



Hope Clinic Community Based Outreach Plan

Findings and Future Considerations

Duke Global Health Institute
Student Research Training Team



Duke
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July 11th, 2022

Today's Agenda

Introduction

Meet the team
and project

Patient Mapping

Geographic
distribution of
Hope Clinic
patients



Interviews

Strengths and
Opportunities
for Growth

Proposed Outreach Plan

Key Components
and Next Steps

Introduction

Meet the Project Team



Adey Harris
*Psychology & Global
Health*



Nick Haddad
*Environmental Science
& Global Health*



Advika Kumar
*Biology & Global
Health*



Rujia Xie
*Public Policy &
Global Health*

Meet the Project Team

Community Partner



HOPE CLINIC

Yolanda Cristiani, LPN

Faculty Mentors

- *Dr. Diana Silimperi, MD*
- *Dr. Sumedha Ariely, PhD*

Project Goals and Activities

Develop an Outreach Model

01

Who is being served? Who isn't?

- Patient Population
- Opinions and Needs
- **Method: Patient and Staff Interviews**

02

Where do they live?

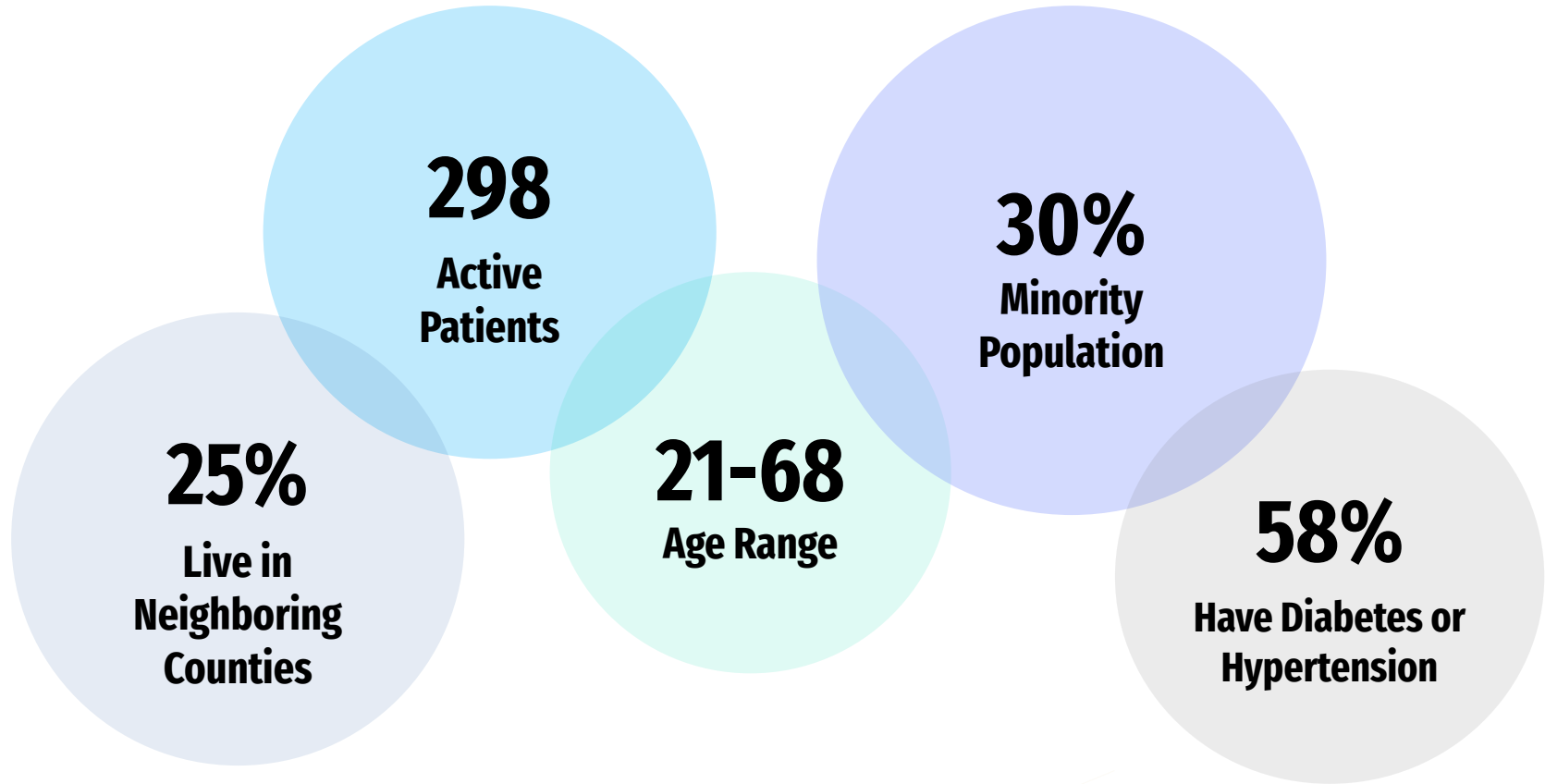
- Geographic Trends
- **Method: Patient Mapping Tool**

03

How will it work?

- Mobile Health Units
- Community Health Workers
- **Method: Partner Conversations and Literature Search**

Active Patient Population



Interviews

Central Themes

Concerns

Potential
Improvements

History and Experiences

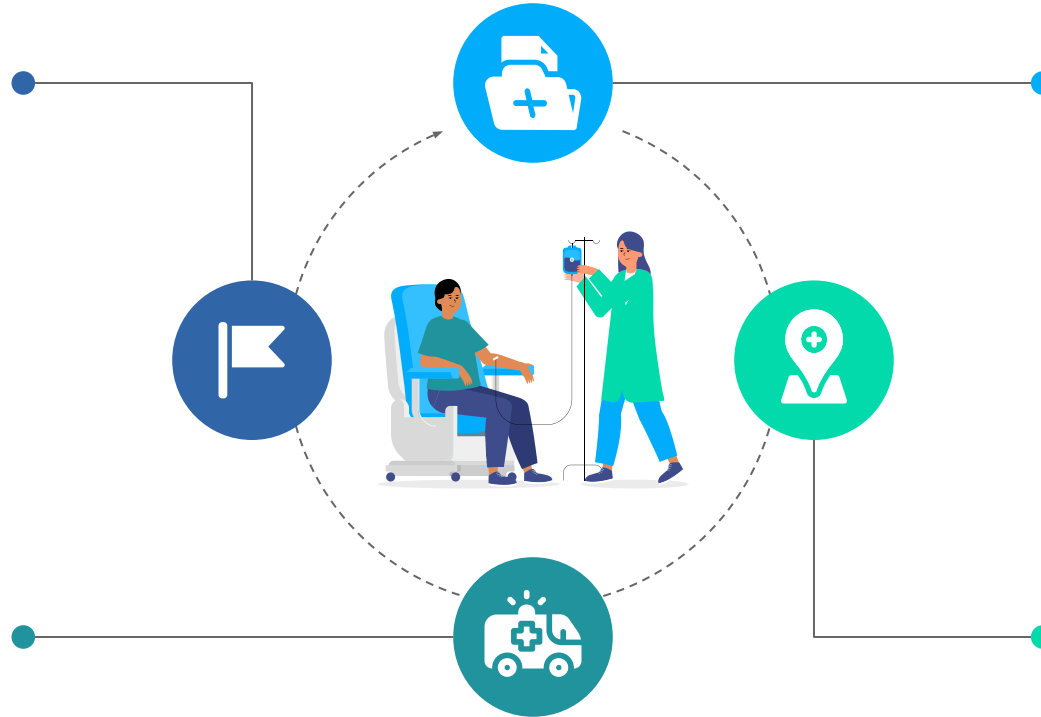
Time with Hope
Clinic and Values

Feedback on Outreach Plan

Thoughts on
mobile health
units and CHWs

Barriers to Access

Transportation,
Clinic Hours, and
Care Continuity



Patient Interviews (n = 20)

History and Experiences



6.28 years

Average time as patient

Satisfied

With current care practices and communication with providers

Health advice

Want more assistance managing their conditions and meeting their goals

Barriers to Access



3 minutes to 2 hours

Range of travel times to clinic via car, foot, or hitchhike

Unreliable

Many patients don't have consistent transportation

33%

Patients interviewed who can't get to specialty appointments

Feedback on Outreach



Positive

Reception to mobile health units and CHWs

Privacy

Patients want private rooms at mobile health units

Check-ins and resource referrals

Most sought-after CHW tasks

Concerns



Support and Continuity

Disconnect with providers

Comprehension

Some materials emphasize negatives – share what patients CAN do instead

Eye and dental care

Patients express difficulty staying up-to-date on exams and checks

Staff Interviews (n = 7)

History and Experiences



- ✓ **Sense of Community**
- ✓ **Diverse Backgrounds**
- ✓ **Dedication**
To Hope Clinic's mission and patients

Patient Needs and Barriers



- ✓ **Access**
To transportation, specialized medication for diabetes, and hypertension management
- ✓ **Expanded Hours**
- ✓ **Compassion**

Feedback on Outreach



- ✓ **Enthusiastic**
Reception of mobile clinic plans
- ✓ **Intended involvement**
Desire to be a part of mobile outreach plans

Concerns



- ✓ **Continuity of care**
No patient follow-up
- ✓ **Equipment**
- ✓ **Staffing**
Need a full-time provider
- ✓ **Medical Records**
Need to switch to electronic records
- ✓ **Hours**
Limited clinic hours

Patient Mapping Tool



74 views

Published 46 minutes ago



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Patient Database



Resources



- Food Lion
- Walmart Supercenter
- Piggly Wiggly
- Paul's Produce

... 28 more



Healthcare Facilities



Fire Stations



Fire Districts



Churches

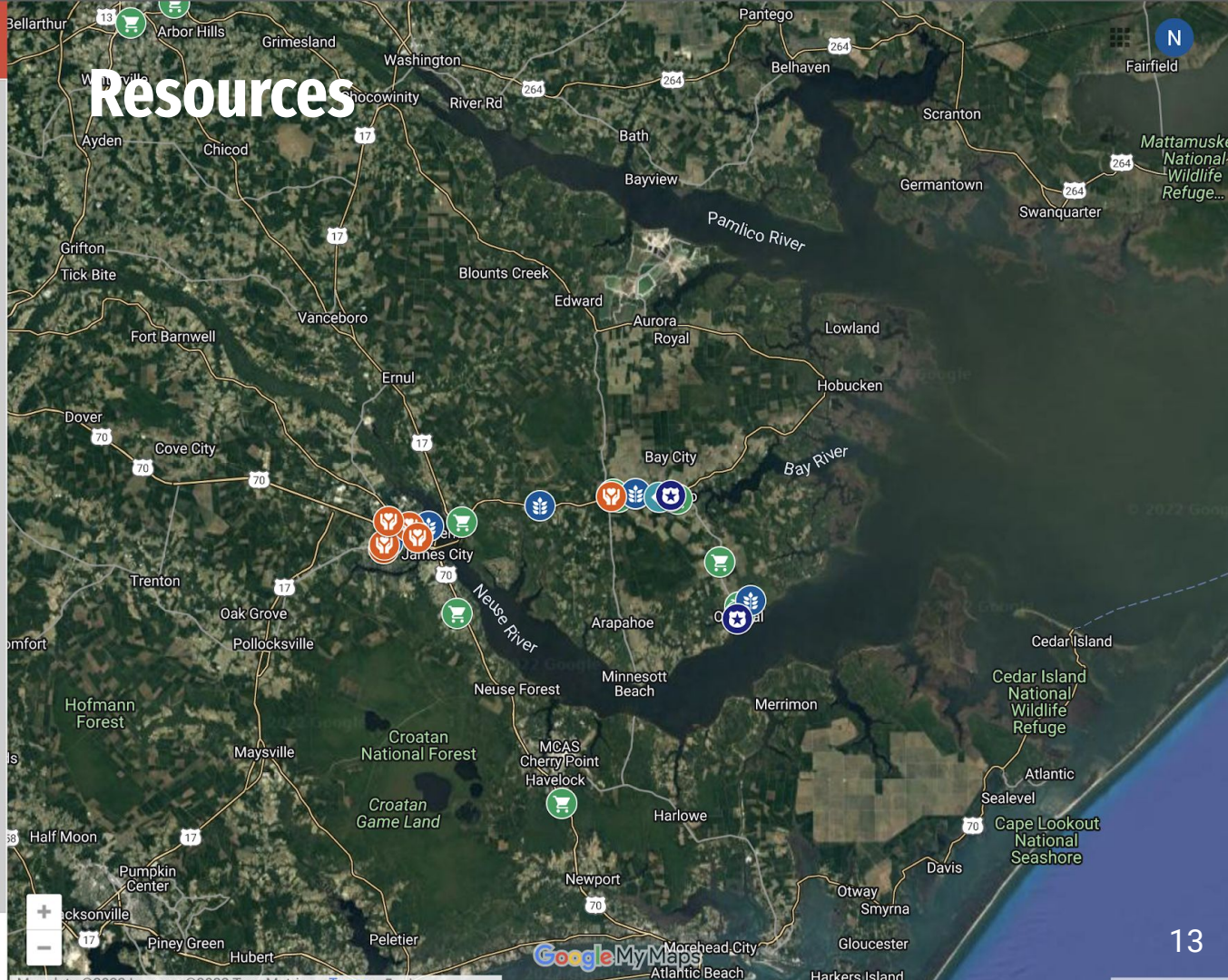


Travel Time to Clinic



Clusters

Resources



74 views

Published 46 minutes ago

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EDIT



Patient Database







Resources



Healthcare Facilities



-  Hope Clinic
-  Pamlico County Health Department
-  Pamlico Community Health Center
-  CCHC Pamlico Medical Center

... 9 more



Fire Stations



Fire Districts



Churches



Travel Time to Clinic



Clusters

Healthcare Facilities



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Patient Database



Resources



Healthcare Facilities



Fire Stations



All items



Fire Districts



Craven

Pamlico

Beaufort



Churches

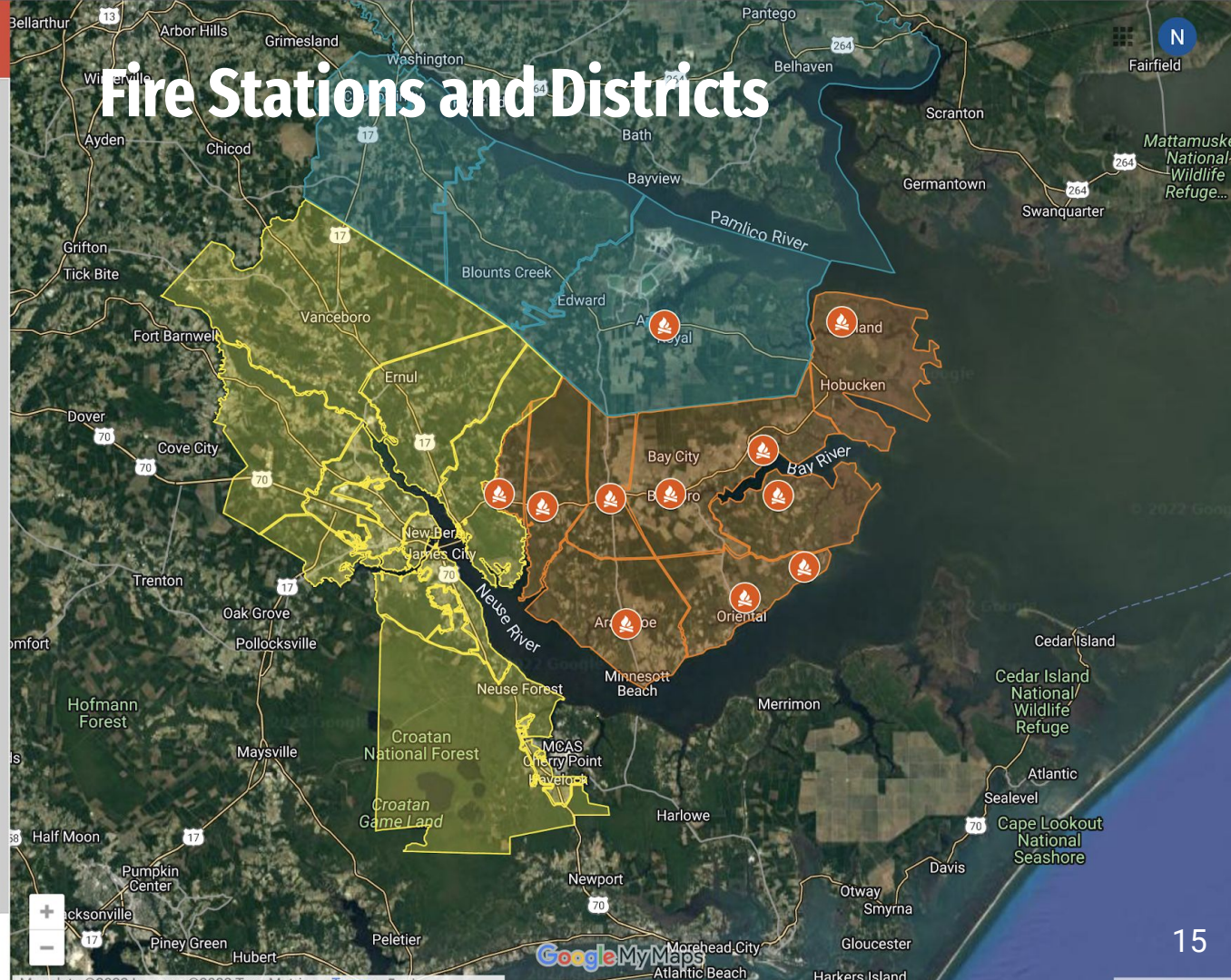


Travel Time to Clinic



Clusters

Fire Stations and Districts



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EDIT



Patient Database



Resources



Healthcare Facilities



Fire Stations



Fire Districts



Churches



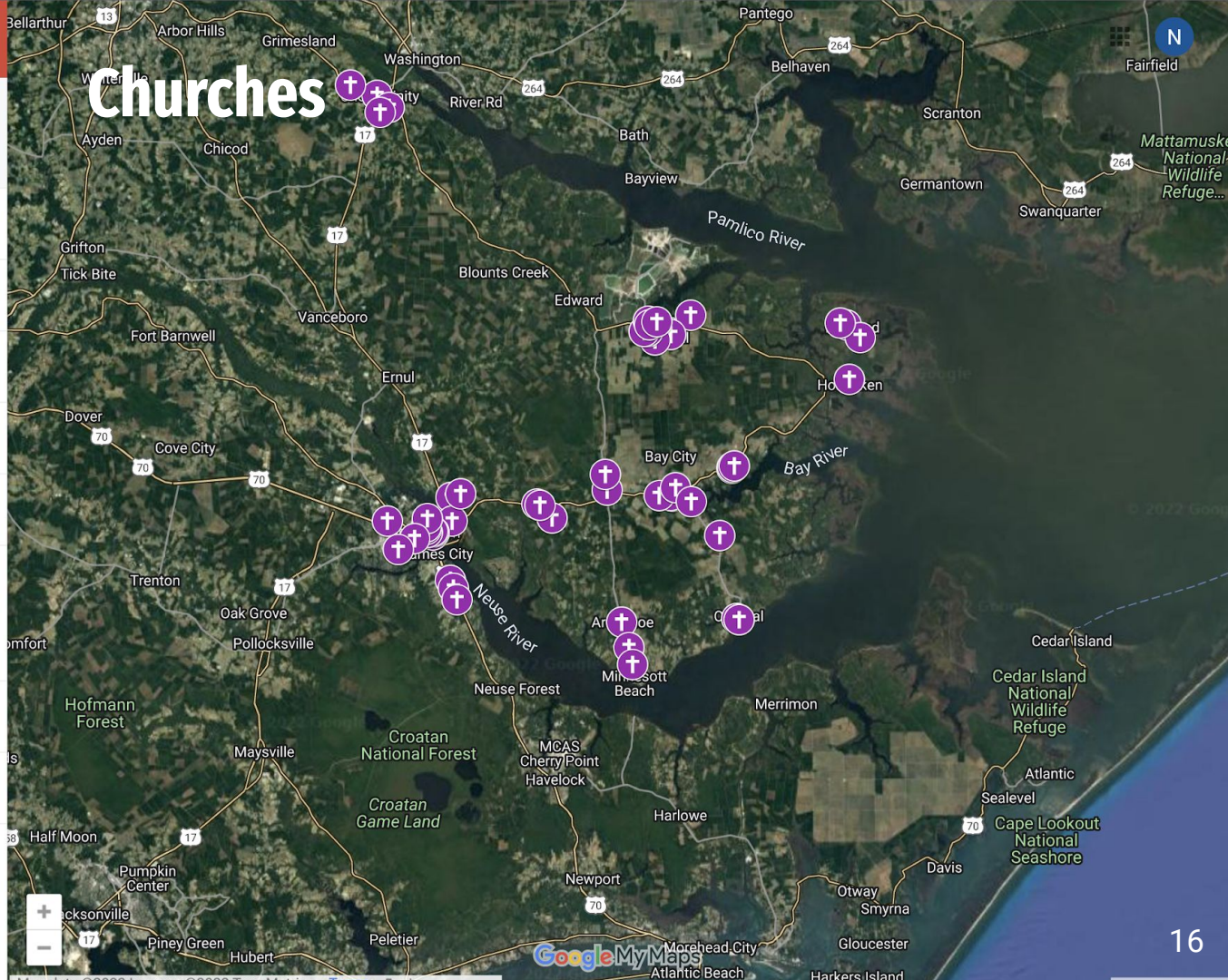
✚ All items



Travel Time to Clinic



Clusters





76 views

Published seconds ago



SHARE

EDIT



Patient Database



Resources



Healthcare Facilities



Fire Stations



Fire Districts



Churches



Travel Time to Clinic



15 minute drive



30 minutes drive



45 minute drive



15 minute walk



30 minute walk

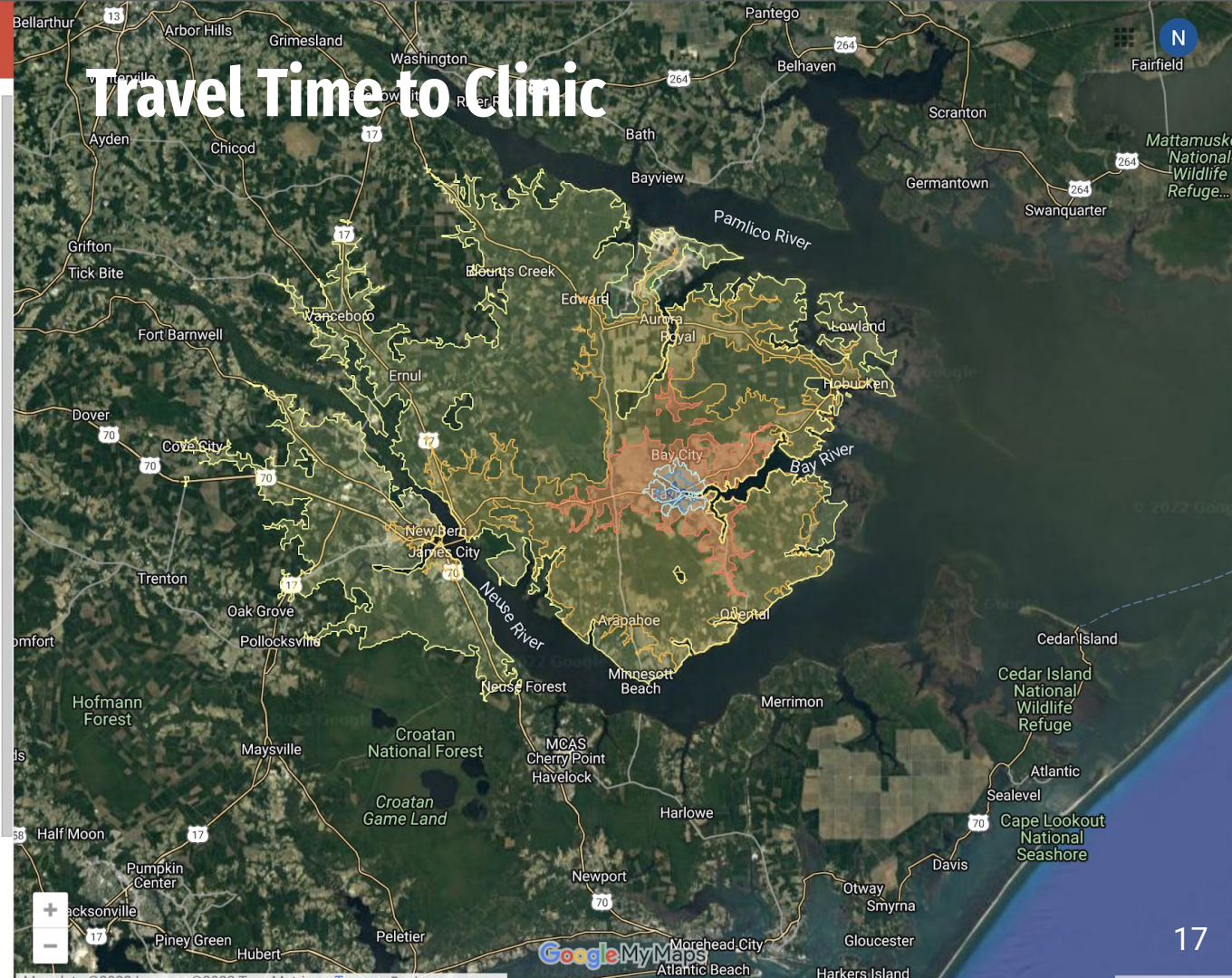


45 minute walk



Clusters

Travel Time to Clinic





Churches



Travel Time to Clinic

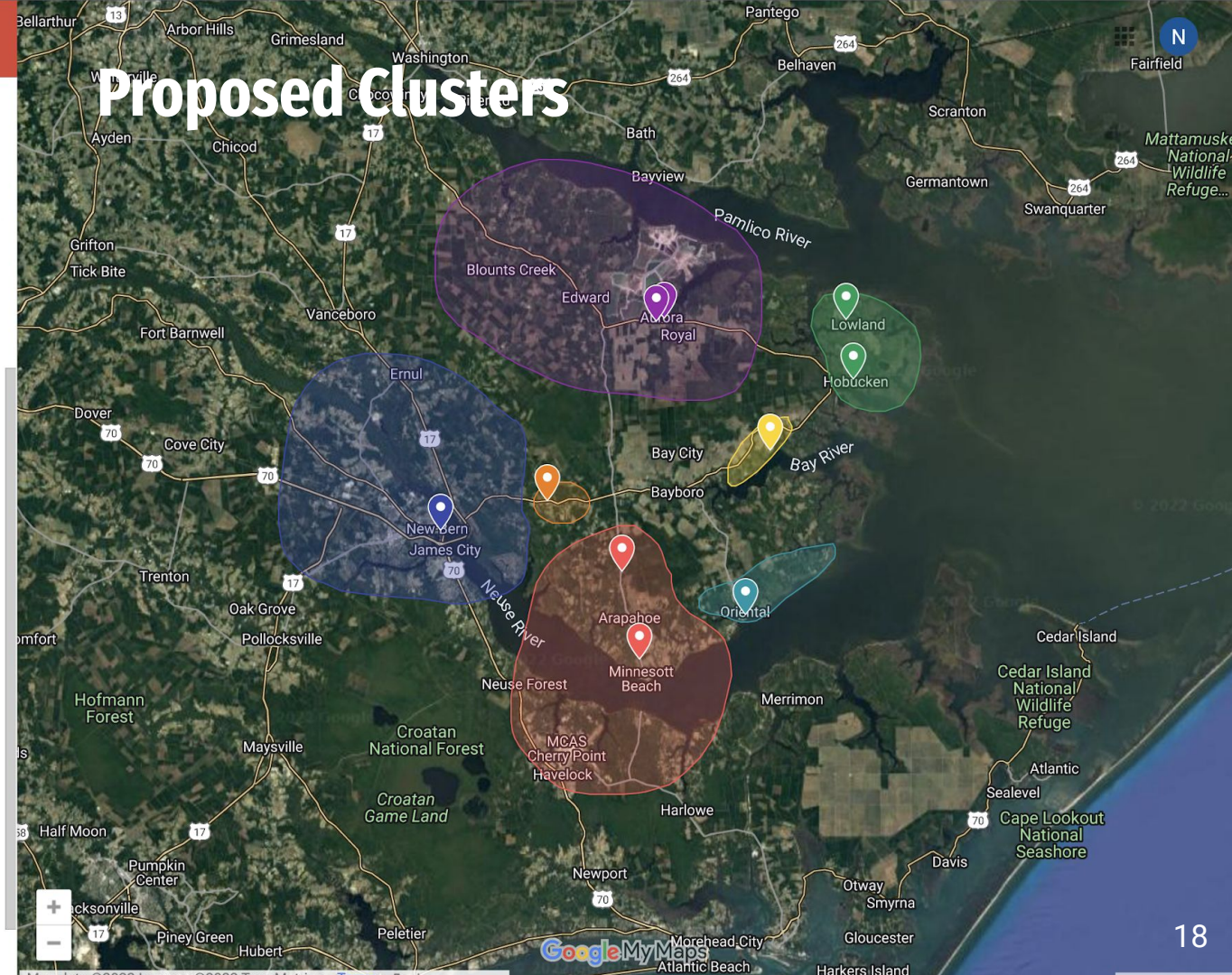


Clusters



- Arapahoe (53)
 - Arapahoe United Methodist Church
 - Pamlico Community College
- Oriental (32)
 - ST. THOMAS Episcopal CHURCH
- Aurora/Beaufort (24)
 - Aurora Community Center
 - Aurora Church of God
- Hobucken/Lowland (14)
 - HOBUCKEN COMMUNITY CENTER
 - Lowland Church of Christ
- Reelsboro (17)
 - Reelsboro United Methodist Church
- Vandemere/Mesic (19)
 - Camp Vandemere
- New Bern (50)
 - First Baptist Church of New Bern

Proposed Clusters



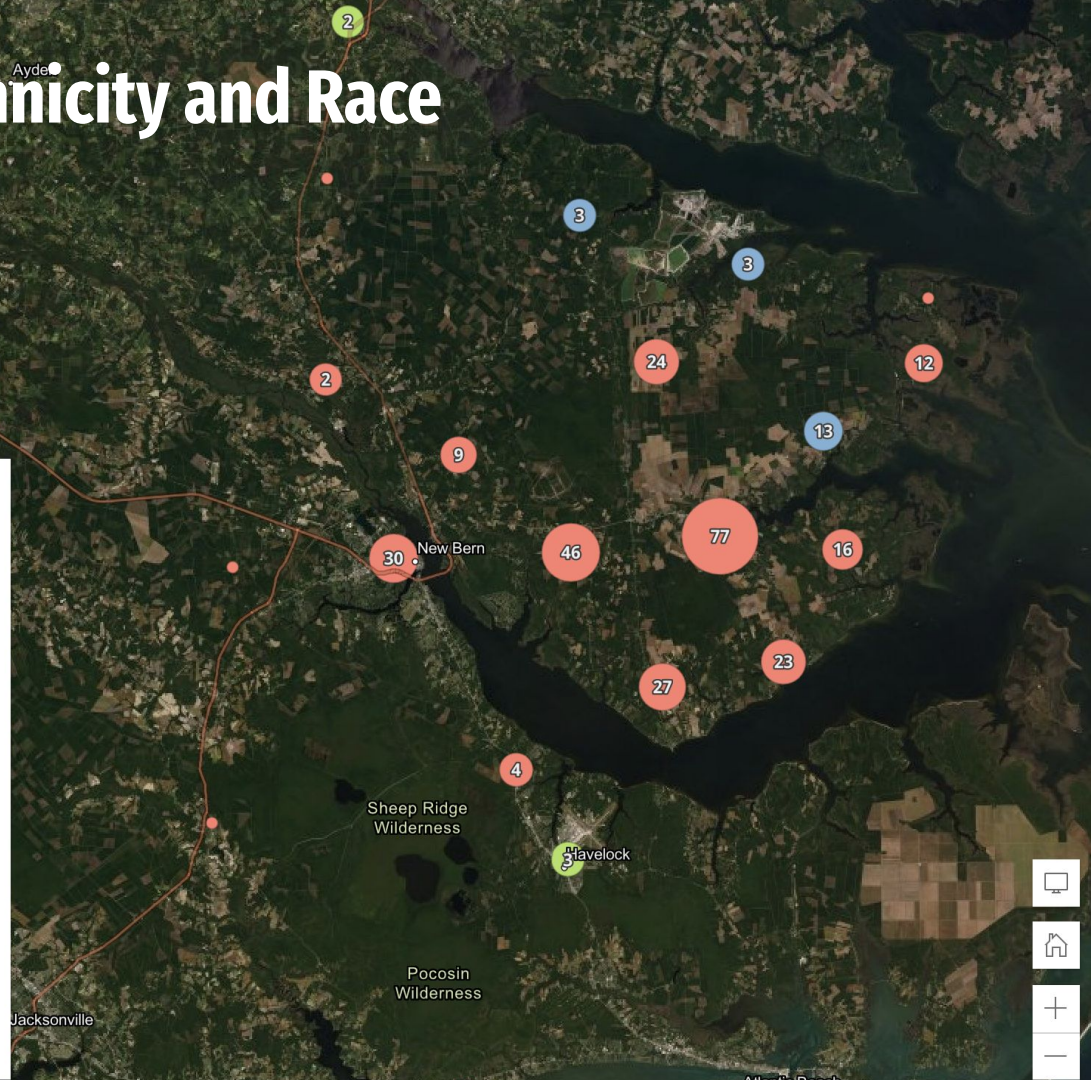
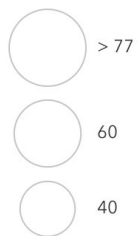
Patients by Ethnicity and Race

Hope Clinic Patients

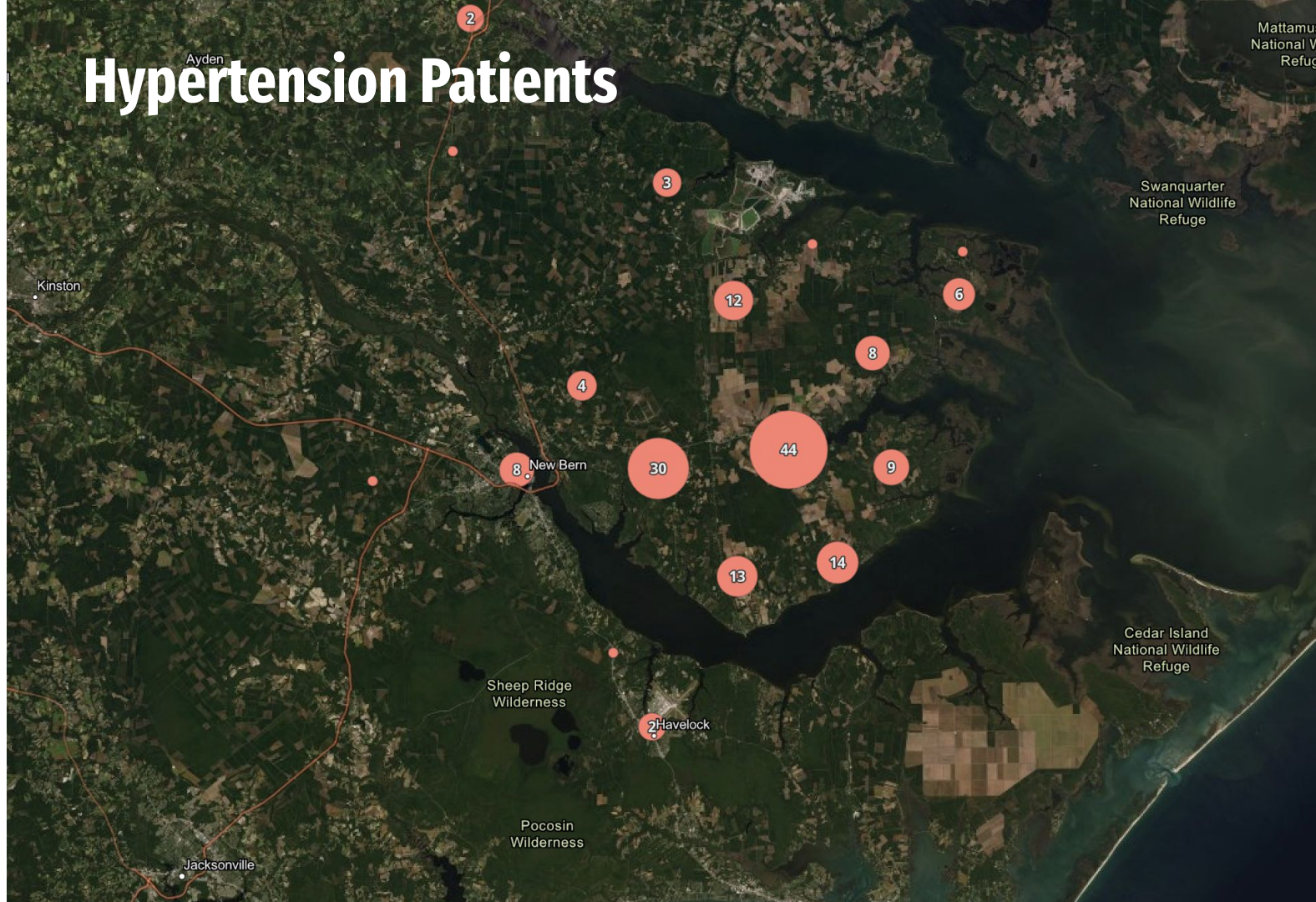
Ethnicity_Race

- Non-Hispanic White
- Black or African American
- Hispanic or Latino
- Asian
- Other

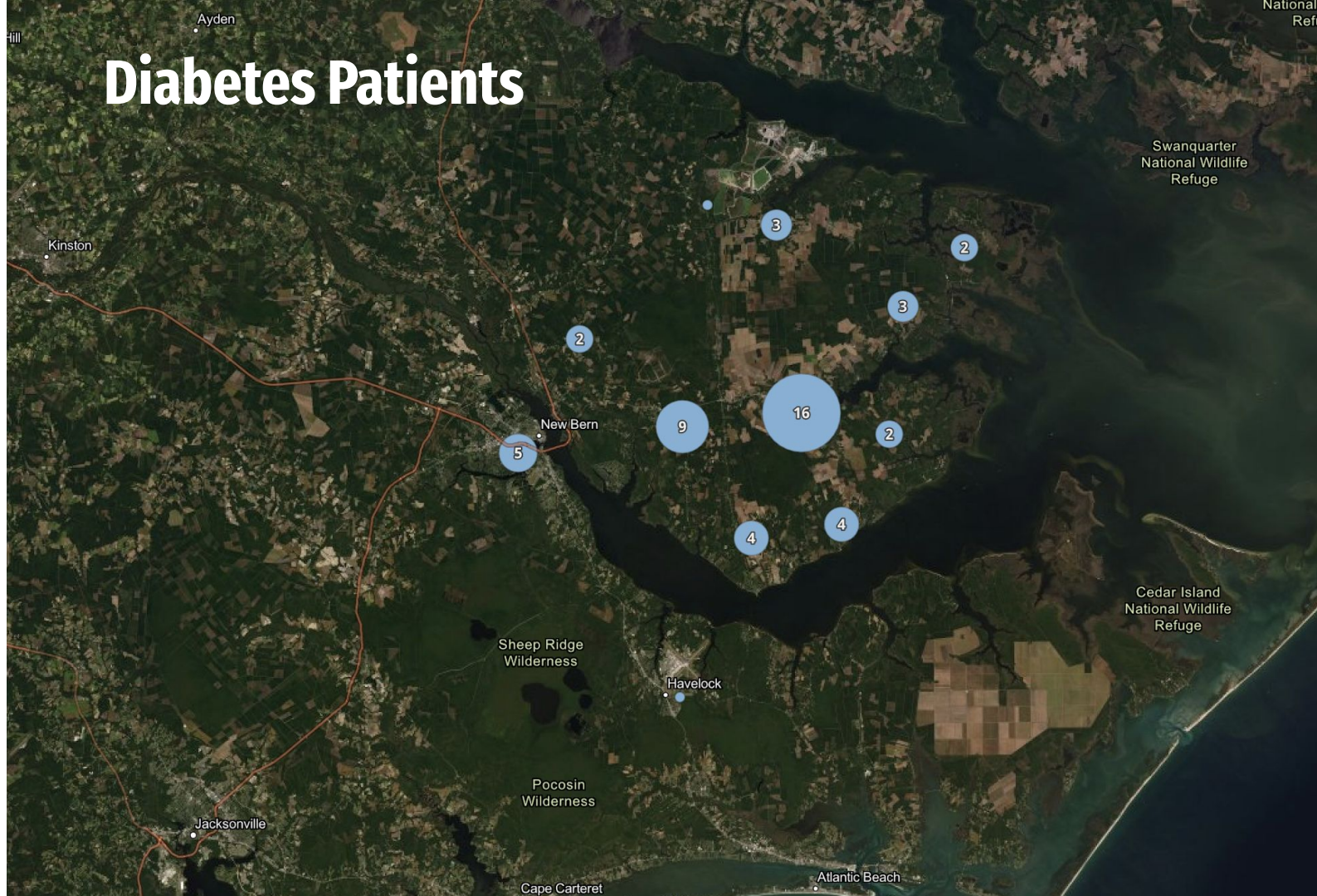
Number of features



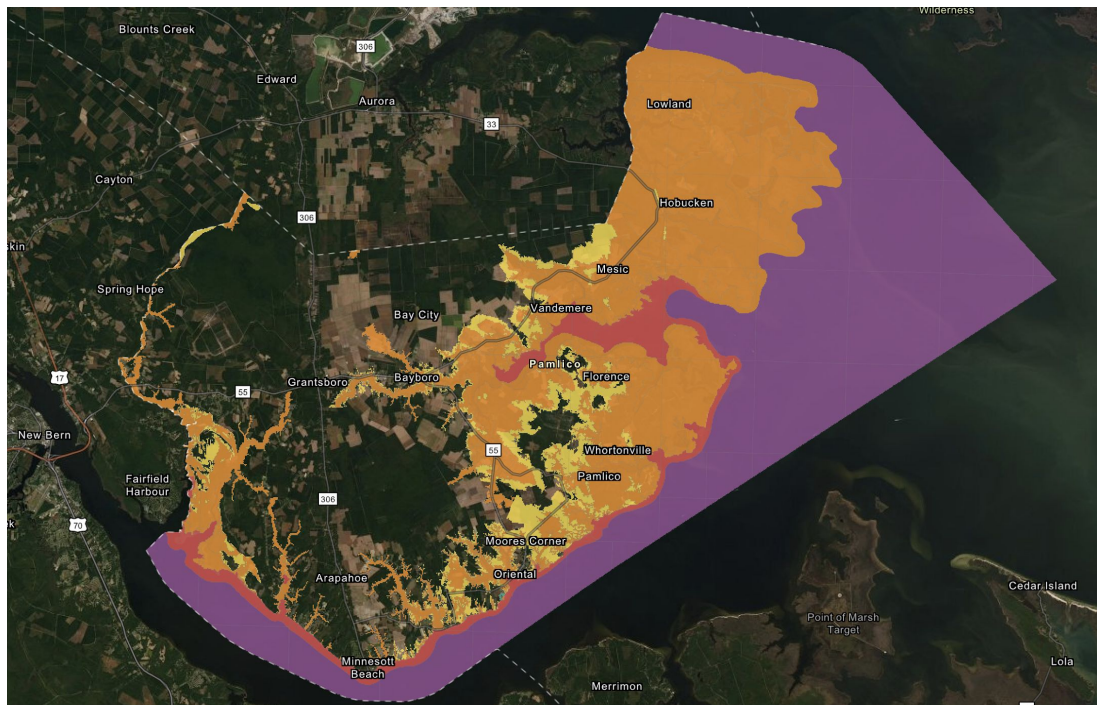
Hypertension Patients



Diabetes Patients



Hurricane-Related Vulnerability



95 patients

**Live in FEMA defined
flood zones**

Benefits

+

Familiar Platform

Google Maps is intuitive and powerful



+

Resources

Search functionality allows resources to be visualized clearly



+

Limited Access

Restricted to staff that need this tool



Future Considerations

→

Patient Privacy

Explore more secure platforms that retain ease of use



→

Update Process

Import AthenaNet data once a month



→

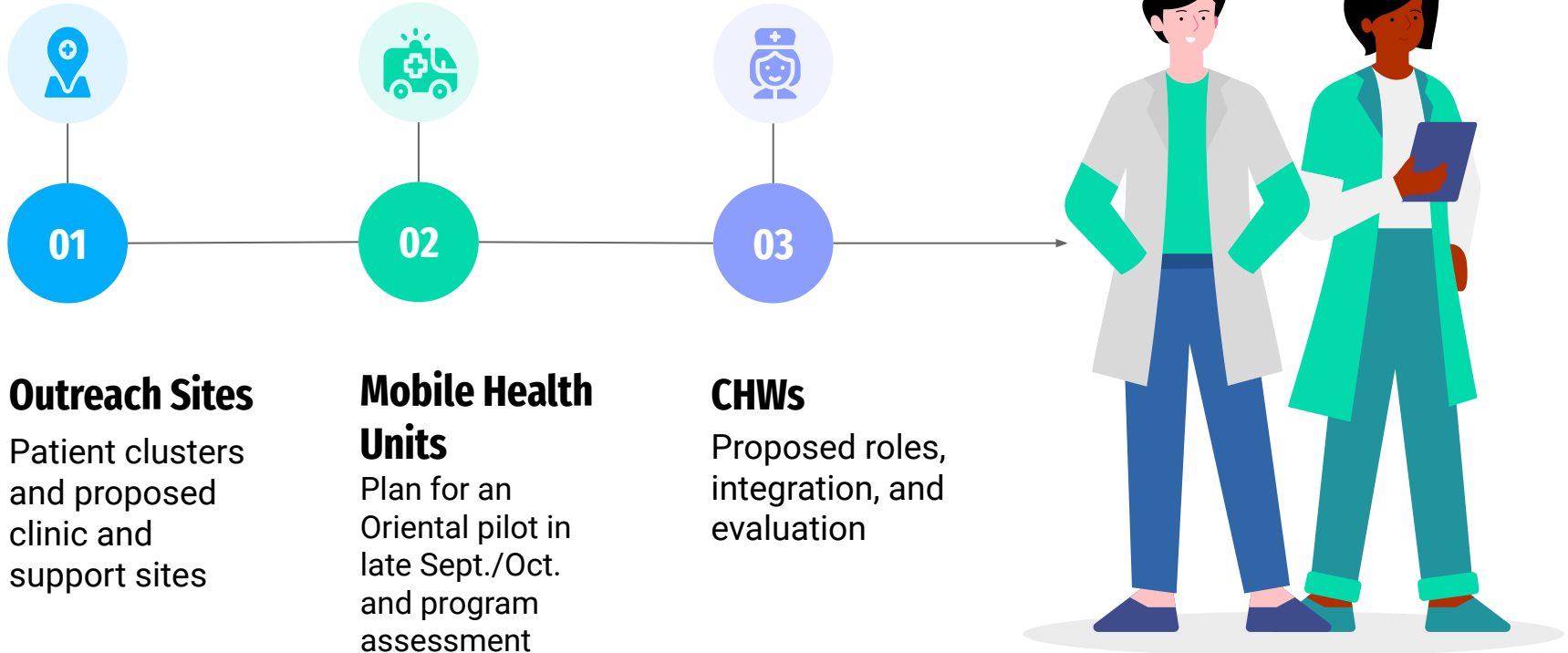
Staff Training

Evaluate ease of use among staff

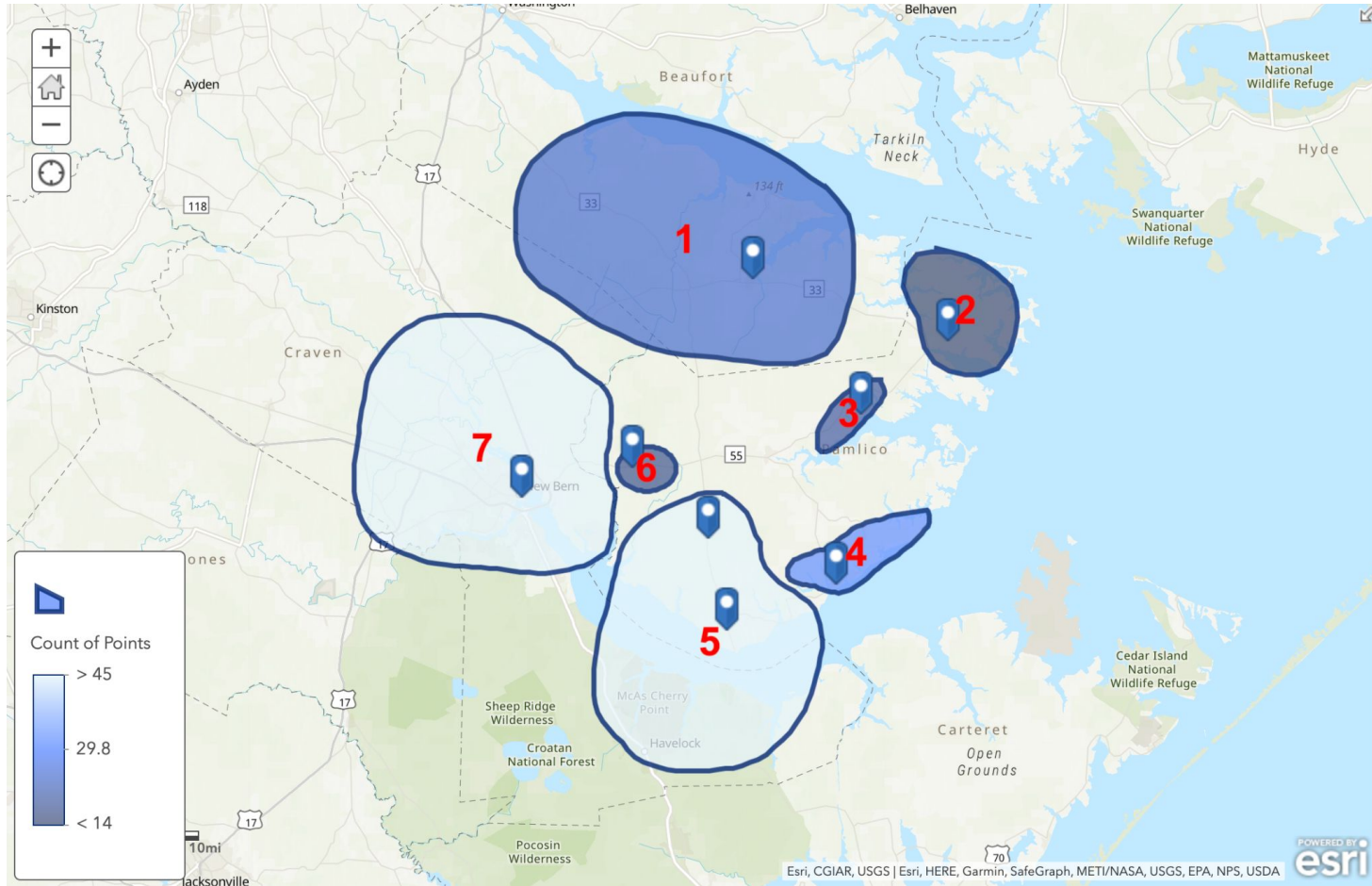


Proposed Outreach Plan

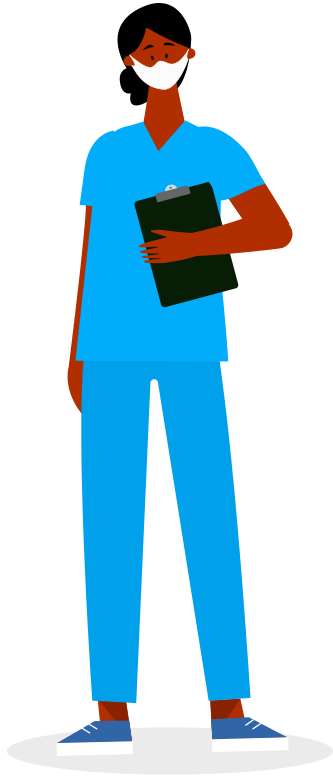
Overview of Plan



Proposed Outreach Service Sites



Proposed Pilot Cluster - Oriental



St. Thomas Episcopal Church



Wednesday or
Thursday in Late
September



Visit each outreach site
quarterly



Offer regular clinic
services

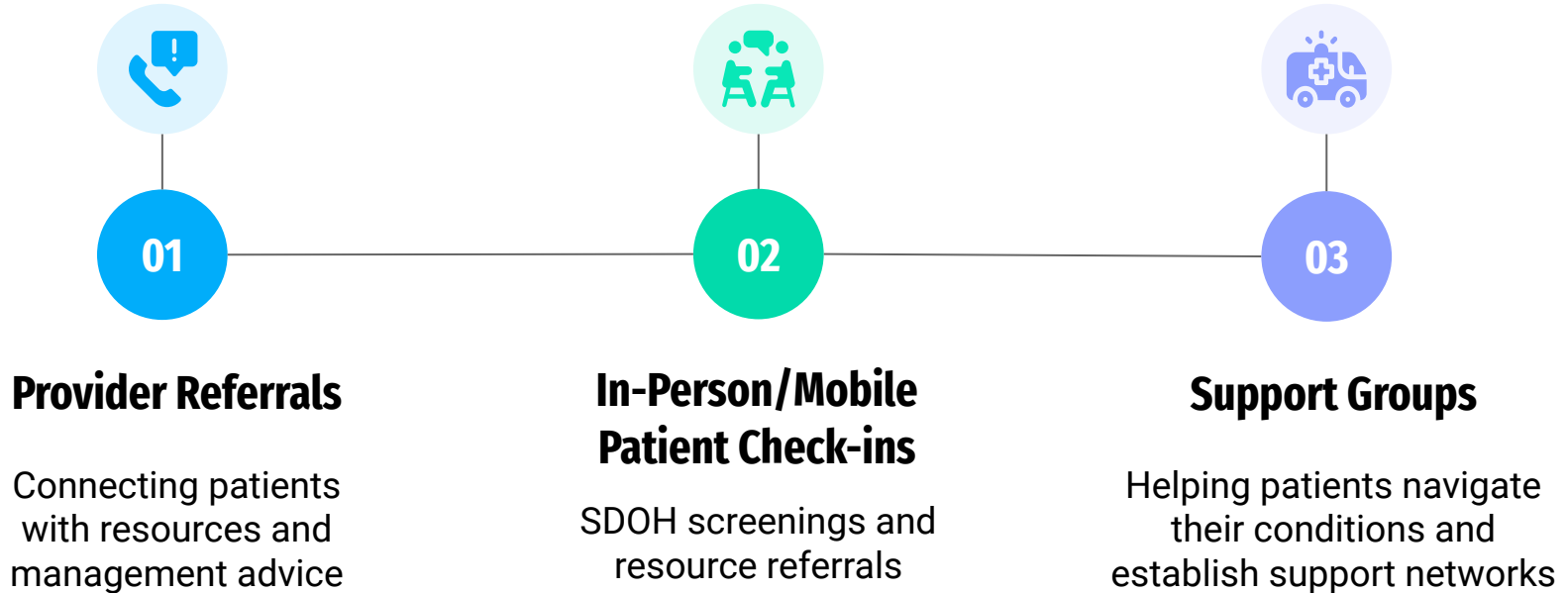


Max travel time: **9 min**
of Patients served: **32**



Collect information on
patient experiences

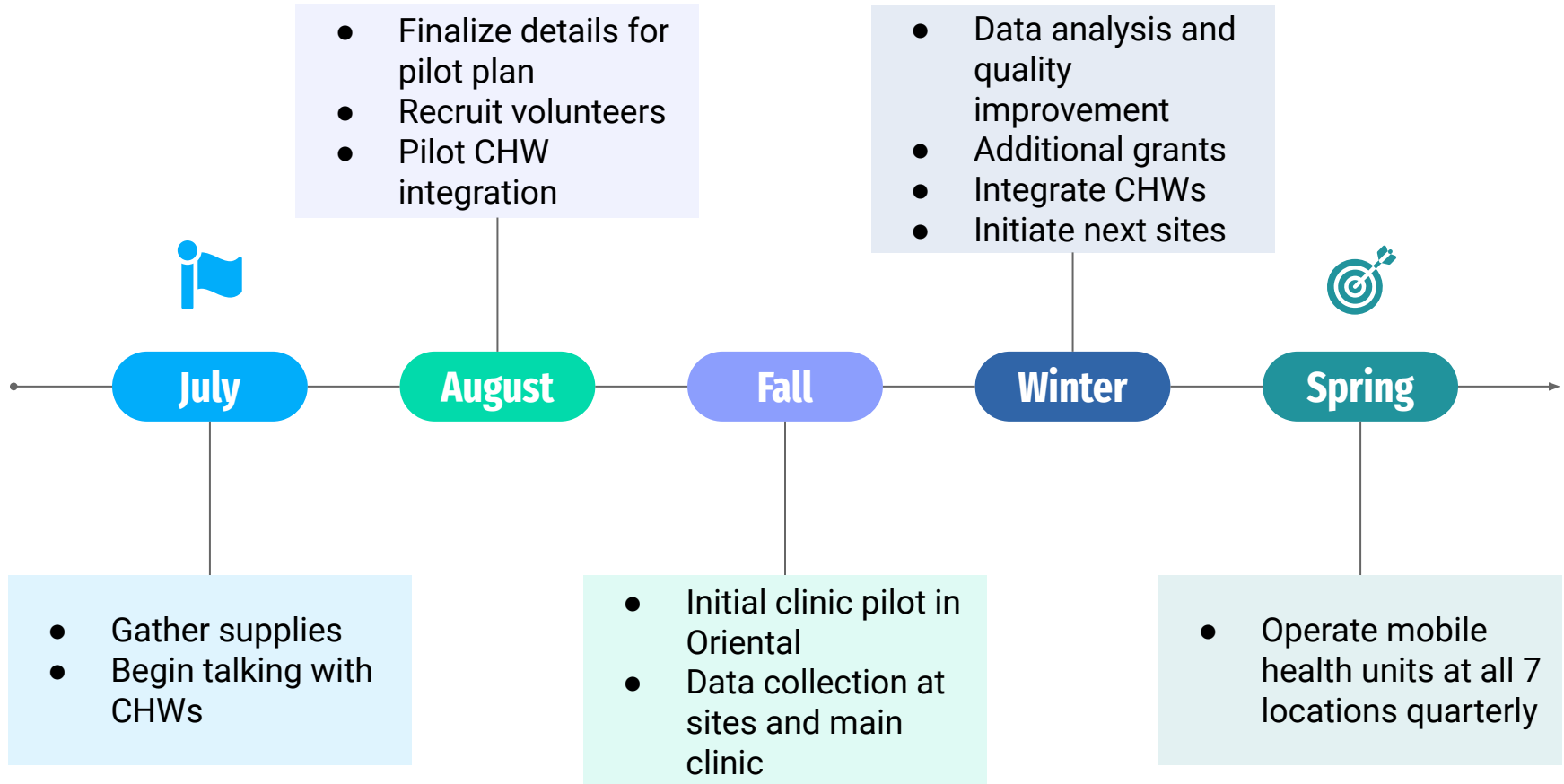
Community Health Workers



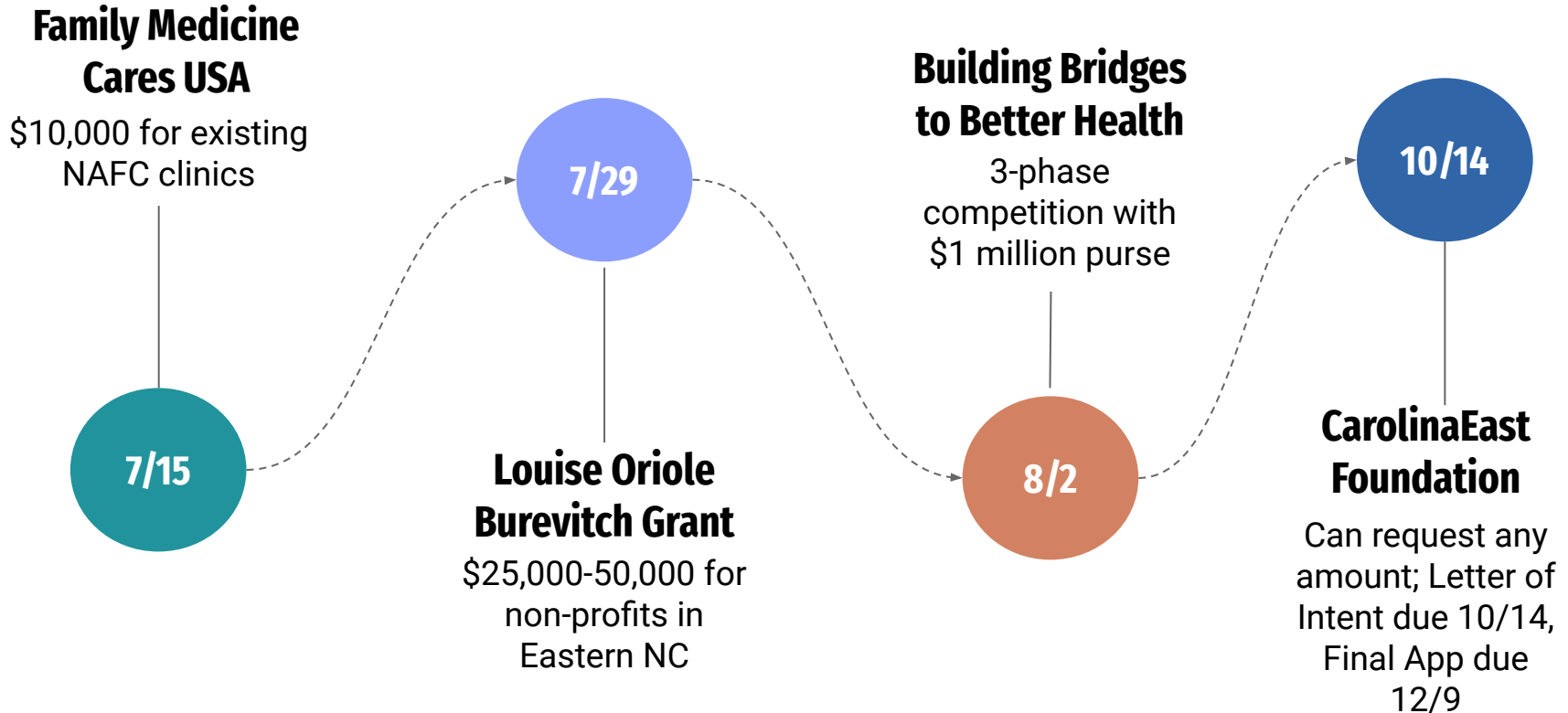
Monitoring Plan

- ✓ Tracking process measures
 - Track # of patients reached, date reached, # of referrals, no-shows, cancellations
- ✓ Patient Satisfaction Questionnaire
- ✓ Clinical indicators
 - Baseline measurement/compare
 - Patient vitals (BP, HR, A1C)
 - Standardized screening tools

Proposed Outreach Expansion Timeline



Upcoming Grant Opportunities



Final Thoughts

Activities

Interviews

Both patients and staff want more **condition-related education**

Patient Mapping

Patients are **widespread** and face **significant transportation challenges**

Outreach Plan

Mobile Health Units and CHWs are potential avenues to pursue

Grants

There are **many upcoming grants** that meet Hope Clinic's mission



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Thank you for listening! Any questions?

A special thank you to **Yolanda, Dr. Silimperi, Dr. Ariely, and the rest of the Hope Clinic staff** who have supported us and worked with us to make this happen.

Potential Questions

- How might Hope Clinic mobilize current staff members and resources to put some of these ideas into action?
- What can the map be used for besides developing community-based outreach initiatives?
- How would the map stay updated as patients are added or removed?
- Which community health workers do you have in mind for testing out this idea? Who are they?
- Who would keep track of monitoring measures for the community-based outreach initiatives? Who would manage this data?
- How does this plan fall within Hope Clinic's current capabilities? If not, what needs to change to make this happen?
- Is any of this information available in more detail?

How might Hope Clinic mobilize current staff members and resources to put some of these ideas into action?

- In talking to staff members during our time here, many have expressed interest in being directly involved in the design and implementation of mobile outreach sites. Here are some possible roles that existing staff can play. [NOTE: many of these roles are similar to roles they currently play on Thursday evenings]
 - Clinic Support Coordinator: Manage reception and patient eligibility checks
 - Clinic Operations Coordinator: Ensure that patient flow is smooth, help operate lab, and possibly hold patient education sessions with individual patients
- To make this process as easy as possible, Hope Clinic should operate mobile clinics as similar to normal clinics as possible. Thus, most resources and processes are familiar to staff. An eventual shift to EMR (AthenaNet) would streamline data input and reduce the need to transport as many paper materials to outreach service sites.

What can the map be used for besides developing community-based outreach initiatives?

- The Patient Mapping tool contains several other layers besides just proposed patient clusters. Eventually, a tool like this can be used to connect patients with resources based on their physical locations, to identify nearby emergency services to connect patients with assistance during natural disasters and violence situations, and to pull out groups of patients with similar conditions in similar areas to form support groups and other educational interventions targeted to their specific needs.
- This map demonstrates the geographic reach of Hope Clinic and can also be used for grant purposes.

How would the map stay updated as patients are added or removed?

- Google Maps allows users to upload a CSV or XLSX (Excel) file easily into the interface, and the software will create a layer based on the data with little user input. This makes it easy for staff to download an AthenaNet patient report each month with specific variables and upload that file into Google Maps. All a user has to do is identify which columns indicate location (e.g., address lines, city, state, ZIP code) and which column should be used as a label for each point (e.g., patient chart ID). This entire process would only take 5-10 minutes.
- The Clinic Support Coordinator would be in charge of updating this resource.

Which community health workers do you have in mind for testing out this idea? Who are they?

- Currently, ECU Health operates a Community Health Worker program that began with a statewide grant during the COVID-19 pandemic. Initially focused on providing COVID-specific resources to residents in Eastern North Carolina counties, their roles have recently expanded to include Primary Care, Maternal and Child Health, and Behavioral and Mental Health support.
- The two Pamlico County CHWs through this program have extensive knowledge of the area and strong connections with existing community resources. They are passionate about serving those whose voices are typically forgotten, and are extremely interested in working with Hope Clinic.
- Their possible roles are still being worked out, but more information will be available in the full report we share with Hope Clinic in the coming weeks.

Who would keep track of monitoring measures for the community-based outreach initiatives? Who would manage this data?

- In the full report and outreach plan documents that will be shared with Hope Clinic, we have outlined more clearly measures to keep track of. However, the exact implementation and collection of this data needs to be worked out between us and Hope Clinic. We don't want data collection to impede clinic operations, so we will work with staff to identify where in the patient flow it makes sense to collect this information and who will keep track of it. We know staff members have countless responsibilities as is, so this shouldn't be a burden to their already taxed schedules.

How does this plan fall within Hope Clinic's current capabilities? If not, what needs to change to make this happen?

- In talking to staff members during our time here, many have expressed interest in being directly involved in the design and implementation of mobile outreach sites. Here are some possible roles that existing staff can play. [NOTE: many of these roles are similar to roles they currently play on Thursday evenings]
 - Clinic Support Coordinator: Manage reception, patient eligibility checks, and

Is any of this information available in more detail?

- A full report will be available in the coming weeks with our general findings and next steps.
- A detailed proposed outreach plan will also be available in the coming weeks.
- Training materials for the patient mapping tool will be shared with staff to ensure sustainability of the tool.
- A grant database document will be shared with the Executive Director.
- Additional statistics we've calculated using the patient roster will also be shared with the Executive Director.

The Executive Director will have all of these documents and materials. For more information or to reach one of us directly, please contact one of us:

- Nick Haddad (nicholas.haddad@duke.edu)
- Advika Kumar (advika.kumar@duke.edu)
- Adey Harris (adey.harris@duke.edu)
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