



Community Health Asset Mapping (CHAMP)

Ashe County NC



Ashe Missionary Baptist
Association

FaithHealthNC
A Shared Mission of Healing

Background of Mapping Process

- ▶ **African Religious Health Assets Program**
 - ▶ Developed a PIRHANA tool for identifying and understanding the positive things in communities
 - ▶ **Community Health Assets Mapping Partnership or CHAMP** was adapted from PIRHANA, developed in Memphis and South Africa to aid in aligning and leveraging assets to improve healthcare outcomes
 - ▶ **CHAMP Ashe County** is being used in North Carolina as part of our **FaithHealthNC** movement

Mapping Workshop Process

- ▶ In this community, we held one workshop and interviewed Seekers:
- ▶ **Health Provider Workshop (9-20-17):** people and organizations providing religious, health, and social services related to providing care to those in the community, broadly defined
- ▶ **Seeker Interviews (9-21-2017):** conducted by trusted liaisons to the Ashe County community



Workshop site, date, and participants

- ▶ Provider Workshop September 20th 2017 at Bald Mountain Baptist Church, Ashe County
- ▶ 15 participants



Seeker Interview Site and Participants

- ▶ Trusted leaders from FaithHealth NC conducted interviews with 22 seekers on September 21st 2017

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Study Area Background

Basic Stats(US census bureau 2016 estimates)

- Population: About 26,924 people

Median Age: 46.6 years (national median-
37.8)

Percent of Population : Non-Hispanic
White=97.1% ; Non-Hispanic Black= 0.9%;
Latino=5.3%; Asian=0.6%; Native
American= 0.3% Two or more races=1.1%

Living in Poverty: 20.2%

High School Education: 82.2%

- Determined area boundary is Ashe County, NC





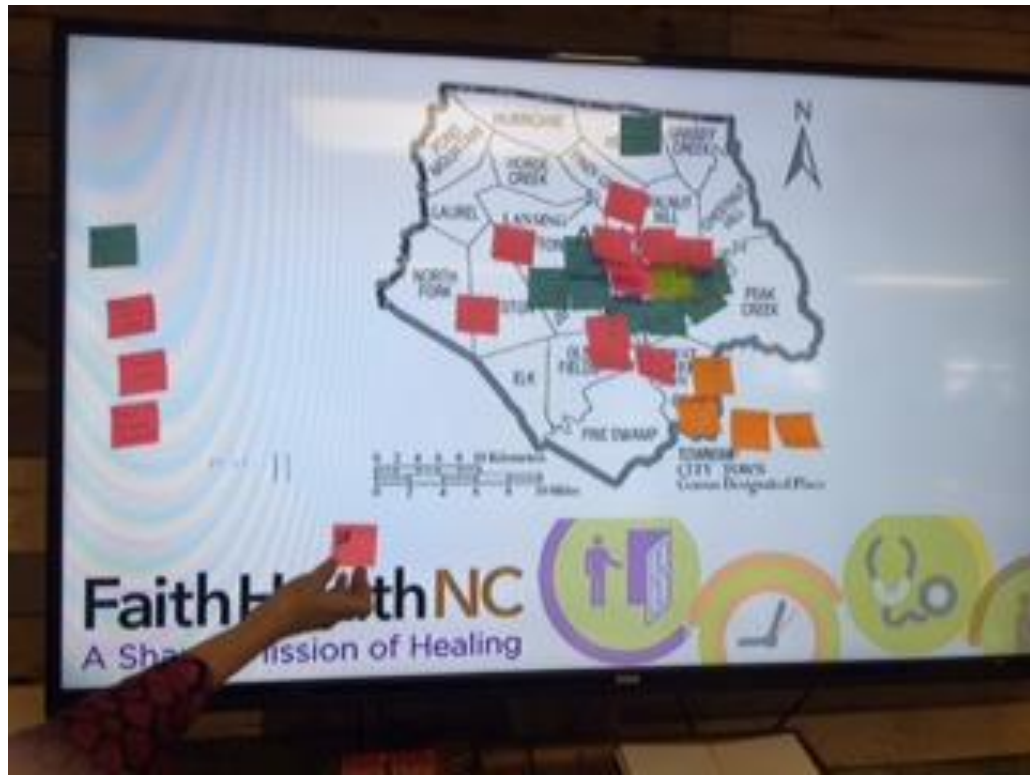
Provider Workshop Facilitators

Dr. Teresa Cutts, Rev. Emily Viverette, Mrs. Diane Dixon, Rev. Leland Kerr

Provider Participants



- ▶ **15 People Participated**
- ▶ 5 males, 9 females, 14 Non-Hispanic Whites; one did not identify



What
Providers put
on the map:
24 Entities

Factors that work to promote health/well-being in your community

- ▶ 1) Transportation - Ability to travel to appointments, or to have providers travel to those in need
 - ▶ 2) Accessibility - increase in the number of clinics, including funding and building trust
 - ▶ 3) Geographic Locations - where clinics are located in relationship to those for whom services are being provided
 - ▶ 4) Collaboration - interagency communication
 - ▶ 5) Education- Health literacy as well as addressing stigma
 - ▶ 6) Food Supply - nutrition resources
 - ▶ 7) Volunteers to Fill the Gap - use of faith communities and individuals to "fill in gaps" of care

Providers' Health Services Matrix

- ▶ 8 Not for Profits
- ▶ 2 Governmental/federally qualified services
- ▶ 4 Faith Based Programs
- ▶ 2 For Profit
- ▶ 6 Educational
- ▶ 4 Case Management
- ▶ 3 Nutrition Services
- ▶ 1 Physical Support Program (added during conversation)
- ▶ 6 Advocacy
- ▶ 4 Front line responders support
- ▶ 2 Counseling
- ▶ 2 Outpatient
- ▶ 2 Inpatient
- ▶ 0 Device Management
- ▶ 1 each, protection, Emergency financial Assistance , parental education, clothing/food, medical care in home, emergency response, transportation, community referrals
 - ▶ MISSING: Daymark, Northwest Regional Housing Authority, CareNet of Wilkes, Seby B Jones Cancer Center, Ashe County Transit Authority, and Mountain Hearts.

Spidergram: Social Networking

Has Relationship

- ▶ Sharing Center(2)
- ▶ DSS(3)
- ▶ Ashe Really Cares
- ▶ Seby Jones Cancer Center(2)
- ▶ APCE(2)
- ▶ AMH(2)
- ▶ Hospitallity House (2)
- ▶ ACTA
- ▶ LTC Facilities (2)
- ▶ Senior Services
- ▶ EMS
- ▶ Caldwell Hospice
- ▶ FaithHealth Referral

Wanted Relationship

- ▶ Sheriff's Department
- ▶ MMMA
- ▶ Coalition for the Homeless
- ▶ Ashe Really Cares(3)
- ▶ Medi Home Health
- ▶ Churches (2)
- ▶ FEMA funds
- ▶ DSS(3)
- ▶ Senior Center (2)
- ▶ HUD (2)
- ▶ Ashe Medics

Organizations of which you are the most proud

Providers

- ▶ **Ashe Really Cares**
- ▶ Sheriff's Office
- ▶ App Healthcare
- ▶ EMS
- ▶ School Based Health Program

Seekers

- ▶ **Ashe Really Cares**
- ▶ Sharing Center
- ▶ DSS
- ▶ Riverview Community Center
- ▶ Jefferson Methodist

Biggest Winners Were....

➤ Providers:

- ▶ Sheriff's Office - "Go where the need is."
- ▶ EMS - "Go where the need is."
- ▶ Ashe Really Cares- helped to reduce food insecurity from 1/4 of the county to 1/6. They were also noted to "walk alongside" their participants and are very collaborative with other agency communities.
- ▶ The School Based Health Center -cared for all Middle School children, and for helping to reduce absenteeism, and is a "safe place"
- ▶ App Health Care - provides care, including Dental, to the underserved.

Biggest Winners Were....

➤ Seekers:

- ▶ Ashe Really Cares- food and clothing
- ▶ Sharing Center- food
- ▶ DSS- meds and electricity
- ▶ Riverview Community Center - food
- ▶ Jefferson Methodist - food ministry

Seeker Interview Sites and Participants

Total: 22 Seekers

- ▶ 19 females and 3 males
- ▶ 21 Caucasian, 1 Hispanic
- ▶ Mean age=43.3 years, median age = 50.5 and ages ranged from 20-73
- ▶ Interviewers: Diane Dixon, Angela Clapp
- ▶ Site: Ashe Really Cares

Seekers Needs

- ▶ Access to dental and eye care
- ▶ Housing
- ▶ Limits related to Medicaid
- ▶ Food quality and access
- ▶ Communication between providers
- ▶ Transportation
- ▶ Financial assistance

Seekers: Gaps in Service

- ▶ Dental and vision care
- ▶ Difficulty finding providers who take Medicaid
- ▶ Travel outside of county for specialists
- ▶ Lack of affordable housing
- ▶ Continuity of care across providers
- ▶ Housing
- ▶ Food
- ▶ Transportation needs

Seekers: Advice to Authorities

- ▶ Need for dental and optometric care
- ▶ Need for resources for the homeless and mentally ill
- ▶ Care for those who do not meet criteria for Medicaid or Medicare
- ▶ Better communication between providers
- ▶ Address the drug problem in Ashe County
- ▶ More availability of providers

Next Action Steps

- ▶ Development of a resource guide: include referral criteria for each agency
- ▶ Identify ways to develop an organization grid which is either online or “quick access”
- ▶ Determine how other agencies are currently collaborating, and make contact with them: i.e. Ashe Health Alliance, and Collaborative Resource Connection
- ▶ Identify ways to communicate through distance, i.e.: teleconference
- ▶ Speak with Ashe County Transportation Authority (ACTA) around transportation needs
- ▶ Identify sources of reluctance in utilizing transportation options available: Ashe has largest transportation budget in state
- ▶ Invite representatives from ACTA and Veterans Administration

Questions/Comments

- ▶ Based on the findings you heard today:
 - ▶ *What stands out most strongly for you?*
 - ▶ *What similarities/differences and potential alignments do you see between Providers and Seekers?*
 - ▶ *What might be additional next steps?*
- ▶ *How would YOU be willing to help all of our county and stakeholders move forward on the ideas we talked about today?*



THANK YOU in helping
all gain **ACCESS** to
Better Health and Well-Being!

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