

Annual Summary June 2023 - June 2024

Transforming
Community Care
through Care
Coordination &
Partnership



HEALTHY FRESNO COUNTY



## Community Health Workers (CHWs) or Promotores (as) provide care coordination services to residents of Fresno County at no-cost!

## **Health Disparities Overview**

Fresno County's Health Disparities Program is an initiative within the Fresno County's Department of Public Health (FCDPH). The Health Disparities Program provides care coordination services through partnering agencies who deploy CHWs to provide care coordination service interventions in underserved communities throughout Fresno County. In addition, CHWs will provide health education materials in a culturally and linguistically sensitive manner on a variety of topics.

Examples of care coordination services may include assisting residents with: finding a medical provider, health insurance, transportation, employment, mental health, family planning, amongst other resources and community linkages depending on a participant's individual needs.

## **Partnering CHW Agencies**

Listed below are the 9 partnering agencies who deploy CHWs to provide care coordination services to the underserved communities:

- Aria Community Health Center
- Black Wellness and Prosperity
   Center African American
   Coalition
- Centro Binacional para el Desarrollo Indígena Oaxaqueño
- Centro La Familia Advocacy Services
- Cultiva La Salud
- Exceptional Parents Unlimited
- Easterseals
- Reading and Beyond
- West Fresno Family Resource Center

## **Community Impact**

1,810

Total Clients Enrolled 2,107

Total Assessments Completed\* 1,100

Total
Outreach
Events That
CHWs
Participated
In

8,724

Total
Resources
And Direct
Services
Provided By
CHWs

6,521

Total
Engagements
Completed by
CHWs\*\*



## **HOW IS DATA OBTAINED**

Partnering agencies of The Health Disparities Program mobilize CHWs who develop community relationships with clients and help identify client needs through utilization of a social determinants of health (SDoH) needs assessment. Information from the assessment is entered and tracked through Care Coordination Systems (CCS), a shared and secure electronic health record system. This centralized data management system can track gaps and opportunities through person level data specific to expressed client needs.

## **Snapshot of the Program**

- Partnering agencies who provide
   care coordination services to the community
- CHWs have been implementing SDoHscreeners and providing services to clients
- Centralized data management
   system that embeds a SDoH screener to capture person level data
   Initial SDoH screening sections that collect client data on Income,
- 7 Transportation, Housing, Food, Health, Personal Safety, Children and Family Planning during enrollment

<sup>\*</sup>Total assessments completed are identified by the number of initial SDoH assessments completed and follow-up assessments completed by the CHWs.

<sup>\*\*</sup>Total number of client engagements completed by CHWs which may include tele-visits, home visits, office visits, and other community locations where CHWs interact with enrolled clients.

## Community Health Worker Snapshot

1,810

Total Clients
Enrolled by CHWs

## CHWS IDENTIFIED CLIENTS THROUGH:

- COVID-19 related outreach and community events
- Community events and canvassing efforts
- Internal referrals from other FCDPH programs
- Internal referrals from other programs within the partnering agencies
- Community referrals sent to FCDPH and partnering agencies

The average impact of a single CHW in one year.

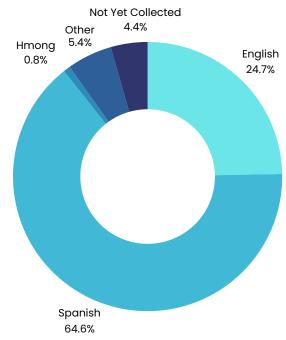
service needs opened

- service needs opened per client
- client engagements per client
- 6 months of care per client

**22:1** client to CHW ratio



Figure 1. Client Preferred Language



**Figure 1.** Language spoken is identified as the percent of enrolled clients who indicated their preferred language as Spanish (1,170 clients), English (447 clients), Hmong (15 clients), Other (98 clients), and Not Yet Collected (80 clients).



## **Partner Highlights**

#### **Aria Health Center**

Aria Community Health Center is a federally qualified health center that provides medical, dental, optometry, and specialty care to underserved rural communities across multiple counties within the San Joaquin Valley, including Fresno, Kings, and Tulare. The Fresno County clinics are located in Riverdale, Coalinga, and Fowler. CHWs are based at the Riverdale location but travel 30 minutes to an hour south to Coalinga and Huron. They not only encourage community members to seek primary medical care but also offer health education and referrals to other local programs and services that address SDoH. The primary populations they serve include Hispanic or Latino individuals and undocumented population.





## BLACK Wellness and Prosperity Center African American Coalition

BLACK Wellness and Prosperity Center - African American Coalition is a community-based organization (CBO) dedicated to advocating for Fresno's Black community and advancing maternal health equity to improve infant health outcomes. CHWs primarily serve the populations in downtown Fresno and at Fresno City College. They not only refer community members to inhouse specialized services, such as the BLACK Doula Network and BLACK Fatherhood Legacy, but also connect them to other local programs and services that address SDoH.

## **Health Disparities Program Client Demographics**

As CHWs enroll and engage clients, they collect a release of information form and obtain demographic data that assists the enrollment process as they provide services to the client.

Demographic data collected may include race/ethnicity, gender, pregnancy, zip code, age, marital status, income, and/or insurance information. Collection of client demographic data is dependent on client consent and the amount of information shared by client is helpful in providing individualized services in a more culturally and linguistically sensitive manner.

Figure 2. Client Overview



Figure 2. 9 out of 10 clients enrolled into the Health Disparities Program are people of color and more than half (61.05%) are ages ranging from 21 to 49 years old.

Figure 3. Gender

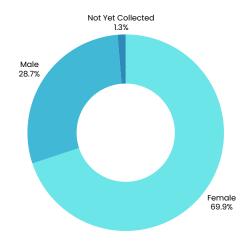


Figure 3. Gender is being presented by the percentage of enrolled clients identifying as Female (1,266 clients), Male (520 clients), and Not Yet Collected (24 clients).

#### Figure 4. Race/Ethnicity

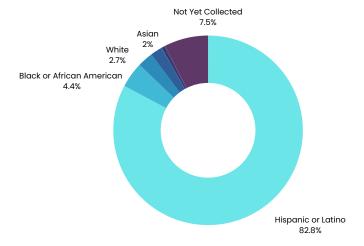


Figure 4. Race/Ethnicity is being presented as the percentage of enrolled clients identifying as Hispanic or Latino (1,498 clients), Black or African American (79 clients), White (48 clients), Asian (37 clients), Two or More Races (8 clients), Other (4 clients), Native Hawaiian/Pacific Islander (1 client), and Not Yet Collected (135 clients).

#### Figure 5. Zip Codes

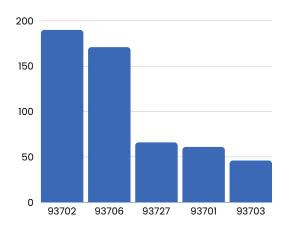


Figure 5. The top 5 zip codes of enrolled clients include 93702 (190 clients), 93706 (171 clients), 93727 (66 clients), 93701 (61 clients), and 93703 (46 clients). All zip codes are within the Fresno County's Healthy Priority Index (HPI)\* Quartile 1.

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## **Partner Highlights**





## Centro Binacional para el Desarrollo Indígena Oaxaqueño

Centro Binacional para el Desarrollo Indígena Oaxaqueño (CBDIO) is a CBO created by and for Indigenous communities. CBDIO's programs focus on language justice, immigration, and worker empowerment. They primarily serve agricultural workers in fields, dairies, and ranches in Fresno and Madera counties, including areas such as Caruthers, Kerman, and Selma. CHWs also provide outreach to areas up to an hour away such as Huron. CHWs are particularly successful in processing Medi-Cal applications for community members, especially with the recent Medi-Cal expansion. CBDIO also offers health education and referrals to other local programs and services that address SDoH.

## Centro La Familia Advocacy Services

Centro La Familia Advocacy Services (CLFA) is a CBO that assists crime victims, supports families and children, promotes health and wellness, encourages civic engagement and provides other community services. CHWs are bilingual and deliver services in a manner that is respectful and culturally sensitive. CLFA operates three neighborhood centers in the Southwest Fresno area and one in the City of Kerman. CHWs conduct outreach primarily in the Eastside of Fresno County, serving rural communities such as Sanger, Del Rey, Parlier, Reedley, Orange Cove, Yokuts/Squaw Valley, and Selma. They not only refer community members to their in-house services, including parenting classes, the victim services department (covering domestic violence sexual assault, human trafficking and other serious crimes), and low-cost immigration services, but also offer health education and referrals to other local programs and services that address SDoH.

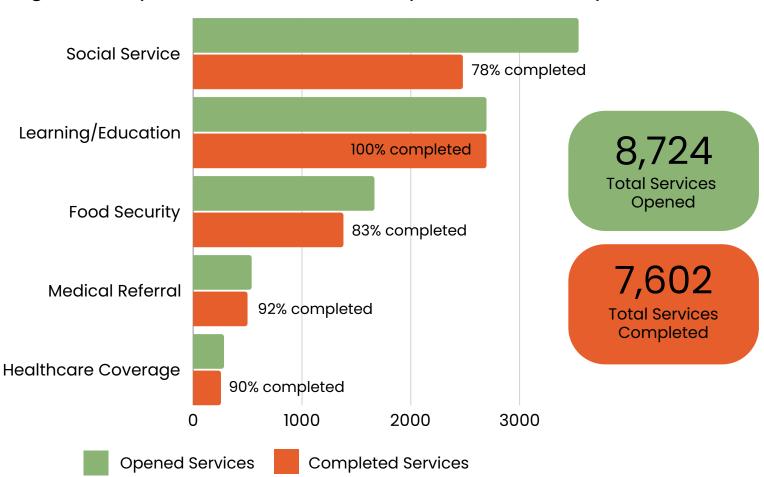
## **Overview of Service Outcomes**

Once CHWs enroll a client, an initial assessment is conducted and based on identified SDoH needs, service need areas are then opened. Services needs are used to track the progress of each client's service need in the centralized data system. Client service areas are dependent on what needs are being expressed by the client (i.e., food insecurity, housing, transportation, insurance, medical home, etc.).



Social Service
was the largest
opened and
completed
service need
for clients.

Figure 6. Top Client Service Areas Opened and Completed



**Figure 6.** The top 5 opened services areas are shown by the number of client needs opened in green: Social Service (3,541), Learning/Education (2,695), Food Security (1,666), Medical Referral (538), and Healthcare Coverage (284). In comparison to the completion of the listed service areas completed shown in orange: Social Service (2,748), Learning/Education (2,695), Food Security (1,387), Medical Referral (500), and Healthcare Coverage (256).

## **Partner Highlights**

#### Cultiva La Salud

Cultiva La Salud (Cultiva) is a CBO dedicated to promoting public health and advancing health equity among Latino community members in the San Joaquin Valley. Cultiva supports initiatives that encourage healthy eating and active living. CHWs primarily conduct outreach in the rural communities of Parlier, Reedley, and Orange Cove. They educate community members about healthy school meals, the Immigrant Latina Women Network (which builds resilience and mitigates the risk of domestic violence), and the SaveTheSeñoras program, which assists elderly women facing food insecurity, isolation, and high levels of poverty. Participants receive a free weekly food box delivered to their doorsteps. CHWs are particularly effective in encouraging physical fitness through free Zumba classes and in supporting farm-to-table healthy eating through their partnership with the Community Life Garden. They also offer health education and referrals to other local programs and services that address SDoH.







#### **Exceptional Parents Unlimited**

Exceptional Parents Unlimited (EPU) supports and strengthens families and children with unique needs through early learning and intervention services. These services include child assessments, evidence-based mental health treatment, parent engagement groups, family empowerment training, and Individualized Education Program (IEP) clinics to families and children with disabilities. CHWs assist community members in the City of Fresno in both English and Spanish, providing health education and referrals to other local programs and services that address SDoH. EPU is particularly successful in hosting a monthly food distribution and vaccine clinic at one of their neighborhood resource centers. The primary populations they serve are ethnic minorities facing economic disadvantages.

Easterseals Central California is a CBO subcontracted with EPU that provides early intervention services, behavior intervention services for autism and other neurodevelopment differences, and a family empowerment program to support families with children who have a disability. CHWs conduct outreach primarily in the Eastside of Fresno County, including Sanger, Del Rey, Reedley, and Orange Cove.

# Community Health Workers Outreach Efforts



9 community partners working together to provide community linkages to Fresno County residents during local events.

During these outreaching events, 58,931 community residents were reached through resources and education while visiting the CHWs information table.

58,931

Community
residents
reached through
outreach events

1,110

Community
outreach events
where CHWs were
present to provide
wraparound services
to Fresno County
residents

200

39,819

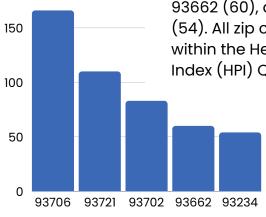
Health education materials provided to the community

In addition, 39,819 health education materials were provided to community residents who attended the events. The top health education materials provided during the events were COVID-19 and Vaccines, Healthcare and Medical Expansion, Diabetes, Hypertension, and Mental Health amongst other topics.

**710**Clients enrolled into the Health Disparities
Program through outreach events

From these outreach events, 710 community residents were enrolled into the Health Disparities Program. 39% of total enrolled participants came from these outreach events to receive care coordination services, at nocost. Additionally, CHWs were able to gauge the interest and reconnect with residents following the event.

The top 6 zip codes of outreaching events include: 93706 (166), 93721 (110), 93702 (83), 93662 (60), and 93234 (54). All zip codes are within the Healthy Place Index (HPI) Quartile 1.



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## **Partner Highlight**







## **Reading and Beyond**

Reading and Beyond (RaB) believes that strong families build strong communities. RaB provides comprehensive, tailored case management, and two-generational programming that works well with children and families to strengthen education, health, and well-being to create sustainable social and financial security. While RaB is known for their afterschool leadership, their programs range from pre-conception to employment training and health literacy to prosperity coaching. RaB assists families through complex navigation support systems to access necessary resources to empower all residents to be resilient and self-reliant. RaB population of focus areas are in City of Fresno (93701 and 93702) providing services of Family Health Clinic Days, Vaccination Clinics, biannual Block Party, Coffee with CHWs, and Wellness Wednesday workshops (English and Spanish) about health topics and seminars related to SDOH.

## Leveraging Partnerships & Sharing Syndromic Surveillance Information

The Health Disparities Program continues to work alongside FCDPH's epidemiology team to assess syndromic surveillance trends and provides information for CHWs to share out to the community. Syndromic surveillance assists in identifying emerging health trends and diseases and early detection of outbreaks that are impacting Fresno County and the utilization of emergency health services. In addition, the team has aided and leveraged with CHWs to continue to connect community members to a primary healthcare provider for non-emergency healthcare needs while also linking members to healthcare coverage when needed for on-going health needs.

## <u>Emerging Health Trends Identified and Shared by CHWs to the community:</u>

- Stiff Neck
- Measles
- Valley Fever
- Heat Related Illness and Heatwave
- Mental Health and Anxiety
- COVID-19
- Myalgia and Hemorrhagic Anomalies
- Cold and Flu Season
- Respiratory Syncytial Virus (RSV)
- Hospitalization Rates
- Diarrhea
- Botulism
- Increased Emergency Room Visits



#### STRENGTHENING PARTNERSHIPS

## **Referral Partnerships**

The Health Disparities Program developed a CHW Network Referral partnership between two Fresno County Department of Public Health's Divisions to enhance program services by providing community care linkages and access to resources.

#### **Referral Partnerships and Outcomes:**

- A partnership was established in early September 2023 with the Community Health Division's Tuberculosis Clinic and 17 clients have been served to date.
- Another referral partnership was established in early June 2024 with the Public Health Nursing Division and 26 clients have been serviced to date.



## **Rural Mobile Health**

The Fresno County Rural Mobile Health (RMH)
Program provides no-cost medical services and care coordination services to Fresno County's rural communities by improving health equity through key partnerships. In partnership with the RMH
Program, the University of California San Francisco School of Medicine in Fresno (UCSF-Fresno), Saint Agnes Medical Center (SAMC), and Tzu Chi Mobile Clinic utilize mobile health units to deliver medical and/or vision services directly to residents.
Additionally, the Health Disparities Program provides wraparound care coordination services by delivering culturally and linguistically appropriate health education during the RMH program events.

#### **CHW Outcomes During RMH Events:**

- 91 RMH events where CHWs were present providing services
- 5,279 health education materials were provided to residents
- 5,462 community residents were reached during RMH events
- 79 clients were enrolled into the Health Disparities Program

## **Partner Highlight**























#### **West Fresno Family Resource Center**

West Fresno Family Resource Center is a CBO with a strong record of empowering and supporting disadvantaged communities in Southwest Fresno and the Eastside of Fresno County, including Selma, to achieve optimal health and well-being. CHWs refer community members to on-site programs and services such as economic empowerment, educational advancement, health and wellness, character leadership and youth empowerment. CHWs assist community members in multiple languages including English, Spanish, and Hmong (both verbally and in writing) and provide health education and referrals to other local programs and services that address SDoH. WFFRC is particularly successful in offering free CPR training, cooking classes, and fitness classes tailored for seniors and adults. Additionally, CHWs have partnered with the Department of Social Services offices in West Fresno and Selma to help community members apply for benefits such as EBT, Medi-Cal, Cash Aid, and more.

These efforts would not be possible without the support from our local partners and community members.

## MEET OUR HEALTH DISPARITIES PROGRAM PARTNERS FROM 2023-2024:



















## Thank you!



To connect with Fresno County Department of Public Health - CHW Network:



CHWNetwork@FresnoCountyCA.gov

