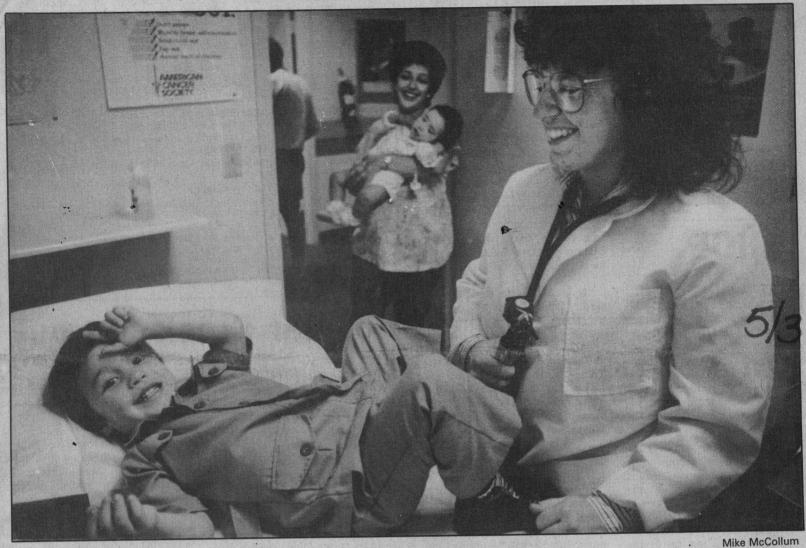
From rented shed to its own building



Dr. Josie Simpkin, right, medical director of Salud, examines 3-year-old Gerardo Fuentes while mom Teresa Fuentes and sister Teresa look on from the doorway.

Downtown health clinic grows up

By CHELA ZABIN STAFF WRITER

AST FRIDAY, some 450 people, among them elected officials and local business leaders; showed up at a ground-breaking celebration for Salud Para La Gente's new 24,000-square-foot building on East Beach Street in Watsonville.

The building - and the community attention it received - is a far cry from the first Salud Para La Gente health clinic that opened 12 years ago in an apple shed on Grove Street.

The clinic, which provides low-cost health care to a mostly Latino clientele, sees about 8,000 people a year. Its current annual budget is \$1.6 million. Only about 30 percent of that is covered by patient fees; the rest comes from various sources, mostly state money designated for specific programs.

Executive director Barbara Garcia said the clinic's service and funding have expanded by one third every year since it

The clinic was founded by Michael Alcalay, a pediatrician with the Santa Cruz County health department, and community health activist Rafael Troche, who wanted to provide more direct medical services to farm workers. It was open one night a week from 5 p.m. to midnight.

Later, with the help of Food

and Nutrition Services, the clinic obtained state money for a bilingual health aide training program. At about the same time, under the direction of Chris Matthews, then county supervisor for the Watsonville area, a county task force called a hearing on the disparity between public funding for socialservice programs in South County and North County.

Watsonville city officials, who had been invited to the hearing, didn't attend, Garcia said, but more than 500 other people did, many of them to complain about a lack of money for health care.

As a result of the hearing, state Sen. Henry Mello, D-Watsonville, lobbied on behalf of Salud for some money from the state's rural health department. A visit to the governor's office by two busloads of local farm workers helped drive the point home, and by 1980 the clinic became a formal organization and hired its first paid staff.

"Since that time, it's just been upward expansion," Garcia said.

In addition to the medical clinic, Salud now has healtheducation and social-services components. It has a program for people with AIDS and those who test positive for the HIV virus. It has had to move several times to keep up with its growth, and is now taking up four buildings downtown. The East Beach Street building is the first the clinic will own.

See CLINIC page 7 ▶

VCF Watsonville - Growth

CLINIC

► From page 1

The building will allow Salud to consolidate all its services under one roof. There will be 12 exam rooms; a multipurpose room for clinic health and nutrition education programs and community use; counseling rooms for the new mental-health component; a play area for children in the waiting room; and an X-ray film development room. Garcia said the remodeling is expected to be finished by early next year, with the medical component going in first.

In the meantime, however, clients and medical staff make do in the clinic's small quarters at 10 Alexander St.

Family feeling

Griselda Panderas, a receptionist at the clinic, was busy in the office last week, but she didn't mind taking time to talk about Salud.

She made a quick list of the reasons she likes working at the clinic: working with the community, being able to put her cultural background to use and chances for advancement in the medical field.

But it's more than that, she said. There's a feeling of unity at the clinic, a sense that everyone is working together with the same goal in mind, Panderas said. And there's a warmth between coworkers that she likes.

"It's like a family atmosphere," she said. "I think this is the place I'm going to stay."

The large demand for low-cost medical services is evidenced by the fact that Salud has to turn people away because there isn't enough room or enough medical personnel.

Alicia Magana was in the clinic last week with her son, Ruben, who wasn't feeling well. She said she chose to come to Salud Para La Gente six years ago because it took too long to get in to see a doctor at the county clinic. She and her family have been coming to Salud for their health care since then.

"When my children are sick, I can get in that day as an emergency," she said through a translator.

Dr. Josie Simpkin, medical director for the clinic, said clients have told her that they feel well cared for by clinic workers, all of whom are bilingual in Spanish and English. Other clients come to the clinic as a matter of convenience — it's near where many of them live.

Simpkin has been working for the clinic only since July, but she said a physician's assistant who has been at the clinic for eight years has told her there's been an overall improvement in the gen-

eral health of many of the people Salud serves.

Emergency care

Still, the majority of people who come to the clinic come because of medical emergencies, rather than coming in for preventive care or treatment of early symptoms, Simpkin said.

"Many of the people who come to us have never been to a doctor," said Garcia.

About 40 percent of people the clinics sees are children, Simpkin said. One quarter of those patients come in for checkups — the rest are for a variety of complaints. The clinic also provides immunizations and general checkups for children at local schools.

Many of the adult patients come to the clinic to be treated for high blood pressure, diabetes and a variety of work-related problems. The clinic has also made a big push to get pregnant women in for prenatal care.

During the frozen-food strike, the clinic provided free medical care to strikers, Garcia said. And after the Oct. 17 earthquake, in addition to providing medical care, the clinic provided information and referrals, and collected and distributed clothing, food and money to earthquake victims. Because of the lack of information going out in Spanish, it hired a team of outreach workers to go to Spanish-speaking neighborhoods and the labor camps to get out information

One of the continuing problems health workers at the clinic are seeing is serious dental decay, Simpkin said.

Garcia expects that the clinic will continue to expand the range of services it provides, and hopes that dental care can be added in the future. A second doctor is being hired, and with the additional exam rooms in the new building, the clinic will be able to take more patients.

Its own lobbyist

One of the reasons Salud has been able not only to stay afloat, but also to grow in times of diminishing dollars for human services, may be its political savvy.

The clinic has its own lobbyist in Sacramento, Arnold Torres, who is paid to keep an eye on health care legislation and programs that might affect Salud. He also makes sure the clinic's state-funded programs are meeting requirements.

When health care funds from Proposition 99 (the tobacco tax) were made available to the state, for example, Torres lobbied to make sure the letters about the money that were sent to the counties directed health departments to work with community clinics.

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Clinics benefit from the service he provides, he said. Most of them, Torres said, are "so consumed with just doing their work, it's hard to see the big picture."

"You need more than just good programs," Torres said. "You need a continual push on issues."

Garcia said the clinic also sees itself in a health-care advocacy role locally and statewide. The clinic is part of a coalition of five community clinics in Santa Cruz County that work together to share information and resources. Salud also works with other community clinics throughout the country.

Money a problem

Garcia said she's concerned about the growing number of people who have no health insurance and about rising medical costs, both of which will increase the demand for services clinics like Salud provide. Funding will have to rise in order for clinics to be able to meet those needs, she said.

Torres said that two of the programs that have been providing funds to clinics like Salud, the Immigration Reform and Control Act and the Prop. 99 tobacco-tax money, will end in the next two years, and that clinics will have to look for new sources.

Salud is currently launching a big fund-raising drive to pull together the final one-third of the \$3.1 million needed to purchase and remodel its new building. Other fund-raising and a loan have provided the first two-thirds.