | 6 |
| Naturalization | 4 | Family Law - Other | 6 |
| Deportation Defense | 3 | Divorce | 4 |
| Childcare Safety Plan | 2 | Restraining Order | 3 |
| Immigration Total | 52 | Child Support | 3 |
| Public Benefits | | Family Law Total | 34 |
| SDI | 18 | Health | |
| Social Security | 14 | Pregnant Farmworker Woman | 11 |
| Public Benefits- Other | 5 | Insurance/Billing | 7 |
| IHSS | 2 | Mental Health Support | 1 |
| CalFresh | 1 | Health Total | 19 |
| Medicare | 1 | Education | |
| Public Benefits Total | 41 | IEP | 14 |
| Employment | | 504 Plan | 2 |
| Workplace Injury | 13 | Education - Other | 1 |
| Disability Discrimination | 6 | Education Total | 17 |
| Retirement Age Farmworker | 6 | Criminal | |
| Sexual Harassment + Assault | 4 | Criminal | 4 |
| Wage and Hour | 3 | Prop 47 | 1 |
| Pregnancy | 2 | Criminal Total | 5 |
| Wrongful termination | 2 | Consumer | |
| Employment - other | 2 | Consumer - Other | 2 |
| Job-Protected Leave | 1 | Small Claims Court | 1 |
| Employment Total | 39 | Consumer Total | 3 |
| Housing | | Grand Total | 244 |
| Habitability | 10 | | |
| Housing Instability/Homelessness | 7 | | |
| Housing - Other | 4 | | |
| Government Housing | 4 | | |
| Security Deposit | 3 | | |
| Eviction | 3 | | |
| Retaliation | 2 | | |
| Rent Increase | 1 | | |
| Housing Total | 34 | | |

About the Monterey County Health Department

The Monterey County Health Department provides a wide variety of health-related services in the areas of public health, environmental health, behavioral health and clinic services. The Department serves over 415,000 Monterey County residents and the Health Clinics provide over 170,000 patient visits yearly. Nine FQHC look-alike clinics provide comprehensive primary and specialty medical care, health promotion education and disease prevention services, regardless of the patient's ability to pay.



Dedicated staff help patients and their families address their health and social problems and navigate the health system, while also working together to prevent future diseases, complications, and conditions. The Department is committed to serving all patients, especially those who are underserved elsewhere, while using resources effectively to care for the entire community's health and well-being.

About CRLA

CRLA provides free legal services to low-income, rural Californians. We have 18 offices from the Mexican border to Northern California. Each year, we provide more than 43,000 low-income rural Californians with free legal assistance and a variety of community education and outreach programs. The impact of CRLA's litigation has touched the lives of millions of low-income individuals, improving conditions for farm workers, single parents, school children, the elderly, people with disabilities, and entire communities.



My name is Aaron Voit. I'm an attorney and Equal Justice Works fellow at CRLA. My fellowship is sponsored by PG&E and Munger, Tolles & Olson. Every Wednesday, I work at the Alisal Health Center to serve a wide array of legal needs. It's a humbling and rewarding experience providing legal services to clinic patients. The staff at CRLA Salinas has generously lent their time and guidance, and the healthcare staff at the clinic has been welcoming and supportive.

Together, we're engaged every day in the dynamic process of innovating integrated services and provision models to reach underserved populations and address unmet needs. It's truly a team effort and such a privilege to be a part of it - and we're just getting started!

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