

# ***KENTUCKY HOMEPLACE QUARTERLY REPORT APRIL 1, 2006 – JUNE 30, 2006***

## ***HOMEPLACE IN THE HEADLINES***

### **Dilemma: pay bills or buy healthcare**



PHOTO BY EDDIE ARNOLD

Kentucky Homeplace Family Health Care Advisor Paul Frederick discusses health issues with client Carol Carmack.

**By Eddie Arnold**

*Reporter*

With prescription and healthcare costs on the rise, those who are either uninsured or underinsured must often choose between paying for healthcare or paying bills.

Thanks to the Kentucky Homeplace Program, however, that decision is one many local residents no longer have

to make. The program started in the late 1990s as an outreach of the Center for Rural Health in Hazard and soon branched out to serve communities in several other counties, including Knox.

The Knox County program has been in operation since May 2003 and operates out of an office in the Knox County Hospital.

Knox County Family Health Care Advisor Paul Frederick said clients are referred from a variety of sources.

“Clients are referred from the hospital, as well as from doctor’s offices, home health agencies, and from the health department. We get referrals from about every health agency around,” he said. “Friends and family members can even make referrals.”

The program provides clients with all types of health information, and education information on illnesses and medications, he said, adding the services are not limited to those that are educational in nature.

“We notify clients of available health, social and environmental services. They can get help with everything from medications, as well as with other social needs,” he said. “We even help people with housing problems.”

Regardless of the need, the Kentucky Homeplace Program strives to match

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# Healthcare

FROM PAGE 1

client needs with the appropriate source of help, he said, adding the program also serves as a liaison between the patients and sources of assistance.

"When patients give us the permission, we can contact doctors, pharmacies, or pharmaceutical companies on their behalf, and do whatever it takes to serve our client," he said.

The program has over 1,000 people enrolled. "We do an annual enrollment on each client, and then we do an annual re-certification to be able to update their information and see exactly what specific needs they have," he said, adding that the program relies on information from each client so that their particular needs may be served.

One crucial part of Frederick's job is home visits with clients. "During the typical home visit, we do an initial interview with the client to assess what their needs are. We begin to do an overall survey of the client's health conditions. We also begin to find out what medications they are on," he said.

The home visits often include surveys to determine the client's awareness of specific health risks. "Right now, we are doing a colon cancer awareness survey, which helps educate clients on questions that they might be able to ask their doctor concerning colon cancer," Frederick said, adding that surveys may range from smoking habits and cessation to whether or not people wear their seat belts.

"We do a lot of educational things," he said.

Once he has all of the client's general health information, it is entered into a database at the Center for Rural Health. If the clients' give permission, that general information may be used for everything from training for UK medical students to helping other clients.

In each of the 10 counties served out of the program's Manchester regional office, family health care advisors are chosen from those counties, allowing them to be more in tune with their own county's client needs.

"They know the particular resources that are in that area and are familiar with the people and the healthcare professionals that are there," he said, adding that clients seem to be more likely to communicate with people from their home county.

Frederick said that if the resources needed to fill a client's needs are not available

in their home county, the program can often find the help that is needed outside the local area.

"In the case where a client might need a hearing aid, we could refer them to a speech and hearing center in Lexington," he said.

Frederick said that help is often available for people with a varied income range. "They don't have to be the poorest of the poor, or totally impoverished to get assistance," he said. "We can often help working people who have no insurance. For instance, married people who have a total income of \$30,000 a year, or a single person with an income of \$19,000 are eligible for assistance through a lot of the medicine companies."

Frederick said the program serves clients ranging from infants and children all the way up to senior adults.

When it comes to what his clients say about the program, Frederick said many say they rely heavily on the help that the program offers.

"Many of them say they didn't know what they were going to do. They were either going to have to do without food or do without other types of services in their home just so they could afford such things as medicine," he said. "Many of them didn't know of any resource until they came here. We have literally changed peoples' lives."

One of those lives the Kentucky Homeplace Program has changed is that of Knox County resident Carol Carmack

Carmack said when her husband lost his job at a Corbin manufacturing plant, she suddenly found herself without adequate insurance to help cover the cost of her medications. However, through the assistance offered by Kentucky Homeplace, she now is able to get the medicine she needs.

"It really has helped me," she said. "It has helped me with my medicine."

Frederick said that, for him personally, the biggest reward is being able to help those people who often need it most.

"I want people to know that this is a resource center where they can find out how they can get help," he said. "There is help available for them."

Although clients are normally seen on an appointment basis, Frederick urged prospective clients to call him at (606) 546-4175, extension 4065.

Story/photo credit: This feature story on Kentucky Homeplace and Knox County FHCA Paul Frederick was published in the June 8 *Mountain Advocate* in Barbourville. For a story about more "Homeplace headlines," see page 5.

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June 30, 2006

Dear fellow Kentuckians:

The Kentucky Homeplace program has continued serving the uninsured, underinsured and underserved citizens of Kentucky. Family health care advisors (FHCAs) have encouraged preventive care services, participated in community service projects and local events in addition to their regular assignment – assisting clients with their needs.

Here's a summary of services for this quarter (April 1 thru June 30): The number of unduplicated clients served was 6,167; the amount of medications and supplies accessed totaled \$5,939,713; and number of services was 93,649. The top client problems included high blood pressure, high cholesterol, diabetes, heart disease, and mental disease.

Kentucky Homeplace FHCAs have had an outstanding year of accessing services and assisting clients in navigating the health care and social systems of their counties. For this fiscal year (July 1, 2005, thru June 30, 2006) the number of unduplicated clients served was 14, 905; total number of services provided was 469,943; and the total amount of medications and supplies accessed reached an all-time high of \$32,982,633.

Preventive care remains a top priority of our program. Homeplace will continue focusing on women's health, addressing access to screening mammograms and pap smears, and providing education on prevention and early detection. We will continue to encourage healthy behavior such as smoking cessation, eating well and exercise.

The entire quarterly report is posted on the UK Center for Rural Health's Web page for your review. Simply click on <http://www.mc.uky.edu/ruralhealth/>, go to the right side of the page and click on Kentucky Homeplace, and then scroll to the bottom of the page and click on (April – June 2006 Quarterly Report). If you still wish to have a printed copy, please call 1-800-851-7512 or email me at [fjfeltn@uky.edu](mailto:fjfeltn@uky.edu).

Sincerely,

A handwritten signature in black ink that reads "Francis J. Feltner". The signature is written in a cursive, flowing style.

Fran Feltner, B.S.N., R.N.  
Director, Lay Health Worker Division

## Kentucky Homeplace in the Headlines

Kentucky Homeplace has received a fair share of attention lately, as newspapers from Hazard to Hopkinsville have featured the program and advertised the services it offers local residents.

Fran Feltner, B.S.N., R.N., said the publicity serves an important purpose – to inform medically underserved residents that a free program is available to help them address their health care needs. She also views it as an opportunity to spotlight the efforts of the program’s family health care advisors (FHCAs), who work diligently to access medications and medical supplies for clients, as well as promoting proper diet, exercise and other preventive methods.

“Our FHCAs have had an outstanding year of providing access to social and medical services throughout their counties,” Feltner said. “Therefore, they deserve public kudos for a job well done.”

Here is a list of “Homeplace headlines” from recent weeks:

- Former Christian County FHCA Jennifer Walton was featured in a front-page article in the *Kentucky New Era*, an 11,000-circulation daily newspaper in Hopkinsville;
- Laurel County FHCA Helen Curry was featured in an article by *The Sentinel-Echo*, a multi-weekly paper in London;
- Knox County FHCA Paul Frederick was featured in a front-page article in *The Mountain Advocate*, a weekly paper in Barbourville (shown on the front cover);
- Breathitt County FHCA Julie Keene was featured in a front-page article in the weekly *Jackson Times*;
- Perry County FHCA Nancy Combs was featured in the weekly *Hazard Herald*;
- Letcher County FHCA Tammie Holbrook was featured in *The Mountain Eagle*, Whitesburg’s weekly paper; and
- Lyon County FHCA Melissa Wynn was featured in *The Herald Ledger*, a weekly paper in Eddyville.

The program also recently announced the hiring of FHCA Roland Brown in the *Floyd County Times* and has begun contacting media outlets in the 10-county South Central Region about possible feature stories there. Plans call for newspapers in 15 western Kentucky counties to be contacted by the end of the year, along with those in the Northeast Region.

## Kentucky Homeplace Bids Farewell to Ova Pittman

Ova Pittman, or “Pitt” as he was affectionately called, began his career with the Homeplace program in January 1999 as the Western Regional coordinator and resigned effective April 14, 2006, to spend quality time with his family. Pitt spent his entire professional career educating students, lay workers, faculty, professionals, clients and the citizens of the Commonwealth in a career that spanned 41 years.

Pitt’s career in health education began in 1965 for the Boone County Health Department. In 1967, he transferred to the Sexually Transmitted Disease Program, where he provided health education to health care providers, clients and civic organizations. From 1983 to 1999, he was the primary provider of Sexually Transmitted Disease Continuing Education and Training to the public health nurses in the Commonwealth.

In 1999, Pitt was recognized by Western Kentucky University’s Allied Health Program as an “Outstanding Alumni” for his contribution to health care. In 2004, the Kentucky Public Health Association awarded him the Sara C. Stice Award for outstanding contributions by an individual in the field of health education in the Commonwealth of Kentucky for 30 years of service in the field of sexually transmitted disease education.

Pitt spent seven years as the Western Regional coordinator for Kentucky Homeplace, supervising 10 family health care advisors. During that time, he continued to serve on statewide and university committees in health care areas. Pitt’s expertise, leadership and wit will be missed by the program. For his years of service, Fran Feltner, director, awarded Pitt a plaque (*see below*) during the annual retreat held in Lexington, along with sincere thanks from the program and staff.

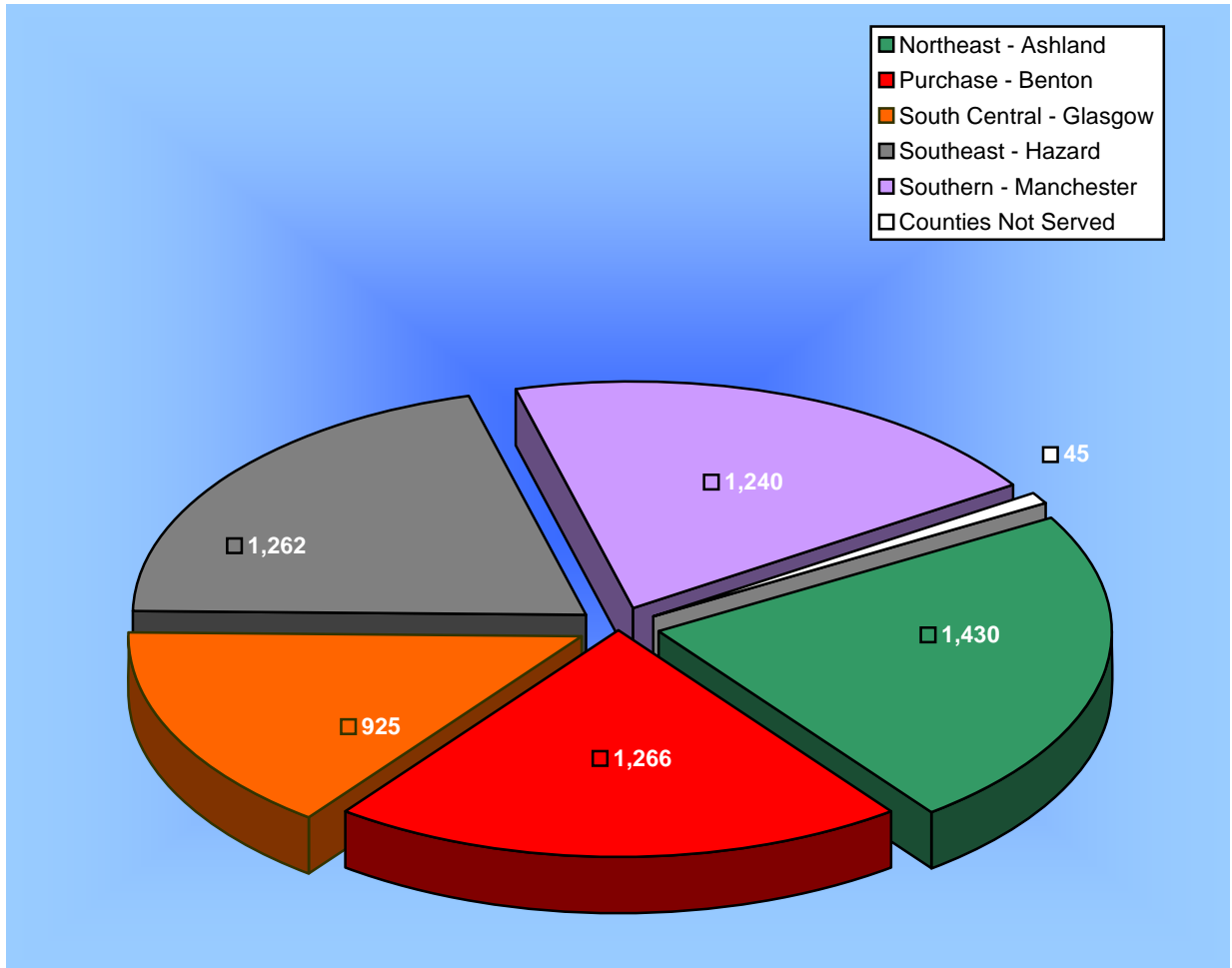
Sherry Morris, former FHCA from Livingston and Crittenden counties, was selected as the new western coordinator.



<b>Poverty Levels of Homeplace Clients</b>					
<b>April 1, 2006 – June 30, 2006</b>					
Number of people in household	100%	101-150%	151-200%	200+%	TOTAL
1	2,220	5	0	1	2,226
2	2,668	53	4	1	2,726
3	646	21	3	0	670
4	349	19	3	0	371
5	97	7	1	0	105
6	38	4	1	0	43
7	15	2	0	0	17
8	2	3	0	0	5
9	3	0	0	0	3
10	1	0	0	0	1
11	1	0	0	0	1
<b>TOTAL:</b>	<b>6,040</b>	<b>114</b>	<b>12</b>	<b>2</b>	<b>6,168</b>
Column %:	97.92%	1.85%	.19%	.03%	100%
Source: Data extracted from the Kentucky Homeplace Computer Database					

<b>Age Distribution of Homeplace Clients</b>		
<b>April 1, 2006 – June 30, 2006</b>		
Age Group	Number of Females	Number of Males
Under Age 1	1	0
Ages 1 to 4	3	0
Ages 5 to 12	5	4
Ages 13 to 14	3	0
Ages 15 to 19	13	10
Ages 20 to 24	76	45
Ages 25 to 44	607	382
Ages 45 to 64	2,169	1,250
Ages 65 to 74	605	369
Ages 75 to 84	370	137
Ages 85 and over	97	22
<b>Total:</b>	<b>3,949</b>	<b>2,219</b>
Source: Data extracted from the Kentucky Homeplace Computer Database		

## Total Clients Served By Region April 1, 2006 – June 30, 2006

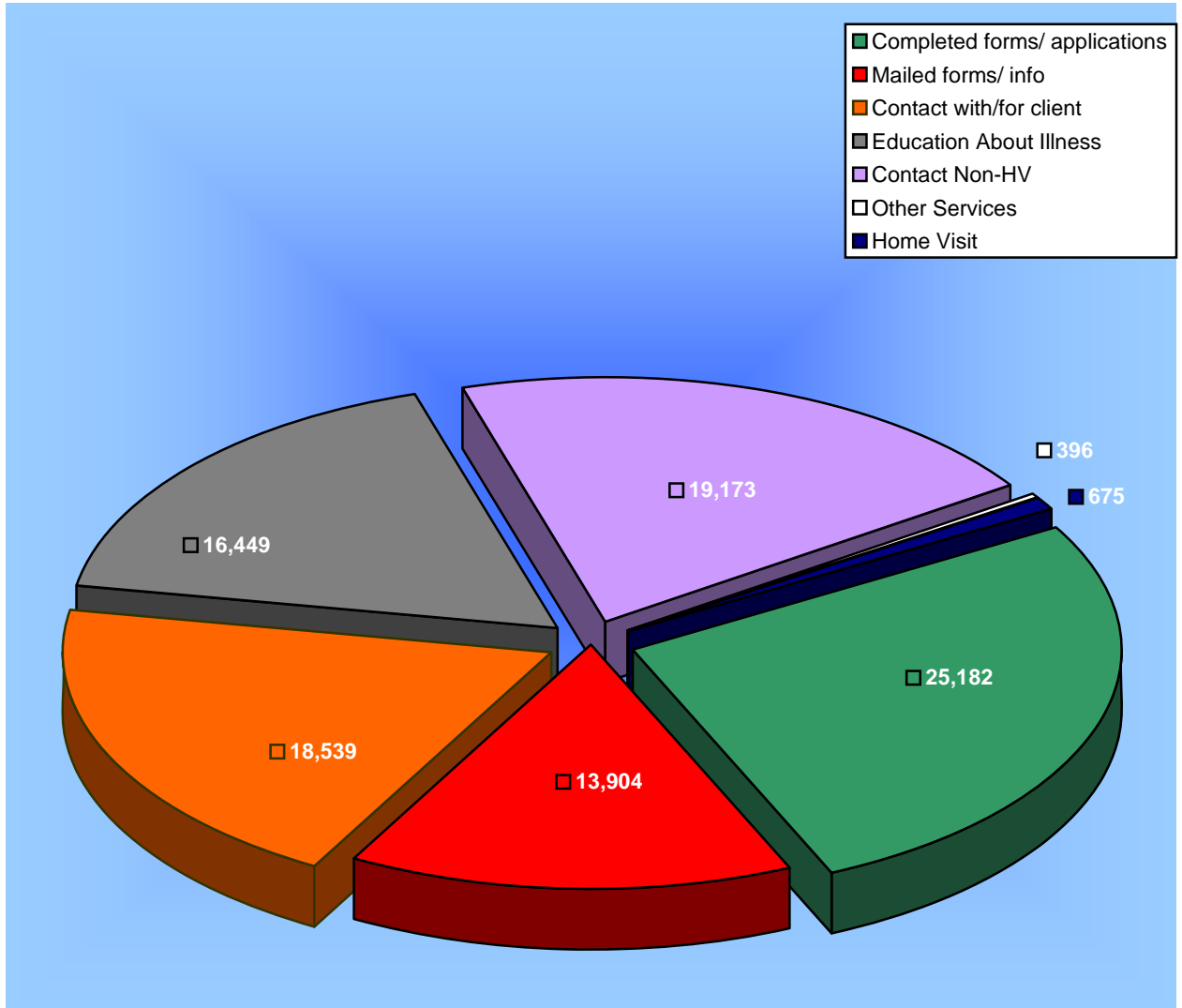


**TOTAL FOR THE QUARTER: 6,168**



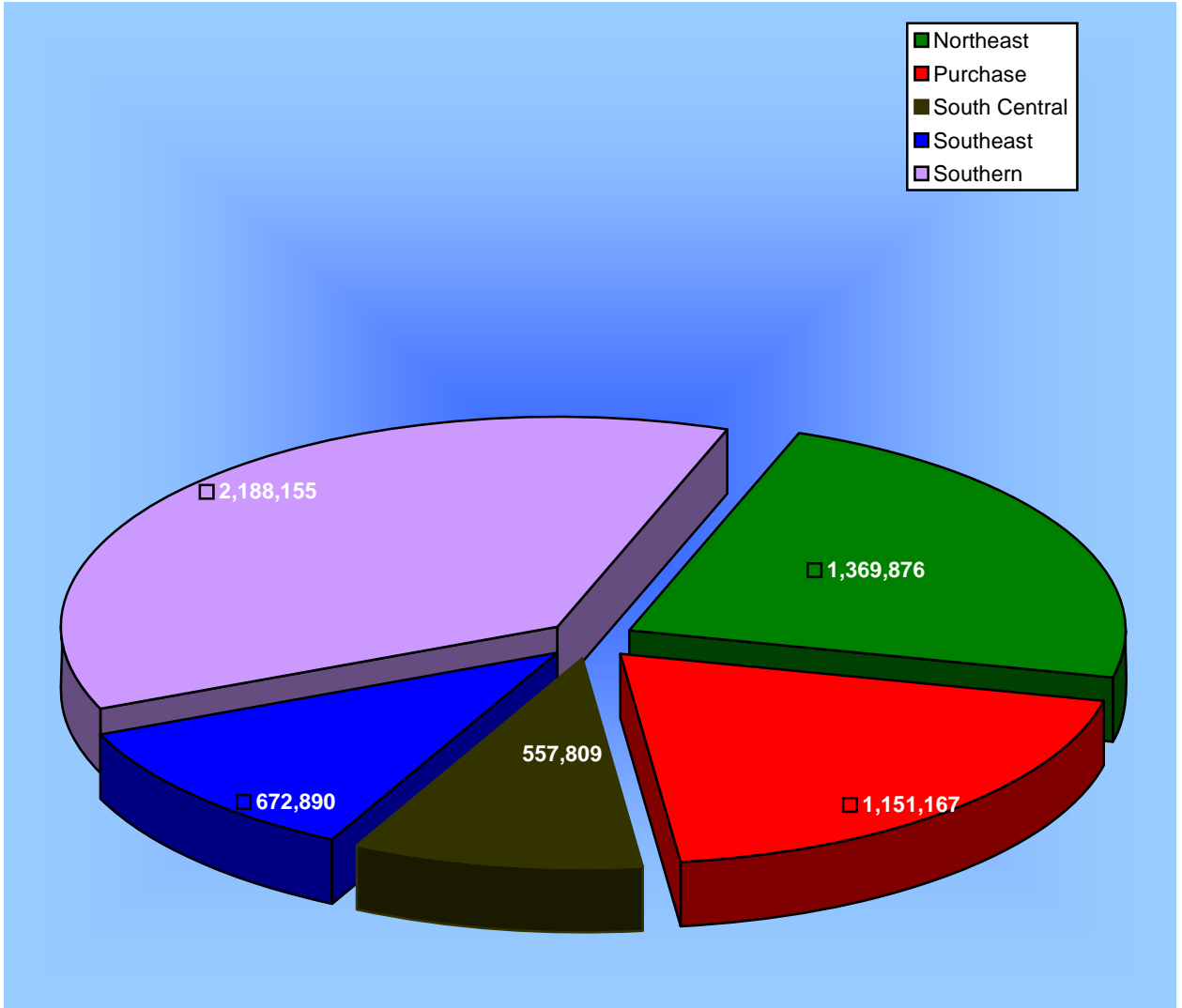
# Client Services

## April 1, 2006 – June 30, 2006



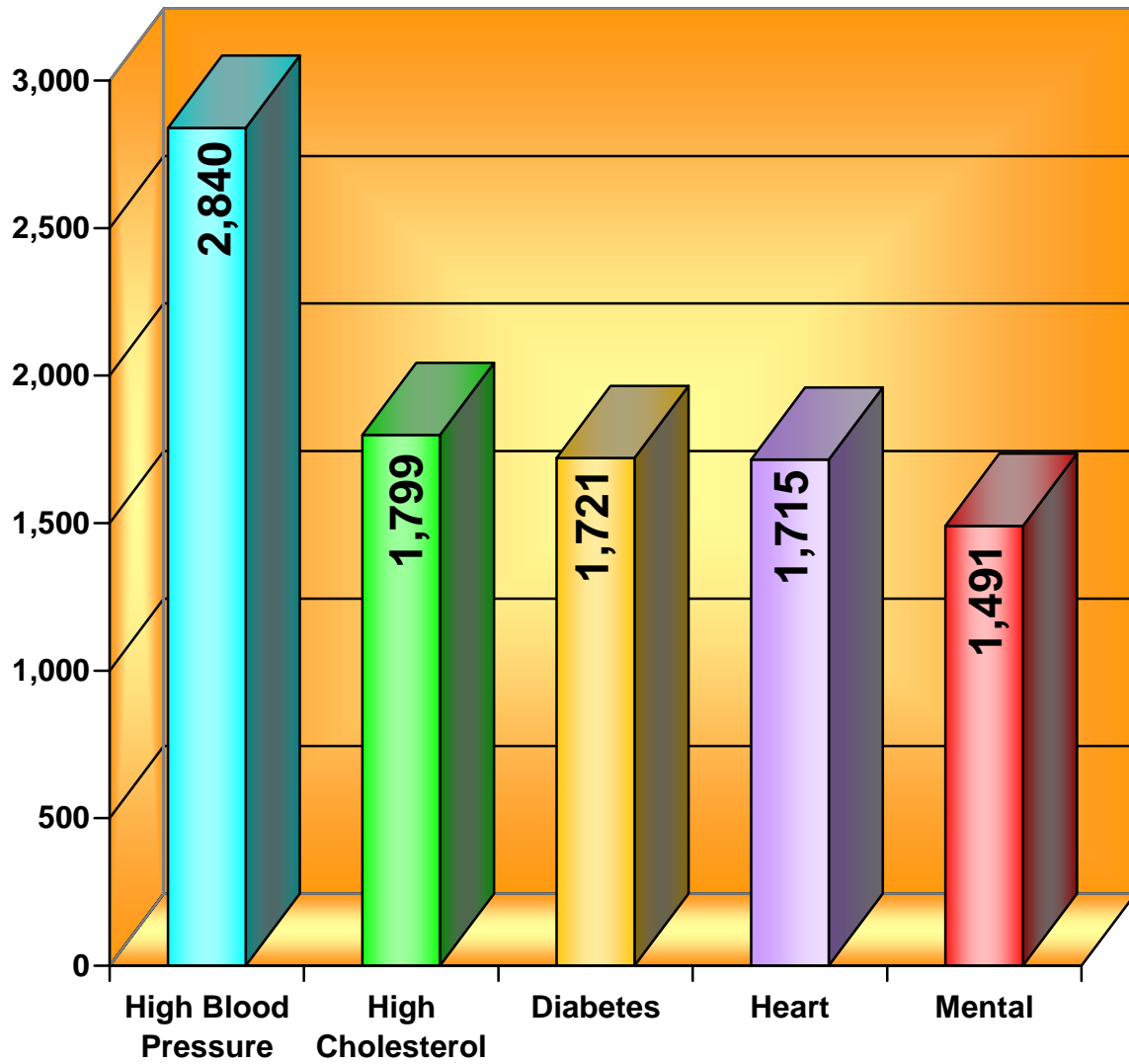
**TOTAL FOR THE QUARTER: 94,318**

# Client Services Value April 1, 2006 – June 30, 2006



**TOTAL FOR THE QUARTER: \$5,939,897**

## Top Five Client Problems by Condition April 1, 2006 – June 30, 2006



# **REGIONAL SUMMARIES**

## **April – June 2006**

### **NORTHEAST REGION – Bath, Boyd, Carter, Elliott, Greenup, Johnson, Lawrence, Magoffin, Martin, Menifee, Montgomery, Morgan and Rowan counties; Regional Coordinator, Deanna Jessie.**

Our family health care advisors served 1,430 total clients this quarter. A total of 25,709 services were provided to these clients. \$1,369,876 worth of free medication was provided to our clients in this service area.

#### **Regional Office**

Deanna Jessie attended a regional coordinator meeting this quarter in Lexington. She continues to meet with the American Cancer Society to coordinate cancer services for Homeplace clients. She coordinated the FIVCO Area Health Department Pandemic Flu training with Dr. Kristy Bolen, epidemiologist, and attended the Little Sandy District training. She attended several Interagency meetings within the Northeast Region. She had several meetings with the Department of Vocational Rehabilitation.

#### **Bath, Menifee, and Montgomery counties**

Teresa Judd participated in the weekly New Hope Clinic's Diabetic Day. She attended the newly formed Interagency meeting. Teresa attended St. Claire Regional Medical Center's Health Fair in Bath and Menifee counties. She attended the annual Chamber of Commerce meeting. She participated in the local Pandemic Flu Summit in the Gateway ADD District.

#### **Boyd County**

Kim Sansom participated in two FIVCO Interagency meetings at the Boyd County Health Department. She attended a Boyd County Health Department presentation. Kim attended the King's Daughters Medical Center Health and Wellness Program training and assisted with osteoporosis screenings. She participated in the FIVCO Pandemic Flu training.

#### **Carter County**

Anita Salyers held two Carter County Community Health Days. She worked with Our Lady of Bellefonte mammography unit. Anita attended the FIVCO Pandemic Disaster Flu Training with the local Health Department.

#### **Elliott and Morgan counties**

Janet Kegley participated in two Elliott County Interagency meetings. She attended the FIVCO Pandemic Flu Training. She attended the Community Health Watch Partnership meeting sponsored by Our Lady of Bellefonte Hospital. She visited with the Gateway Community Services of Morgan County.

#### **Greenup County**

Kelly McCarty attended the FIVCO Interagency meeting and participated in the Health Fair with Helping Hands. She assisted Our Lady of Bellefonte Hospital mammography unit with free

glucose meters, dental and eyeglass services for participating clients. Kelly attended a meeting with Pathways. She attended the FIVCO Pandemic Flu Training at the regional office.

### **Johnson and Magoffin Counties**

Judy Bailey assisted with the Low-Income Health Day in cooperation with the Magoffin County Health Department. She attended the Community Action Services Interagency meeting. Judy attended the Pandemic Flu Summit in Magoffin County and participated in the FIVCO Health Department Pandemic Flu Training.

### **Lawrence County**

Elizabeth Kelly attended the Lawrence County Interagency meeting. She attended the Pandemic Summit provided by the Lawrence County Health Department. Elizabeth participated in the FIVCO Health Department Pandemic Flu Training.

### **Rowan County**

Family health care advisors from Carter, Elliott and Bath counties are trying to serve the people of this county.

### **SOUTH CENTRAL REGION – Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, and Warren counties; Regional Coordinator, Beth Wells.**

Our family health care advisors served 925 total clients this quarter. A total of 11,349 services were provided to these clients. \$557,809 worth of free medication was provided to our clients in this service area.

Kentucky Homeplace and the Barren River District Health Department-Kentucky Diabetes Prevention and Control Program co-sponsored an educational program titled *Learn How to Manage Your Diabetes* in Butler and Logan counties. Approximately 13 Kentucky Homeplace clients from Butler County and five clients from Logan County attended the four-hour seminar. Those attending were provided with excellent information plus a question and answer session was held to help them better understand diabetes and prevent possible future complications that may occur with lack of proper understanding and care.

Last quarter, Kentucky Homeplace staff provided outreach/referrals to women over age 40 for cervical/breast cancer screenings. A total of 63 appointments were made. Recent inquiries to clients found that several required additional follow-up care for abnormal pap smears and/or mammograms, and cholesterol levels. Kentucky Homeplace will continue to evaluate barriers that are preventing women from obtaining the screenings and attempt to increase the number of women receiving cancer screenings.

### **Barren County**

Jeanen Williams attended the Barren County Vision meetings and the Pandemic Flu Summit.

### **Metcalfe and Monroe counties**

Janice Compton attended the Monroe County Diabetes meetings and the Monroe Cancer Coalition meetings. She participated in the Monroe County Senior Citizens Fest and several Metcalfe County Vision meetings.



### **Edmonson and Hart counties**

Sharon Cherry participated in the Edmonson County Health Fair and attended the Pandemic Flu Summit. She attended the organizational meeting of the Hart County Community Outreach Program to coordinate organizations within the Horse Cave area to better serve the community. She also attended the Healthy Hart Coalition meeting, the Hart County Diabetes Coalition meeting and the annual Barren River Area Development District (BRADD) meeting.

### **Warren County**

Velma Koostra attended the Pandemic Flu Summit and provided a presentation to the Warren County Vision meeting about Kentucky Homeplace services. She also attended the annual BRADD meeting.

### **Allen and Simpson counties**

Peggy Gillock attended the Allen and Simpson County Vision meetings and the Pandemic Flu Summit.

### **Butler and Logan counties**

Bettie Phelps attended the Pandemic Flu Summit and assisted the Community Action Agency with distribution of commodities to Kentucky Homeplace clients. Bettie provided outreach this quarter to women over age 40 for cervical/breast cancer screenings in Butler County and she organized diabetes programs in Butler and Logan counties.

## **SOUTHEAST REGION – Breathitt, Floyd, Knott, Leslie, Letcher, Perry, Pike, Powell, and Wolfe counties; Regional Coordinator, Lynn Whitaker**

### **Regional Office**

Lynn Whitaker attended a Vision Meeting with Paul Vance in Knott County. She attended the Pandemic Flu Summit held in Hazard and attended the Kentucky River Community Care Consumer Conference held at Alice Lloyd College. She attended a regional coordinator's training held in Lexington.

### **Wolfe County**

Pollyanna Shouse attended a meeting with the UK Extension Office targeting diabetic clients in Wolfe County. She attended the Pandemic Flu Summit held in Breathitt County. She attended a meeting with Middle Kentucky River District Community Action (MKRDC) called "Focus on the Family," regarding abuse and family functions. Polly attended a meeting in Wolfe County with the PRIDE organization regarding cleaning up the county. Polly attended an Interagency meeting to form a better referral system. Polly held weekly Community Health Days at the Powell County Clinic, to take care of her Powell County clients.

### **Letcher County**

Tammie Holbrook attended a Pandemic Flu Summit in Hazard. Tammie met with a member of the Sharing with Appalachian People (SWAP) program regarding housing repairs.

### **Knott County**

Paul Vance attended a Pandemic Flu Summit in Hazard. Paul attended the Kentucky River Community Care Consumer Conference and made a presentation regarding the Kentucky

Homeplace program. Paul attended the Leslie, Knott, Letcher, Perry (LKLP) Vision Interagency resource meeting in Knott County.

### **Breathitt County**

Julia Keene attended the Disaster Planning Committee to discuss how to handle emergency situations in the community. Julie attended the local Pandemic Flu Summit and a meeting presented by Kentucky Community Action promoting healthy lifestyles for families. She attended a local Interagency meeting to form a better referral system within the community.

### **Pike County**

Kristie Childers and Barbara Justice attended a Mobilizing Action Partnership for Pike (MAPP) meeting at the Pike County Health Department regarding vision and brainstorming ideas to make Pike a healthier county. They attended a meeting with the Kentucky Cancer Coalition regarding colorectal cancer information kits for physicians. Kristie and Barb worked at the Hillbilly Days festival in downtown Pikeville, giving informational material regarding Homeplace to the public. Kristie attended a meeting with Williamson ARH on outreach to underserved communities within the county. Kristie had several Community Health Days at Phelps and Belfry while Barb was doing the same in Elkhorn City and Virgie. They attended an interagency meeting at the Big Sandy Area Community Actions Building. They attended a Pandemic Flu Summit held at the Pikeville College.

### **Perry County**

Nancy Combs attended the Pandemic Summit held in Hazard.

### **Leslie County**

Delana Roberts attended the Pandemic Flu Summit held in Hazard. She had several Community Health Days and two Diabetic Health Days. Delana attended a Health Fair in Leslie County sponsored by Mary Breckinridge Hospital.

### **Floyd County**

Gina Bates attended the Pandemic Flu Summit held at the Prestonsburg Health Department. She attended a meeting with the Kentucky Cancer Coalition at the Pike County Health Department regarding colorectal cancer information kits for physicians.

**Note - The Southeast and Southern regions participated in a colorectal survey this past year, promoting education and awareness of colorectal cancer and available screenings. There were three colorectal survey trainings held at the Center for Rural Health and the FHCAs and coordinators from both regions attended those trainings**

**SOUTHERN REGION - Bell, Clay, Harlan, Jackson, Knox, Laurel, Lee, Owsley counties; Regional Coordinator, Helen Collett.**

This quarter our family health care advisors served a total of 1,240 clients. A total of 17,763 services were provided to these clients and \$2,188,155 worth of free medication was provided to our clients. The family health care advisors attended training sessions held at UK Center for Rural Health on colorectal surveys and a UK benefits seminar.

### **Bell County**

Nancy Brock attended the Bell/Whitley community service meeting and the Cooperative Christian Ministry Community Day.

### **Clay County**

John Howard and Michelle Ledford attended a meeting concerning the colon cancer grant Homeplace is working with and a UK benefits seminar.

### **Harlan County**

Shirley Madrey attended the Black Bear and Polk Sallet festivals this quarter. She was able to distribute our brochures to many residents of Harlan County.

### **Lee and Owsley counties**

Linda Thacker attended the Women's Health Fair at Kentucky River Community Care in Beattyville. She presented the Homeplace program at the Beattyville Kiwanis meeting in June and attended a Clinical Care Committee meeting at Marcum & Wallace Memorial Hospital.

### **Knox County**

Paul Frederick attended the Knox County Health Department Diabetes Educational Training meeting. He was able to inform the participants of the resources Homeplace can offer diabetics. Paul also attended a meeting of the Tri-County Cancer Coalition. He and Helen Collett, coordinator, met with the chief executive officer of the Knox County Hospital in Barbourville and introduced the new referral project Homeplace wants to incorporate with the admissions of patients. Paul also met with the director of nurses at Knox Family Medicine to discuss the Medicare Part D Prescription Drug Program.

### **Laurel County**

Helen Curry attended a meeting concerning the colon cancer grant Homeplace is working with and a UK benefits seminar.

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### **WESTERN REGION - Ballard, Caldwell, Calloway, Carlisle, Christian, Crittenden, Fulton, Graves, Hickman, Livingston, Lyon, Marshall, McCracken, Trigg, Webster and Union counties; Regional Coordinator, Sherry Morris**

This quarter our family health care advisors served a total of 1,266 clients. A total of 19,049 services were provided to these clients and \$1,151,167 worth of free medication was provided to our clients.

### **Regional Office**

Kentucky Homeplace welcomes Sherry Morris as the new Western Region coordinator. Sherry brings 5 ½ years of experience with Homeplace as the former Livingston and Crittenden FHCA. Homeplace bids farewell to Ova Pittman, former coordinator, and Jennifer Walton, FHCA from Trigg and Christian counties. Our best wishes to them and their families for the future.

**Ballard and Carlisle counties**

Angelic Carpenter attended the area Pandemic Flu Summit and had several meetings with newly elected county officials in the Ballard County area.

**Marshall County**

Tessa Vail attended the area Pandemic Flu Summit and has been involved with the Marshall County Fiscal Court Student Worker Program. Tessa has also helped provide services to the clients of Livingston, Crittenden, Christian and Trigg counties in the absence of a family health care advisor in those areas.

**Graves County**

Mary Beth Rohrer attended the area Pandemic Flu Summit. She worked with the Graves County Relay for Life as a volunteer. Mary Beth was recognized at the Graves County Breast Cancer Coalition Meeting for all of her efforts and hard work to help get the women of the community involved in screenings for breast and cervical cancer.

**Caldwell and Lyon counties**

Melissa Wynn attended the area Pandemic Flu Summit. She has attended monthly Interagency and Champion Meetings in both Caldwell and Lyon counties. Melissa has also helped provide services for the clients of Crittenden and Christian counties in the absence of a family health care advisor in those areas.

**McCracken County**

Pamela Hamilton attended the area Pandemic Flu Summit and attended the McCracken County Heart Walk.

**Union and Webster counties**

Jerrell Rich attended the Pandemic Flu Summit and the distribution day at one of the local church food pantries to offer assistance to those who attended.

**Calloway County**

Carla Gary attended the Pandemic Flu Summit. She attended the Calloway County meeting on Domestic Violence and a Diabetes Workshop that was presented in her area.

**Fulton and Hickman counties**

Shan Roberts attended the Pandemic Flu Summit. She participated in the Iris Festival Health Fair and worked with the Relay for Life team in Fulton County. Shan attended the Living with a Stroke seminar and Health and Diabetes meeting at the Fulton Senior Center.

**Livingston and Crittenden counties** – Sherry Morris accepted the position as Western Regional coordinator.

**Christian and Trigg counties** – Jennifer Walton resigned and moved out-of-state. FHCAs from the Western region are providing services for these counties at this time. FHCAs will be hired in the near future to serve these counties.

## **CLIENT ENCOUNTERS**

### **Actual situations encountered by our family health care advisors this past quarter**

My story this quarter is about a victim of domestic violence. I received a message on my answering machine that just said “I need help” and a phone number. When I returned the call, the client told me she had been beaten up by her husband. The client had moved to Kentucky from Ohio and needed help with housing, medicine, food and medical care. After seeing and talking to the client in person, I found out that she qualified for Supplemental Security Income (SSI). I called Community Based Services and when they investigated her case they found that she had received SSI in Ohio. The client thought she could not receive this same SSI in Kentucky. I made her an appointment with Social Security to get the address changed. I called the Big Sandy Community Action Program to get her assistance with housing and rent. I called the local health department to make her an appointment at the free health clinic and filled out all the forms for her medications. By being able to work with other agencies in my county, we were all able to help make a difference in this woman’s life. The client came back into the office with a big smile on her face; she was getting counseling and felt like she would be all right. That makes coming to work a pleasure.

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My tale this quarter is about a 55-year-old man and his 48-year-old wife. They had moved here from Ohio five years ago. One evening, the man started having chest pains and was taken to the hospital. He had had a heart attack and was taken from a community hospital to the University of Kentucky Hospital in Lexington. When the man got out of the hospital, they went immediately to the local Community Base Services office to get help. There he was able to get spin-down medical assistance to help pay for some of his hospital bill, but it did not have prescription coverage. They sent him to my office with his list of medications. I did an assessment on them both. Neither of them had been to a doctor in the five years they had lived in Kentucky. As I did the assessment on the woman, she told me she was a diabetic but had not taken her medicine since she had moved to Kentucky because they just could not afford it.

The first thing I did was find a doctor who had a sliding fee scale. I explained to them that without a doctor I would be unable to help get his medication. I made them an appointment and told them to follow up with me afterwards so we could process their applications for prescriptions.

They returned to see me about a week later. We filled out the prescriptive forms but the man did not have enough of his heart medication to last until the forms were processed. I called the doctor and got enough samples of Lipitor but they didn’t have Plavix, which was what he really needed the most. I called our local Christian Social Services and they were able to buy two weeks of Plavix for him.

This couple said they never imagined that something like this would happen to them. He had been working full-time and just in one day their whole life changed. They said they were happy to know that there was an agency that still cares so much for people. I am glad to be part of that agency.

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This quarter I had the pleasure of helping a wonderful couple in my county. It is hard to put into words how it made me feel being able to assist such grateful and wonderful people. It makes all the hard work that this job entails worthwhile.

Let me start by telling you a little about them. The wife is a retired school teacher, story teller, poet and accomplished writer. The husband is a very talented artist who has traveled abroad and has had his art shown all over the world. He has a studio in a building adjacent to his home. That is where this story begins. He has a lot of health problems and now is unable to stand or walk without assistance. He was able to obtain a scooter to help him become mobile again but there was one big problem – there wasn't any way of getting the scooter in and out of the home. The wife fixed a make-shift ramp consisting of sheets of plywood laid over very steep steps that led into their home, but it wasn't safe for either of them to use. She said if there was a fire she'd just open the door, give him a shove and hope for the best.

Their comedic way of looking at their everyday struggles is just part of what makes them so very special. It made me very sad to know that someone so gifted is unable to do what he loves because of lack of a safe way in and out of his home. Trips to the doctor and for necessities were major hurdles. If they made it off the ramp safely, they still couldn't get the scooter in their van. So with the help of Kentucky Homeplace and vocation rehabilitation, they have a new, safe ramp in and out of the home and soon will have all the modifications made to the van to get themselves and the scooter safely in and out of the vehicle. This will enable them to begin to travel again and enjoy life to the fullest. They have helped me see that we should never take the simple things for granted. Something like being able to get in and out of your own home is something most of us don't even think about. We just open the door and step out. But what if one day you couldn't – how would your life change?

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A client that I had helped with glasses called me. His step-son and daughter-in-law had a house fire and they had lost everything. I did a home visit where they were staying with his mother and step-father. The wife did not even have a pair of shoes. She said she told the neighbor she was just thankful to have her feet to put in shoes. I called the nearest Red Cross Center and found that they would have to call and set up a visit. I gave them the telephone number and the information I had found out.

I then called our Community Outreach Shelter and got telephone numbers for houses that were available to rent. They had always lived in the country and did not want an apartment or house in the city. We found them a house in the country to rent. I also called another agency that helped with clothing. These people were the most humble and thankful clients. They had no insurance and only his disability income. While doing the preventive care screening, I found that she had not had a pap smear and mammogram for some time. I waited for them to get settled in and got her an appointment at the health department for a pap smear and mammogram.

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I have a client who is mentally ill and has no family. He has been evicted from the last three places he lived. Apparently he moves and does not inform Social Security and then his check is returned and subsequent letters from SS do not get to him and he loses his check. I believe the last landlord must have thrown his clothes out because (no exaggeration) he has had the same shirt and pants on for 10 to 12 months and he also does not bathe, which gets him ejected from various restaurants and businesses in town.

I finally convinced him to let me call Social Security and we got his check reinstated. I also got him food on several occasions because he had nothing to eat. I got clothes and shoes donated and I gave him soap, deodorant, shampoo, razors, etc. Most days when I prepare my lunch, I fix extra and leave it on his doorstep in case he is running low on food. I saw him the other day and he actually had on the shoes and clothes I gave him and looked clean and had shaved. I overheard a lady in a local store talking about this gentleman and wondering to her friend why his appearance had improved so much lately. I was smiling to myself and secretly taking pride in the fact that maybe I had in some small way contributed to this improvement.

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I recently received a referral from a life-long friend for his daughter, who needed help with several medical issues. She is a 32-year-old divorcee who has diabetes, seizures, problems with depression and vision problems. She has a 12-year-old child and her only source of income was the sporadic child support from her ex-husband. She had a medical card, but that was taken away from her. After enrolling her in the program, I completed applications for all of her medications and an application for new eyeglasses. She now receives all her medications at no charge and has gotten her glasses. She just called me to advise that because her medical issues are now stable, she was able to get a job and completed her second week of work. She will be eligible for her company's health care and prescription plan and was happier and felt better than she had in years.

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During this quarter, I saw how important Kentucky Homeplace is in my community. I was able to see the quality of one person's life change dramatically in just a few weeks. I received a phone call from a home health nurse referring a patient with diabetes to me because he needed assistance with maintenance medication. He lives alone and has no transportation. I phoned and scheduled a home visit to complete the necessary paperwork.

I explained Kentucky Homeplace and the Patient Assistance Program to him. During the initial interview, I discovered that he was diagnosed with diabetes at age 22. His medical needs were insulin, needles and his wheelchair. He told me he had a few insulin needles left and that he was reusing them because he could not afford to buy more. Also, due to complications from the diabetes, he is recently a double amputee. His leg was not healing well from the surgery and his next appointment to see his surgeon was not until the following month. His power chair had quit working and he had been using a loaner chair for about three months. This chair was not in good condition. The battery would not stay charged and this limited his daily function capability. I told him I would help with everything I could. There were so many problems; I did not really know where to start. I left the home visit feeling frustrated but hopeful.

I contacted my supervisor and she was concerned about his situation. She began to work on getting diabetic needles for him. She notified me that she had been able to get some needles but they would have to be handled through a skilled nursing person. I contacted a home health nurse and she agreed to take him the needles. When she arrived at his home, she was also concerned about the open wound. She contacted the client's doctor and managed to get his appointment rescheduled for a sooner date. The physician diagnosed the amputee site as being infected. This diagnosis allowed for a home health nurse to do home visits and care for his wound and hygiene needs.

I contacted a local medical equipment supply company and explained his situation. This began the process of replacing his wheelchair. Within a few weeks, he had received a new motorized chair designed for his needs, the service of a skilled nurse, access to diabetic supplies, and assistance with transportation to his doctor visits. We are working on obtaining prescription coverage through Medicare D.

He says “thank you” every time I talk with him. He does not have long distance on his phone but he calls Homeplace’s toll-free number if he needs anything. Yesterday I returned his call and he wanted to let me know he was outside in his yard enjoying his tomato plants. Through networking and compassionate people, this has been a very rewarding experience for everyone involved.

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I received a call from a 32-year old male who was involved in an automobile accident. The accident left him with a neck injury and his doctor recommended physical therapy. He had no income or insurance to cover this cost. I contacted the physical therapist at the local hospital and found that the client met the qualifications for the disproportionate share hospital indigent patient assistance program. This allowed him to receive treatment for free. His doctor contacted the hospital and set up his treatment plan. Thanks to our program and his physician working together, the client is receiving much-needed medical care.

## KENTUCKY HOMEPLACE SITE INFORMATION

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