

***KENTUCKY HOMEPLACE  
QUARTERLY REPORT  
October 1 – December 31, 2006***



***UNIVERSITY OF KENTUCKY  
CENTER FOR RURAL HEALTH  
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*Front page photo:*

Breathitt County family health care adviser Julia Keene discusses health information with client Haven Fugate during a visit to his Jackson home. During 2006, Keene performed more than 7,800 services for nearly 400 clients; in the same time period, she accessed approximately \$390,000 worth of free medications on their behalf.



UNIVERSITY OF KENTUCKY

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December 2006

Dear fellow Kentuckians:

The Kentucky Homeplace program has continued serving the uninsured, underinsured and underserved citizens of Kentucky. Family health care advisors 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, Oct. 1, 2006 – Dec. 31, 2006: The number of unduplicated clients served was 5,343; the amount of medications accessed were \$5,555,197; and other services accessed totaled 287,035; and number of services was 86,034. The top client problems included high blood pressure, high cholesterol, diabetes, mental disease, and heart disease.

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 <http://www.mc.uky.edu/ruralhealth/LayHealth/Quarterly.htm>; October-December 2006. 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 cursive script that reads "Francis J. Feltner".

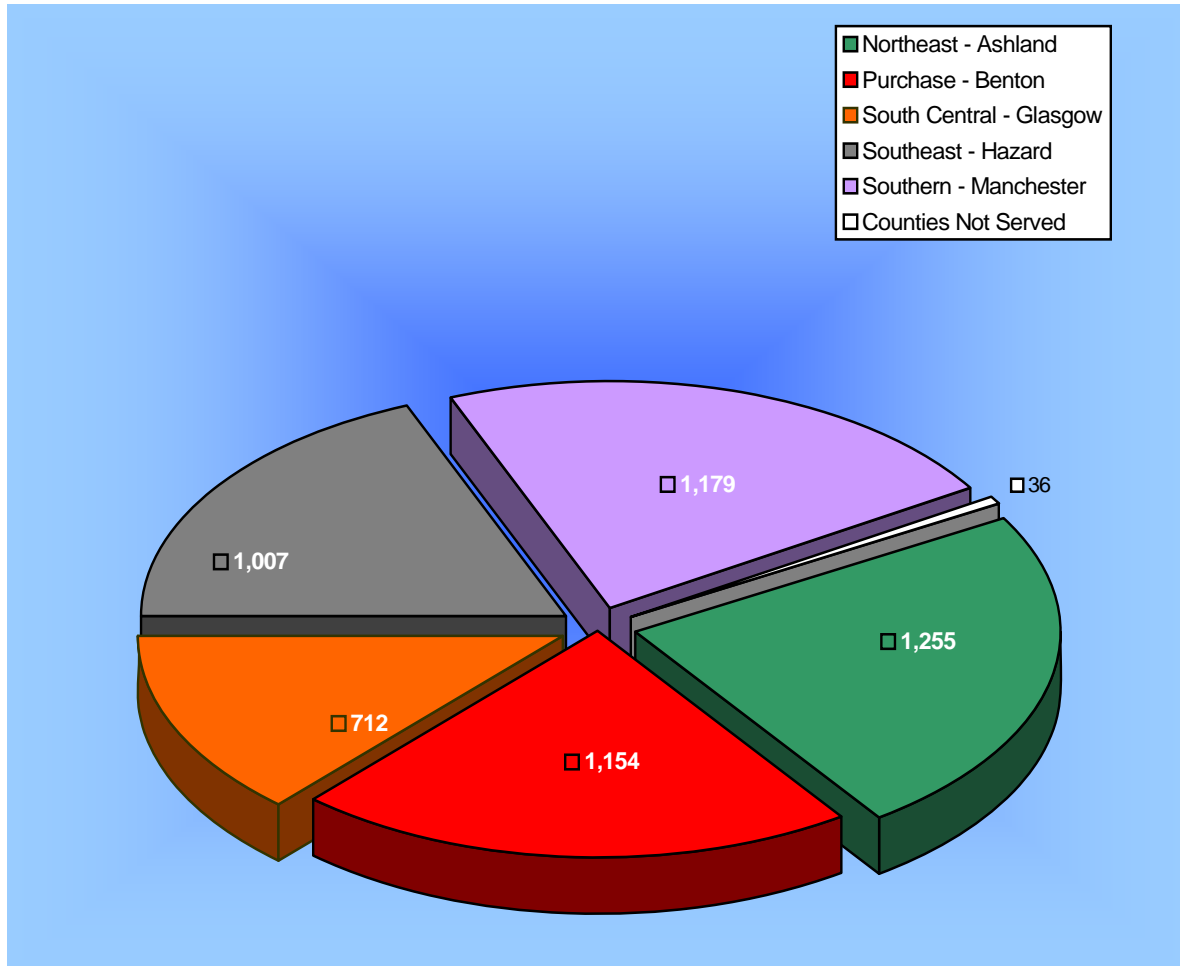
Fran Feltner, B.S.N.

Director, Lay Health Worker Division

<b>Poverty Levels of Homeplace Clients</b>					
<b>October 1, 2006 – December 31, 2006</b>					
Number of people in household					
	100%	101-150%	151-200%	200+%	TOTAL
1	1,797	3	0	0	1,800
2	2,262	55	4	1	2,322
3	643	28	1	0	672
4	321	17	2	1	341
5	125	6	0	0	131
6	36	5	0	0	41
7	12	2	1	0	15
8	5	4	0	0	9
9	2	0	0	0	2
10	2	0	0	0	2
11	1	0	0	0	1
21	1	0	0	0	1
23	1	0	0	0	1
<b>TOTAL</b>	5,208	120	8	2	5,338
Source: Data extracted from the Kentucky Homeplace Computer Database					
*Incomplete data on 5 clients					
<b><u>Total Clients 5, 343</u></b>					

<b>Age Distribution of Homeplace Clients</b>		
<b>October 1, 2006– December 31, 2006</b>		
Age Group	Number of Females	Number of Males
Under Age 1	0	2
Ages 1 to 4	1	2
Ages 5 to 12	8	15
Ages 13 to 14	2	2
Ages 15 to 19	35	9
Ages 20 to 24	82	35
Ages 25 to 44	664	387
Ages 45 to 64	2,068	1,161
Ages 65 to 74	331	209
Ages 75 to 84	194	71
Ages 85 and over	44	21
<b>Total:</b>	3,429	1,914
<b>Median Age:</b>	52.9	52.7
Source: Data extracted from the Kentucky Homeplace Computer Database		

## Total Clients Served By Region October 1, 2006 – December 31, 2006

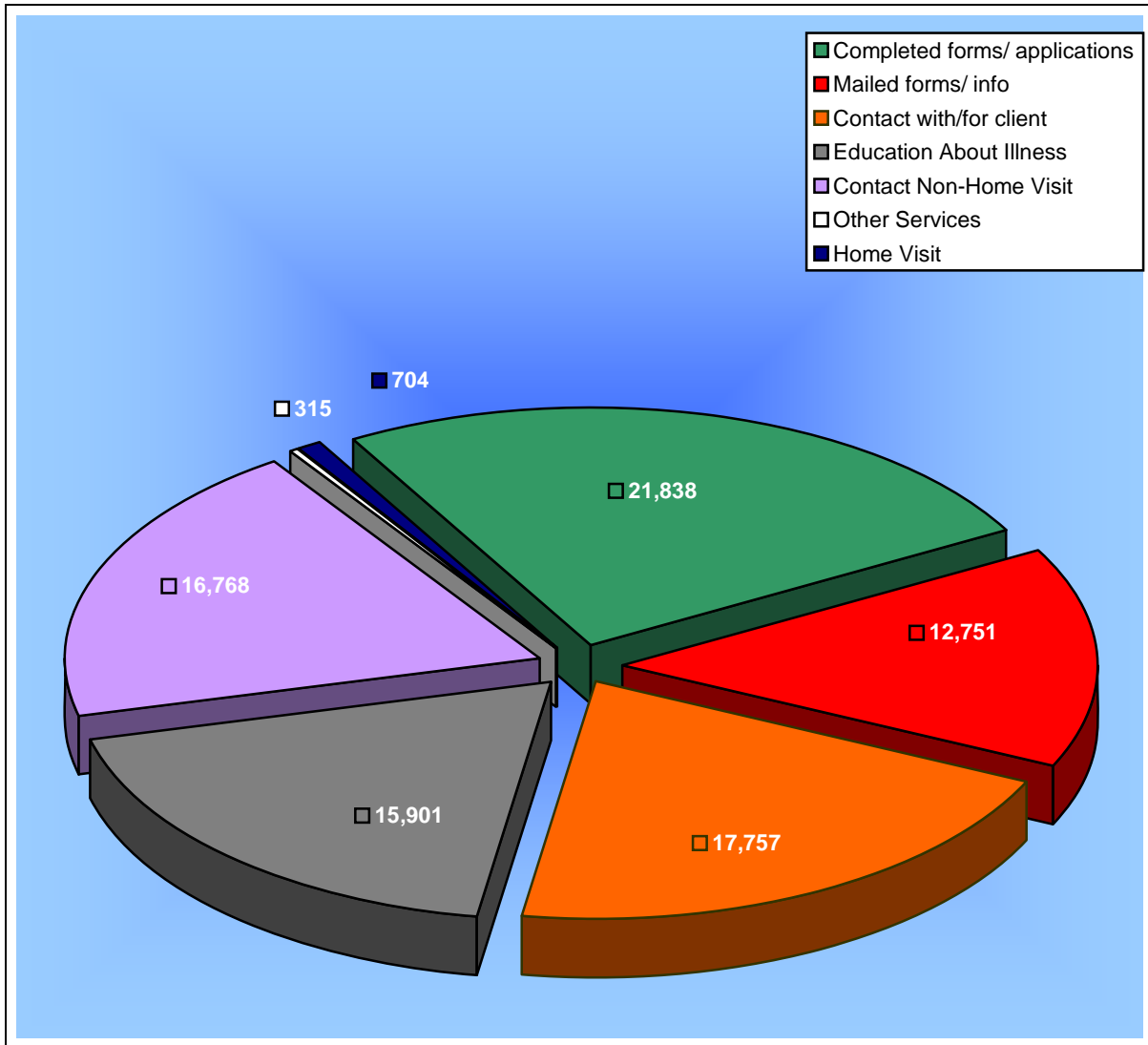


**TOTAL CLIENTS FOR QUARTER: 5,343\***

\*This total represents unduplicated clients – in the regional summaries, some clients are seen more than once each quarter and that duplicated number is reflected in their totals.

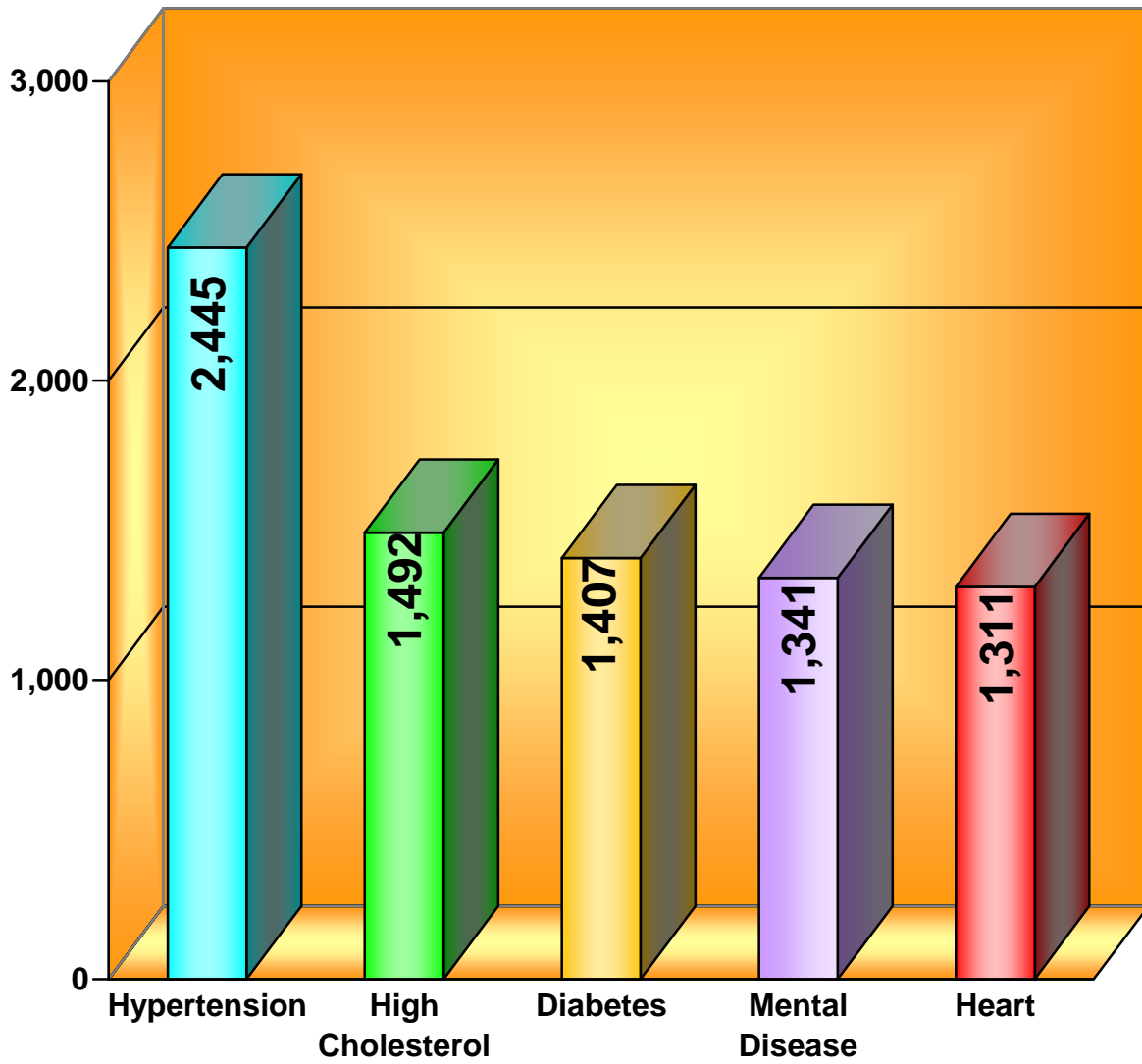
# Client Services

## October 1, 2006 – December 31, 2006

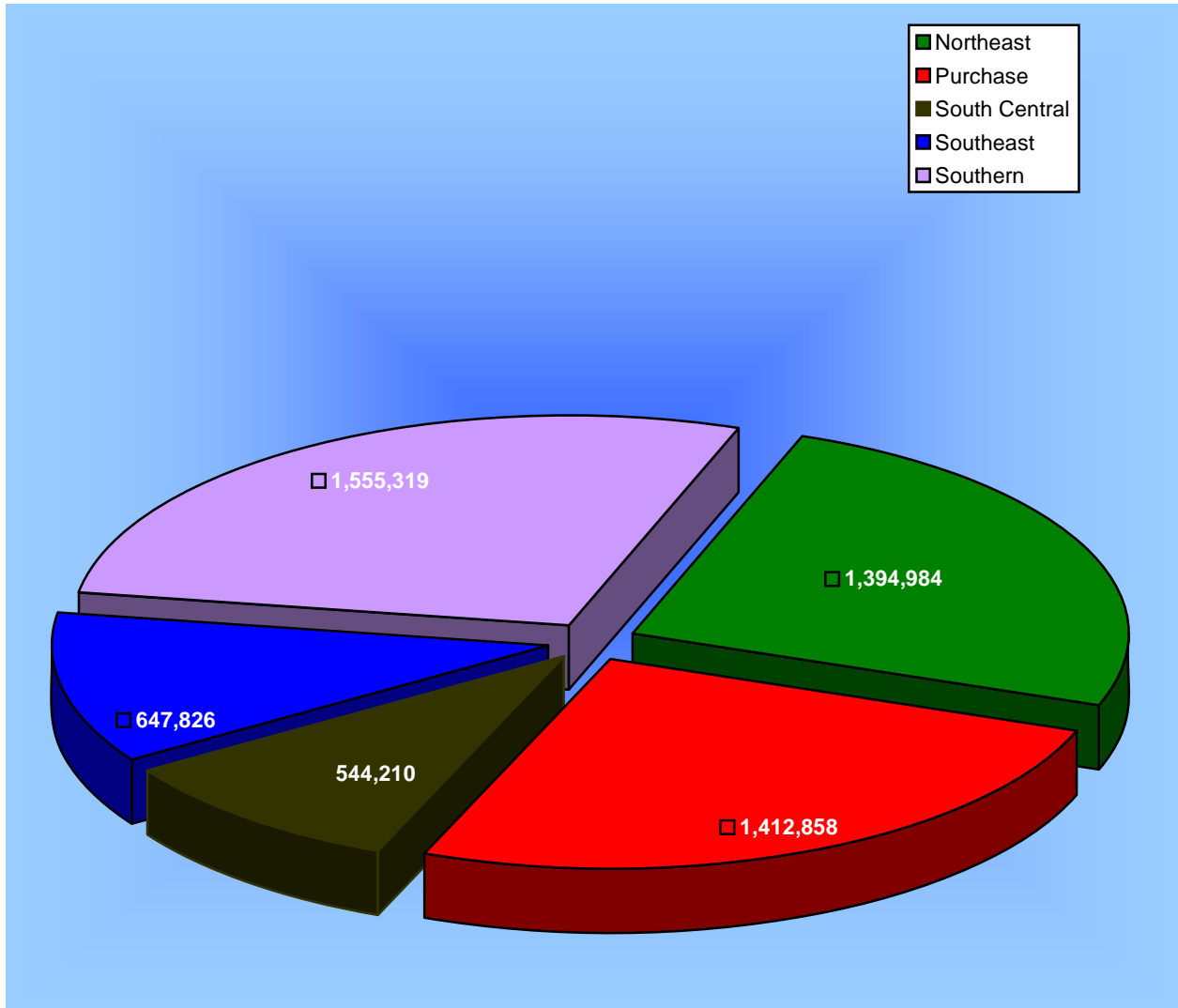


**TOTAL FOR THE QUARTER: 86,034**

## Top Five Client Problems By Condition October 1, 2006– December 31, 2006



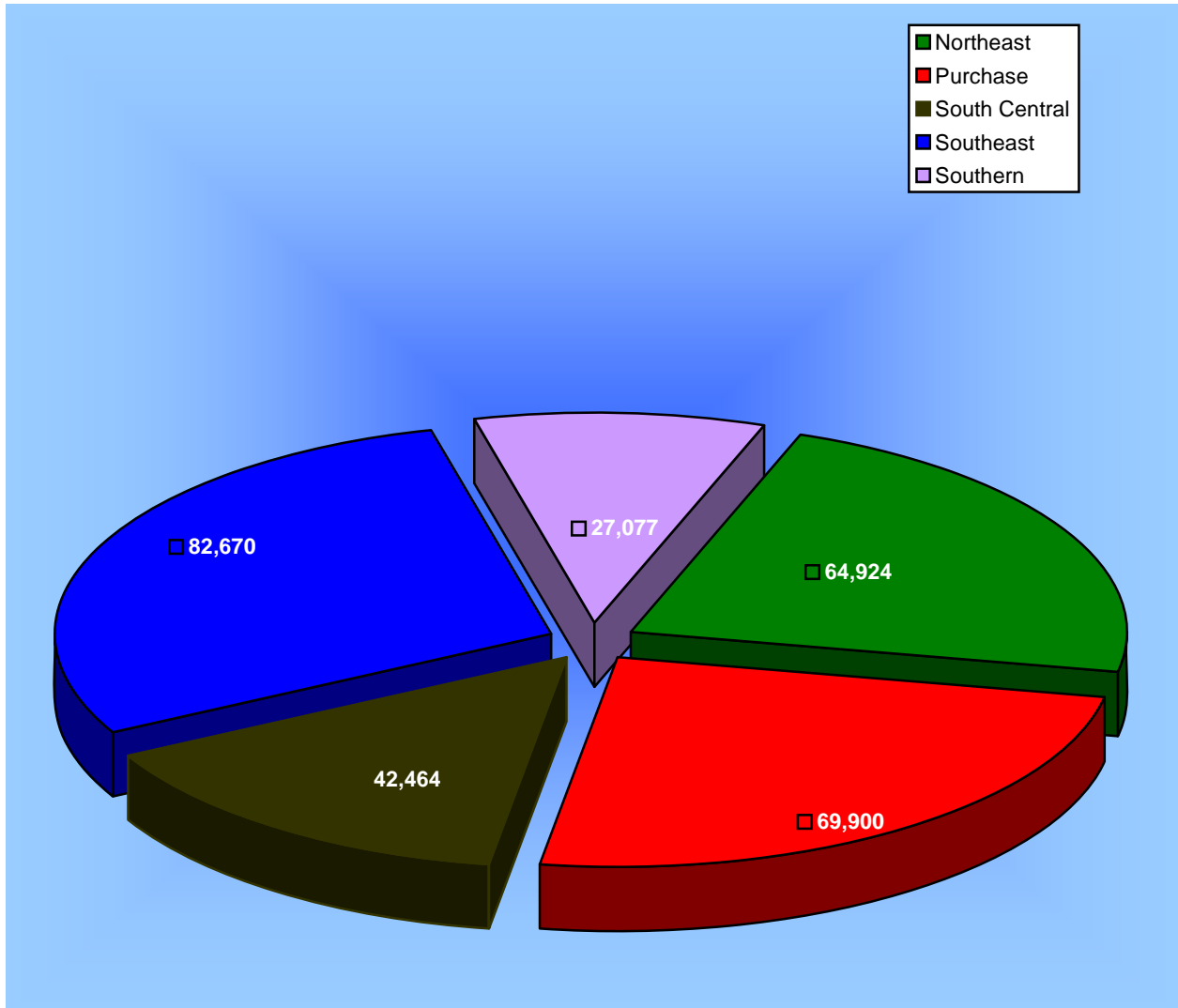
**Client Medications Value  
October 1, 2006 – December 31, 2006**



**TOTAL MEDICATION VALUE: \$5,555,197**



## Client Services Value October 1, 2006 – December 31, 2006



**TOTAL SERVICES VALUE: \$287,035\***

\*Services Value represents any services and supplies other than medications

## **REGIONAL SUMMARIES**

### **October – December 2006**

#### **Northeast Region**

**Deanna Jessie**  
**Kelly McCarty**  
**Teresa Judd**  
**Elizabeth Kelly**  
**Anita Salyers**  
**Janet Kegley**  
**Kim Sansom**  
**Judy Bailey**

**Regional Coordinator**  
**FHCA (Greenup)**  
**FHCA (Bath, Menifee, Montgomery)**  
**FHCA (Lawrence, Martin)**  
**FHCA (Carter)**  
**FHCA (Elliott, Morgan)**  
**FHCA (Boyd)**  
**FHCA (Johnson, Magoffin)**

This quarter our family health care advisors served 1,283 clients. A total of 22,258 services were provided to these clients, with service values of \$64,924. Nearly \$1.4 million of free medication was provided in this service area.

The Northeast Region received training with Our Lady of Bellefonte Hospital and Dr. Abdul Khoudoud on the links between diabetes and vascular disease. Fran Feltner, Kentucky Homeplace director, and Margaret Russell, administrative coordinator, presented updated policies and procedures to the staff.

FHCAs and/or the regional coordinator have attended the following meetings: Interagency meetings in Boyd, Bath, and Lawrence counties; Magoffin County Health Department monthly health screenings; Carter County Community Health Days; FIVCO Elder Abuse meeting; and, Our Lady of Bellefonte Mammogram Days.

Greenup County Judge-Executive Robert Carpenter invited Homeplace to participate in screening local residents for medical and social needs. Boyd County Judge-Executive Bill Scott allowed Homeplace to assist in the Boyd County Community Health Week. Carter County Judge-Executive Charles Wallace requested that Homeplace FHCAs assist in screening local needs as well. FHCAs Kelly McCarty, Kim Samson, Anita Salyers and Janet Kegley participated in these community health weeks and more than 1,000 people were screened.

#### **South Central Region**

**Beth Wells**  
**Peggy Gillock**  
**Janice Compton**  
**Velma Koostra**  
**Sharon Cherry**  
**Jeaneen Williams**  
**Lisa Lack**

**Regional Coordinator**  
**FHCA (Allen, Simpson)**  
**FHCA (Monroe, Metcalfe)**  
**FHCA (Warren)**  
**FHCA (Edmonson, Hart)**  
**FHCA (Barren)**  
**FHCA (Logan, Butler)**

This quarter our family health care advisors served a total of 722 clients. A total of 10,242 services were provided to clients in this service area, along with other services valued at \$42,464 and \$544,210 worth of free medication.

The South Central Region has had an active quarter with numerous activities. Our region is happy to welcome our newest FHCA, Lisa Lack. She is serving Logan and Butler counties and is a welcome addition to our staff. All Homeplace staff volunteered with community agencies over the Christmas holidays to provide food, gifts, and needed items to clients and families who were in need of assistance.

Diabetes education classes were provided for Homeplace clients by the Allen County and Barren River District health departments. There were 19 clients in attendance. Twenty-one clients from Barren and Warren counties took part in healthy cooking classes provided by the UK Extension Office.

In Monroe and Barren counties, we completed the summer Wellness Program and are getting geared up for the 2007 Wellness Program. Our walkers are anxious to get started and we plan for 2007 to surpass the success of the 2006 program. Janice Compton also assisted the Monroe County Cancer Coalition with coordination of the Monroe Women's Health Day. There were more than 200 people in attendance at the event, which featured health-related speakers, screening and education.

**Western Region**

**Sherry Morris**

**Shan Roberts**

**Pamela Hamilton**

**Mary Beth Rohrer**

**Tessa Vail**

**Carla Gray**

**Angelic Carpenter**

**Cynthia Phillips**

**Melissa Wynn**

**Jerrell Rich**

**TBH**

**Regional Coordinator**

**FHCA (Fulton, Hickman)**

**FHCA (McCracken)**

**FHCA (Graves)**

**FHCA (Marshall)**

**FHCA (Calloway)**

**FHCA (Ballard, Carlisle)**

**FHCA (Livingston, Crittenden)**

**FHCA (Lyon, Caldwell)**

**FHCA (Webster, Union)**

**FHCA (Christian, Trigg)**

This quarter our family health care advisors served 1,173 clients. A total of 21,504 services were provided to these clients, with service values of \$69,900. More than \$1.4 million worth of free medication was provided in this service area.

The Western Region chose to concentrate on breast cancer awareness as our main focus for this quarter. The FHCAs worked diligently to educate and encourage their female clients to have preventive screenings, such as mammograms and pap smears. We worked with many of our local health departments to help schedule these important procedures for our clients in need of these services.

For our male client population, we invited Joan Lang from the Kentucky Cancer Program to do an educational presentation on prostate cancer. FHCAs learned about some of the symptoms and screenings that may be used to diagnosis this increasing problem.

Even with the all the joy and festivities that come with the Christmas season, many times our thoughts turn to those who are less fortunate. This year, the Western Region decided to have a group project. Each FHCA was asked to pick a client they had worked with and help make the holiday season a little brighter for them and their families. This was done by seeking donations from the community and then preparing gift baskets or partnering with other agencies that already had assistance programs in place. It was an activity that everyone really enjoyed.

**Southeast Region**

**Lynn Whitaker**  
**Tammie Holbrook**  
**Nancy Combs**  
**Paul Vance**  
**Julia Keene**  
**Barbara Justice**  
**Kristie Childers**  
**Pollyanna Shouse**  
**Billie Johnson**

**Regional Coordinator**  
**FHCA (Letcher)**  
**FHCA (Perry)**  
**FHCA (Knott)**  
**FHCA (Breathitt)**  
**FHCA (Pike)**  
**FHCA (Pike)**  
**FHCA (Wolfe, Powell)**  
**FHCA (Floyd)**

This quarter our family health care advisors served 1,045 clients. A total of 16,030 services were provided to these clients, with service values of \$80,233. Nearly \$650,000 worth of free medication was provided in this service area.

As a group we worked hard to get food, clothing and gifts to several needy families throughout our region for Christmas. The Southeast Region also is pleased to welcome Billie Johnson as the new FHCA for our Floyd County office.

The Southeastern Region has presented the Homeplace program at the following locations: Ermine Senior Citizens Building, Jenkins Senior Citizens Building, Oven Fork and King Creek Senior Citizens Building, Family Resource Center in Wolfe County, and the Wolfe County Senior Citizens Building.

Lynn Whitaker attended a five-day supervisory training program held at UK in Lexington. Julia Keene met with Lifetime Potentials in Breathitt County and assisted some of their clients and with the Senior Circle. She also attended a health fair held at the Kentucky River Medical Center. We attended interagency meetings in Pike, Letcher, Perry, and Wolfe counties, as well as the Knott County Vision and Food Bank meetings.

Pollyanna Shouse holds Community Health Days at the Powell County Clinic bi-weekly. Kristie Childers has had several Community Days at the Belfry Public Library. Barb Justice and Childers met with the Partnership for Prescription Assistance at the Pike County Health Department.

**Southern Region**

**Helen Collett**  
**Michelle Ledford**  
**Nancy Brock**  
**Linda Thacker**  
**Shirley Madrey**  
**Paul Frederick**  
**Helen Curry**  
**Kendall Morgan**  
**TBH**

**Regional Coordinator**

**FHCA (Clay)**  
**FHCA (Bell)**  
**FHCA (Lee, Owsley, Estill)**  
**FHCA (Harlan)**  
**FHCA (Knox)**  
**FHCA (Laurel)**  
**FHCA (Leslie)**  
**FHCA (Jackson)**

This quarter our family health care advisors served 1,194 clients. A total of 15,278 services were provided to these clients, with service values of \$27,077, and \$1,555,319 worth of free medication was provided in this service area.

Our region continues to concentrate on providing better health care information to our clients by means of community health days. This quarter, Nancy Brock held two health days in Bell County; Helen Curry, in cooperation with Marymount Medical Center, hosted two community health days in Laurel County. On these days, several nurses checked clients' blood pressure and blood glucose levels. Clients were educated about proper foot care and nutrition and were offered a flu shot. These days were very successful, with about 75 people in attendance.

Linda Thacker continues to work with Marcum & Wallace Memorial Hospital on an ER initiative. Under this initiative, every person that is seen in the emergency room will be screened and referred to Homeplace for assistance.

Helen Collett, regional coordinator, attended supervisory training classes this quarter. This training offers valuable information to supervisors about the university's policies and procedures.

## **CLIENT ENCOUNTERS**

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

I received a call from a 52-year-old man who was in need of medication and assistance to help to pay for a colonoscopy. This man was employed part-time and did not have any medical insurance. In doing the initial screenings, he informed me that his mother had died last year from colon cancer and that his uncle had prostate cancer. He was more worried about the colon cancer and the test than he was in receiving his medication.

We did all the assessments and paperwork to send to his doctor for his medication. I called Vocational Rehabilitation and was informed that since he was employed, they would be able to pay for the test and if problems were found, they also would pay for treatment. Now he will be able to get his medication free, testing done for colon cancer and treatment, if any, afterwards. By getting his health issues taken care of, he will be able to continue working.

---

I received a phone call from a woman who had moved from Ohio to care for her aging parents. At first, she took a six-month leave from her job in Ohio, but because of her dad's diagnosis of dementia, she had to quit her job and stay here.

She had always been employed and had health insurance, but she lost her health insurance when she quit her job. She has many allergies and breathing problems. Without insurance, she was unable to buy her medicines. During the initial interview, I discovered that she had not had her annual mammogram and pap smear, so I referred her to the local health department for those services. In addition to helping her get all her medicines, I helped her find a provider here who she really likes.

She was very appreciative of the Homeplace program. She said she had always been self-sufficient, and because I made her feel at ease, she was not ashamed to ask for help.

---

I received a referral from UK Medical Center on a local resident who had just been released after receiving stents in their heart. This person had no income, no insurance and was living with a friend during their recovery. They had gotten a seven-day supply of medications from the hospital, but could not afford to purchase the remainder of the monthly regimen that had been prescribed.

After the initial interview, I followed up with the client's local physician. I was able to secure a 90-day supply of sample medications to tide them through till the patient assistance program began to supply their medicine. I then gave them instructions on how to apply for Social Security Disability and the hospital's patient assistant program.

---

Recently I received a phone call from a local hospital asking if I could assist one of its patients with obtaining her prescription medications after she was released from the hospital. That information and a phone number was all they gave me. After several attempts, I made contact

with the patient's daughter, who was acting as the caregiver for her mother, and arranged a home visit with them.

The client was an 84-year-old widow living on a small Social Security check from her late husband. She had Medicare A and B. She was taking 12 prescription medications, of which half were newly prescribed while she was in the hospital. The client had heart and respiratory problems and was also a diabetic.

While gathering her information, it became obvious that this client should have qualified for the Low Income Subsidy for Medicare D. I asked the client and her daughter if she had enrolled in Medicare D and if so, had she applied for the Low-Income Subsidy. Their response was a question, "What's Medicare D?" That response is more typical than one might think. I found that the client had never applied for SSI or Medicaid, for which she should have been eligible. This explained why she had not been automatically enrolled in a Medicare D plan with the Low-Income Subsidy. Together, with the client and her daughter, we formulated a plan for her to apply for the Low-Income Subsidy, enroll in Medicare D and a plan to work through the Patient Assistance Programs until she was able to activate her Medicare D plan.

Within three days of our meeting, the client had applied for the Low-Income Subsidy and began the process of enrolling in a Medicare D program. Within two weeks of that, the client received a card to purchase her prescription medications at the low-income pricing for Medicare D enrollees of \$2 for generic medication and \$5 for brand name medication. All of her prescribed medications were available on the formulary. The client learned she may also be eligible for additional income through SSI. The client is now able to afford all of her medications without financial assistance from her daughter.

---

My client was 62 years old and had been living with his daughter. Recently, she moved him into an apartment by himself and he had not received his Social Security check to cover his expenses.

After getting the referral, I did a home visit. I talked with his landlord and found he owed rent and had no food. I contacted Community Action about help with rent. I got him food, soap and detergent. I went to Community Based Services and got an application for food stamps. I took the application back to him and we filled it out, and then returned it to Community Based Services. He is now getting food stamps. I assisted him with calling the Social Security office and arranged for his check to be mailed to his new address. I also got him some housewares so he could fix his meals and be more comfortable.

---

I received a referral from the local hospital for one of its patients who had just been released but needed assistance. He had no insurance, no job, and no way to pay for the multiple prescriptions that had been given to him. When I went to his home, we filled out all the applications for his medications.

While I was there, his wife had told me that their home had burned the month before, and they were living in a small apartment until the house they were going to rent was ready. They didn't need any help with living arrangements at the time and were drawing enough food stamps for

themselves and their son, age 17. I made available to them information for clothing at our local Community Center, but they said they were OK with clothing due to some donations.

I asked the wife if there was anything I could help her with. She told me she was drawing disability and had Medicaid to help with her doctor bills and medications. Her disability check was their only source of income at the time, until her husband was well enough to go back to work. She said she would like to see if I could help her get dentures since hers had been destroyed in the house fire. I filled out the necessary papers for her and started calling resources. I first called a local dentist and his office asked me to call and see if I could find a dental lab that would donate the dentures and call them back if I found one. I called a dental lab in our county, explained to them the situation, and they agreed to donate a full set of dentures. I then called the dentist's office I had talked to and told them I had a full set of dentures donated and the dentist donated all his time and office visits as well. The dentist's office told me that, including the dentures, this was \$1,100 worth of services. I have since talked to the husband of this lady and he said she was thrilled to have her new dentures and could finally eat her favorite snack again – peanuts! Both of these people were truly appreciative of the help and I was glad to be able to assist them.

---

I had a call from a client who I had previously helped with medication. He was having eye problems and was seen by an optometrist in late summer and it was recommended that he have cataract surgery. This client had no insurance and wanted to return to work. I referred him to the Department for the Blind, where he was eventually screened and the surgery was performed in October for free. His vision is much better and he is now seeking employment.

---

A 32-year-old lady with a two-month-old baby called for assistance with medications. After making the initial assessment, I found she had Medicaid and a medical card. She was also receiving WIC (Women, Infants, and Children Supplemental Nutrition Program). The co-pay was causing a hardship, but she was not eligible for the patient assistance programs.

The client had been living with adopted parents but after she became pregnant they made her move out. She was trying to make it on her own. In trying to find out how I could help with other needs to free up funds for medications, I found that purchasing diapers was very expensive. I contacted a local church group who donated a supply of diapers and some baby items. The client was living in an attic apartment and paying more than \$300 for rent. I asked if she had applied for assisted housing and she said she could not pay for the security check that was needed. After a visit to the Housing Authority to pick up an application, we completed the form and I found a resource to pay for the security check. Once the necessary form is returned, we will file for housing assistance and hopefully be able to get her into better low-cost housing.

---

I had a 37-year-old male who was referred to me by Social Services. He has diabetes, high blood pressure, obesity, and sleep apnea. He told me he had not slept all night in months. He needed a Continuous Positive Airway Pressure (CPAP) machine that cost about \$2,000 but could not afford it. I called one of the local oxygen supply companies and asked them for help. They brought the free CPAP machine to my office with the mask and all the hoses he needed. I gave him a glucometer for his diabetes. He was very happy and called me a few days later to let me know the machine was really helping him and thanked me several times.

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I have a client who I had helped with medication in the past who now needed assistance with getting eyeglasses. She had prosthesis in one eye and had poor vision in the other. I set up an appointment for an eye exam so she could get glasses. She brought back a note from the optometrist that said she needed cataract surgery for her right eye and that she was in danger of being totally blind. She had no insurance, so the optometrist asked me to please explore all available resources to see if I could find someone to do the surgery free.

I called the McLean Eye Center in a neighboring town and got her on the list for the mission cataract program. I explained to them it was imperative that she get the surgery and explained the situation to them. I called and told her they would call her and set up appointment but I did not know when they would do this. About three months later, she called me and she was crying. She said she just wanted to thank me because she had had her surgery and has 20/20 vision in her eye. She had not realized how bad her vision was until they did the surgery. This is what makes my job worthwhile.

---

A friend referred a gentleman to me who was in need of assistance with medication, diabetic supplies and groceries. The only thing he did have was a roof over his head. He had worked in the coal mines for 16 years, but lost his job because he couldn't pass his physical. He had been a diabetic since he was 18 years of age and is now insulin dependant. He did not apply for his disability at the time he lost his job, because he was hoping to get his diabetes under control and go back to work. Since the loss of his job, his diabetes had gotten worse. He couldn't afford to buy his medication and had no family to help him. His mother left him when he was four years old and his father had passed away recently.

He had friends that would call or stop by to check on him occasionally. When they couldn't get in touch with him, they usually called the local police department and asked them to check on him. They had to break into his home on several different occasions and found him in a diabetic coma. On one occasion, he was disoriented from low blood sugar and was taken to the local hospital's emergency room. From there he was transferred to a psychiatric hospital. There was nothing mentally wrong with him; his diabetes had caused him to become disoriented. The resource worker there started the process of getting him signed up for Supplemental Security Income (SSI). He was referred to Social Services, but they were limited as to what they could help him with.

When I met him he was very quiet; he barely spoke. He looked at the ground and never made eye contact. He was very introverted. I explained to him the services our program offers and also let him know I could help. He said he could use some help, but looked at me sort of hopeless because others had told him the same thing and did nothing.

I signed him up for free medication through the Patient Assistance Programs. I took the forms to his doctor to get them signed because he had no transportation. I went to the Department of Community Based Services and signed him up for food stamps and also checked his eligibility for a Medicaid card. I talked to the mayor about helping him get city water because he lived in city limits and had no indoor plumbing. I spoke with the state representative about helping him get SSI, because during the time I was helping him he got a letter stating that he had been denied. I assisted him with his appeal forms for his SSI. I assisted him with getting diabetic supplies

through an indigent program. I went to the local food pantry and got him a food box and a voucher for some groceries. I asked if he needed anything else and he told me he could use some coal because he was completely out. I went to LKLP and signed him up for the Home Energy Assistance Program (HEAP) and they brought him a load of coal.

The day before Thanksgiving I went back to the food pantry and got him some more groceries. I had his name put on our Christmas tree and he got a \$50 gift card for groceries, a coat, hat and gloves. I was also able to get him a turkey and food box from a local church for Christmas.

Now when I see him, he talks a little more and will occasionally smile. He says that I have done more for him than any other organization. If there was ever anyone that needed their disability it would be this man. He has nothing and no one. Every time I talk to him my heart breaks. I'm afraid that if he doesn't get medical or financial help soon he is going to die. I will continue to check on him and assist him with everything I possibly can.

---

I had a lady call me concerned about the health of her parents. Her father had lung cancer but was still trying to work while taking chemotherapy, and her mother could not afford the medication she was supposed to be taking. I advised the daughter to have one of her parents call so I could schedule a home visit and see what services we could help them with.

After receiving a call from the mother, I visited their home. Upon my arrival, the parents informed me they had just received notice that their home was being placed in bankruptcy and that they would have to move by the first of January. They had also just been informed by the husband's doctor that his port was infected (the site where his chemotherapy was given). This family was in definite need of assistance; they seemed to have nowhere to turn.

First, I started on the husband's needs. I explained to the wife about various programs the American Cancer Society had that would help provide funds for medicine, travel and other needs the husband might have. I also told her about the Chronic Disease Fund that would help with insurance co-pays and other related expenses that occur with lung cancer. About that time, the husband came in from work and though you could tell that his battle with cancer was taking its toll, he had to continue to work so he could keep his insurance.

Next, we started on the wife's problems. She seemed overwhelmed. I could tell that the stress brought by her husband's illness was about to cause her to break. She said that due to the financial problems that they were having, she had not been to the doctor in more than a year. I told her I would contact one of the local resources to take care of her doctor visit and then we could start applying for her medications. At this point I told her I would be back later that afternoon with the applications and more information concerning the agencies that could provide assistance to her husband.

When I returned to the home later that day, I had an application for assistance through the Chronic Disease Fund, for co-pay and insurance assistance (which he has been approved for) and an application for a yearly \$500 grant with the Cancer Society to provide assistance. They were both so excited and seemed uplifted by the help I had provided. I was able to leave their home with a smile, knowing that I had been able to provide them some hope in a difficult situation.

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I have spent a lot of time this quarter to help a client who is legally blind and deaf with very poor living conditions. Her home was infested with roaches. The telephone repair man had reported her conditions to the local health department, but they were unable to assist her because the problem was inside her home. When I scheduled the home visit, I was not sure I could assist her either.

During the home visit I saw a roach crawl out of her refrigerator; I got up and killed it. It was at this point that I knew I was going to help her no matter what. The refrigerator was full of roaches (dead and alive); they were all over her food. As soon as the home visit was finished I started my search for her a new home.

This was a long process! I found her a new apartment in a secure building. I was able to find resources to help her with a deposit and get her first month's rent paid. Working with others, I was able to get her "new" furniture donated. A local pastor helped by getting people to help clean the pieces of furniture and clothing that were salvageable. The church also helped move her to her new apartment. I was even able to get funds for her to stay overnight at a motel while all this was under way. She is on the waiting list at our local PACS office for homemaking services and Meals on Wheels. She is now settled in her new home.

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This quarter I acquired a gentleman with a diagnosis of multiple sclerosis as a client. His condition had deteriorated to the point that he has lost control over most of his motor skills; so much that they released him from prison into the custody of his parents, who are trying their best to take care of him. They assist in bathing, feeding and other daily functions many of us take for granted. They have to lift him from bed and into his wheelchair, which is very difficult on his mother, who has several bad discs in her back.

The client was in the process of applying for a medical card, but needed assistance with medications until the application was approved. We completed patient assistance applications to help with this problem.

The parents felt that if he had a hospital bed it would make his transfer into his wheelchair much easier. With no insurance and no money to purchase a bed, the family was unsure where to turn. I sent out a plea to the other workers in my region, called the Center for Accessible Living and other agencies, but was not having much success. Then I thought that one of the local hospitals or nursing homes might have an old bed that they could donate. I called my county judge-executive and he gave me the name of lady to call that works for the county-run hospital. They had a bed in the hospital basement that my client could use for as long as he needed – or at least until his medical card was approved and he could get one of his own.

I then called my client's father to inform him that we had a hospital bed and all he needed to do was call the hospital and make arrangements to pick it up. He was so appreciative. He couldn't believe that someone had actually gone to the trouble of helping him, since he had run into so many brick walls with other agencies from which he sought assistance.

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## KENTUCKY HOMEPLACE SITE INFORMATION

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