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## Sometimes a Lawyer is the Best Medicine

## Lawyer treats kids for legal maladies

By Matthew Hirsch

RECORDER STAFF WRITER

There's a new kind of specialist at Children's Hospital and Research Center Oakland. Like longtime doctors there, she sees patients suffering from earaches, chronic asthma or schizophrenia, but she's not a doctor. She's a lawyer.

Each Wednesday at lunchtime, Sheila Hall sets up shop in a patient room where she and Anne Marie Nicpon, a UC-Davis law student, offer free legal advice to the families who bring their children in for treatment. They aim to improve children's health by making sure basic social needs are met.

Since kicking off their work this summer, the two have faced a dizzying array of legal challenges, including child custody, housing and public-assistance problems.

On a recent visit, Hall and Nicpon saw a patient with a heartbreaking story: She was a timid 14-year-old victim of sexual abuse suffering from severe depression and schizophrenia.

The young girl was going through intensive counseling and medication, but the lack of private space — she shares a bedroom with an older brother — in her family's cramped sub-



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**THE LAWYER IS IN:** Attorney Sheila Hall, center, and law student Anne Marie Nicpon talk to Dr. Shelia Ankrah, left, at Children's Hospital in Oakland.

sidized apartment was worsening her medical condition.

"I told her we were going to do everything we could to help," said Hall, an attorney at East Bay Community Law Center

After reviewing the local housing authority's rules, Hall saw that the family had a strong case to be assigned a larger apartment so the girl could have a bedroom of her own. "You can get a waiver if there's a medical need, and she has a very clear medical need," Hall said.

For the past several years, Dr. Gina Lewis, a pediatric physician at Children's Hospital, has wanted to work with Bay Area legal institutions in cases where even the best medical care is not

enough.

Lewis found her match a mile up the road at EBCLC, a public interest law clinic that was looking to expand its services to lowincome people living with chronic health problems. For years, EBCLC has provided legal counseling to patients at another Alameda County hospital, but those services were less integrated with medical care and targeted mostly to HIV patients.

"We were doing a medical-legal collaborative without really calling it that," Hall said.

Through its partnership with Children's Hospital, known as the East Bay Medical Legal Collaborative, EBCLC attorneys conduct regular trainings for health care providers to identify legal issues that may be undermining a patient's medical condition. They advise clinicians who treat patients with chronic asthma to find out whether their patients are inhaling dust or mold at home, for example.

"We see kids all the time where the medical piece is such a small part of what we're doing," Lewis said.

As medical director of the medical legal collaborative, Lewis helped launch the program on a shoestring budget of about \$25,000, with startup funds coming straight from Children's Hospital and EBCLC. The group is now applying for seed money from a national foundation in hopes of funding one full-time staff attorney.

Thirteen years ago, a doctor at Boston Medical Center established the blueprints for the medical-legal partnership. Today, the Boston clinic's pediatric department has five in-house lawyers and a \$200,000 budget. The success in Boston led to creation of the national Medical Legal Partnership for Children, which provides resources to 30 other local site programs around the country.

"The physicians recognize this is the legal equivalent of preventive care. If you address these legal issues early, in the long run you're going to be saving money," Lewis said.

With scarcely enough resources to provide for internal staff, public health experts say most hospitals are reluctant to clear space for nonmedical activities. The fact that lawyers have carved out any space at a big-city teaching hospital is an indication of strong support for the project, they say.

At the Lucile Packard Children's Hospital in Palo Alto, the only other Bay Area health care facility linked with the Medical Legal Partnership for Children, lawyers have seen immediate signs of success.

They served 75 families last year, the first full year of operation, and supplied information to medical providers for 25 others, according to Melissa Rodgers, a supervising attorney at Legal Aid Society of San Mateo County, which sends lawyers to the Palo Alto children's hospital.

After expanding into additional fa-

cilities last September, Rodgers expects those numbers to increase in the future. "When we do training on any topic, we see a spike in the number of referrals," she said.

Lawyers in private practice say the medical-legal partnership may point to a more effective way to deliver pro bono legal services. After all, finding a steady stream of clients can sometimes be as difficult as freeing up staff time and resources.

"Poor people don't walk into our offices. We work in big tall buildings," said Stephen Hanlon, a partner in Holland & Knight's Washington, D.C., office and a member of the Medical Legal Partnership for Children's national board. "We are always looking to get in touch with people who do screenings

who can put us in touch with people whose problems we can solve."

The directors of the East Bay Medical Legal Collaborative have their sights set high. They hope to fully integrate services one day, giving patients the ability to schedule medical and legal appointments concurrently.

But first, there's a minor medical task to perform. They have to inoculate doctors against the paralyzing fear of lawyers.

"Everybody is very supportive of the idea once they understand that lawyers are coming in to serve the patients," Lewis said, "not to sue the hospital."

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