Community Health Advocate

Program Goals

• Improve access to health through screenings, engagement and referral to health and community partners

• Improve health outcomes by serving as an advocate and liaison between the community and healthcare systems
Who is a Community Health Advocate (CHA)?

Trusted members of their neighborhoods/communities who:

- Live within the community they serve
- Relate to those they connect with
- Actively engaged in their community
- Passionate about improving health in their community

What Does A CHA Do?

Community Health Advocates (CHAs) live within the communities they serve. CHAs build relationships with their neighbors to help them live healthier lives.

Why Blood Pressure?

Blood pressure screenings are a simple and effective way to tell a health story. Uncontrolled high blood pressure (>140/90) can lead to damage of the arteries, heart, brain, and kidneys.

CHAs CONNECT CITIZENS WITH SERVICES

Through the program’s one-on-one relationship focus, neighbors are connected to healthcare services, neighborhood services, and other community resources.
Process?

**Community Health Advocates**
- Provide blood pressure screenings in various locations.
- Individuals are referred to partnering healthcare systems for various reasons, including high blood pressure.

**Healthcare Systems**
- Complete patient intake.
- Begin care with a provider.

**Community Health Advocates**
- Follow-up with healthcare agencies and referred individuals.

Where Do We Go?

- Transit Center
- Community Events
- Door-to-Door
- Produce Distributions
- Community Agencies (i.e., Salvation Army, Food Banks)
- Neighborhood Meetings
- Health Fairs
- Libraries
- Grocery Stores
- Local Churches

**Community Health Advocate Neighborhood Engagement**
Education Examples

FREE Blood Pressure Screenings
Call or email to schedule your free screening today!
417.874.2477
advocate@springfieldmo.gov

High Blood Pressure Damages:
Your kidneys, lungs, and arteries

Do you know your numbers?
Guidelines
Systolic
Diastolic
Normal
Less than 120
Less than 80
Pre-High BP
120-139
80-89
High BP
140 or more
90 or more

High Blood Pressure Prevention and Control
Risk Factors
Aging
Carbohydrates
Family history
Level of Activity
Poor Nutrition
Overweight

Take an Action!

High Blood Pressure Damages
kidneys, lung, and arteries

Overall Summary
Community Blood Pressures, 2014-2017

<table>
<thead>
<tr>
<th>Year</th>
<th>Screenings</th>
<th>Individuals</th>
<th>Elevated</th>
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<tbody>
<tr>
<td>2014</td>
<td>342</td>
<td>306</td>
<td>32%</td>
</tr>
<tr>
<td>2015</td>
<td>1021</td>
<td>584</td>
<td>46%</td>
</tr>
<tr>
<td>2016</td>
<td>2494</td>
<td>1894</td>
<td>39%</td>
</tr>
<tr>
<td>2017</td>
<td>3301</td>
<td>2762</td>
<td>42%</td>
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</tbody>
</table>
Trends Over the Past 3 Years (2015–2017)

- 1 out of 4 people we screen claim they do not have a primary doctor.
- High blood pressure screenings are consistently above national average in geographical focus area.
- Affordability remains a top reason why people do not seek preventative care. Other life needs take priority – food, shelter, child care, utilities.
Data, Data, Data

- Median Age, 53
- 71% first screening
- 18% screened non-Caucasian
- Over 14,000 attempts in 2017
- Female 53% Male 47%

Unsuccessful Attempts
- Not Home 50%
- Refuse 37%
- Vacant House 5%
- Not Safe 8%

Next steps:
- Possibly create seasonal program for blood pressure screenings
- Track community referrals
- Direct referrals for pain management/substance abuse clinic through community blood pressure screening sites
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