UNIVERSITY OF KENTUCKY

Kentucky Homeplace

July 1, 2018 – June 30, 2019 Annual Report



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

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 25th Anniversary Celebration of Kentucky Homeplace on May 26, 2019

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Kentucky Homeplace

My Fellow Kentuckians:

This year was very special for Kentucky Homeplace due to the fact that May of 2019 marked the 25th anniversary of Kentucky Homeplace Community Health Workers (CHWs) serving the residents of Kentucky. During the celebratory event, the CHWs were honored and recognized as well as many of the people who were responsible for the creation and continuing support of the program. During this year, thousands of people utilized the services of local community health workers. The 22 community health workers have worked tirelessly to help the underserved in their community so they can have the basic necessities in order to live a productive life. The worth of their endeavors is reflected in the summary below.

Annual Summary

For the period July 1, 2018 – June 30, 2019, the CHWs provided services for 4,259 clients. CHWs logged 17,263 hours on care coordination activities with a value of \$328,004, amount of medication accessed \$11,827,655 and other service values (not medications) accessed were \$3,544,300 for a combined total of \$15,699,959.

The annual report is posted on the UK Center of Excellence in Rural Health's web page at <u>http://kyruralhealth.org/homeplace</u>. The report is found under the Programs tab then choose Kentucky Homeplace. Choose Annual Reports on the right then click on 2019 Kentucky Homeplace Annual Report. If you wish to have a printed copy, please call 1-855-859-2374 or email me at mace.baker@uky.edu.

Sincerely,

William Mare Baker

William Mace Baker, RN Director, Kentucky Homeplace Program



Program Activities

July 1, 2018 - June 30, 2019

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) accepted the position of President Elect.

Community Engagement Activities

CHWs attended back to school events, Remote Area Medical (RAM), resource and health fairs, interagency meetings, diabetic coalitions and many others to promote the services of KHP and to support other individuals and agencies in their communities.

CHWs assisted with the following events: Second quarterly All eyes on Appalachia free eye care clinic in Harlan, KY.

Conferences attended:

-Most KHP CHWs attended KYACHW Conference 9-27-18.

-Darla Shepherd (CHW Harlan County) and Kala Gilliam (CHW Rowan County) participated in a panel presentation at the Kentucky Rural Health Association conference on the role of CHWs delivering evidenced based self-management programs in rural Appalachia.

- Angela McGuire (CHW Lawrence and Martin Counties), President of KYACHW and Kala Gilliam (CHW Rowan County) President Elect KYACHW attended the Unity Conference in April 2019.

CHW Training

-All CHWs received updated Diabetes Self-Management Cross-Trainings (July 2018).

-All Kentucky Homeplace CHWs attended Mental Health First Aid training during the month of November 2018.

-In December 2018, all CHWs attended Substance Abuse Brief Intervention Training (SBIRT) and Care Collaborative Blood pressure training.

-Kentucky Homeplace CHW training was conducted in January 2019 at the UKCERH with five attendees.

-All CHWs attended a KYACHW meeting in March 2019 in Montgomery County and received Trauma Informed Care 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 were 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

-KHP received Medistar Hosparus Health Innovation Award (October 2018).

-Courtney Charles accepted the CHW position Estill County KHP office in November 2018.

-Katie Dampier accepted the CHW position in Laurel/Jackson County KHP office in January 2019.

-A new office space was obtained in Boyd County in the Hillcrest-Bruce Mission.

-Shelly Menix accepted the CHW position in Greenup and Boyd Counties in May 2019.

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







Activity Summary

(Clients visited: 07/01/2018 - 06/30/2019)

Activity	CHW Hours
Agency Contact	8,285.88
Education	2,525.93
Enrollment	1,435.42
Followup	2,463.78
Recruit	253.07
Survey	2.83
Travel	224.93
Workshop	2,071.55
Grand Total:	17,263.39

Total All Regions



Total service value for 17,263 hours equals \$328,004.



Visit Summary

(Clients visited: 07/01/2018 - 06/30/2019)

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





Hospital-ER Summary

Episode Type	Reason	Episodes	Days Stay	
Emergency Room	Chronic Disease	55	0	
Hospital	Chronic Disease	125	658	
Hospital - Observation	Chronic Disease	14	0	
Emergency Room	Injury	32	0	
Hospital	Injury	11	94	
Emergency Room	Non-chronic Disease	50	0	
Hospital	Non-chronic Disease	45	162	
Grand Total:		332	914	





Age Gender Summary

Age Group	Female	Male
Ages 00 to 04	2	5
Ages 05 to 12	8	7
Ages 15 to 19	10	9
Ages 20 to 24	22	23
Ages 25 to 44	323	209
Ages 45 to 64	1,057	849
Ages 65 to 74	644	485
Ages 75 to 84	302	215
Ages 85 and over	61	28





BMI Category Summary





Insurance Summary

Insurance Type	Clients
Medicare A	2,088
Medicare B	1,809
WellCare	716
No Insurance	547
Medicare D	474
Humana	460
Medicaid	377
Anthem	308
Private	183
Aetna	162
Passport	129
Medicare F	47
Veterans	16







Poverty Level Summary





Education Level Summary





Events throughout the year



3rd Annual Kentucky Association of Community Health Workers





Kentucky Homeplace staff at the MediStar Awards receiving the Hosparus Health Innovation Award.









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 Centerof Excellence in Rural Health





25th Anniversary Celebration of Kentucky Homeplace



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





Highlights of Actual Client Encounters

July 1, 2018 - June 30, 2019

- 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.
- 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.
- Today I came back to the office after the staff meeting, as I came through the door I heard a familiar voice coming down the hallway behind me. A client has seen me coming in the building and wanted to share some news. This client was FIT tested 3 years ago, his test came back as positive. Which means he needed further testing, He had a colonoscopy and he was found to have 4th stage colon cancer, his doctor told him if he had waited one more month it would have been too late. They did a bowel resection on my client and he was deemed to be cancer free. While he was going thru all this his brother was also diagnosed with colon cancer and before he could begin treatment passed away. Today, my client tells me that his sister had been diagnosed with colon cancer about a month ago and they removed 4 ft. of her colon, the tumor weighed 25lbs. He went to take her for her treatment and she refused to go. Big tears rolled down his cheeks as he talked about her. She dosen't have children and thinks she has nothing to live for. I told him if there was anything I could do to encourage her to let me know. I figure just having her brother still here, after beating cancer would be enough, but we can never know how we would feel if it was us, if it was our decision to make.
- This story started last summer; I got a call from a former KHP client. The ceiling in her mobile home fell, 4 literally fell. It was made of sawdust and glue and over the years with moisture from gas heat and several leaks it just collapsed, leaving of course a mess, and 2X2's and a metal roof exposed to the living room, kitchen and a bedroom. What a mess, I told the client to dust off and pack up everything she wanted to keep and then let me know I would get volunteers to come help her move. In the meantime, I found the elderly couple an apartment near town. She was thrilled, it was rent she could afford and it would be a great place for them, close to town, family, doctors and grocery store. Problem solved. The elderly gentleman came to town to look at the apartment, and after he was told he could bring his little dog he seemed to be okay with the move. Nope. Moving day came and he told his wife he wasn't moving, he couldn't leave his childhood home. I contacted a Christian work group that was working in the area and they said they would go see if there was anything they could do, they were afraid this job required more skill than they had. Indeed the man in charge went to see the home and called me. He said that 18 the house was in way worse shape than he thought and there was no way they would be able to fix all that needed to be fixed just to make it safe. The elderly couple stayed there in the home, family helped to patch up the ceiling the best they could. All winter they stayed there until the electric breaker box melted, literally melted. A family member called me and said that this time they had no

choice they had to move. Again I was able to find an apartment, on the ground floor with access to the yard from the apartment, the little dog was welcome and the wife loved the new apartment, they had never had anything as nice as this, moving day came, you got it, he said Nope, not moving. They ran an electric extension cord from the barn to the house so they would have lights. Today the same family member came in to the office, all the belongings are loaded in a trailer and have no other choice but to move. I made one call, the apartment was still available, some minor paperwork needed to be completed and they could move in. Praying for good weather today, the couple are moving into their new home. Neighbors have already been to visit, even before they got unloaded. The elderly gentleman is going to the local flea market with his new neighbor tomorrow. Seems like things are going to be ok!

- Another year is coming to a close but I am so thankful for the opportunity of meeting a client just before the holidays that I will forever remember. This client came into my office uninsured with multiple health problems. After completing the initial interview and reviewing the client's income, I noticed that the client would qualify for premium assistance through the Federal Marketplace. We completed the application for health insurance. The client couldn't believe that he qualifies for health insurance for less than \$56.00 per month but had gone without it for so long. He said he wished that he had come here sooner to review his options. During the visit, he informed me that he had no medical home, so we completed the application for him to be seen at an FQHC on sliding scale for reduced payment. The client returned to the office just to thank me for being patient with him and helping guide him with the multiple needs that he had. After going to the doctor's appointment he has received the medications that he had gone without for so long because of not having insurance and he is feeling much better.
- During my 15 years with Kentucky Homeplace I have received many phone calls. Phone calls for medicines, calls for glasses, dentures, cloths and food. The call I received last week was an encouraging call, one of hope, gratitude and encouragement.

Diabetes or (my sugar problem) as this very nice older man called it was his problem. After suffering from heart disease and developing diabetes his wife did everything she could to learn more to help her husband. But even with all the carb counting and exercise his A1C just wouldn't go down. I found out that he was not taking the medications he really needed to take due to the very high cost. The medications he needed where not covered by his Medicare Part D plan.

I was able to help access these medications from PAP for my client. Three months latter this client calls to let me know his new A1C numbers, he had gone from an A1C of 14 to an A1C of 7 and his Triglyceride numbers where back to a normal level. My client said he just knew that by taking the right medicines he would be able to get his A1C even lower by his next visit. He said that by being able to get the medicines and education needed for his diabetes, he would be able to enjoy living many more years.

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 18 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.

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 18 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.



Kentucky Homeplace Administration

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