

# UNIVERSITY OF KENTUCKY

## *Kentucky Homeplace*

April 1 – June 30, 2019  
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.

Picture was taken at the 25<sup>th</sup> Anniversary Celebration of Kentucky Homeplace on May 26, 2019

# ***TABLE OF CONTENTS***

<b>Letter from Kentucky Homeplace Director .....</b>	<b>03</b>
<b>Program Activities .....</b>	<b>04</b>
<b>Social Determinants of Health/Barriers to Care .....</b>	<b>05</b>
<b>Activity Summary .....</b>	<b>06</b>
<b>Visit Summary.....</b>	<b>07</b>
<b>Hospital-ER Summary .....</b>	<b>08</b>
<b>Age-Gender Summary.....</b>	<b>09</b>
<b>BMI Summary.....</b>	<b>10</b>
<b>Insurance Summary.....</b>	<b>11</b>
<b>Poverty Level Summary .....</b>	<b>12</b>
<b>Education Level Summary .....</b>	<b>13</b>
<b>Kentucky Homeplace Staff Photos.....</b>	<b>14-15</b>
<b>Kentucky Homeplace Regional Map.....</b>	<b>16</b>
<b>Client Encounters.....</b>	<b>17</b>
<b>Kentucky Homeplace Contact Info .....</b>	<b>26</b>



# Kentucky Homeplace

My Fellow Kentuckians:

This past quarter Kentucky Homeplace celebrated 25 years of dedicated service to the residents of Kentucky. Many thanks to all of those who attended the event and especially to those who have supported the program over the years. Some of the CHWs in attendance have been with the program for over 20 years. Their dedication to helping their communities and to the program are an inspiration to all involved.

To put it into perspective, from July 2001 through June 2018 Kentucky Homeplace provided 4,917,437 services, served 161,968 clients, service value and medication value \$324,395,091 with a return on investment of \$11.20. This excludes data prior to currently accessible databases. For a more complete description of the event, visit our website at <http://ruralhealth.med.uky.edu/news/kentucky-homeplace-celebrates-25-years-helping-commonwealth-access-needed-care>

This quarter there were 42 participants in our Chronic Disease Self-Management workshops (CDSMP), 16 in Diabetes Self-Management workshops (DSMP) and 28 in Walk with Ease (WWE).

## ***Quarterly Summary***

For the period April 1, 2019 – June 30, 2019, the CHWs provided services for 1,872 clients. CHWs logged 4,544 hours on care coordination activities with a service value of \$86,336, amount of medication accessed \$2,050,907 and other service values (not medications) accessed were \$865,973 for a combined total of \$3,003,216.

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 April-June. If you wish to have a printed copy, please call 1-855-859-2374 or email me at [mace.baker@uky.edu](mailto:mace.baker@uky.edu).

Sincerely,



William Mace Baker, RN

Director, Kentucky Homeplace Program



# Program Activities

April 1-June 30, 2019

## **Community Engagement Activities**

Angela McGuire KYACHW President and Kala Gilliam KYACHW President Elect attended the Unity Conference in Las Vegas and represented both KYACHW and Kentucky Homeplace.

Dr. Frances Feltner UKCERH Director and William Mace Baker KHP Director presented “CHWs open doors for health disparities research to improve social determinants of health in a hard to reach Appalachian population” at the Unity Conference.

Kentucky Homeplace was honored and proud to attend the 25<sup>th</sup> Anniversary of Kentucky Homeplace on May 16, 2019. Many thanks to all who have supported the program over the years.

Kentucky Homeplace attended the Remote Area Medical (RAM) events this past quarter in Hazard on June 8, 9th. This event enabled Homeplace clients to receive dental work, eyeglasses, hearing aids and clothing at no cost to them.

The CHWs held several Diabetes Shoe Clinics for their clients. The CHWs attended their county’s interagency meetings and attended several health fairs during this quarter.

## **Professional Development/CHW training**

On May 21, 2019 the CHWs attended the Kentucky Association of Community Health Workers (KYACHW) quarterly meeting at the Natural Bridge State Park, and was provided the training “Bridges to Health” by Vivian Lasley-Bibbs.

All staff were trained to conduct “Plan to be Tobacco Free” to assist their clients with smoking cessation. Several CHWs completed CPR First Aid certification. Several Kentucky Homeplace CHWs attended the Operation Change Focus Group.

## **Other News**

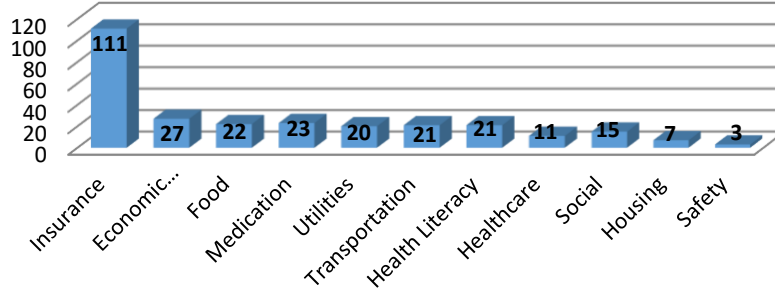
Shelly Menix accepted the CHW position in Greenup and Boyd Counties and is currently in orientation/training.

Two vacancies exist in the Knox and Knott County KHP offices (interviews are in process).

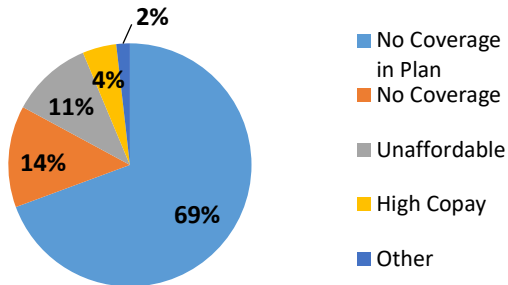
KHP had the annual picnic staff meeting at Carr Creek Lake during June and Trish Adams with EKCEP presented their program to the group.



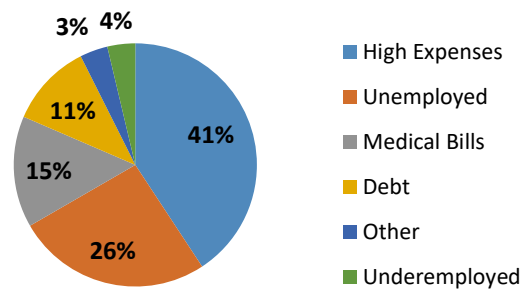
**SOCIAL DETERMINANTS OF HEALTH BARRIERS TO CARE**  
**4/01/2019 - 6/30/2019**



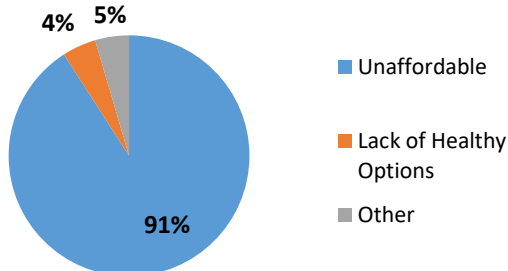
**Insurance Instability Barriers**



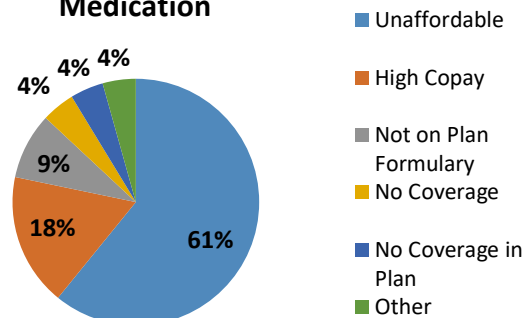
**Economic Instability Barriers**



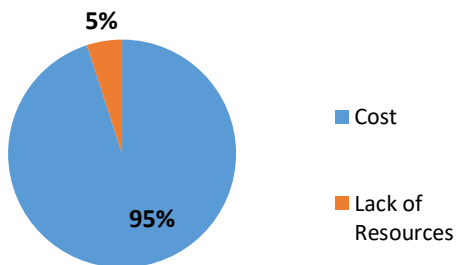
**Food Barriers**



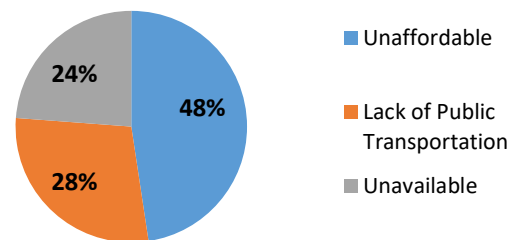
**Medication**



**Utilities Barriers**



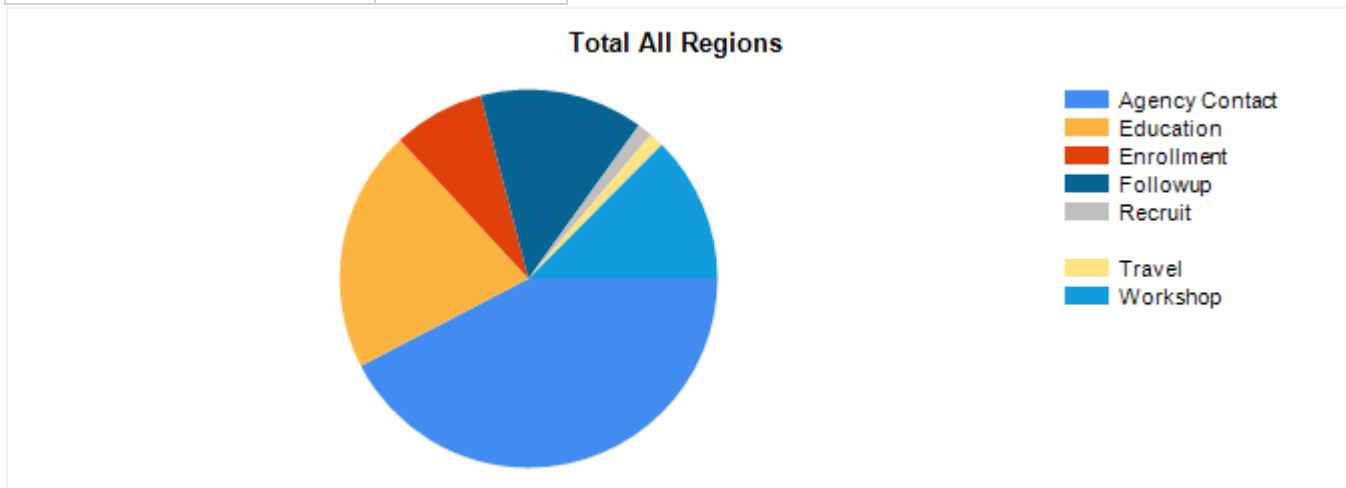
**Transportation Barriers**



## Activity Summary

(Clients visited: 04/01/2019 – 06/30/2019)

Activity	CHW Hours
Agency Contact	1,925.13
Education	941.32
Enrollment	356.75
Follow-up	636.48
Recruit	57.78
Travel	57.50
Workshop	568.72
<b>Grand Total:</b>	<b>4,543.68</b>



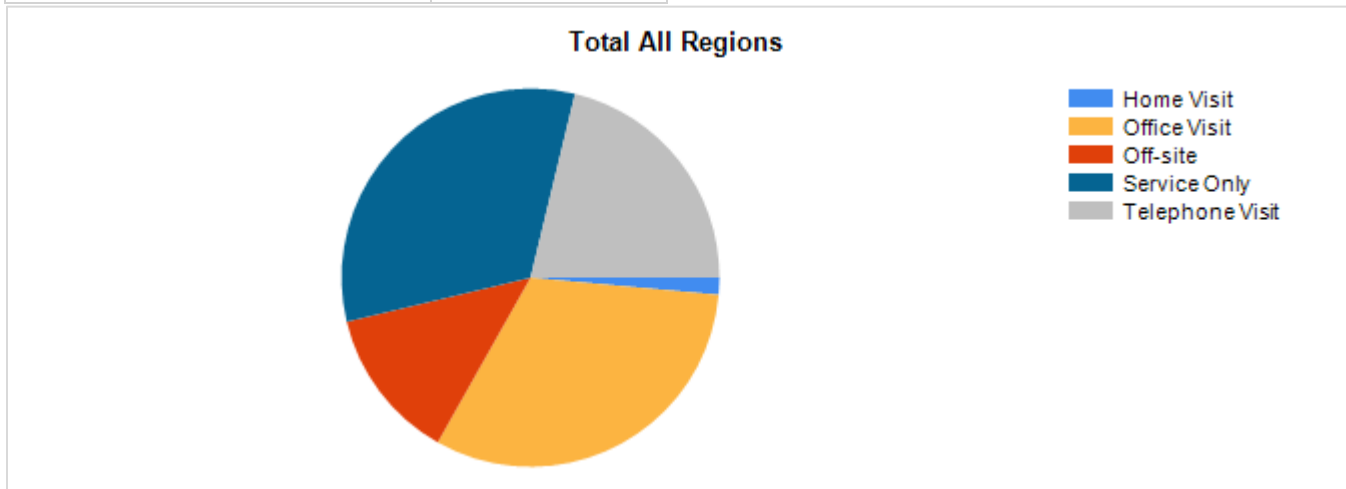
Total service value for 4,544 hours equals \$86,336.

# Visit Summary

(Clients visited: 04/01/2019 – 06/30/2019)

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

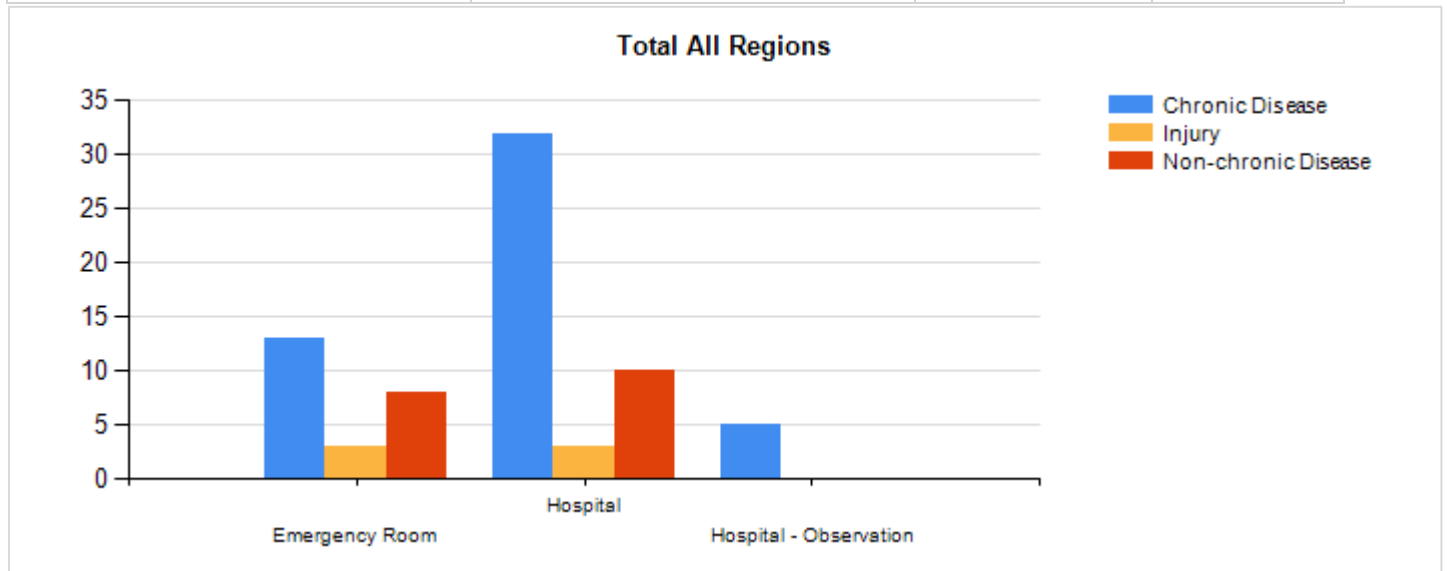
Visit Type	Client Visits
Home Visit	72
Office Visit	1,578
Off-site	650
Service Only	1,618
Telephone Visit	1,055
<b>Grand Total:</b>	<b>4,973</b>



# Hospital-ER Summary

(Clients visited: 04/01/2019 – 06/30/2019)

Episode Type	Reason	Episodes	Days Stay
Emergency Room	Chronic Disease	13	0
Hospital	Chronic Disease	32	176
Hospital - Observation	Chronic Disease	5	0
Emergency Room	Injury	3	0
Hospital	Injury	3	15
Emergency Room	Non-chronic Disease	8	0
Hospital	Non-chronic Disease	10	23
<b>Grand Total:</b>		<b>74</b>	<b>214</b>

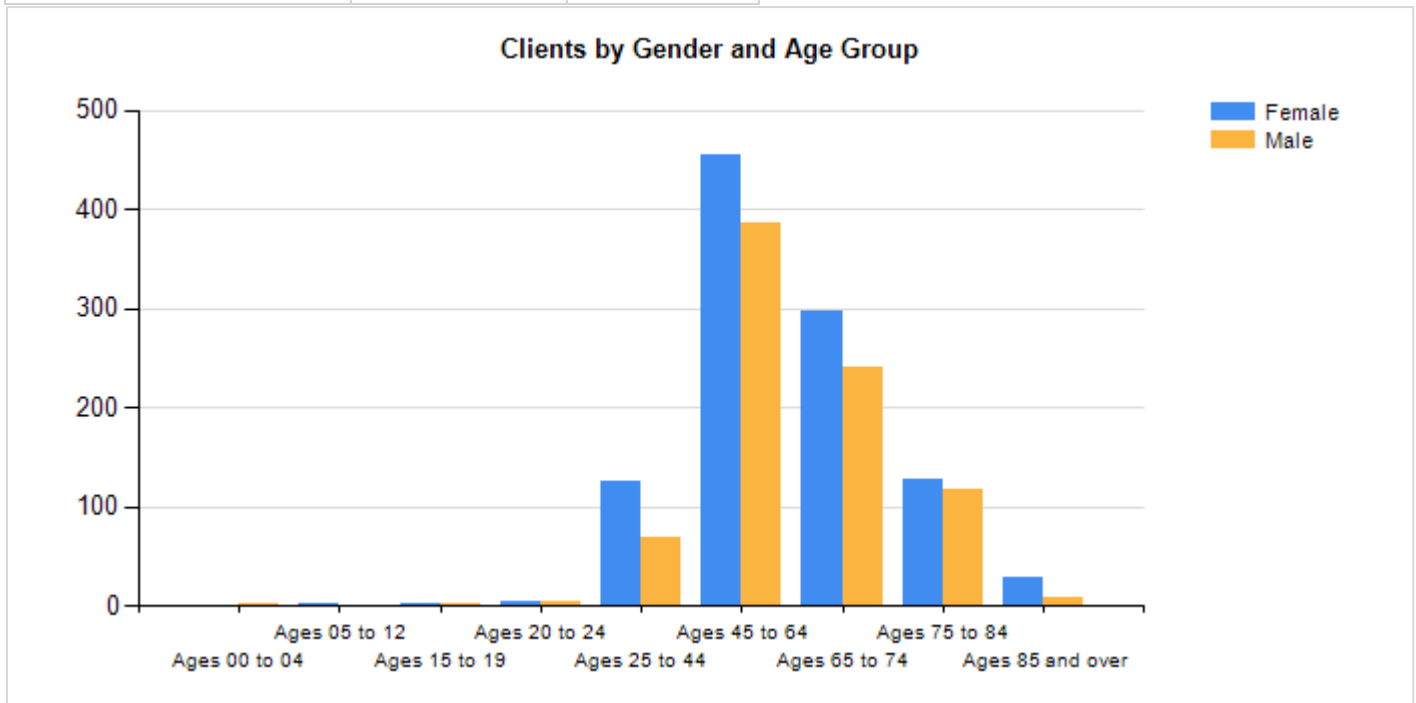




# Age Gender Summary

(Clients visited: 04/01/2019 – 06/30/2019)

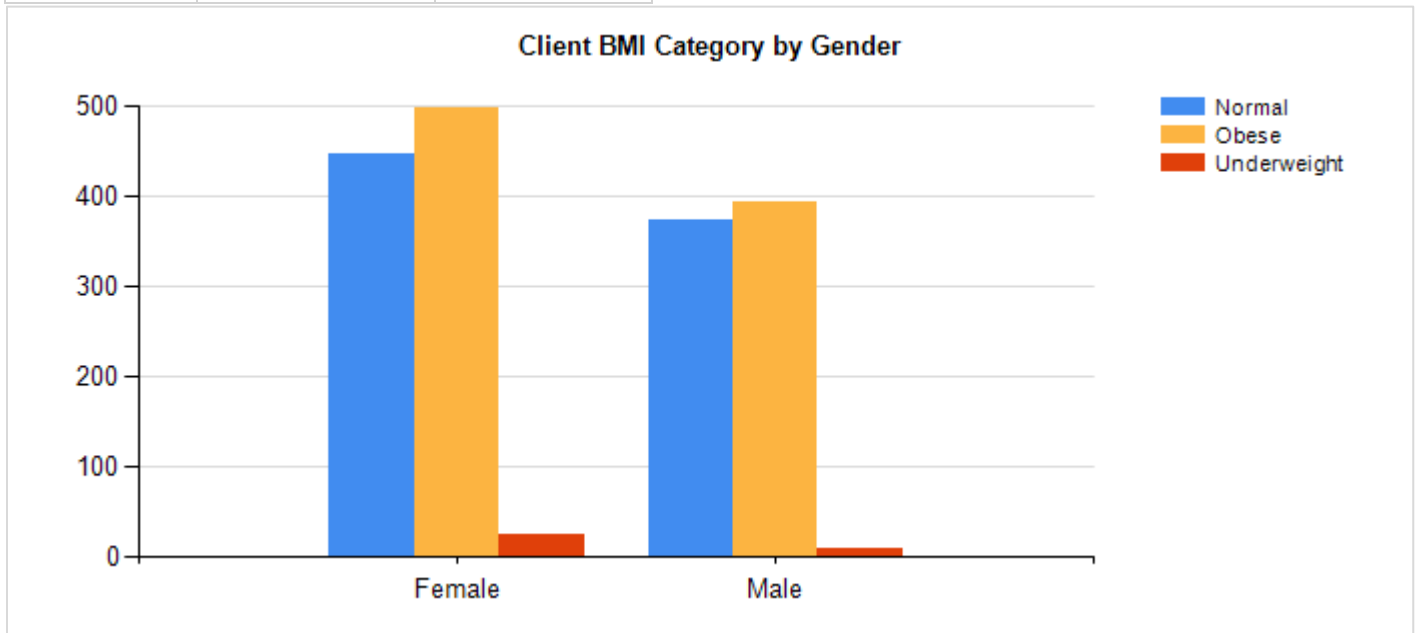
Age Group	Female	Male
Ages 00 to 04	0	1
Ages 05 to 12	2	0
Ages 15 to 19	2	3
Ages 20 to 24	5	4
Ages 25 to 44	125	68
Ages 45 to 64	455	385
Ages 65 to 74	297	241
Ages 75 to 84	128	118
Ages 85 and over	29	9



# BMI Category Summary

(Clients visited: 04/01/2019 – 06/30/2019)

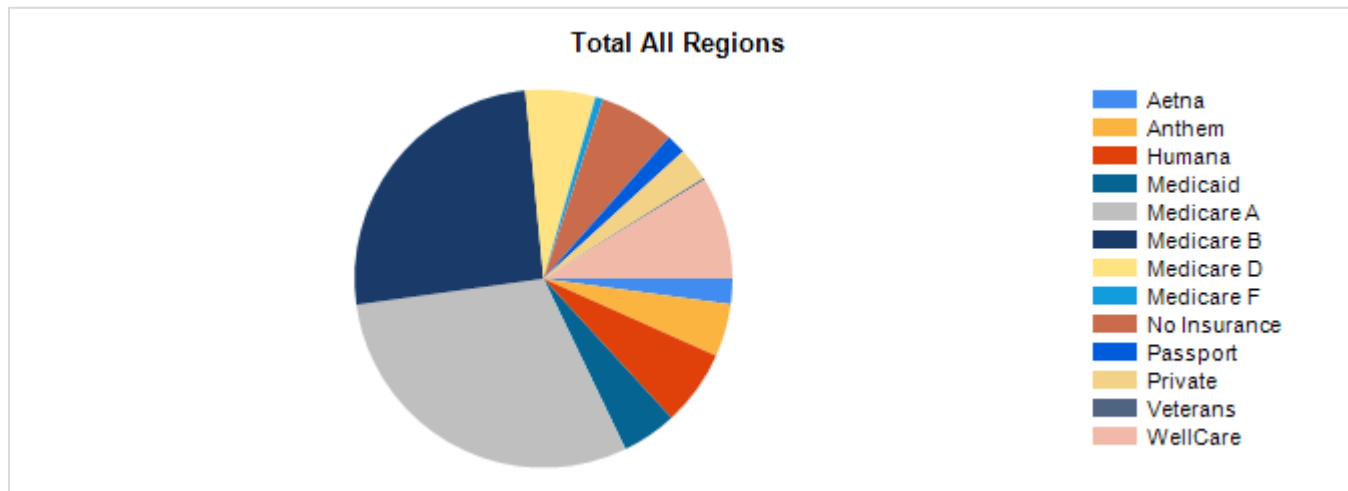
Gender	BMI Category	Clients
Female	Normal	448
	Obese	499
	Underweight	24
	<b>Total:</b>	<b>971</b>
Male	Normal	375
	Obese	394
	Underweight	10
	<b>Total:</b>	<b>779</b>
	<b>Grand Total:</b>	<b>1,750</b>



# Insurance Summary

(Clients visited: 04/01/2019 – 06/30/2019)

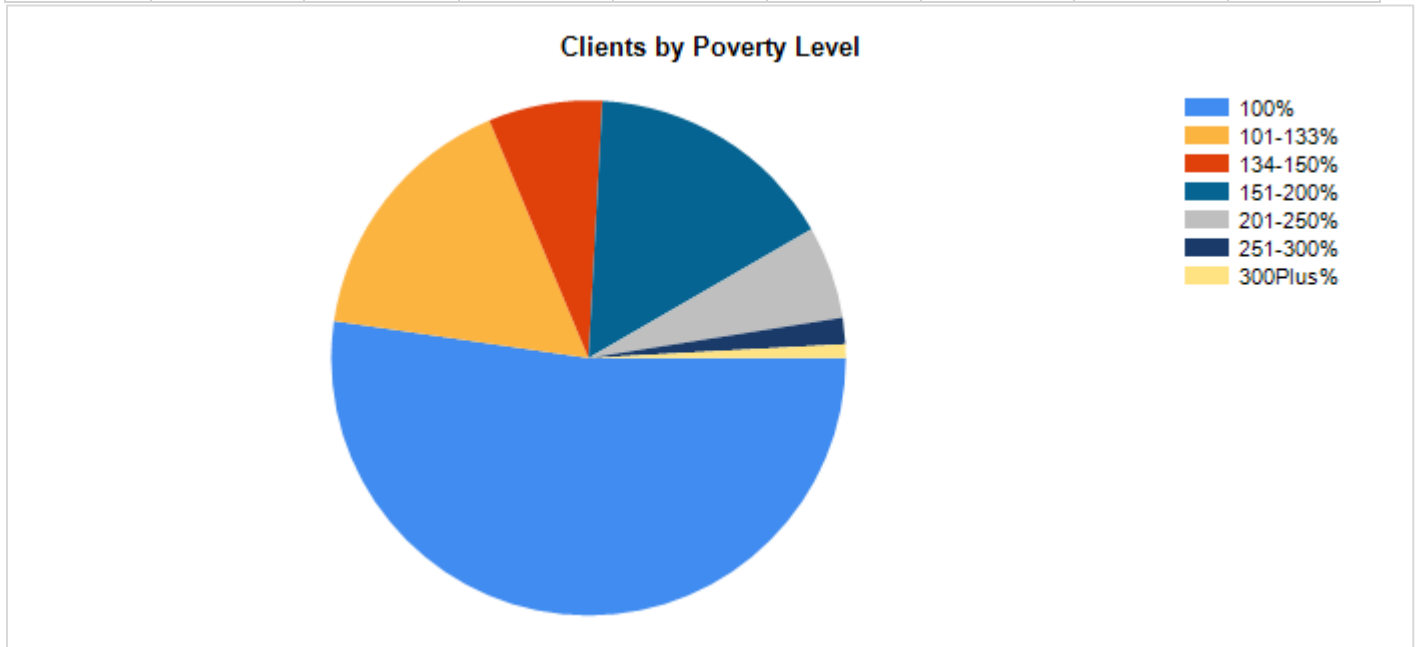
Insurance Type	Clients
Medicare A	981
Medicare B	840
WellCare	287
No Insurance	212
Humana	212
Medicare D	197
Medicaid	154
Anthem	148
Private	93
Aetna	71
Passport	55
Medicare F	21
Veterans	5



# Poverty Level Summary

(Clients visited: 04/01/2019 – 06/30/2019)

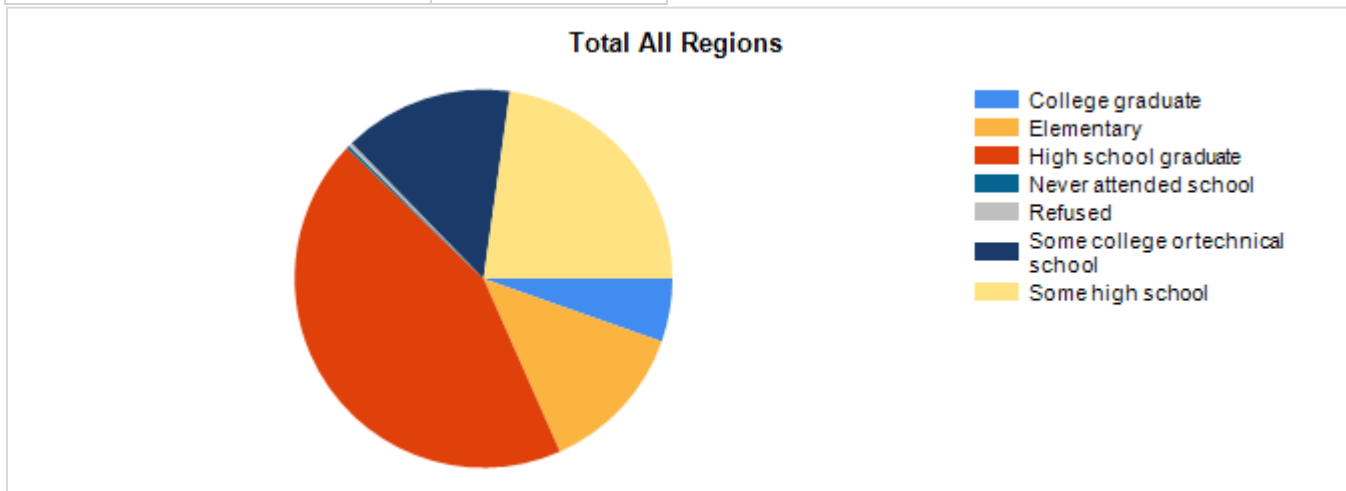
	100%	101-133%	134-150%	151-200%	201-250%	251-300%	300Plus%	Total
Clients	979	307	134	296	109	31	16	1,872



# Education Level Summary

(Clients visited: 04/01/2019 – 06/30/2019)

Education Level	Clients
Never attended school	5
Elementary	243
Some high school	426
High school graduate	819
Some college or technical school	272
College graduate	101
Refused	6
<b>Grand Total:</b>	<b>1,872</b>



## Bridges to Health Training at Natural Bridge State Park



Front to back: Amanda Goolman, Angela McGuire, LaDonna Roberts, Carole Fraizer, Courtney Charles, Shelly Menix, Darla Shepherd, Katie Dampier, Barb Justice, Elizabeth Smith, Kathy Slusher, Ashley Gilbert, Mary Bowling, Pollyanna Gilbert, Samantha Bowman, Kayla Gilliam, Kim Smith, Shirley Prater and Kathy Hamilton.





Dr. Connie White, Deputy Commission/Ky Dept. for Public Health



Dr. Connie White, Deputy Commission/Ky Dept. for Public Health; Representative Kathy Hinkle; Mark Birdwhistle, VP Health SysAdmin & Chief of Staff/UKHC; Fran Feltner, Director/UK Center of Excellence in Rural Health; Senator Robin L. Webb; William Baker, Ky Homeplace Project Director/UK Center of Excellence in Rural Health

## 25<sup>th</sup> Anniversary Celebration of Kentucky Homeplace



Kentucky Homeplace CHWs (Community Home Workers): Ashley Gilbert, Kathy Hamilton, Carole Fraizer, Barb Justice, Ladonna Roberts, and Mary Bowling



Kentucky Homeplace CHWs (Community Home Workers): Shelly Menix, Katie Dampier, Kala Gilliam, Amanda Goolman, and Angela McGuire



## 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

April 1, 2019 - June 30, 2019

- ✚ Medicare Part D patients are in the coverage gap. I have so many clients that are now in the Donut hole. Many of these are diabetics and need insulin to live. These clients are unable to pay anywhere from \$500.00 to \$1000.00 dollars a month for insulin. Today I served a client that had an A1C of 10 in March and today his A1C number is 7. Little by little, his number is going down, he says it is in part to education he receives from Kentucky Homeplace. Education, inspiration to keep eating right, and taking those extra steps.
- ✚ I had a referral from a local doctor's office for a woman that lived in the assisted living apartments that they felt had several needs. I called and scheduled a home visit and went out later that week to enroll her into the program. This elderly woman had been sleeping on the floor. She had very little food in the house and no personal hygiene products and no transportation or funds to get any. She wanted out of the living situation. I called a local nonprofit; they donated a brand new bed frame and mattress to my client and a large supply of food to get her back on her feet. All delivered right to her door. She has since moved to another assisted living facility and was able to attend my recent chronic disease self-management (CDSMP) workshop I had there. She loves her new home and has made many new friends there. She said it feels like home should feel.
- ✚ I have been working with clients that have Medicare/Medicaid. Medicaid doesn't want to pay for Insulin and brand name medicines. I have worked on education about getting the medicines pre-authorized, but they have still refused to cover several medications for clients that have always been able to get the medicines on their Medicaid Card. Medicare clients check on getting Medicare Part D find it difficult to get a plan that will cover all their medicines and have to pay a \$50 to \$75 monthly premium before they get the first medicine. Most of their medicines if it is brand name will cost \$60 per prescription, per month. After they have worked their whole life and now they can't afford to get the medicines they need.
- I have worked with several clients that are having to pay the \$135.50 a month for the Medicare Part B. I have went with them to assist them in talking to the Cabinet for Families and Children because they have trouble understanding what they need to do to get help.
- I have been able to get several the money back and the Medicaid Supplement to cover the 20% Medicare does not pay. They seem to be so happy that I can go with them so I can speak on their behalf on things they do not understand. Sometimes it just takes someone to help them understand what they are telling them.
- I had a man come to me that had bad hearing loss that was referred by a friend. His friend had received reduced cost hearing aids with my help. He said he was so impressed with the process and the friendly staff at the hearing clinic that he wanted to see if he qualified. He had a previous hearing test done and was told he needed hearing aids but they were very unaffordable. I enrolled him and started the process that same day. Since then, he qualified for the program, was approved, and will be receiving his new hearing aids within the next couple of weeks.
- ✚ Recently I had a client referred to me by a local provider in our area. She had gave me the impression that he simply needed help with Vision and Dental services that we help provide. The client came in to see me at Kentucky Homeplace. After a short conversation and entering information into our database, I

quickly realized this client was a case like no other! He had worked all of his life driving a truck over the road and has his commercial driver's license. Then he had been in a wreck, which led to many serious health complications over the years. He suffered from a Stroke, and heart attack, which left him with short-term memory loss.

The client stated he only had one son that worked a lot, he did not really have anyone to help him, and those that did always charged him or took advantage. He is currently in the process of awaiting cataract surgery from a local provider from the diabetic eye exam referral that we provided. We are also getting him referred to get a full set of dentures and he is so excited! After the Eye exam, I will help him with a new pair of glasses.

The saddest issue of all about this client is he has no one to help him. He suffers with many chronic issues, such as uncontrolled diabetes. With the short-term memory loss, he cannot remember to be consistent about taking his medications such as insulin. He cannot remember when his med's are due, when to check his blood sugar or hardly anything. I called Home Health to see if they had established an order for some Home Care assistance. Which means he has a Nurse coming to do Home visits and organizing his medications on the weekly basis. His insurance will soon deny that service and leave him alone again. I chose to go a step farther and call the Horizon Adult Health Care to see if he might qualify for a home based program that they offer. This service provides someone to come in his home, cook, fix medication and provide weekly reminders so he could stay on track. This service alone will be such a blessing for my client. We are now helping him with a pair of Diabetic Shoes he has never had before. He suffers from severe neuropathy in his feet and legs, so the shoes should help. He reports his Blood sugar is doing a lot better since he has had services to go the extra mile to help him.

Our next step is helping relocate him in the downtown area, which will provide better access without him having to travel such a long distance to go to the doctor, grocery, and he stressed he's not able to keep up with living alone in such a big place. He will convert to a 1-bedroom apartment that I helped arrange for him in August. As I said, he has been a case like no other! He wrote me a little thank you card just for helping him and being so concerned with his well-being.

The life of a Community Health Worker at Kentucky Homeplace is so much more than an office visit. In just a short time, you realize well, there is a reason why his numbers such as blood sugar, blood pressure and many problem areas are out of control. My client's short-term memory loss effects everything. He cannot remember to take his medication, or check his blood sugar. I am thankful I was able to help this client choose different options which were available to help him maintain some independence.

While I am still building my clientele, I had a lady come to my office for help with her insulin. Unfortunately, she hadn't spent enough in out of pocket expenses in order to get help from the pharmaceutical companies. While I was unable to help her at the time, she was still very humble and thankful that I was willing to help her. I explained that once she got closer to the amount spent then she could come back to me and we would get it all worked out for her. I also had another client come in that had heard about us from a friend, he had Medicare A & B and had been talking with someone about getting Part D, but didn't have prescription coverage at the time, there were about eight medications that he was needing some assistance with. I was able to get two of those medications completely free! The other 6 medications I was able to get him a 3 month supply of each on a discount plan to where he would only have to pay around \$45 every 3 months for all of those medications, which was way less

than what he had been a month. After working all of these medications up, they all totaled up to over \$6,000!

- ✚ This quarter I received a referral from a local church, a family had lost everything when their home burned down. The church was able to help all the family members, but the father still needed help. After setting up an appointment and several missed appointments, the father finally came in. When doing the initial interview, I realized he needed eye exam and glasses and needed clothing for a job interview. I was able to get a voucher for clothing. He stated that he was put on a waiting list for low-income housing. Therefore, I made a call to housing office and was able to schedule him an appointment sooner than what they told him. He was very happy and could not stop thanking me.
- ✚ I received a referral from a program that helps mothers get back on their feet. The lady needed glasses to get her GED. I was able to enroll her with an eyeglass assistance program and got her eyeglasses. She also needed a resource for housing repairs; I helped her submit an intake application with a non-profit organization that helps with home repairs at an affordable cost. She called and let me know she had been approved and was waiting on them to come out and speak with her.
- ✚ I had a lady to come to my office needing assistance with a power chair. I got her enrolled and begin to ask her questions about her health. She hadn't been to a gynecologist in years or been following up with any preventative care. She stated that she couldn't afford that and that she had not been to see a regular physician in months. Her last appointment her doctor had told her that she needed knee surgery in order to correct her knees so that she could walk again. After she had spoken with her doctor, she learned that it was not going to be a cheap surgery. The office visit to see the specialist was going to cost \$250, and this was only for consultation. She had already made up her mind that she was going to be bound to a wheel chair for the remainder of her life. I asked if a doctor had prescribed a power chair, she said no but it would make her life easier. I begin to ask her questions about her situation and her income. She had told me that she and her husband were no longer together and she was currently living with her mother. I asked if she had ever tried to apply for Medicaid. She said she tried a few years ago but didn't get it. I asked if she had tried recently and she told me no. I finished getting her enrolled with Kentucky Homeplace and asked if she wanted to try applying for Medicaid again. She definitely wanted to try again but was so afraid of being denied again. After enrolling her, my client was approved for Medicaid. She finally got health insurance. She started crying and her daughter hugged me and thanked me over and over for helping them. It takes asking questions and really listening to our clients to see what all they need and finding the fix to help their situation.
- ✚ I had a home visit with an elderly man needing assistance with a wheel chair ramp. He had been having trouble getting access to exit and enter his home. This was one reason why he had requested a home visit. After speaking with him, I found that he also needed assistance with chucks. I spoke with one of my co-workers and she showed me a resource that would help with obtaining a lender wheel chair ramp. I got in contact with the agency and was able to get the wheelchair ramp delivered with the help of another co-worker. After receiving the wheelchair ramp, I then delivered it to my client. He and his family were so excited that he was finally able to have access for his wheelchair so that he can leave his home and go to church. I was also able to obtain two full boxes of chucks and deliver them to the client as well.

✚ I had a client that came to me for assistance with his medications. He was having a terrible time paying for his medications and desperately needed them. He had brought me a receipt of how much his medications were costing him and I could see why he was struggling so badly to purchase them. These medications were his lifeline to assist him to live an easier life. Without them, he would have more complications. After getting him enrolled I called his family physician and explained to them why he hadn't been using the medication as prescribed. They were not affordable, but I knew of a program that we could utilize that could possibly get him his medications free. I told them I was sending an application by the client to be signed by the doctor so that I could get him enrolled into the prescription assistance program. My client had an appointment within that same week with his doctor and I knew he could get the applications to his doctor quicker than me mailing them out. A couple days later, my client brought the papers back to me and I made copies of everything and prepared the applications and mailed them out. It took quite a few weeks and a couple bumps in the road but I got him enrolled and my client was able to get his medications free for a year. He came by the office to thank me for all my hard work that I done to get him his medications.

✚ A client lost her Medicaid coverage and came to me to help her get it active again. She had no reason why it had happened except that it didn't work when she went to the pharmacy. I made several phone calls to DCBS, Wellcare, and Medicaid. Her case was complicated and no one could explain what had happened to her coverage. I had to talk to several different departments that were trying to help her. I finally got someone who noticed the problem. She got confirmation on the problem from a co-worker. After the problem was corrected, I was able to tell the client she could use her card and her medication would be covered.

✚ I received a referral from a local doctor for an elderly man who was suffering from severe pain in his hips and other joints and he was progressively becoming unable to walk. He had very little family support and had to find his own ways to accommodate his disabilities. He sits on the seat of a walker and pulls himself with his feet to his vehicle. Drags his body into the driver seat and struggles to fold and cram his walker across the drivers seat with him in it so he can access it when he arrives at his destination. He came in to see me because his doctor told him that although he may be able to drive still for quite some time he cannot transfer due to the separation of his hips and very soon, he will find that he cannot stand at all.

He came into my office with a prescription for a ramp that could be used on his minivan so that he will be able to get inside the van with a wheelchair without having to transfer to the driver's seat. This seemed like something simple, ramps are a common need. By interviewing him, I learned he was a veteran of high rank and long term so I had hoped that with his time served that we may be able to get a veteran program to assist him. I spent hours contacting programs that had been referred to me and those that I had found online, all of them said that ramps on vehicles are not something that they can assist with. I learned that with all of these programs since the vehicles, value increases with a ramp installed that if the client were to sell it there would be some financial gain and the ramp would go along with the vehicle. Those programs were not going to be an option.

The client told me that a local store sold portable ramps for ATVs and that they weren't much money but more than he could afford. I contacted the store for information to the corporate office hoping that if I explained to them the situation that this veteran was in perhaps they would be willing to donate the ramp. They declined since the ramps were not made for wheelchairs they feared he might be injured using it improperly. I called every church in our county asking if they can assist financially or help in any way. We still had no luck.

I contacted one of the ramp programs that we use often, he was denied again, this time because his van was an older model being a 2002 model. My client was almost ready to give up and I was starting to get worried myself because it wasn't looking very good. I feared that this otherwise independent man would be living in a facility if we can't get the ramp. We reached out to another ramp program who provides temporary ramps while waiting for home repair agencies to come in and build permanent ones, unfortunately they only assist with home ramps and nothing for vehicles. I even contacted community action to see what the average price that their handicap accessible ramps usually auction for; sadly, with such a low income and no savings it would be impossible for him to purchase one of these vehicles from the auction.

We were running out of options, he came in to my office to see if I had any other ideas and to provide me with his labs. After looking at them and comparing them to his answers in the database, I knew something wasn't accurate. His doctor hadn't diagnosed him with diabetes yet he had high glucose and A1C readings. I contacted the doctor's office and asked them to review past labs and turns out, they had completely missed that this client had diabetes. While I promised him that I would look for every single program possible and apply for each one of them, he needed to get to his doctor's office who had agreed to see him right away. Turns out his feet had never been checked either. He had a foot exam that day and found out he was diabetic and needed shoes as soon as possible. The doctor's office was even more concerned about him not being able to get a ramp at this point because the risk of him hurting a foot or leg would be much more dangerous if he couldn't heal properly from the diabetes. The way he had been getting in and out of his vehicle was already difficult and could very easily cause injury.

Program after Program denied him for the same reason, his van was a 2002 model and that if he could purchase a newer vehicle then he would be approved for a ramp. Buying a new vehicle wasn't an option for him. I had recently used a program for another client that was recommended to me through our local community action agency for someone who was denied for other programs. The deadline for the application was April 1<sup>st</sup> and that was one week away. We scrambled to complete the application, have his doctor write a letter, contact the insurance company for proof that they will not pay for the vehicle modifications, and even a quote as to what it would cost to purchase and install the ramp. My client and I reached out to his daughter for help and the three of us worked three days continuously to get this application completed and postmarked before the deadline. We even got the local USPS carrier involved on this case.

I'm happy to say that the hard work paid off and my client was awarded \$3,600 for the ramp and installation. The money we received was grant funds and will not have to be paid back. My client was so happy and thanked me repeatedly because he knows what a difference that this will make in his life.

✚ While conducting a Diabetes Self-Management Workshop at a local Senior Citizens Center, one of the participants came up to talk with me to get help with glasses. She was having a lot of trouble with her

eyes and being on a fixed income, she could not afford going to the eye doctor without help. I was able to get help through a vision program and also an eye exam revealed she had cataracts in her eyes. She was able to get the cataracts taken off, get glasses, and is doing much better.

✚ Our job is not a 9-5 job. Many times, we are stopped at the grocery store, doctor's office or even church. This time I was on my way out the back door of the building at work. Headed to my vehicle after a long day. Ready for some sunshine and quiet time. Someone yelled my name from across the parking lot. I turned to see a familiar face. He approached and he began to tell me about his mom, and her serious condition. He asked if I had a minute to talk with him. We came back to the office for privacy and he sat down and began to try to tell me what was going on with his mom. Tears filled his eyes as he told me how bad she was, and that the doctor she was seeing was not willing to help her. My friend's mom has cancer, her spine has degenerated so bad that it is actually separated. The doctor she is seeing is an oncologist and he wants her to continue chemotherapy treatments. She is not able to do this, she is not able to ride in a car to even take the treatments. The explanation is very graphic of her physical condition, so I will spare you that. As he talked about his mom, I became very upset, thinking that a so called health professional would let her just lay in this kind of shape. The blessing is that she feels no pain because her spinal cord is severed, but this is a flat out disgrace that a human being is just being left to die. The doctor said he would not release her for seven more days, because he feels like she will need to continue with the chemo treatments.

The longer we talked the madder I got. No better explanation for how I felt than that statement. I went to the internet to find contact information for Hospice of the Bluegrass. I found a phone number and told my friend to call them and explain his mom's situation exactly as he had explained it to me.

The next morning he came bouncing into my office, so excited he could hardly talk. He had done as I told him, within two hours the Hospice nurse was at his mom's side. The nurse had contacted the doctor and he still refused to sign for hospice for her. The nurse was able to let her sign forms that said she was no longer going to take chemo treatments. This let Hospice move in and help her. They cleaned and dressed her open wounds. They were at her house until 1:00AM, just making sure they had done everything they could do that night. The next day, they scheduled to have a special bed delivered for her, one with an air mattress so that the pressure points could get relief. Hospice will be at her house every day, for as long as they are needed.

✚ I received a call from a sweet lady today, she said, "A friend told me to call you, I'm at the end of my rope". The lady went on to tell me she had lost her home in a fire 3 weeks ago, she said she was trying to stay in the part that had not been gutted by the fire. She has no electric and no running water. But what hit me the hardest is that she told me she has multiple sclerosis, and the stress has made it worse. I have a friend that has MS and I know what she goes through personally, so my heart went out to this lady.

She went on to tell me that she has no transportation and no family to help her, her mom passed about 2 years ago and ever since everything had just went downhill for her. It just so happens that our local fire chief came in my office as my first call with her ended. I asked him about a house fire in her area, I didn't give him details, and however he knows that I work with our local Red Cross, so he gave me the information.

I called all our local apartment locations and there was nothing available. I happened to think about a local community mental health agency and their homeless program, and the reason I did this was that the place she is trying to stay is uninhabitable. They checked their schedule and gave me a time they could see her tomorrow, I called our local transportation agency to see if they could transport her, they could but not at the time I needed. So several calls back and forth with different appointment times and finally a time was reached and it was TODAY! The process has begun to help this lady find a home, even if it is temporary.

The receptionist called to tell me the application has been completed and is being scanned in the system, now as I told my little lady, this is a process, and it may take a little while to get thing sorted out, but she was thankful, it is a light to look forward to.

The agency will find a home/apartment for her and will pay the rent until she can get things sorted out for herself. She qualified for low-income assistance. Last time I spoke with her she was crying and hopefully they were tears of joy.

✚ I had a new client in need of medication and again like so many times before – didn't know she qualified for insurance. While doing the initial enrollment and looking over her medications, discussing the different programs I came to the proof of income section and I needed a copy of the clients insurance cards if she had insurance. She tells me she doesn't have insurance and didn't bring in a copy of her income. She thought that she wouldn't qualify for anything – she was told a couple years back by social services she didn't so she never tried again. I went ahead and enrolled her and we did the applications that we could with no proof of income. I sent her home to return with her proof of income and then we would see what else we could do for her.

She came back in a couple of weeks and she had gotten sick and also had a change in income. She gave me her income and after looking it over I told her it looked like she qualified for Medicaid and she could not believe it. She said "How can that be?" It did not matter that her income had changed or not she still met the guidelines for help. I told her things have changed, and programs change, guidelines change. If there is a change in her income, if she is to move or anything changes in income things like that at all - she has to contact KHP or her local DCBS office with the changes and that keeps everything good.

✚ A former diabetes self-management program (DSMP) client shared that when he was in another one of our other classes it really made a difference in his life. He said he went to see his family doctor and he was expecting to hear the doctor say his A1C was down to a 7, his surprise it wasn't – he was a little down but his doctor told him he was doing great and to keep doing whatever it is that he is doing. Its working, his sugar is staying even and not going up and he is not gaining any weight, so that is good also. The doctor told him he could cut back on some of his insulin but he needed to still take the long acting medication. He was just happy to hear he could cut back. He said if he writes everything down and watches what he eats and sees his numbers going up it makes him feel bad, like he is doing something awful. By doing this it helps him get back on track. His numbers used to be really high, now it's running 130 in the morning when it was over 200. He's happy and his doctor is happy. He said he would recommend Kentucky Homeplace (DSMP) class to all his family and friends...

✚ I had the pleasure of meeting an amazing soul this past week. To hear his story you would wonder how he can be such a happy, positive person. He began telling me his story while we were completing his enrollment to get him a set of dentures. He told me he had been fighting cancer for 9 years and the



more he went into detail the more my heart broke. He had struggled with many treatments and throughout the treatments he was unable to work so finances became a struggle as well. From the chemo he had been taking, his teeth began to rot away from the treatment. So he eventually lost all of his teeth and as we sat there talking, he was just the most optimistic person I had ever encountered. With the hand he had been dealt he still never lost hope and to see that is truly inspiring. We talked, laughed and even cried and he was truly an amazing person. I'm so thankful that I get to meet and help such wonderful people with this job. I believe God puts everyone in your life for a reason.

- ✚ During my recent CDSMP class, a lady attending was a severe diabetic with out of control numbers. While attending class she learned about self-management tools to help control her numbers. She used the action plans to get her exercise in after meals and the plate method to control the amount of carbohydrates she was eating. She learned portion control and foods that wouldn't run her sugar up so high. By the end of the class she stated her numbers were coming down and she has a completely different outlook about her health. She has the confidence and knowledge to become healthier. Success stories like this make my job all the more worthwhile knowing the difference's made in individuals lives.
- ✚ A case manager at DCBS called me one day; she had a lady that was in need of assistance on straightening out her insurance- she was no longer eligible for Medicaid due to her age. She had initially been on a Medicare savings program and was comfortable with the price of her medications. However one day she went with a relative who needed to sign up on a Medicare plan and had went directly to a company store- she had become confused on if she had adequate coverage and the representative at the insurance office signed her up on an expensive (for the client) Medicare plan, that ended up making her medications unaffordable. We were able to get things resolved for her with a few phone calls and by the time she needed her next prescription filled she was able to afford them with no trouble.
- ✚ A client was in need of adult briefs and bed pads, because they are too expensive. I was able to speak with a few local agencies and they were able to get a donation of 2 large boxes of pads, and 20 bags of briefs to start him off with, and while they have the resources they will continue to do this once a week as long as possible.
- ✚ Today I had a client come in the office as a walk in. He is a man with multiple chronic diseases. I had first seen him several years back to assist him with getting a spend-down card through KY Medicaid. Since then he routinely comes in and lets me know how he is doing. When he first came to me he had just been diagnosed with diabetes. His A1C was 11. He was told he couldn't have any corn, beans, potatoes, noodles or rice. I suggested that he come to a Diabetes Support Group Meeting that myself, a local hospital, the local health department and UK Extension had in place. He agreed to come and said this helped him so much with the choices of food he was able to eat. He said he was happy to learn that he could eat some of the foods that he loved but it is now in moderation. He still would call or come in periodically and ask questions about his eating habits. I invited him to participate in a Diabetes Self-Management Class through Stanford University that I had been trained in, this class lasted 6 weeks, 1 day a week for 2 hours each session. He accepted the invitation and came to the classes religiously. He was the first to ask questions and always came prepared to class. The first couple of years he had brought his A1C down from an 11 to a 9, so that was what it was when he started the classes. Today, he



came in with an A1C count of 6.7. He was so excited to tell me of these results. He still struggles some with labels and counting calories and carbs but he is doing so much better. I am so glad we had the opportunity to help him live a healthier life with the educational tools we have been given.

- ✚ I have a client who is an elderly man and has a leg brace and cane due to having polio as a child came into my office upset. He recently was “cut off” his Medicaid extra help. After speaking with him and talking to DCBS, we had to have forms faxed from DCBS in order for me to become his assister. After the appropriate forms were filled out, the DCBS representative and I worked with my client and got all the necessary information into his file with the state. The DCBS representative informed me that my client was to be reinstated on July 1, 2019. While here in my office, I was also able to assist this client in getting a much needed appointment for an eye exam and he was also interested in getting hearing aids. He expressed how much he appreciated my help and was so thankful he wouldn’t have to worry about this anymore.
- ✚ My client, a terminally ill cancer patient, who wasn’t able to travel, needed a home visit. He needed help getting his nutrition drink. He couldn’t afford it anymore and needed it for 100% of his daily caloric intake. After some research I was able to locate a company that offered the nutrition drink free to those who met the criteria. I sent his cancer doctor the application to fill out and return to me. I then contacted the company and we were finally able to get his application submitted and he is now approved for 100% nutrition/liquid free. He was also seeking help for his activities of daily living needs and I was able to get him in to contact with a local community based service who is now sending someone to help with his ADL and cleaning his house for him. He says he is so grateful for the help Kentucky Homeplace helped him with and in helping him get the services he needs.
- ✚ My client came in for medication update. He had been a long time client and I had been told that he had developed a slight case of dementia. His daughter brought him into the office for the appointment. During our interview, he answered all questions well with no hesitation or showing any signs of his illness. He did however, keep staring at my wall. Once we were done with everything, he asked if he could see my calendar on the wall, which was a Farmer’s almanac calendar. I took it off the wall and handed it to him and he was talking about the “good fishing” days that the calendar has marked. I of course asked him, do you like to fish? He responded, oh yes, every chance I get and handed me my calendar back after glancing through it. I asked him if he had one of those calendars and he said no, he could not find them where he lives. I handed him my calendar back and told him to make sure he watched for those good fishing days and to enjoy it.

## Kentucky Homeplace Administration

Fran Feltner, DNP <a href="mailto:fjfeltn@uky.edu">fjfeltn@uky.edu</a>	Principle Investigator	606-439-3557	Kentucky Homeplace 750 Morton Blvd. Hazard, KY 41701
Baker, William Mace <a href="mailto:mace.baker@uky.edu">mace.baker@uky.edu</a>	Director	606-439-3557	Kentucky Homeplace 750 Morton Blvd. Hazard, KY 41701
Kegley, Janet <a href="mailto:jkegl2@uky.edu">jkegl2@uky.edu</a>	Project Manager	888-223-2910 606-738-6315 (fax)	Senior Citizens Building 101 S KY 7 P. O. Box 67 Sandy Hook, KY 41171

## Kentucky Homeplace CHWs

Goolman, Amanda <a href="mailto:ago263@uky.edu">ago263@uky.edu</a>	CHW	606-674-9297 606-674-9298 (fax)	Bath	Bath Co. Health Dept. 68 Oberlin St., Rm 232 PO Box 1198 Owingsville, KY 40360
Slusher, Kathy <a href="mailto:kathy.slusher@uky.edu">kathy.slusher@uky.edu</a>	CHW	606-337-6886 606-337-7183 (fax)	Bell	Total Care 121 Virginia Ave. Pineville, KY 40977
Shelly Menix	CHW	606-327-0020 606-327-0024 (fax)	Boyd	Boyd Co Community Center 3015 Louisa Street PO Box 1277 Catlettsburg, KY 41129

Young, LaDonna <a href="mailto:LaDonna.Young@uky.edu">LaDonna.Young@uky.edu</a>	CHW	606-666-7106 606-666-5984 (fax)	Breathitt	Kentucky Homeplace 1154 Main Street Jackson, KY 41339
Smith, Elizabeth <a href="mailto:easmith123@uky.edu">easmith123@uky.edu</a>	CHW	606-474-2742 606-474-2592 (fax)	Carter	Kentucky Homeplace 101 Fraley Miller Plaza, Suite B P.O. Box 546 Grayson, KY 41143
Smith, Kimberly R. <a href="mailto:KimberlyRSmith@uky.edu">KimberlyRSmith@uky.edu</a>	CHW	606-599-1039 606-598-4315 (fax)	Clay	Kentucky Homeplace 105 Main Street Manchester, KY 40962
Prater, Shirley <a href="mailto:sdpr223@uky.edu">sdpr223@uky.edu</a>	CHW	606-738-5927 606-738-6078 (fax)	Elliott	Senior Citizens Building 101 S. KY 7 P. O. Box 67 Sandy Hook, KY 41171
Charles, Courtney <a href="mailto:courtney.charles@uky.edu">courtney.charles@uky.edu</a>	CHW	606-723-9902 606-723-9903 (fax)	Estill	Kentucky Homeplace 152 Richmond Road P.O. Box 654 Irvine, KY 40336
Hamilton, Katherina <a href="mailto:kah225@uky.edu">kah225@uky.edu</a>	CHW	606-874-1204 606-874-3847 (fax)	Floyd	Best Practice Family Health 1358 Watergap Road PO Box 2234 Prestonsburg, KY 41653

Shelly Menix	CHW	606-327-0020 606-327-0024 (fax)	Greenup	Greenup Co. Health Dept U.S. Highway 23 P. O. Box 916 Greenup, KY 41144
Shepherd, Darla <a href="mailto:Darla.shepherd@uky.edu">Darla.shepherd@uky.edu</a>	CHW	606-574-0239 606-574-9268 (fax)	Harlan	Kentucky Homeplace 313 Central Street PO Box 1418 Harlan, KY 40831
Katie Dampier	CHW	606-287-3756 606-287-3765 (fax)	Jackson	Kentucky Homeplace 101 Main Street PO Box 583 McKee, KY 40447
Bailey, Judy <a href="mailto:jbail2@uky.edu">jbail2@uky.edu</a>	CHW	606-789-4232 606-789-3937 (fax)	Johnson	Johnson Co. Recreation/ Community Center 232 Preston Street Paintsville, KY 41240
Vacant	CHW	606-785-9884 606-785-0270 (fax)	Knott	Kentucky Homeplace 59 Cowtown Road Hindman, KY 41822
Vacant	CHW	606-277-0018	Knox	Kentucky Homeplace



		606-277-0078 (fax)		320 High Street P. O. Box 1029 Barbourville, KY 40906
Katie Dampier	CHW	606-862-9749 606-862-9767 (fax)	Laurel	Kentucky Homeplace 188 Dog Patch Trading Center London, KY 40741
McGuire, Angela <a href="mailto:angela.mcguire@uky.edu">angela.mcguire@uky.edu</a>	CHW	606-638-1079 877-213-7161 606-638-4941 (fax)	Lawrence Martin	Kentucky Homeplace 108 Bulldog Lane, Rm. 161 Louisa, KY 41230
Bowman, Samantha R <a href="mailto:samantha.bowman@uky.edu">samantha.bowman@uky.edu</a>	CHW	606-464-2156 877-847-9821 606-464-9420 (fax)	Lee & Owsley	Kentucky Homeplace 120 Main Street PO Box 1540 Beattyville, KY 41311
Bowling, Mary <a href="mailto:mvbo224@uky.edu">mvbo224@uky.edu</a>	CHW	606-672-2155, Ext. 15 606-672-4605 (fax)	Leslie	LKLP 121 Maple Street PO Box 899 Hyden, KY 41749
Gilbert, Ashley <a href="mailto:ashley.gilbert@uky.edu">ashley.gilbert@uky.edu</a>	CHW	606-633-7441 606-633-7458 (fax)	Letcher	Letcher Co. Health Dept. 115 East Main Street Whitesburg, KY 41858
Bailey, Judy <a href="mailto:jbail2@uky.edu">jbail2@uky.edu</a>	CHW	606-349-8842 606-349-8841 (fax)	Magoffin	Magoffin Co Health Dept 119 East Mountain Pkwy

				P. O. Box 1569 Salyersville, KY 41465
Prater, Shirley <a href="mailto:sdpr223@uky.edu">sdpr223@uky.edu</a>	CHW	606-743-4005 Ext. 312 606-743-4002 (fax)	Morgan	Kentucky Homeplace 151 University Drive West Liberty, KY 41472
Bowman, Samantha R <a href="mailto:samantha.bowman@uky.edu">samantha.bowman@uky.edu</a>	CHW	877-847-9821	Owsley	Kentucky Homeplace 200 Mulberry Street Booneville, KY 41314
Frazier, Carole <a href="mailto:Carole.frazier@uky.edu">Carole.frazier@uky.edu</a>	CHW	606-439-3557 606-439-0237 (fax)	Perry	Kentucky Homeplace 750 Morton Blvd. Hazard, KY 41701
Justice, Barbara <a href="mailto:barbara.justice@uky.edu">barbara.justice@uky.edu</a>	CHW	606-433-0327 606-433-0440 (fax)	Pike	Kentucky Homeplace 478 Town Mtn. Road PO Box 2243 Pikeville, KY 41501
Gilbert, Pollyanna <a href="mailto:pollyanna.shouse@uky.edu">pollyanna.shouse@uky.edu</a>	CHW	606-668-7660 606-668-7661 (fax)	Powell	Kentucky Homeplace 351 North Main Stanton, KY 40380
Gilliam, Kala <a href="mailto:kala.gilliam@uky.edu">kala.gilliam@uky.edu</a>	CHW	606-784-3881 606-784-3498 (fax)	Rowan	People's Clinic 751 West 1st Street PO Box 812 Morehead, KY 40351
Gilbert, Pollyanna <a href="mailto:pollyanna.shouse@uky.edu">pollyanna.shouse@uky.edu</a>	CHW	606-668-7900	Wolfe	Wolfe Co. Courthouse P. O. Box 236

Campton, KY 41301