

UNIVERSITY OF KENTUCKY

Kentucky Homeplace

**July 1 – September 30, 2018
Quarterly Report**



Kentucky Homeplace <http://www.kyruralhealth.org/homeplace>

Funding for the program is a joint collaboration of the Kentucky Cabinet for Health and Family Services and the University of Kentucky and the Center of Excellence in Rural Health.

Photograph taken of Dewey Lake in Floyd County Kentucky courtesy of William Mace Baker

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Kentucky Homeplace

The third quarter of 2018 was very busy time for Kentucky Homeplace. During this quarter, all Community Health Worker's (CHWs) were given an update training on Diabetes Self-Management DSMP over the course of two days. DSMP workshops will be offered in the service area beginning this fall. For workshop locations please see the program locator at the following link: <http://ruralhealth.med.uky.edu/cerh-trainings> Cumulative totals from the fall of 2015 through the end of FY 2017 indicate 883 individuals participated in CDSMP/DSMP and 517 participated in Walk with Ease for a total of 1,400 participants in both programs.

Kentucky Homeplace serves 30 rural counties in the eastern portion of the state and is currently staffed with 20 full time CHWs and two current vacancies. The following report reflects the CHW activities during this quarter. This quarter overall totals are significantly increased in comparison to the previous two quarters this year. The CHWs are working diligently in their communities to reach those in need of services and the totals below reflect their efforts.

Please take the time to review the "Client Encounters" section near the end of this report. This section details the struggles and hardships of the people the CHWs encounter on a daily basis and provides an insight into the valuable work Kentucky Homeplace CHWs do in their communities.

Quarterly Summary

For the period July 1, 2018 – September 30, 2018, the CHWs provided services for 1,877 clients. CHWs logged 4,352 hours on care coordination activities with a service value of \$82,683, amount of medication accessed \$2,229,963 and other service values (not medications) accessed were \$991,897 for a combined total of \$3,304,543.

The entire quarterly report is posted on the UK Center of Excellence in Rural Health's web page at <http://kyruralhealth.org/homeplace>. The report is found under the Kentucky Homeplace tab, Quarterly Reports and then click on July-September. If you wish to have a printed copy, please call 1-855-859-2374 or email me at mace.baker@uky.edu.

Sincerely,

William Mace Baker

William Mace Baker, RN
Director, Kentucky Homeplace Program



Program Activities

July 1 - September 30, 2018

Kentucky Association of Community Health Workers

The majority of Kentucky Homeplace (KHP) staff attended the Kentucky Association of Community Health Worker (KYACHW) conference on 9-27-18 in Louisville. Approximately 110 people attended the conference this year.

KHP staff member Kala Gilliam (Kentucky Homeplace CHW Rowan County) has accepted the position of President Elect.

Community Engagement Activities

The following is a sample of events attended by Kentucky Homeplace Community Health Workers (CHWs) this quarter:

University of Kentucky resource fair, Gateway Headstart, Letcher County Back to School Bash, Knott County Health Fair, Letcher County Resource Fair, UK Colon Cancer Research Community Advisory Board CDC site visit - Hazard, in addition to a host of other events such as interagency meetings, diabetic coalitions etc.

CHWs assisted with the following events:

Second quarterly All eyes on Appalachia free eye care clinic in Harlan, KY.

Conferences attended:

Kentucky Homeplace Community Health Workers attended the 3rd Annual Kentucky Association of Community Health Workers (KYACHW) in Louisville.

Professional Development

All Kentucky Homeplace CHWs attended the Assister Kentucky Health training and the CMS FY2019 Certified Application Counselor (CAC) online training.

Webinar Trainings: Needy Meds Webinar, Kentucky Online Gateway (KOG) Webinar.

CHW Training

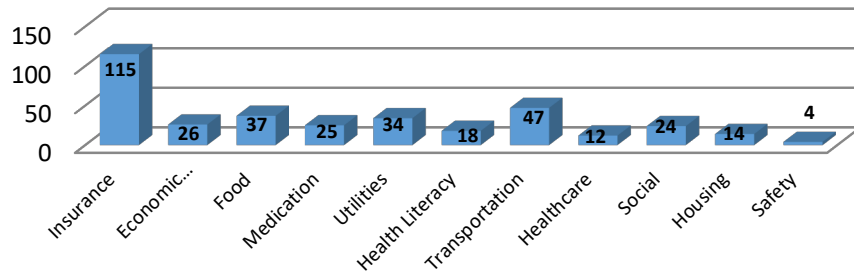
Master Trainers Mace Baker and Janet Kegley provided two updated Diabetes Self-Management Cross-Trainings to bring the CHWs up to date on providing DSMP workshops for their clients.

Other News

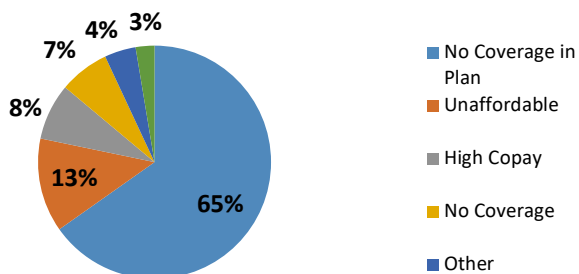
Two current vacancies in the Boyd/Greenup and Jackson/Laurel offices.



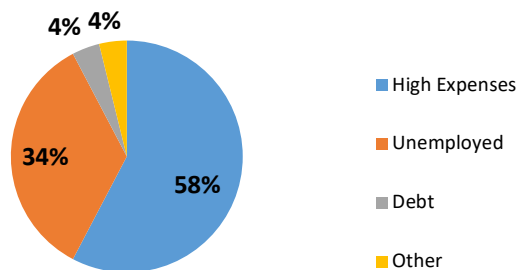
SOCIAL DETERMINANTS OF HEALTH BARRIERS TO CARE 7/01/2018 - 9/30/2018



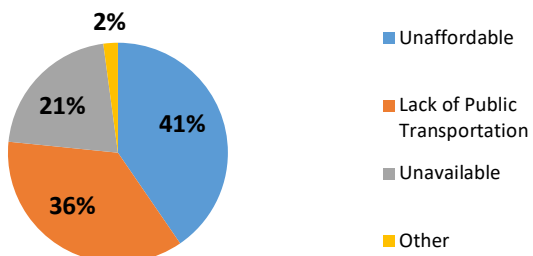
Insurance Instability Barriers



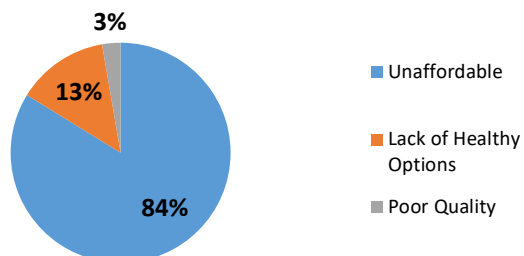
Economic Instability



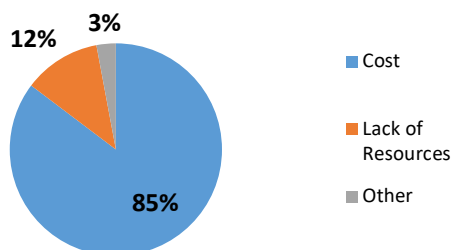
Transportation Barriers



Food Barriers



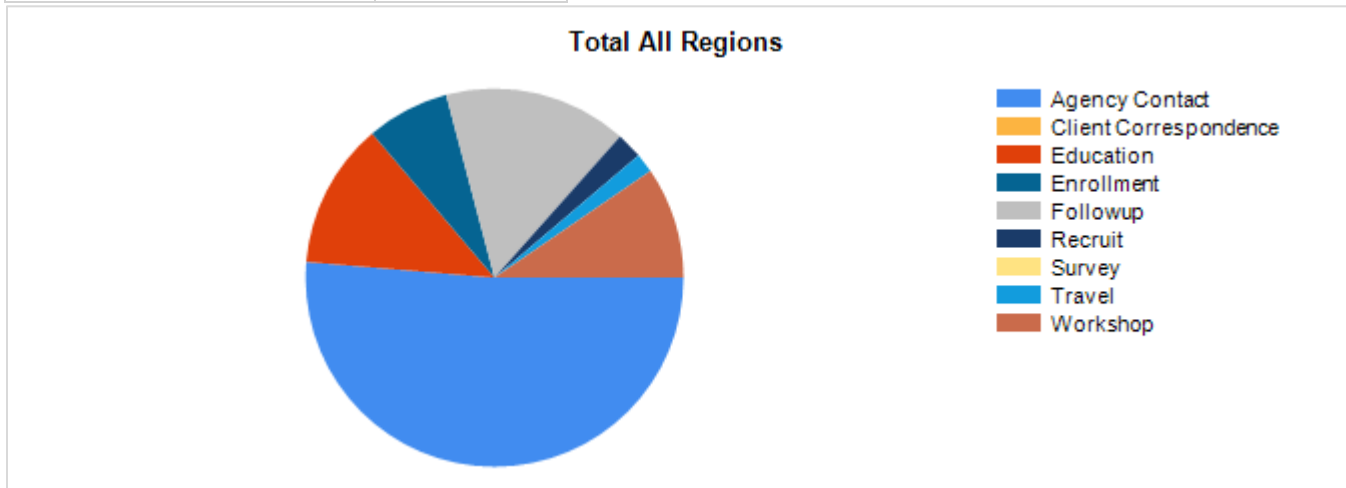
Utilities Barriers



Activity Summary

(Clients visited: 7/01/2018 – 9/30/2018)

Activity	CHW Hours
Agency Contact	2,233.40
Client Correspondence	0.25
Education	542.13
Enrollment	308.42
Followup	683.83
Recruit	96.50
Survey	0.25
Travel	71.97
Workshop	415.00
Grand Total:	4,351.75

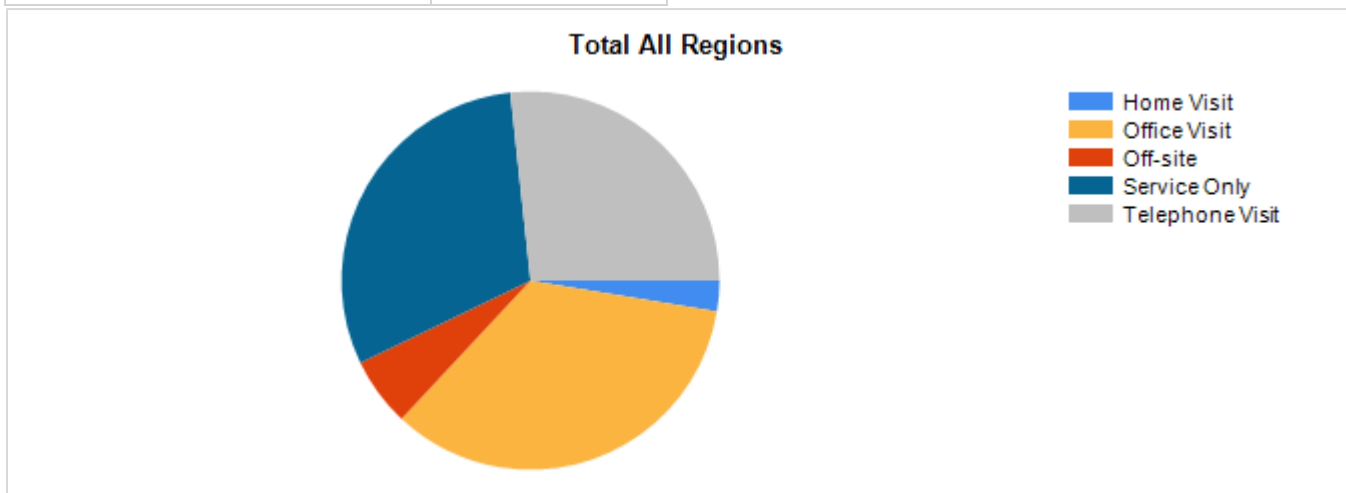


Total service value for 4,351.75 hours equals \$82,683.25

Visit Summary

(Clients visited: 7/01/2018 – 9/30/2018)

Visit Type	Client Visits
Home Visit	142
Office Visit	1,870
Off-site	320
Service Only	1,657
Telephone Visit	1,454
Grand Total:	5,443

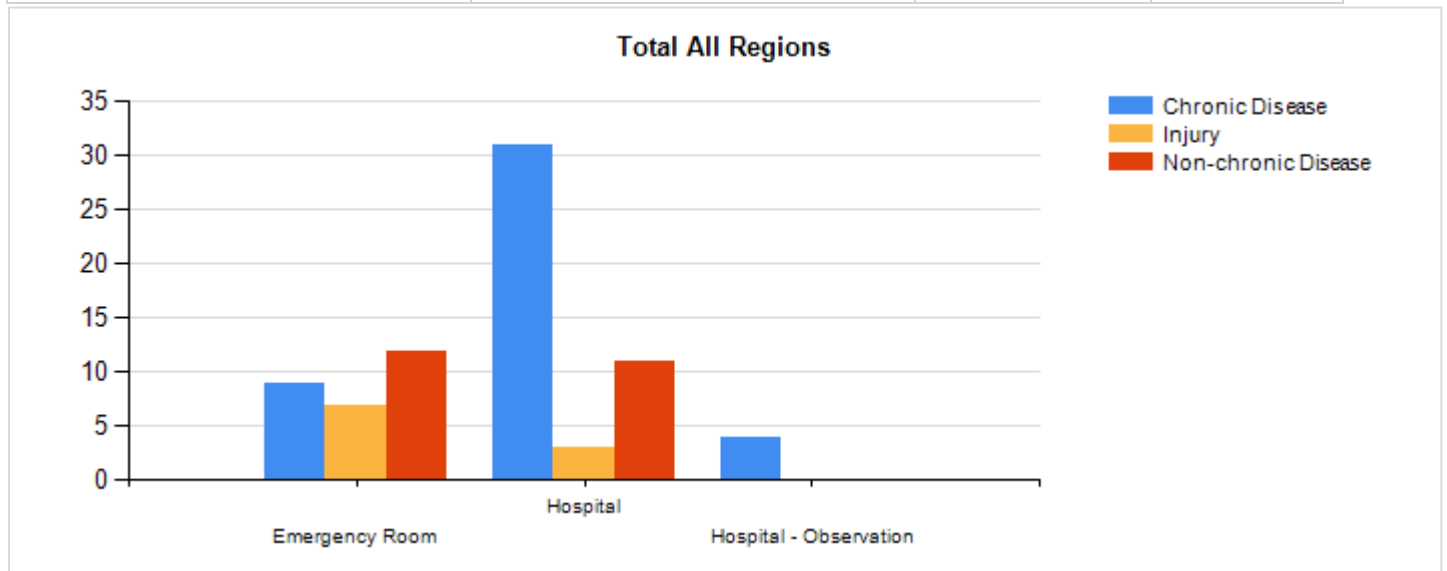


* Service only involves any actions taken on behalf of the client while the client is not present.

Hospital-ER Summary

(Clients visited: 7/01/2018 – 9/30/2018)

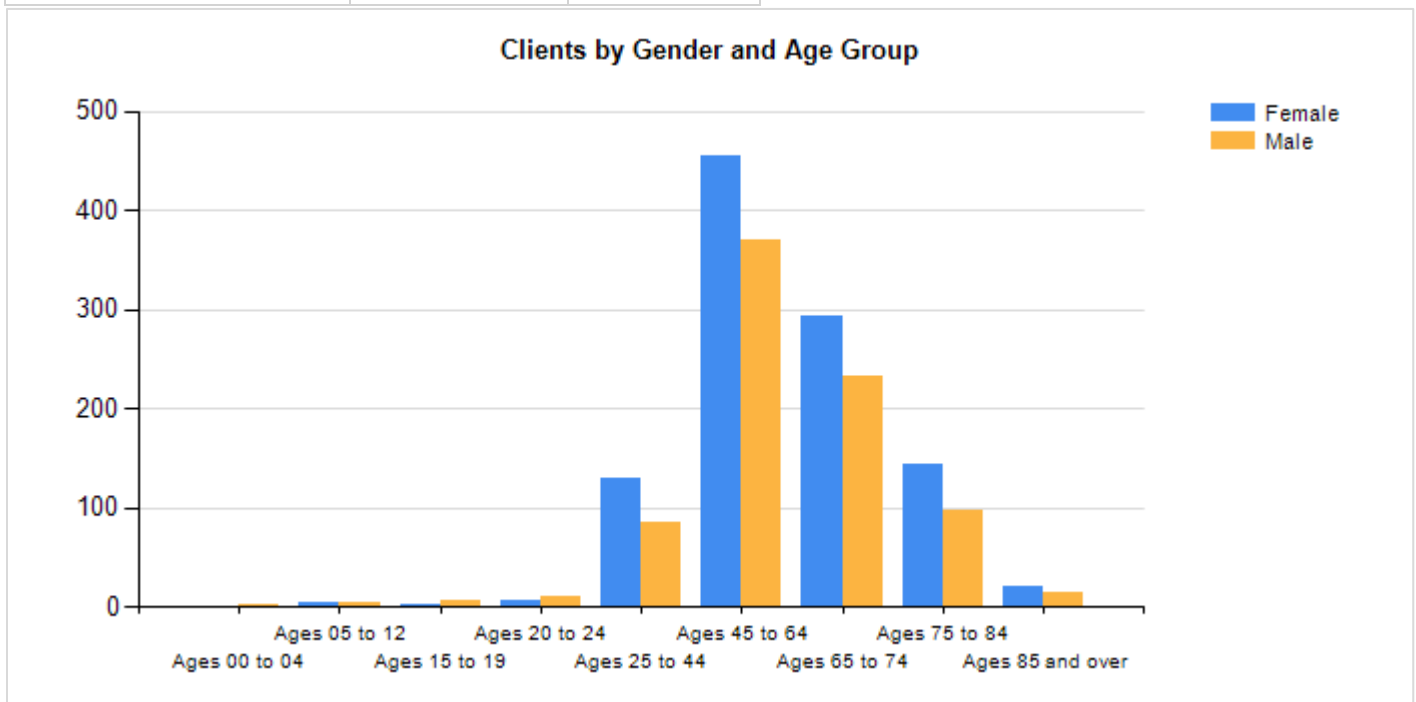
Episode Type	Reason	Episodes	Days Stay
Emergency Room	Chronic Disease	9	0
Hospital	Chronic Disease	31	117
Hospital - Observation	Chronic Disease	4	0
Emergency Room	Injury	7	0
Hospital	Injury	3	3
Emergency Room	Non-chronic Disease	12	0
Hospital	Non-chronic Disease	11	67
Grand Total:		77	187



Age Gender Summary

(Clients visited: 7/01/2018 – 9/30/2018)

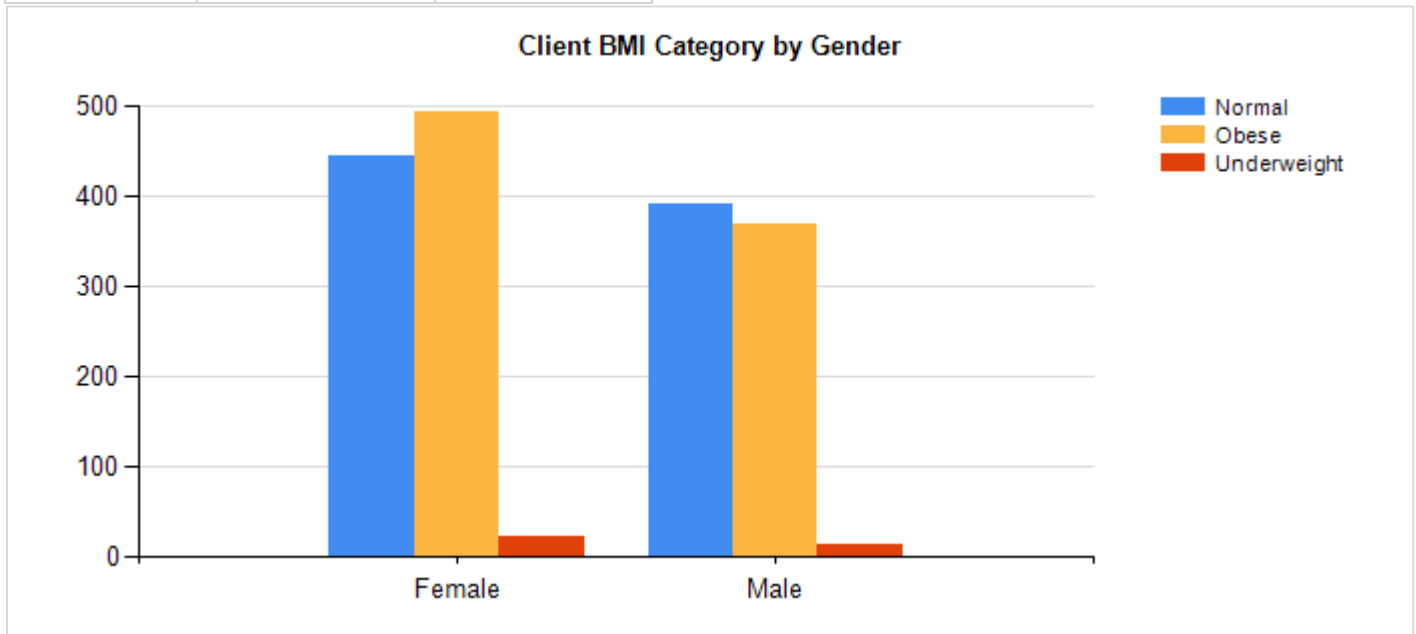
Age Group	Female	Male
Ages 00 to 04	0	2
Ages 05 to 12	5	5
Ages 15 to 19	2	6
Ages 20 to 24	7	10
Ages 25 to 44	129	85
Ages 45 to 64	454	370
Ages 65 to 74	293	233
Ages 75 to 84	144	97
Ages 85 and over	21	14



BMI Category Summary

(Clients visited: 7/01/2018 – 9/30/2018)

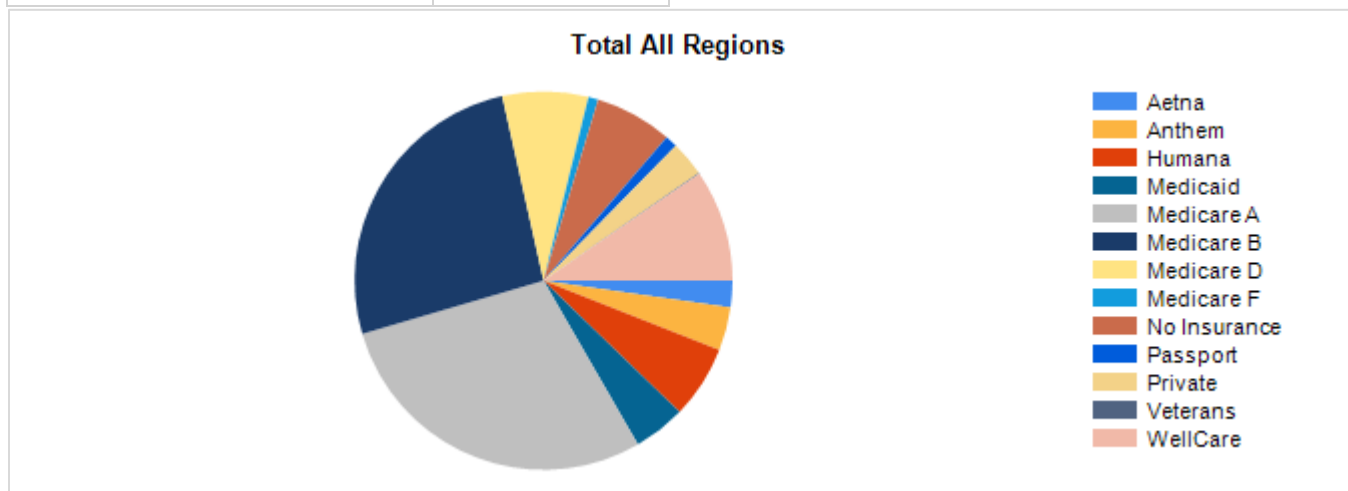
Gender	Bmi Category	Clients
Female	Normal	445
	Obese	493
	Underweight	23
	Total:	961
Male	Normal	391
	Obese	369
	Underweight	13
	Total:	773
	Grand Total:	1,734



Insurance Summary

(Clients visited: 7/01/2018 – 9/30/2018)

Insurance Type	Clients
Medicare A	967
Medicare B	874
WellCare	321
Medicare D	247
No Insurance	223
Humana	209
Medicaid	150
Anthem	125
Private	101
Aetna	76
Passport	35
Medicare F	28
Veterans	3

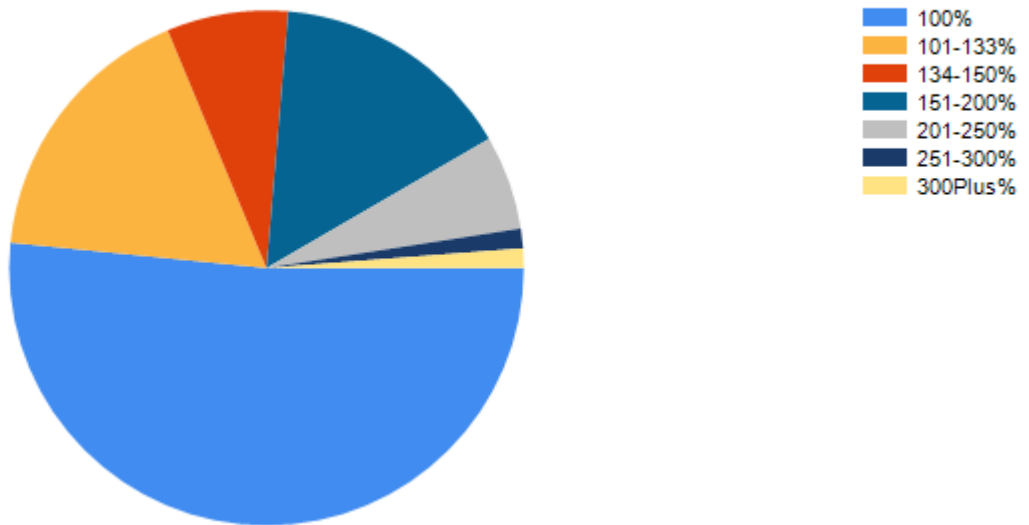


Poverty Level Summary

(Clients visited: 7/01/2018 – 9/30/2018)

	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300Plus%	Total
Clients	968	322	143	287	111	23	23	1,877

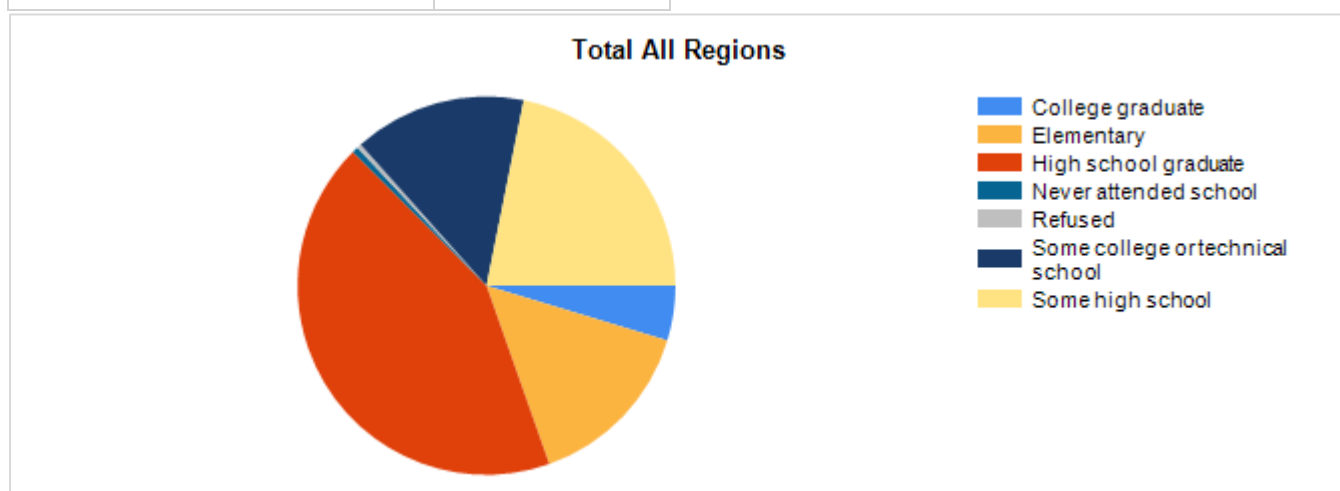
Clients by Poverty Level



Education Level Summary

(Clients visited: 7/01/2018 – 9/30/2018)

Education Level	Clients
Never attended school	10
Elementary	280
Some high school	410
High school graduate	805
Some college or technical school	277
College graduate	88
Refused	7
Grand Total:	1,877



3rd Annual KY Association of Community Health Workers Conference





Kentucky Homeplace

30 County Service Area




Central Office
Mace Baker, Director
750 Morton Blvd., Hazard, KY 41701
855-859-2374




Client Encounters

Actual Situations Encountered by Community Health Workers

July 1, 2018-September 30, 2018

 I receive more and more calls every week from clients who receive Medicare that have gone into the coverage gap. Many of these people are diabetics. Diabetics that are prescribed very expensive insulins or other medications, which they are not able to purchase due to the high cost. Luckily, I am able to help my clients get these medications most of the time at no cost. This allows them to be able to take care of their health until their insurance picks back up. Education and support groups are other ways our program reaches out to seniors in my community.

I had a very nice woman come in to my office that was in need of dentures. I got her enrolled and completed all the required surveys. During our initial interview, I found that she qualified for Low Income Subsidy, needed dental services and had not had a mammogram in over 10 years. My client's needs were taken care of with three phone calls and a little paper work. She walked out of my office feeling better than when she came in. A few weeks later, I saw her in the grocery store and she thanked me for my help. She said that she would have never known what to do or where to go if I had not been there and made those calls. She just did not know the resources that were available and that someone with Kentucky Homeplace was available to assist her with the process.

 As a Community Health Worker, we encounter needs of all kinds. Occasionally I will get a client who needs eyeglasses and that is all, or medication assistance and nothing more. However sometimes, I have a client who comes in with a variety of needs. It seems to be common that a person might often question how that housing or transportation can affect the health of someone, but it does.

I have a middle age client who came into the office in need of eyeglasses. During the initial interview process, it was clear he needed more than just eyeglasses. At only 42 years old, my client recently had his leg amputated from diabetes complications and was facing the possibility of having issues with his other leg. He came in to my office in a wheelchair being pushed in by an uncle who struggled with his own health finding it difficult to care for my client. After a quick chat, I realized that my client had no idea that his glucose measurements had been because he did not have a working glucose meter. He had for some time, not been able to check his levels because his hand coordination was too weak for his previous device. His primary care doctor was able to get him a new device but his testing strips and supplies were not approved on his insurance.

I immediately began working with his MCO to find out why that meter was approved but none of his supplies was. Turns out, it just needed a prior authorization. Staff members of the clinic he attends were not completing the guidelines required by the MCO to approve his supplies. We quickly worked together to meet their requirements and get his supplies approved. He had already went at least 6 months without ever testing due to not receiving his supplies. That was just a start though. He had missed regular appointments, was scheduled soon to be fitted for a prosthetic, and learn to walk again. All of which are pending at this time because due to his amputation he recently was approved for social security benefits but has not started receiving payments.

His journey has not been without complications, on one occasion he received a letter stating that his SNAP and medical benefits had discontinued because he did not complete SNAP work requirements. Again, as his Community Health Worker, I was quick to react knowing that he needed both his SNAP and health benefits to maintain a healthier life. At this moment, there was no way that he was going to be able to complete work


requirements when he could not even walk. I had to contact DCBS on his behalf, make a trip to his family doctor to have forms completed and return them to DCBS in the same day to assist him in recertification of his benefits.

Knowing that his goal is independence and improved health, he knows that he will need as much assistance as he can get. At this point, due to the mental impact that stress of losing his leg and a lifestyle change it has made for him, he felt that he might also benefit from mental health care. We easily had him set up with an agency that will assist him in maintaining appointments, grocery shopping, paying bills, and ensuring that he has access to as many services as possible.


Additionally, I was able to get him referred to another program that will assist in getting him care needed to live independently. He may select a family member to assist in his needs that allow him to live independently such as grocery shopping and house cleaning. He will also receive assistance with medical supplies that he may need such as wound dressings and latex gloves.

Many of the services that my client has received may not be the typical services that you would expect from a Community Health Worker. All of the time I have worked with this client, accessing needs that are not health needs, still directly affected his health. Without accessible housing, he may not be able to adequately bathe himself, prepare food, or even be near a family doctor. Transportation is always needed to get to and from appointments when serious health conditions exist. Even assisting him with his SNAP benefits was very important to his health since not eating healthy food could also negatively affect his health and his ability to control his diabetes.

My work is not done with this client at this time; I will continue to assist him until he no longer needs my help. I make sure that I stay in contact with him biweekly, even if it is long enough to make sure that he is doing everything he needs to stay healthy, or to find out if he needs my assistance with something else. I chose to write about this client because I feel like this is a perfect example of how important the role of a Community Health Worker really is. In my client's case, having a Community Health Worker is going to improve his life overall and that is the ultimate goal.

 Each quarter we provide a short story on how we have helped people. I would like to talk about the overall care that is given to our clients. I had a person come in with a Walmart bag of medication, lay it out on my desk, and say, "Please help." They then tell me, "I have all of this and no idea why I am supposed to take it." We sat down and went through everything he had and if I did not know what it was for we googled it and/or called the local pharmacy to see what it treats. I have had clients to call and say, "My babies are hungry is there anywhere I can get some food?" Thank God, for my friend on this one that emptied out pantries and a vanload of food was delivered to their house. Some people come in saying they need eyeglasses and just cannot afford the \$300 plus fees that they were being billed to pick them up and needed them to simply read. Some have needed home repairs, clothes, medications, fans, air conditioners, medical equipment, boost protein drinks, personal hygiene products, blankets, bedding, appliances, insurance, advice, gas money, help on utility bills, GED's, job searches, physicians, reduced fee clinics, dentures and other dental care. There is a broad range of the things we have done for our clients but the most important one is our bond or friendship. When you help someone in real need that you know can never pay you back, there is no better feeling. Of all the turndowns, dead ends and other obstacles that we meet on a daily basis, they know you are in it for them. They trust us,


they are grateful for us and what we do for them. With that, there is no greater reward. I am thankful to have my job as a CHW and I am grateful that Kentucky Homeplace has been present in so many lives.


 I called a church in another county to inform them of an upcoming health expo that was going to take place in another state. This expo was three hours away. The person I spoke with did not know about the event and asked that I send him any information I had. I explained how everything worked. I then told him that I had several clients that were going and they were my senior clients. I went on to tell him that one needed hearing aids and several teeth extracted. The others needed a hearing test and hearing aids. I told him I wished there was a van or bus available to take all my clients to the expo at one time. These trips are hard on the seniors to travel so far but they had no other way to purchase the hearing aids or to pay for their dental work. Medicare does not cover dental for our seniors.


The person I talked to from the church told me they had a bus at the mission he worked with and would check on it and give me a call back. He later called me back and said after thinking about our situation, he decided that it would be best if the mission would help my Homeplace clients with their hearing aids and dental! Boy I was so excited. We worked together to set a date, time and place for an audiologist to come to my office and do the hearing test for my clients. He gave me a dollar amount that I could work with and I started calling my clients and getting everything completed for the big day.


The mission was able to provide five sets of hearing aids for my clients. This event provided a value of \$30,000 for my clients. This truly was a blessing! We are working on getting the one client their extractions and dentures. I have spoken with some of these clients and they said they feel so much healthier. Just being able to hear sounds when in the past they could not hear much.


One of the clients stopped in and had to share that she was so touched to have been approved for the hearing aids. What is here today might not be here tomorrow. Money is not always where it is always going to be! I explained KHP has a few programs and we will apply for all – and when she got the call that she was approved for the grant and it was going to be free she was speechless. Now that she has her hearing corrected and finally with the correct devices she hears things she has never heard before. Things we take for grant, like rain, birds chirping, she told me she was getting a glass of water and thought what is that sound! She kept looking around and finally looked down it was the water hitting the bottom of her glass! I thought I was going to be the one that was going to need the box of Kleenex – she said she has called all her family, went to church – all she wants to do is get out of her little apartment!!! Being able to hear has opened up a completely new world... This 92-year-old woman that went to church every Sunday to try and listen to her preacher knowing she could not hear a word he was saying but she went anyway. She never lost the faith that maybe someday she could hear again.


 One day a man came into my office expressing a need for dentures. Dentist in the area had been quoting him very high prices, and he was on a set income that made the idea of ever getting dentures seem impossible to him. At one point a family member recommended that he come in and see if Kentucky Homeplace might be able to help. After doing the initial interview, it was discovered that more than dentures were needed. The client has diabetes, hypertension and COPD, but no primary care doctor and had not had a regular doctor in years to monitor these conditions. He was just going to random clinics to get the refills on medications, but not getting the necessary blood work and consultation. By the end of the visit, he had an appointment with a dental clinic to get affordable dentures, an appointment with a doctor at a local clinic (along with a game plan to keep them as a regular physician), and an appointment to come back to be fitted for free diabetic shoes.


 Many times I have been asked the question, what do you do? My answer is, that I try to address any medical need that a client has. Now I know that is a broad answer, for a broad question. In one month alone, I have accessed financial assistance for a senior citizen that desperately needed repair on her home, she qualified for a USDA grant to replace her foundation. I have helped clients with glasses, hearing aids and Medicare part D, and this is just a few examples of what we do at Kentucky Homeplace. I am proud of our organization because it lets me help people in my own community.


 A lady from a local church called me asking about assistive devices for people that has bad eyesight. She told me that a lady in their church needed something to help her be able to read her Bible and read recipes because she loves to cook, especially bake. I told her I would check the internet and see what I could find. She told me that her optometrist had shown her a device that had a battery powered light and magnified the print. I looked to see what I could find, found a web site that had many devices for the people that needed help seeing. I called the company and spoke with a representative in Michigan, she was very knowledgeable of their products, she had a device that she recommended that was much more affordable than the one my client had been shown. I called the lady at the church and told her what I had found and gave her the number to reach the representative I had spoken with. The church decided to surprise my client with the backlit magnifier; she was thrilled. Since then I have found a program that helps people with devices at no cost to them. A wonderful program that enables me to assist my clients with things they need to help them have a better quality of life.

 Donut hole - this used to be a phrase associated with my favorite part of the donut. Now I associate it with people that are in great need of assistance with life sustaining medications, such as insulin. I have a client that is a heart transplant patient. His surgery was 17 years ago and he is still going strong. He called me this summer to tell me his insulin would cost him \$489 a month, and there was no way he could pay that. I asked him to come to the office and let me see if I could help him. I used KPAP to look at the application for the insulin he is prescribed, it happens to be on the list of drugs that is available from the company. I asked him which pharmacy he uses, he told me and I called to see if they would fax over his out-of-pocket expenses for the year. In just a few minutes, I had the report in my hand and he had already spent \$1700.00 out of pocket. I made a copy of his proof of income, attached it along with the report to the application, I explained the program to the client. He took the form to his doctor; his doctor signed it right away and faxed it to the drug company. He was approved within 24 hours and in less than a week we had a 3 month supply of FREE insulin, just this week I ordered his 3 month refill. One very thankful client!

 A young female visited my office needing help finding providers in our area. She was a returning client of Kentucky Homeplace and knew I was able to provide help in the past. She was very upset and explained she is going through a divorce; her employment had cut her hours back to almost none. This female client cried almost the entire time she was in my office. I was able to get her a same day appointment with a provider. I requested the clinic send me a new patient packet and helped her complete it. I printed off some educational materials about depression, managing depression and explained she may want to speak with her provider about this. Client returned to see me approximately three weeks later and thanked me for my help and I noticed she was doing a lot better.


 I have been working with a client that needed eyeglasses. He came into the office to check on how to get new eyeglasses. I was able to assist him with getting him a new pair of eyeglasses by going through an organization that Kentucky Homeplace works with. During the visit with him, I was also able to link him up with a program that provided him with a \$50.00 Goodwill Voucher to help him with clothes etc. I was able to talk with another program and linked him to a program to assistance with getting a job with the Senior Program and Free Cell Phone to help with communication. He is diabetic and I was able to get him a free pair of Diabetic Shoes. He was so happy with getting help with several programs at the same location. I told him we were a one-stop shop for his needs.

 I have a client I have been helping him get medicines since 2009. He has purchased a Medicare D Plan for his medication and still by August, he is in the Donut Hole and cannot afford his medicines. He is having problems getting his insulin and other medication. His income is a little above the income allowed for him to get the LIS-Low Income Subsidy (Extra Help). Talking with him, I explained that I would be able to assist him with some of his medication through different programs for the rest of the year. He could get some free and some at a very low cost. We did the paperwork for the doctor to sign off on and got the process going. He was eligible to get his insulin free for the rest of the year. He said he did not know what he would do if it was not for Kentucky Homeplace to help him with his needs.


 This quarter I assisted a 47-year-old male in getting access to healthcare. This client came into my office seeking assistances with insurance coverage but by the time he left my office I had scheduled him for the first appointment that he had with a physician in over 10 years.


After going through our core screening with him, I noticed that the client was not currently up to date on any physicals, labs, or preventative screenings. I asked the client how long it had been since he had been to a doctor and he told me that he had not seen a doctor in more than 10 years. While the client was in my office, I took his blood pressure and it was 177/120, at that time the client informed me that he had not had his blood pressure checked in years.


After educating the client on hypertension and the side effects it can cause, I was able to talk the client into going to the doctor to have a complete exam. I contacted the clinic and within only a few moments, I was able to get this client into the office quickly for a check of his blood pressure. Since then the client has called me to let me know that the physician would not allow him to leave the clinic without medication to treat his hypertension. This client thanked me for my concern and prompt action in getting him into the clinic and, is truly humbled and thankful for the assistances that he has received from Kentucky Homeplace.


 My client came in as a walk in. He had previously been incarcerated for 2 years, he needed new hearing aids. The ones he was wearing were fourteen years old. I enrolled him into our program and started the procedure of acquiring reduced rate hearing aids for him. I asked if he had a cell phone and he said no. I called a state program and initiated an application for him. The day of his appointment for his evaluation, he received his application for the phone. He took the application with him to the appointment.


The next step was to come see me for final processing. I processed the hearing aid application and the free phone application. He was excited when he called me to say that he was approved for the free phone loaded with apps to help the deaf/hard of hearing and his hearing aids.

 This quarter I was able to help a man that is a security guard, he was a referral from a disability program. He was having trouble at work not being able to hear the other guards on the portable hand-held radios and also not hearing what was being said from patients needing assistance. He had been written up several times and was on his way to being unemployed. After several calls to schedule appointment with him, and being a no-show, his supervisor reached out to me and said that he would allow him to come on the clock if I could see him. I scheduled an appointment and was able to enroll him into a program and get him hearing aides after 12 years of not being able to hear properly.


 I received a referral from a clinic. A young man had lost his job and had no place to live. He was sleeping from couch to couch and not able to get into the homeless shelter because the waiting list was so long. He did not have transportation to schedule an in office visit so I made several calls to help him get what he needed and was able to get him a case-worker and she then was able to help transport him to the outreach program that would help him with job search, housing and local food organizations.

 This quarter I had a client come in to get help with dentures. As I was asking screening questions regarding hearing, the client voiced her concern about her inability to hear properly and said that she could not afford hearing aids. I discussed a program with her that we worked with that provided hearing aids at a very low cost. In addition to this, she pointed out that it has been a long time since she has had her eyes examined. I also helped her get eyeglasses.

 I had a client that was in need of medications and was referred to me from the free clinic that my office is located out of. She had been going to see the doctor at the free clinic and was in desperate need of inhalers. The doctor knew that there were programs that I could enroll her in and referred her on to me for assistance with each of them. She was definitely eligible to receive the assistance through the pharmaceutical companies that we use, due to her low income. With the doctor being there handy, he was able to sign off on the applications and fax the applications to the company from within the clinic in one day. She was able to receive her meds and pick them up here at the clinic when they were delivered. It is such a wonderful thing to be able to, not only gain trust within our clients, but also to gain trust with the doctors as well.


 I make monthly meetings to provide services at a facility in Boyd County with a group of women that all have different types of needs. I met with a woman that needed assistance getting a double mastectomy bra. She had breast cancer when she was younger, which resulted in having both breasts removed. Before she came to the facility, she had purchased a bra but it was broken and no longer useable. Her insurance would only pay for a portion of her bra and she did not have the money to pay for the other portion. She was desperate and was very embarrassed. I talked with her and started working on her case. I contacted all the CHW's with Kentucky Homeplace to see if anyone had a donation of mastectomy bra and none had the size I needed for my client. I then got in contact with a woman from a program that we work with who was going to do her best to assist me. She had a couple places that she was going to check with to see if they had any donated to their facility. After

checking around she called me to let me know that they had mastectomy bras in her size. I was elated for my client and my client was very thankful to have received a not just one bra, but two. It is phenomenal how everyone can work together to help those who are in need.

 My client is an elderly man who had not had an eye exam in several years. He could tell something was going on with his sight. He is a Medicare A and B recipient, and has very high monthly bills. His income was too much to qualify for a program that would help with his eyeglasses.

The University of Kentucky was sponsoring a Free Eye Clinic in Harlan. I told my client about it and set him up to be seen by the Optometrists from UK. While having a thorough eye exam, something was spotted in one of his eyes. The optometrist suggested that he have further testing and he came back into my office and told me.


We scheduled him and appointment with an Optometrist and he will be having surgery on his eye this month. If not for the services offered by UK through Kentucky Homeplace, this client could have lost his eyesight and been completely blind in that eye. He was very thankful that we were here to help him and set him up for the initial eye appointment that helped find the problem with his eye.


 My client, an elderly woman who had had a stroke and is having trouble with her hearing. She had not had her hearing checked in a very long time. She was feeling left out of daily life and was not enjoying her visits with family and friends. She also stated that she did not have transportation.

The first thing we had to figure out was if she qualified for the program from reduced hearing aids. We sent her the application to see if she would qualify and she did.

The next thing we had to do was find transportation for her to get to the exam appointment in Lexington. I contacted our local transportation program for her and told them she was fearful of traveling alone due to her condition after the stroke. They informed me that she could take one person with her to the appointment to help her get on and off the bus, and help her into the appointment and back home.

She was very thankful for the help of Kentucky Homeplace. She is on her way to hearing better and enjoying her family and friends again.


 I had a client that needed help with insulin. He needed four different kinds and he was not taking his medication because he did not have the money to pay for them. His out of pocket expense would have been \$800.00 plus per month. His doctor was concerned and wanted to help him. The doctor referred the client to me to see if I could help him. I was able to get his medication at no cost.


 Kentucky Homeplace Community Health Workers from Harlan, Bell and Leslie had the privilege of working with a wonderful program called “All Eyes on Appalachia”. This program is offered through the University of Kentucky to help provide services of free eye exams, free eyeglasses, and screenings for diabetic eye disease, glaucoma, cataract, dry eyes, and others.

Our role prior to the event as CHW’s was to recruit clients in our counties. Between all three CHW’s we recruited over a hundred clients. The day of service, we saw 51 clients from our surrounding counties. All fifty-one clients had been seen by Kentucky Homeplace workers or; they became clients of ours. Everyone received

free eye exams and if they needed glasses, they received free eyeglasses even our adults received glasses! It was such a blessing!

One of my clients was diagnosed with Macular Degeneration; he was referred back to Huffman and Huffman who graciously donated their office space for our program. They are treating him for Diabetic Retinopathy with steroid shots over the next three months. His wife said, if I had not referred him he probably would have went blind. He is a severe Diabetic and faithfully comes to Kentucky Homeplace every year for the services that we help provide. They were both so grateful! He had not had an eye exam in over five years. Thankfully, we stress the importance of diabetic eye exams. It was such an honor and privilege to work on a Saturday to help promote such a great cause. I love my job and role at Kentucky Homeplace in Harlan County.

 I had a client come in needing assistance with housing. He and his girlfriend were living in a tent on his dad's property. They had minimal clothing and one pair of shoes each that were in bad shape. I started by calling the low-income apartment's here in town to see if they had any openings. They had only a couple available. They faxed a copy of the application over and we completed the same day and returned. They had an appointment the following Thursday for an interview. They are now on the waiting list for a home. I also was able to locate food and some clothing for the couple.

 I had a call one day from a man that had just relocated to the county I serve. He was in bad need of adult depends. The county that he moved from had a program to supply all his depends. He did not realize that when he moved that the program would stop. They only help people that live in that county. I was able to find him a large supply from an organization in town. We are still working to find a resource to provide him with a supply each month.

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