

111 Park Ave.: The building where today's work took root

Finally, we've let it go. On July 31, 2012, Health Care for the Homeless entered into a contract to sell 111 Park Ave., the building that was our base of operations from 1992 to 2010. On Monday, July 31, 2017, we closed the deal. In the days since, we've canceled insurance coverage. BG&E will stop sending us bills. Andrew Oliver will no longer be summoned by the alarm company in the wee morning hours because of a glass break. The new owner will convert the building into apartments and retail spaces. And proceeds from the sale will support the maintenance of 421 Fallsway.

During our 32-year history, we've learned at least three things about buildings. ***First and fundamentally: buildings matter.*** Space matters. It's better to have a home—a base of operations—than not to have one. Buildings give shape to our lives, and to our day-to-day work.

111 Park Ave. provided a base of operations for many organizations over the last 100 years. In 1908, a terminal and maintenance station for the Washington, Baltimore and Annapolis Electric Railway opened on the site, with passenger train cars moving through large openings on Liberty Street and out onto Park Avenue. The railway operated until 1935 when, amidst the Great Depression, it folded in the face of competition from a rising auto industry.

The building then became a branch of Baltimore's Equitable Trust Company, before becoming our home in 1992. A steel vault with an 18-inch thick door was installed in the basement beneath the thick concrete floor originally poured to support the weight of train cars. The director of our addiction program would later have an office in that vault, and when it subsequently housed the cubicles of five outreach workers, they asserted their physical location made them our most valuable staff members.

We used to joke in a funny/not funny kind of way that 111 Park Ave. followed the U.S. economy—a train station in the early 1900s, a bank by mid-century and a homeless health care clinic before the turn of the millennium.

The second thing we've learned about buildings: we grow attached to them.

Health Care for the Homeless was seven years-old when it left its early site at 232 N. Liberty St. and partnered with Persons Aiding Travelers and the Homeless (also known as PATH, the former Traveler's Aid Society) to buy 111 Park Ave. and open the "Center at 111 Park Ave." The center was a new kind of one-stop shop for people experiencing homelessness and in addition to Health Care for the Homeless, housed the Homeless Persons' Representation Project and PATH's Break the Cycle employment program. (Within five years, PATH and HPRP moved out and we bought the rest of the building and continued to grow.)

When I first showed up on the scene as an outreach worker in 1993, the first social worker I met lamented how much the organization had changed. "*We were such a different organization when we were on Liberty Street.*" And a nurse practitioner told me, "*I wish you could have seen our clinics at My Sisters Place and Christopher Place.*" Decades later, many of us heard similar exclamations following our move to 421 Fallsway. "*You should have seen the organization we were at 111 Park Ave.*" "*We're not the same as we were then.*" And we've heard them more recently, as staff has ventured beyond 421 Fallsway to other locations.

Only 15% of our current 260 staff members spent time at 111 Park Ave.—and only two moved there from Liberty Street when that site became so crowded that the stairwell was the only space large enough to fit 20 people for monthly all-staff meetings: Wanda Hopkins and Jan Caughlan, my first supervisor. Even though so few of us ever worked there, so many of our programs and practices today took root at 111 Park Ave.

In 1993, newly-hired pediatric outreach nurse Lisa Stambolis had the cubicle next to mine. We were inspired by the fierce passion of the agency’s founders who asserted that homelessness was unacceptable, and of the providers who made up interventions as they went along to care for a population shut out of mainstream health care systems. Rooted in lessons from the original Robert Wood Johnson research project (1985-1987) that led to the creation of Health Care for the Homeless in Baltimore, our entire endeavor remained an emerging practice in the 1990s—and beyond.

At 111 Park Ave., we launched the first state-certified addiction treatment program for people experiencing homelessness. We hired our first physician. One of our psychiatrists worked with a health department coalition to create Baltimore’s first needle exchange. Against conventional wisdom, we housed our clients long before anyone thought to call it “housing first.” Through a collaboration with Baltimore City, we sent a Convalescent Care nurse out to local shelters. And by the end of the decade, we became the first Health Care for the Homeless program in the country accredited for ambulatory and behavioral health by The Joint Commission.

And at 111 Park Ave., our advocacy grew alongside our clinical work. When the governor eliminated Medicaid for single, childless adults, we worked to create the predecessor to the Primary Adult Care program that would eventually give way to Medicaid expansion. When the mayor closed Baltimore’s winter shelters, we rallied outside City Hall until they reopened. When the Downtown Partnership hired street security guides to forcibly move people experiencing homelessness away from local businesses, we joined the Homeless Persons Representation project to, semi-successfully, sue them. And we advocated for living wages—and tied our own wage floor to the local cost of housing.

Many lasting programs and traditions grew out of meetings in 111 Park Ave. group rooms. One conversation between two social workers and a Veterans Affairs art therapist resulted in our client art group and the colorful mosaics and sculptures in our current clinics. A visit from the Secretary of the Social Security Administration spawned the national SOAR program to expedite disability benefits for people experiencing homelessness. Clients met to form the Consumer Relations Committee of the Board. A meeting with Baltimore officials spurred our first official “housing first” collaboration. And clinical leaders met with architects to design 421 Fallsway, while development staff and community members conceived an ambitious capital campaign to create those relationships that continue to advance our work today.

In the ever-evolving history of Health Care for the Homeless, early events at 111 Park Ave. often foreshadowed what was to come. A young *City Paper* reporter named Molly Rath took shorthand around an office table while we discussed the causes and consequences of homelessness. A state health department staffer named Barbara DiPietro, who later helped write Maryland’s first “Ten Year Plan to End Homelessness,” volunteered at our front desk with former security guards Ken Hess, Mike Rudolph and John Lane. Veronica McDonald and Pete Iacovelli worked to understand Medicaid billing systems even as the majority of those we served were uninsured. Pat Scott ran around the first floor with paper medical records held high over her head long before our first electronic health records system went live.

And at 111 Park Ave., we planted the seeds of our mobile and West Baltimore clinics. From the moment we left Baltimore's west side in 2010, we realized many of the individuals we had cared for weren't making it to us past the Charles Street divide. We knew we needed to bring our services directly to people experiencing homelessness outside the walls of a building. And we knew that pressing human need on the west side of town would someday bring us back.

Which brings us to the third thing we've learned about buildings: Health Care for the Homeless is bigger than a building. A building has never contained our spirit and our mission. As we've moved from one facility to another and out into new clinic spaces, we've taken with us much more than boxes and moving trucks can hold.

The five people who implemented the first Health Care for the Homeless grant in 1985, the 20 staffers who moved from Liberty Street to 111 Park Ave. in 1992, the 125 people who left 111 Park Ave. for 421 Fallsway in 2010...none of them could have predicted the organization we'd become or the bold strategic plan we'd be following into the future.

But they would recognize our values. And years and even decades later, the Health Care for the Homeless staff who have gone before us would clearly see themselves in you.

Thank you for all you do to advance our mission in greater Baltimore.

Kevin

Kevin Lindamood
President and CEO