



OKLAHOMA
State Department of Health

Community Health Worker Success Stories



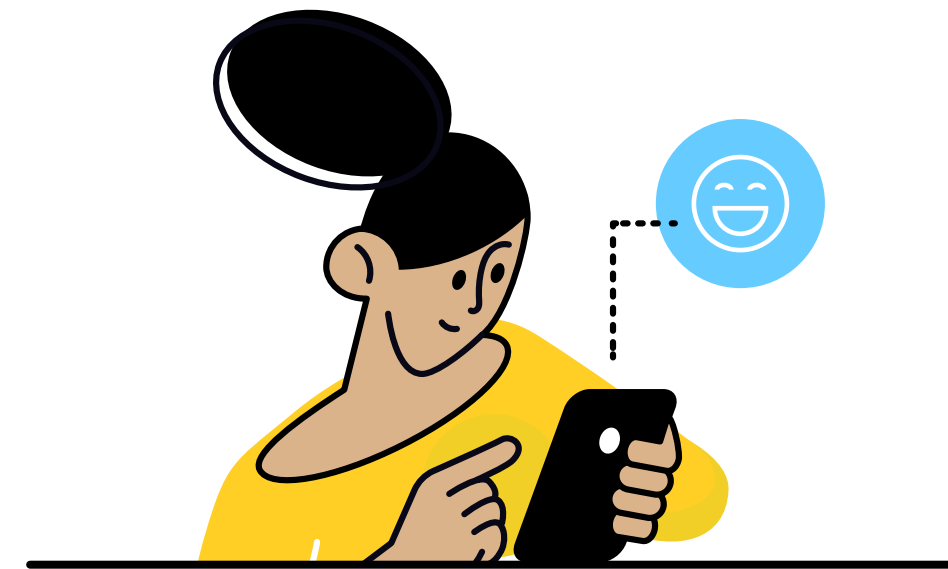
To our clients —

Your determination and hard work have been nothing short of extraordinary. Each story reflects your resilience, courage and unwavering commitment to achieving your goals. We are incredibly proud of your achievements and the strides you've taken towards a brighter future. Thank you for inspiring us with your dedication and for allowing us to be part of your journey. Your success is a testament to your strength, and we are honored to celebrate it with you.

Community Health Worker Success Stories



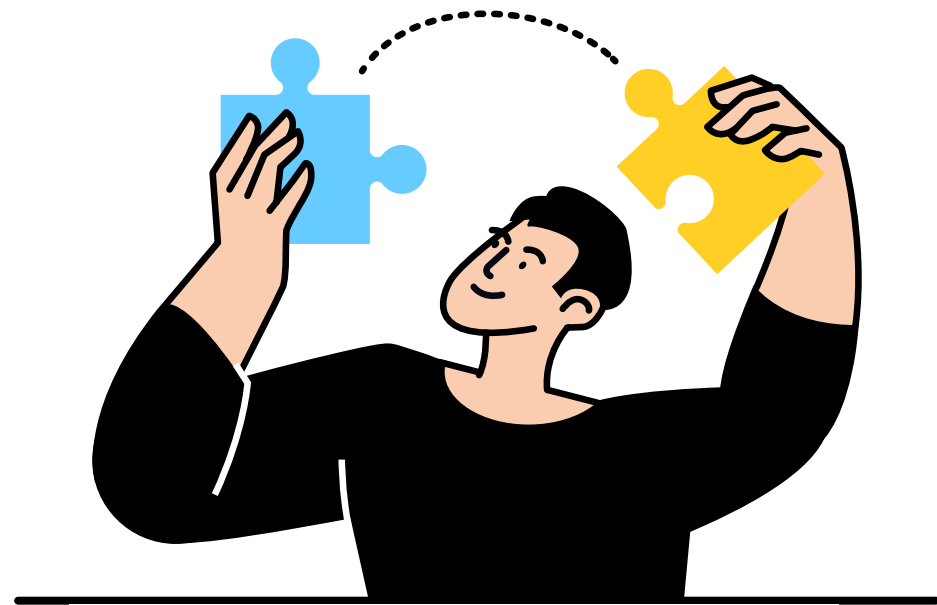
"We just don't know who we will inspire and how!"



"I can see his smiles shining brightly through the words in his text messages."

I

I joined OSDH late in August of 2023, and my second client contact opportunity was in September. He is a Native American Tribal member and a Veteran who had been living in a Housing Authority complex for several years, with a bed bug infestation that he noticed immediately upon moving into his apartment. Having just spent all his money to move in, he didn't have a way out. We began the process of finding a new place, and he only wanted to go to one other apartment complex. I assisted him with his application and delivered it to the apartment office on his behalf. He continued to endure the poor conditions at the Housing Authority residence until his application was accepted at a local apartment complex. Prior to the move, he sounded depressed and was not hopeful about life in general. We remained in contact because he reached out to me with questions and guidance. Recently, he reached out to me seeking vocational rehab. I connected him to OK Workforce and he is excited about starting this new program. He's gained some "new life" in his life. I can see his smiles shining brightly through the words in his text messages. We just don't know who we will inspire and how!



"Utilizing my connection with the president of the local chamber of commerce ..."

II

I received a call from a family, with three children, that was sleeping in a storage unit, with limited food, and no income. We were able to place the children with other family members for the time being. Utilizing my connection with the president of the local chamber of commerce, we were able to apply chamber funds designated for homeless assistance to set the family up in a local motel. Both parents were adopted at an early age and had no family support system to lean on for help outside of the mother's elderly adoptive mother to take the children only.

The mother had schizophrenia and desired to be medication-compliant but did not know how to go about doing so with no health insurance. I was able to get the mother, and eventually the kids, on SoonerCare. I was then able to connect the mother with a local mental health provider for necessary counseling and needed prescription refills. The father was not initially qualified by the SoonerCare system, but a call to BCBS of Oklahoma offered an opportunity to have him enrolled on a charitable outreach program

and they enrolled him into a reasonable plan while not charging him a premium for 180 days. I was able to assist the mother in acquiring a part-time job, which she said inspired her to search for and find a second part-time job, and she found one in a single day that agreed to work around the schedule of the first. In the meantime, I connected the family with a food bank, so they were fed in the short term. I assisted the father in applying for unemployment, which he originally was unaware he should qualify for. I also assisted the family with acquiring the initial birth certificate for the two youngest children.

By speaking to the hard work, I felt the family invested in themselves once they had food and shelter, I was able to convince the chamber of commerce to go beyond their normal limitations and cover the cost of the family being in the motel for several weeks. The extra time in the motel allowed the family to have food and shelter until their income they began earning was able to come in, as it takes a week or a few weeks before gaining that first paycheck.



With birth certificates of all the children, we were able to apply for the family to get on the subsidized low-income housing list. With the extended time in shelter covered by the chamber, and the local food pantries support in covering the food security gaps, we were able to provide the family temporary food supply and keep them in shelter until they were able to unite the family together into a low rent apartment they could afford, and have SNAP applied for and approved.

Ultimately in the process I learned the father worked for a company that went out of business during the COVID-19 pandemic shutdown, but that he had earned 10+ years' experience there as a machinist as well as having earned two separate nationally recognized certifications in his field. This led to him eventually finding a well-paying position here local. That position paid well enough that they bypassed the low-income housing due to the waiting list and went straight into renting their own 3-bedroom single family home, taking them from being a separated family living in a storage unit to living the life of a lower-middle class family thriving on their own.



"Others will sign you up, but I made sure he received the help."

III

Our TB nurse referred one of her clients to me. He is a 45-year-old man that has stage 4 kidney failure, congestive heart failure, diabetes, in active TB and is morbidly obese. She referred him to me because he didn't have running water and she thought it was because he had a plumbing issue that he couldn't afford to get fixed. I called him and found out that when his water was shut off originally, it was due to a pipe bursting when we had freezing temperatures outside; however, he did get that fixed. He just didn't have the money to get it turned back on because of the high water bill from when his pipes burst. At the time, the city, had received a COVID-19 grant to help residents pay past-due rent and utilities for up to six months. I told him about it and asked if he would be interested. He said yes. I met with him at his next appointment with our TB nurse and we filled out the application. The application asked how you were directly affected by COVID-19 and I told him to put inflation. He only received \$900 per month in SSI and after making his house payment, utilities, and paying for rides to everywhere he goes, there was little to none left. COVID-19 caused the price of everything to go up except wages,

and with his health conditions it was a real struggle. He called me the next day and told me not to submit the application because he didn't feel right about it since he never actually contracted COVID-19, but I held on to it.

During his visit I noticed that a rollator could really help him, and asked if he would like me to ask around and see if maybe I could find one for him. He was all for it. He told me that he wears out often and it would be helpful to have a place to sit for a quick rest. I contacted about 10-15 different agencies by either email or phone asking about the services they offered and if they knew of anyone that could help. Most of them could help, but the hoops that you needed to jump through were just too much.

Finally, (when I was about to give up) I opened my email, and I'd gotten a response from Ability Connection Oklahoma. She had an electric wheelchair for one of my other clients, but they didn't have a rollator. She then let me know that they did have money in the budget to purchase a rollator for him and all we had to do was fill out a short information sheet and submit proof of his diagnosis. She also told us to go find the rollator that he wanted online and send that to her as well. I already had all of that and I emailed it to her. She then ordered the rollator, and it was delivered to him about a week later. He was so happy and thankful. His exact words were when he used his new walker that it was wonderful. It allows him to go places that he would have trouble going without it, and when there is no place to sit, he has a seat. He was very happy.



In the meantime I had taken a couple of applications for other clients to the city and they paid their bills. I saw how easy the process was and contacted the client and asked him to reconsider submitting the application. I told him that I submitted other apps, and the same reason was used on those apps as his and they were approved on the spot. So, he said OK. I then submitted the application to the city and waited. I didn't hear from them, so I contacted them and asked for the status and was told they were waiting. After a couple of weeks of talking to the city and the water department they finally found funds to pay his water bill and get his water turned back on after two years. He was so grateful and told me that out of every agency or person that I was the only one that truly helped him. Others will sign you up, but I made sure he received the help.



"Let's try again, together."

IV

Last Wednesday I got a call from a client's therapist. She asked if I could contact the client and provide additional resources. I contacted the client the next day and told her about local food pantries in her area. The client, who is aged, hard of hearing and low-vision, agreed to meet in person at the food pantry at the local Senior Center. On Friday I went to the Senior Center and unfortunately lost contact with the client. However, when I was there I was invited by staff to stay at the Center and speak with other seniors at the facility. I set up my table with a few resource flyers, incentives and COVID-19 tests. Very quickly I was welcomed by everyone that entered the building and they asked about my services. I had the opportunity to witness the companionship and fellowship of the local aged community, and even had the privilege of being entertained by guitar gospel music while lunch was being prepped! Before lunch began, they did the Pledge, said a prayer, and made a few announcements. I was given the opportunity to speak to more than 60 residents regarding the County Health Department and CHW services. Every senior asked that I come again. They expressed great interest in having the Health Department come with nurses and provide blood pressure checks, flu shots, etc. We are now in the planning process to go the Senior Center to provide them services. So, despite a lost contact, I was still able to connect to 60 seniors.

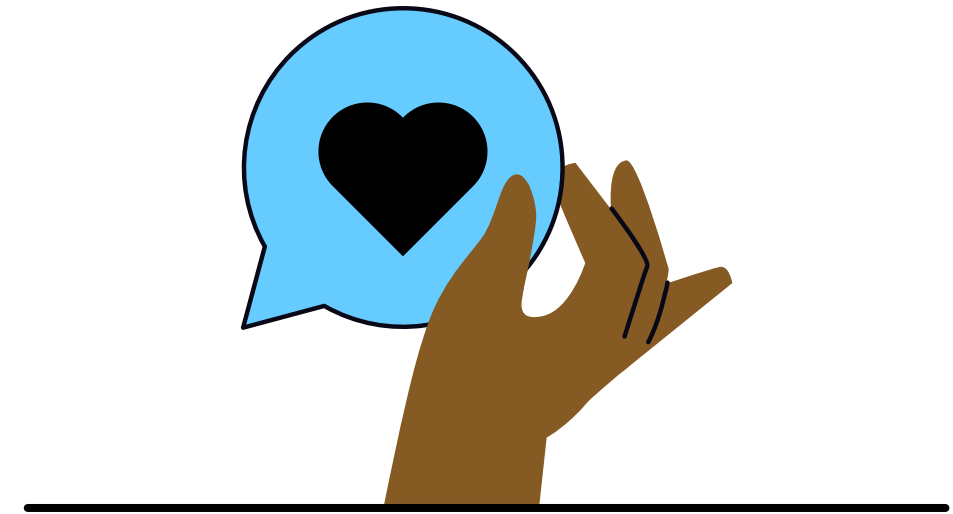
V

I started working with a client this month who has been through a lot in her lifetime, and is currently living in a homeless shelter. She was not comfortable sharing with me all the details from her past when we first met, and I let her know that is perfectly fine. She came to me because she is in kidney failure and receives dialysis treatments three times a week but does not have transportation. She has SoonerCare and told me she tried to schedule SoonerRide but was told the dialysis clinic must call to arrange it. I told her, "let's try again, together." We called, and transportation is now scheduled to pick her up three times a week starting tomorrow. Yay! The following week she was admitted to the hospital. She called the shelter from the hospital angry and in a panic. I went with the shelter staff to the hospital to attempt to talk with her. At first, she was yelling and threatening to leave. I pulled up a chair and just let her get all that frustration out. After that she shared with me about her past. By the end of our conversation there was smiling and even some laughing. I waited until her nurse came in before I left, the interaction between the two was positive, and reassured me that she was in good hands.

"No matter where we are, we are always willing to help."

VI

I was getting lunch after a dentist appointment and a young man was on the phone trying to find a shelter or transition housing. While he was on the phone, I started looking for places to stay. When he hung up, I apologized for listening to his conversation. I gave him my list and we started talking about the options. Like most people, he didn't want to stay in some on my list. We found one and called; they did not have any openings but had a place for him at a transition shelter if he could get there. His ride showed up and I am hoping he made it. No matter where we are, we are always willing to help.



"Thank you for giving me a chance when no one else would."

VII

I have a client who has been getting shelter through Operation Care. She was just able to get her 5-year-old son back from his father and has discovered she may be in some legal trouble, thus preventing her from wanting to apply for employment out of fear of being found and losing her son again. Operation Care has implemented a new standard for those who are experiencing homelessness, and that is to be employed. I was able to reach out to someone who knows someone and get her a job. So now she can continue having shelter. We are putting in housing applications and she will begin making payments to tend to her legal matters. She stated today, "Thank you for giving me a chance when no one else would."



"Several of us stayed in frequent contact as his support group."

VIII

I met my elderly client, who is with disabilities, in March 2023, while he was experiencing multiple hardships, including using a wheelchair for transportation throughout town and “couch surfing,” which eventually led to him experiencing homelessness in a dilapidated garage not meant for human habitation (without running water). He did not have transportation out of town, nor did he have regular access to food. His SSI met few needs. He was in dire need of weather-appropriate and everyday clothing and was suffering from mental health conditions which were exacerbated by addiction. I focused on the needs that I could control such as food, clothing, and transportation access, and appointments with his PCP. I spoke with him frequently about addiction, but I was also aware that addiction was the only “comfort” he had, so I treaded lightly, despite my stance on the topic.

Diann (OSDH Social Worker) and I made weekly trips to make contact with him, ensuring that he could see the support he had and providing him with donated supplies.

We also ensured that we stayed in frequent phone/text contact with him. He endured a particularly difficult event in June with depression. He struggled through a couple of days with being in contact with 988 and 911, with my guidance and support. Eventually, of his own doing, he made it to a mental health facility where he gained access to the assistance he needed, including feeling human again by being indoors, sleeping in a bed, having access to three meals a day, and toilet and shower facilities.

When he was discharged from the facility, I assisted him with the successful completion and admission of the Advantage Waiver Program application. I advocated for him to receive services while staying in the garage. He called me the first time his case manager, Abby Green from ASCOG, and her coworker, showed up for an assessment, also bringing food and supplies. He was so happy he cried. On June 28, 2023, I submitted a rental application on his behalf to the residential manager of an income-based apartment complex. For nearly eight weeks, my client endured in the garage through the hottest part of the summer, calling me almost daily, and sometimes throughout the night, without hope and motivation. Several of us stayed in frequent contact as his support group. Additionally, the apartment complex manager went above and beyond, driving to verify references when phone calls went unanswered.

Around noon on August 22, the apartment manager called to tell me that she received his lease! I called my client first, then his nurse and Diann. Before I began the process of securing transportation for him, I sent an email to Rick Jones introducing him to his new client. Rick’s response was top-notch, and I knew that my client would continue to do well. My client arrived at his new apartment on August 22 about 2 p.m.

On August 25, Diann and I drove to meet the complex manager and thank her for going above and beyond to assist him with his application. We also went to say hello to him, and he proudly showed off his new home, happy tears included. Between all of us, also known as “the village,” and enduring uncertain bouts of hope and faith, he is finally in a place he can call home and gaining access to the continuation of services, with solid referrals, supplies, and peace in his life.





"... I believe everyone deserves grace in their life."

IX

A Point of Grace became a vision for me after I attended A Point in Time in Chickasha last January. I saw the impact it made on the individuals who attended. I knew I had to come back and recreate this event for my community. I changed the name to A Point of Grace because I believe everyone deserves grace in their life. I began by securing a safe location for this event to be held and getting commitments from various agencies across the state to participate. This event was for a targeted population: the homeless. My inspiration for A Point of Grace not only came from the event I attended, but also through a client I helped. I started working at the Hughes County Health Department in January of 2023 and this was one of my first clients to serve. He was homeless and needed my help with health insurance, SNAP, employment, and housing. He was referred to me by my pastor at church. This client was unique because I could tell he had a desire and drive about him to get out of the situation he was in. I was able to help him get Medicaid and SNAP benefits. The church helped him with housing and employment. He now has a place to stay and is in charge of maintenance at the church. He is working on getting a vehicle,

but for now he rides his bike wherever he goes. He told me he wants to help others because so many helped him when he was at his lowest. When he found out I was doing A Point of Grace he went all over town letting people know they needed to attend this event. He even helped me set up tables and chairs the day before.

**"... there are so many
in our community
who need help."**

The A Point of Grace event served 21 individuals. They each received a backpack full of supplies for attending. The backpacks were provided by Muscogee Creek Nation. District 6 OSDH staff offered flu vaccines and Point of Care Syphilis checks. Everyone had the opportunity to take a shower and get a haircut while there. The Corner Clinic did blood pressure checks, as well as glucose. Carl Albert Mental Health Services handed out information about being aware of their mental state. Deep Fork Community Action provided information on housing for the homeless. The Muscogee Nation provided information on suicide prevention, intervention, and postvention. They also educated individuals on Narcan and how to use it. Scott Robinson, who leads a group for recovery, was on hand as well. The last thing everyone was able to enjoy was a spaghetti lunch with bread and cookies. This event was successful and will continue to grow each year. There were several community partners who helped make this a success. I will be forever grateful for each of them and especially to my client who opened my eyes and made me realize there are so many in our community who need help.

X

One of my clients is a partially-disabled veteran. He is a single father of three children, one of which has cerebral palsy and a couple of other disabilities. His son needs 24/7 care, so he was unable to work outside the home. They were struggling to make ends meet, and he asked me if there was any place where people like his son could go hang out just to get out of monotony of his day-to-day routine. I told him that KI BOIS has an Adult Day Care coming soon. If his son has a waiver from DHS, it will be fully covered, if not it will be \$10 an hour. He said that he has been on a waiting list to get a waiver for years. He said that he doesn't even know who his son's case worker is and that he had not spoken to one in years. I was able to locate his case worker's name and contact information for him. I called the client the other day and he said that he has been hired at UPS and will start next week. He was able to get ahold of his son's case worker and they were interviewed for the waiver this past Monday. My client said the interview went well and that they were approved!

XI

I had the opportunity to help a client recently with obtaining SoonerCare insurance for herself and her child. This client had a child that was very ill and in need of medical care but had no insurance. The client was able to submit her SoonerCare application online but struggled when needing to upload documentation as well as conveying her needs to OHCA due to a language barrier. OHCA sent the client to the Health Department for help in completing her application. I was able to complete an income statement and self-employment cash log with the client. I also called OHCA helpline with the client present so that I could mediate between the client and OHCA to ensure the client was able to obtain the needed medical insurance. Due to the process taking several days, I encouraged the client to take her child to the emergency room and gave the client a retro application in hopes medical care would not be delayed for the child. Through my interaction with the client, I learned a familial history of the client being treated "less than" due to the client being foreign-born. Through several hours of working with the client and OHCA, I was able to help the client complete the needed documentation for her SoonerCare to be approved. I not only helped the client to obtain medical insurance, but also helped the client feel valued and worthy of our efforts. We deal with a lot of individuals that feel unheard and unseen; I think helping a client feel worthy and valued is the greatest success.



"I think helping a client feel worthy and valued is the greatest success."



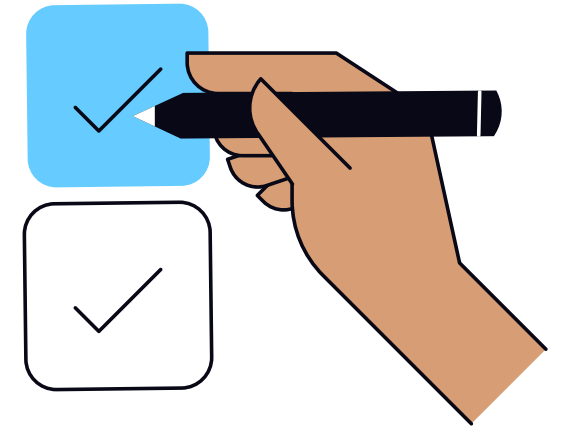
"I was there to support her while she told her story to the counselor."

XII

Today I had a client who came in because she had been sexually assaulted by two men she did not know. She wanted to get testing done for STI/HIV and the health department staff were so good with her! She was enrolled in Medicaid and got the testing she needed. I could see she was understandably terrified and still in shock. She did not want to report her assault to the police. She also did not have transportation to get to a shelter. I called The Family Shelter of Southern Oklahoma for her and spoke to one of the counselors there before I put our client on the phone. I was there to support her while she told her story to the counselor. The Shelter did take her in, but we still needed to find transportation. With the client's consent, I called several places but there were not any drivers available and there was no funding to utilize a taxi service. I called the local church coalition, and they were able to send someone over to pick her up and take her to the Shelter. I called the shelter back to let them know she was on the way. The client thanked me several times as she was leaving. She was very grateful and relieved to get the help, support, and safety she needed.

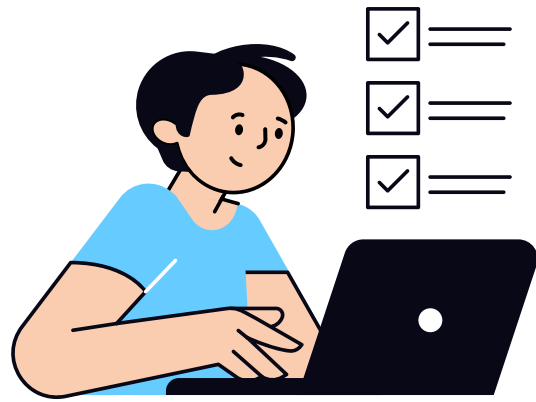
XIII

A client contacted the local Hispanic Community Center, whose Executive Director referred the client to me. I called the client back; she needed help with immunizations and a PCP provider. The client came in to drop off immunizations records from her country to enter in our OSIS system. Along with our team at the health department, we were able to update her immunizations and advise of the immunizations her child needed to be up-to date on in Oklahoma. We also signed-up her child for WIC and helped her with requesting social security numbers for her family. I was able to inform her about her SoonerCare and give her printed copies of their member ID cards for all family members.



XIV

I have a client who is a single mom; she is Latina and didn't have health insurance or any kind of help. I was able to help her get Sooner Care, find a doctor, baby clothes, a baby crib and diapers. She was very happy and grateful for all the help.



Core CHW Roles

1. Cultural mediation among individuals, communities and health and social service systems.
2. Providing culturally appropriate health education and information.
3. Care coordination, case management and system navigation.
4. Providing Coaching and social support.
5. Advocating for individuals and communities.
6. Building individual and community capacity.
7. Providing direct service.
8. Implementing individual and community assessments.
9. Conducting outreach.
10. Participating in evaluation and research.

Thank you to the Community Health Workers of the Oklahoma State Department of Health. Your empathy, ability to listen without judgment and willingness to go above and beyond makes a difference in the lives of others. You treat each person with dignity and respect, fostering a sense of belonging and empowerment.

Please know that your efforts do not go unnoticed. You are the heartbeat of communities, and we are immeasurably grateful for all that you do. Your kindness and compassion ripple through our neighborhoods, leaving a lasting impact on all who are fortunate enough to cross your path.

Core CHW Skills

- Communication
- Interpersonal and relationship building
- Service coordination and navigation
- Capacity building
- Advocacy
- Education and facilitation
- Individual and community assessment
- Outreach
- Professional skills and conduct
- Evaluation and research
- Knowledge base



Office of Community Health Workers

Community Health Workers (CHWs) are frontline public health workers who are trusted members of and/or have an unusually close understanding of the community served.



OKLAHOMA
State Department of Health

**Community
Development Services**

Contact your local county health department for more information or to connect to a CHW.