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CHWs Improving Health Outcomes in Rural South Carolina

Community health workers (CHWs) critically impact individuals and communities. The following case studies show how CHWs are changing lives and improving health outcomes throughout South Carolina.

At A Glance

CHW Case Study: Access to Healthcare Union, South Carolina

Almost 10% of Union, South Carolina's population is uninsured. A look at how CHWs are helping residents access care.

CHW Case Study: Eliminating Barriers for Latino/Latina Communities

Spartanburg, South Carolina

CHWs intimately understand the gaps for various rural and minority populations throughout South Carolina. How CHWs are engaging communities to address health inequities.

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Rural communities have long been underserved in healthcare and had CHWs before there was even a name for them.

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CHW Case Study: A Community Health Hub Lee County's Rural Health Library Program

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CHW Case Study: CHWs and Clinical Teams

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Building strong CHW teams throughout South Carolina by embracing best practices.

Introduction

For too long, individuals who are most impacted by health inequities have not had the access they need to the resources that can change their health and well-being. Evidence shows that the most lasting health solutions are produced by uplifting individuals and communities and aligning health services, resources, and support.

Impacts

Community health workers (CHWs) critically impact individuals and communities.

As trusted community members, CHWs serve as a resource for increasing health knowledge and self-sufficiency. CHWs also help improve health outcomes and overall well-being through various activities, including outreach, community education, informal counseling, social support, and advocacy.

Through the work of CHWs, people and communities have a greater understanding of the programs and services available to enhance their overall health. Assistance can be provided in various ways, such as helping with an unmet healthcare need or improving social determinants of health like transportation, food insecurity, living conditions, and even financial assistance and job opportunities.

The following case studies are a few examples of how CHWs in South Carolina are helping individuals, healthcare systems, and entire communities build on their strengths and break down barriers so everyone has a chance to be healthier.



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Access to Healthcare Union, South Carolina

Almost 10 percent of Union, South Carolina's population is uninsured. While Rona Jones had spent more than 20 years working for the state of South Carolina, when she left her job for health reasons, she suddenly found herself without insurance and with serious health problems.

While she had a family physician for years, Rona needed to see specialists for her recurring pain. Due to her lack of insurance, she had trouble getting referrals to address her needs. Without insurance, it was difficult to afford doctor visits, physical therapy, and prescriptions. That's when her family physician recommended she meet with a CHW at Access Health Union.

Rona says it got to the point that her pain was unbearable. "I kept coming up here to see my doctor, and there was nothing she could do for me. I couldn't get answers through anybody else. Nobody wanted to talk to me. I was just a person with no insurance," Rona recalls. "But one day, my family doctor put me in touch with Rena Goode, a CHW."

CHW Impact

Rena Goode is a CHW at AccessHealth Union. First working as a certified medical assistant in an OBGYN office, she got a bachelor's degree in healthcare administration and started working at the hospital in Union as a CHW.

Most of the patients she works with are uninsured, and one of her primary roles is to help them access care.

Rena noted that many people she serves are like Rona and don't even realize they have options. "I have clients that come to me. They have been to the ER probably 20 times, and no one has said anything about AccessHealth and the resources available to them."

She adds, "Working in the doctor's office previously, doctors, nurses, and staff, they don't have the time to talk with the client and patients and kind of just tell them about all the services available to them in Union." That's where CHWs come in, Rena says. "We're able to give that extra push of telling them about all the services and resources available in the community."

Upon the recommendation of her family doctor, Rona reached out to Rena to share the health challenges she was facing and explain her lack of health insurance.

That is when Rena got to work helping and advocating for Rona.

"Rena stepped in right away, and she has been my helper ever since. Without her, I probably wouldn't be standing here today," Rona said.





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Outcomes

Upon connecting with Rena at AccessHealth Union, Ronya learned about some of the Medicaid and disability coverage options available to her due to her injuries, which were related to the labor she performed for more than 20 years.

She also helped Ronya get the referrals needed to see specialists to address her pain.

"It's been a long road, but without Rena, I couldn't have made it," Ronya said.

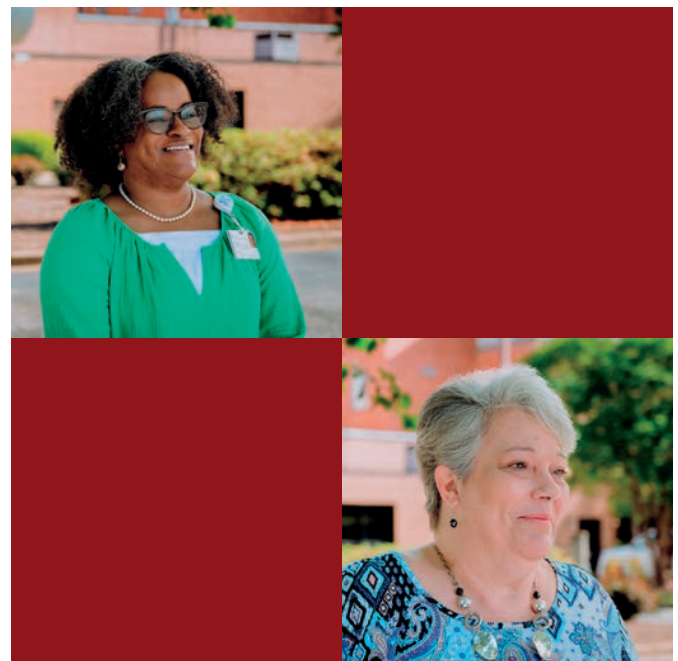
Throughout their three years of working together, Rena has helped Ronya get the health care services she needed and coached her on how to take charge of her overall health and well-being.

For all these reasons, Ronya credits Rena with helping to improve her health. She considers Rena a trusted friend and confidant and a resource for the community she lives in. Ronya has referred many friends and family members to Rena so they can get the same support she now has.

"I tell everyone to call Rena Goode at the hospital. I pass her name on to a lot of people; I give them her name because I know how important it was to me at the time that I needed her. I still need her," Ronya remarks.

"Every day, there's something that I don't understand, and I call her, and she explains it to me, or she directs me in the right way. Doctors don't always have time to explain what's going to happen, but Rena, she's always doing what she's good at - and that's helping somebody. I wouldn't trade Rena Goode for anybody."

"It's been a long road, but without (my CHW) Rena, I couldn't have made it."
- Ronya Jones, AccessHealth participant





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Eliminating Barriers for Latino/Latina Communities Spartanburg, South Carolina

CHWs intimately understand the gaps for various rural and minority populations throughout South Carolina. Engaging Latino/Latina individuals whose health inequities have impacted can open up dialogue and raise awareness that brings new and important perspectives to public health discussions and the development of resources.

PASOs, which means “steps” in Spanish, is part of the Center for Community Health Alignment and has a team of bilingual, bicultural CHWs across South Carolina that support the state’s Latino/Latina communities.

“I started as a volunteer at the Upstate Family Resource Center, and then I started doing case management. Seeing the challenges facing Latino/Latina communities,” said Nora Curiel Muñoz, a CHW supervisor and team supervisor in Spartanburg, South Carolina. That led Nora to help create and expand PASOs in Spartanburg County.

“We know that the Latino families are underserved, and it's because of many of the barriers that we face, like language barriers, but there are also many who are concerned about their immigration status and the lack of health insurance,” Nora added.

CHW Impact

In partnership with the Upstate Family Resource Center in Spartanburg and with support from CCHA and CHW leaders at PASOs’ central office, Nora supervises a team of five CHWs who work throughout Spartanburg.

Nora and her team educate, advocate, and encourage Latino/Latina individuals throughout Spartanburg by raising awareness about available services and creating partnerships to enhance the well-being of communities.

She notes that her PASOs team of CHWs often identifies barriers and gaps in healthcare and other services in their communities through community partnerships and advocacy.

For example, when they discovered the local hospital offered lactation services for new moms but that there were no Spanish language lactation services, she and her team worked with the clinical team at the Spartanburg hospital to create a partnership. Now there is a partnership with Spanish speakers who can help support the program and give Latino parents and babies access to lactation support.

“Through all these training and resources, - we’re creating a network of partners that didn’t exist before,” Nora says. “We try to be that bridge between the community and the service providers.”



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CHW Outcomes

From daily check-ins and updates to monthly meetings with partner organizations, Nora and her team collectively make a difference in the Latino/Latina communities they serve.

Throughout the COVID-19 pandemic, their CHW team helped educate the community on COVID vaccines and connect people to the available resources to get vaccinated.

The team is anchored in the community through its partnership with the Upstate Family Resource Center. It provides individuals and families various services and resources, including evidence-based training and health education, teen pregnancy prevention, and risk assessment programs.

Nora notes that while these services are available to the community, they are not always utilized. However, with the increased awareness of these programs that can be created by ongoing engagement - and more CHWs in the community - the result is a greater awareness and utilization of the services by community members.

According to Nora, "There are many services available. It's just that many people don't know about it. So that's part of our role - we're able to spread the word about all the services. And it is sometimes difficult to navigate the system. So that's something that we do as well. We help navigate and just create that connection and ensure it is happening."

Thanks to Nora and her team of CHWs, the Latino/Latina community in Spartanburg is better connected to services, has a greater understanding of how they can advocate for their health and are making lifestyle changes that improve overall health outcomes.

"Through all these training and resources, we're creating a network of partners that didn't exist before. We try to be that bridge between the community and the service providers."

***- Nora Curiel Muñoz, CHW
Supervisor***



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Neighbors Helping Neighbors Sumter, South Carolina

Rural communities have long been underserved in healthcare and had CHWs before there was even a name for them. In these rural communities, there's a deep history of people caring for each other and doing their best to support their neighbors.

Community health workers know the communities they serve and can provide support and access to care that best fits the needs of their participants.

CHWs have a deeper understanding of community needs and barriers and often have relationships with the individuals who live in the community. Because of these relationships, the CHWs can help people access the necessary services for a healthier life.

In Sumter, South Carolina, Lillie Fox is a CHW who likes to say she was a CHW before there was even a name. "It was just neighbor helping neighbor," she says.

Before becoming an official CHW, Lillie worked with community members and helped out wherever she was needed. Now a certified, independent CHW, she has continued taking care of community members, and she had a significant impact on her community during the COVID-19 pandemic.

This became particularly evident during the COVID-19 pandemic when Lillie was able to help individuals in rural Sumter County - some with mobility issues and/or transportation issues - access vaccinations and boosters to protect them against COVID-19.

CHW Impact

During the COVID-19 pandemic, Lillie saw firsthand the barriers to healthcare that can impact individuals and communities. Isolation resulting from quarantine measures and limited interactions with friends and neighbors resulted in many individuals' health needs not getting addressed, creating new barriers to care.

Lillie used her skills as a CHW to find unconventional ways to support her participants and ensure they received the healthcare and medicine they needed.

"It's one thing to talk to someone on the phone, but it's something else to physically see what they need and what you can do to help them," Lillie said.

Creating trusting bonds between herself and the community removes barriers of mistrust that people may face, especially in an unprecedented global pandemic, and ensures all in the community have information about and access to vaccines.

Lillie shared, "I make it my business to find out what's going on in the community and how the community can connect and make things better for the citizens of the community."



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Lillie has seen her hard work pay off through many success stories, several of which she heard about from participants long after her work with them had concluded.

"People come back to see you and tell you about the impact you've had on them," Lillie shared.

Outcomes

Lillie's participant Brenda McCleod is bedridden and after contracting COVID-19 in 2021, she wanted to get the vaccination but was having trouble finding a provider who would administer it in her home.

Upon hearing this, Lillie made it her mission to find a provider that would come to Brenda.

"She was determined, and she made call after call," Brenda said.

After multiple calls and visits to different vaccination sites, Lillie was finally able to secure Brenda an appointment to get the vaccination in her home, which other healthcare providers had been unable to do.

"I just started calling, calling, calling, calling, and then finally managed to get it, and it ended up right back with the agency that I started with, but apparently they didn't even know that that could happen," shared Lillie.

Brenda has a strong bond with Lillie, noting that when she had trouble getting access to the vaccination, she had every confidence Lillie would find the solution. "I trust her, she listens and understands my challenges," Brenda adds.

Lillie also helps Brenda understand the complexities of the healthcare system by answering her questions thoroughly.

Brenda shared, "She's like a friend and someone you can talk to who can help you."

Brenda says Lillie has saved her life - and there's no one else she would trust to help navigate all of her health needs. "I tell everyone, my neighbors, friends at church, call Ms. Lillie. She can help," Brenda says.

"I trust her (my CHW), she listens and understands my challenges."

*- Brenda McCleod, participant,
Sumter, South Carolina*





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Rural Community Resource Gaffney, South Carolina

In rural communities like Gaffney and the surrounding communities in South Carolina's Upstate, there are challenging barriers related to healthcare access and unmet social needs.

One of the most significant barriers is transportation. In many areas of rural South Carolina, the lack of easily accessible public transportation creates barriers to care and limitations on other resources and education available to individuals and communities.

"The average literacy level of the people we enroll is from 8th to 10th grade. They do not have health insurance, and they typically don't qualify for Medicare and Medicaid assistance, so a lot of our clients, when they go to the doctor, may not know how to advocate for themselves," Sheri Crocker says. Sheri is a CHW with AccessHealth Cherokee and provides resources for individuals and communities throughout the Upstate.

"As a CHW, we provide patient education. We provide resources for our clients. We get to know them a little bit better to determine their needs and refer them to our network of resources," Sheri explains.

From attending community events to educating and providing resources about health and wellness to helping connect individuals with transportation and navigate other barriers, CHWs like Sheri work day in and day out to support participants throughout the Upstate.

"As a CHW, we provide patient education. We provide resources for our clients. We get to know them a little bit better to determine their needs and refer them to our network of resources," Sheri explains.

From attending community events to educating and providing resources about health and wellness to helping connect individuals with transportation and navigate other barriers, CHWs like Sheri work day in and day out to support participants throughout the Upstate.

Sheri gives the example of individuals living with diabetes in rural communities who have only utilized emergency rooms to get care. When CHWs can work in communities and meet people at health fairs and other community events, participants learn about community resources and programs to help them manage their diabetes and live healthier lives.

Sometimes the work of CHWs like Sheri helps identify underlying and undiagnosed health issues.

"Instead of going back and forth to the ER to get medicine and check their blood sugar, as CHWs, we advocate for them and help them understand how they can take better care of themselves. Getting the word out through health fairs, connecting community partners, and providing resources have made a big difference in these communities," Sheri says.





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CHW Impact

Cathy was connected with Sheri for services at AccessHealth Cherokee after a visit with her general practitioner to address her stomach pain. She couldn't get a referral to a specialist because she didn't have healthcare insurance. Sheri began working with Cathy on access to specialists and preventative screenings.

"Sheri, my CHW, explained everything to me, she spent a lot of time with me, and that's how I got set up with Dr. Keating, who did a colonoscopy and immediately found my cancer," Cathy said.

When starting work with a new participant, Sheri conducts an extensive intake process where she spends time talking with them, exploring their health needs, and getting to know them. Sheri explains that CHWs work with individuals to evaluate their whole health, not just physical health, including assessing their mental health and lifestyle, as well as investigating where barriers might exist.

"During the enrollment process, we use a screening process which prompts me to talk about resources in our area that the client may not even be aware of. For instance, they may not even know about SNAP benefits available to them," she said, referring to the Supplemental Nutrition Assistance program available to certain individuals. SNAP provides nutrition benefits to supplement the food budget of families below a certain income level to purchase healthy food.

"I've connected folks with counseling services and other mental health resources through Cherokee Mental Health. It's during that time that I get to know the client and be able to talk to them about all the resources available."

"You know, if I hadn't met Sheri - or learned about AccessHealth - or her doing any of the things she has done for me, I wouldn't have known I had cancer, and I probably wouldn't be here today,"

- Cathy, AccessHealth Cherokee participant





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Outcomes

Without Sheri and several long conversations about her health and the resources available despite her lack of insurance, Cathy says her cancer may never have been found.

"You know, if I hadn't met Sheri - or learned about AccessHealth - or her doing any of the things she has done for me, I wouldn't have had my procedure, and I wouldn't have known I had cancer, and I probably wouldn't be here today," Cathy said.

Sheri was a resource to Cathy throughout the process. Sheri was available to family members to help ensure Cathy was getting the right care and medications. She also gave Cathy guidance on questions to ask her care team about her prognosis and the different procedures she would be undergoing.

For Sheri, Cathy's story exemplifies the outcomes they've been working to achieve in rural communities throughout the Upstate. Two years into a grant supporting rural CHWs in the Upstate, Sheri says she has seen drastically improved outcomes across communities.

AccessHealth began providing services to communities throughout rural South Carolina, and their impacts have been significant.

Since beginning to offer services in 2010-2022, AccessHealth impacts in rural communities in South Carolina include:

- 12,446 people enrolled in AccessHealth programs;
- 12,428 people received prescription assistance;
- 12,446 people were assigned medical homes;
- 2,184 people connected to smoking cessation services;
- 2,611 people connected to behavioral health services; and
- 25% of people have graduated from the program.

"It's just remarkable. I have heard from different providers that patients are now on course. They are keeping up with doctor's visits, have recurring visits, ask for and get the medications as they should, and reduce their ER visits to just life-threatening events only," Sheri said.

By working with individuals to assess unmet needs, CHWs are helping rural communities, and individuals like Cathy improve overall health and well-being in communities throughout South Carolina.





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A Community Health Hub Lee County's Rural Health Library Program

Health resources and support are not as easily accessible in rural communities as in cities and urban areas.

CHWs and clinical teams can partner to find innovative ways to reach out to community members and gain their trust, to create an environment where they feel comfortable.

In South Carolina, CHWs have started utilizing community libraries as access points to engage and uplift residents.

The Rural Health Library Program at the Lee County Public Library, supported by the Center for Rural and Primary Healthcare, offers the community a wide variety of support and resources. Jaquetta Graham is a CHW who helps run the library program in Bishopville, South Carolina.

From providing health assessments to the distribution of healthy foods to helping residents who visit the library connect to resources for employment and healthcare, the Lee County Rural Library program has significant impacts.

"The library is a place where people will hang out. Most people say to me, 'I thought it's just a place where you just read books,' but once they found out what was going on and what other resources they could find besides just books, it was amazing," Jaquetta said.

CHW Impact

Jaquetta shared that the library program has allowed her to engage with community members and better understand their needs, what impacts their health, and what barriers prevent residents from living healthier lives.

Since its start, the program has grown substantially, Jaquetta notes. "They're not only coming because they can get fresh fruits and vegetables and get screened, but also because they need more assistance."

The program has also garnered unexpected community support. "People actually came out and wanted to get more involved. They were bringing people from everywhere, bringing people in vans; we've had buses loaded with people show up."

Jaquetta makes personal connections with people in the library, learning a little about who they are and what they might need. She takes the time to get to know everyone who comes in, noting many in the community know she always wears purple, her favorite color. "They come for help and ask for the girl in the purple shirt," Jaquetta noted.

A community hub that isn't a healthcare facility eliminates some barriers that can lead to unhealthy lifestyles. "The library is a very safe space for many of them. They have begun to trust the workers in the library. They have gained trust with me," Jaquetta said.



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Outcomes

The success of the Rural Library Program has been multifaceted, from connecting people with primary care doctors to helping participants find housing and employment.

"I've helped someone get housing. He actually came to the community hub," Jaquetta said. "We talked, and it took a little while for him to really let me in, but after letting me completely in, he realized how much I could really help him," Jaquetta said. She notes she was able to complete a housing application and help him secure an apartment.

Jaquetta's role in the Community Health Hub allows her to build connections and close some barriers to improved health and well-being. At the same time, it has helped eliminate some of the social determinants of health for residents and helped them become community advocates.

She says having programs like the Library Program in the community shows the impact of eliminating barriers and helping residents take steps that will improve overall community health.

"It has changed their lives. It has changed their health for the better. It changed to the point that they want to go and tell somebody else and actually help somebody else."

"It has changed their lives. It has changed their health for the better. It changed to the point that they want to go and tell somebody else and actually help somebody else."

- Jaquetta Graham, CHW





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CHWs and Clinical Teams

The growing partnerships between CHWs and clinical teams are integral to community health.

CHWs have a more trusting relationship with individuals than most healthcare professionals and clinical teams and serve as the bridge to helping participants navigate the healthcare system.

They also can spend more time with participants than a health professional and can take more time to explain complex health and medical information than a doctor or nurse might.

CHWs have regular contact with participants, including often seeing them in their homes, giving them a deeper understanding of the participant's physical and mental health.

"Working with CHWs has been very beneficial for us," said Patti Smith, a retired midwife, and nurse in Orangeburg, South Carolina.

"We're more of the professional clinician, and they're more personable. For instance, we tell a patient their medication, diagnosis, and treatment and send them on their way. CHWs come in, and they can really explain to the patient what has been prescribed and why, they can make sure the patients understand what is going on," she explains.

"Unlike us who only see them in the office, CHWs are going into their homes, and they will stay as long as they need to. They only have a 15 to a 30-minute visit with us, but they have an hour to two hours with the CHWs," she said.

The CHW will spend time with the participant going over what was told to them by the medical professional, helping decipher medical jargon, and helping them understand all that was told to them by a doctor or nurse. If there's a problem, the CHW will follow up with the clinical team, Patti explained.

"It allows for the patient to talk to someone they are more comfortable with, but it also allows us to be more informed about what's going on with their care after they leave the office," she added.

Sometimes the information provided by the CHW can be lifesaving.

"We had a patient that was having some major postpartum depression. She did not recognize it, but the CHW called me, and we connected them with some behavioral health resources, and it made a big difference; it probably saved her life," Patti said.

Outcomes

Dr. Stephen Smith is in charge of a large clinical team in Society Hill, South Carolina, and has seen firsthand how CHWs can create better outcomes for participants in various ways.

"They have a big impact on improved outcomes - big time. What CHWs do kind of falls into a lot of different categories.

They're helping make sure participants are getting and taking their medicines. They help with transportation - whereas I usually don't realize that the patient had help getting here," Dr. Smith remarked.



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He added that having access to transportation in rural communities is critical to patients getting the care they need. "Having that access and help with transportation is so important."

Dr. Smith shared that CHWs also help his team improve the care they provide for patients, noting that working closely with CHWs allows clinical teams to understand participants' whole health better.

"You have a much clearer idea of what's happening in the home, what barriers might exist, why they might not be taking the prescribed medications, why they keep coming back with issues."

Working with CHWs increases that understanding and allows clinical teams to adapt and work with the CHW and participants to follow through with their care plan. They can answer questions, solve problems, and create a whole network of support systems to improve individuals' whole health.

"I can write the prescription, but then the question is, does the patient here in Society Hill have access to be able to get it? They can schedule an appointment, but can they actually get here? Do they know how to access insurance benefits that they qualify for? This is where the CHWs come in, and it's a game changer," Dr. Smith said.

"CHWs give us a much clearer idea of what's happening in the home, what barriers might exist, why they might not be taking the prescribed medications, why they keep coming back with issues."

- Dr. Stephen Smith, provider





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Maintaining a Team of CHWs

It is important for organizations to identify CHW supervisors who understand the role and core competencies of CHWs. Supportive and ongoing supervision is a best practice and motivates strong teams of CHWs who can significantly impact their communities. Supervisors can also be champions and advocates within health systems and clinical teams, as well as critical connectors within communities being served by CHWs.

Supervisors are trained CHWs and/or recognized community leaders who have worked in the community and can support CHWs who will also hold them accountable.

Impact

CHW supervisors should stay connected with the community to ensure the best care for participants. They can help build relationships with other organizations, acting as a mediator not only for the individuals served by the CHWs but for their CHWs too.

Nora noted that one of the essential parts of her job as a supervisor is to act as a sounding board for her CHWs, listening to challenges they face with participants or partner sites.

"I supervise five CHWs daily, and we have different programs they are supporting for participants here in Spartanburg, but I also attend a lot of meetings with partners, and my role is advocating for the people of the community with those partners," said Nora Curiel Muñoz, a CHW supervisor in Spartanburg, South Carolina.

She helps her team of CHWs navigate challenging cases, making sure that they have the support and knowledge to help them advance positive outcomes for participants. She remarks that she reinforces empathy and patience among her team of CHWs, and encourages them to celebrate successes when they happen.

"I have the most wonderful team you can imagine. I know they are kind and that they care about the people they are helping."

Nora's connection to her team allows her to be supportive and empathetic, listening to their needs and doing her best to meet them.

Her understanding of her community as a CHW enables her to give her team a greater understanding of what programs and partnerships are available to reduce social determinants of health.





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Outcomes

Marek Calhoun is a retired police officer who has made community health work his passion. Supervising a large team of CHWs isn't the same as being a first responder, he says, but it also isn't that different.

Marek says he can apply his understanding of the community from years of police work to his current role as a CHW supervisor at CareSouth Carolina, a federally qualified health center in the Pee Dee region of South Carolina.

"When I got into this position, it was my opportunity to change some things, to make sure we got out in the community and got the word out about the help people can get," Marek said.

"When I came into this position, we started participating in more events. We started doing more outreach and getting the word out about what CareSouth is and what type of programs and services we have to offer for our patients and community."

As a supervisor, Marek encourages his team of CHWs to be effective by being prepared. "I encourage my team each day to be preparing for the next day - to always be prepared for when a patient comes in. They should be looking at their schedule for the next day and the day after that - to always be planning and mapping things out."

Marek has also chosen his team carefully, ensuring they will be a good fit for CHW in his community. He has built a team with strong existing connections to the community.

"They're already invested here; you don't have to develop that buy-in/ They already have a vested interest in the community because they're from that community. They're friends. They're family; all of those folks live in their community. Now they're working in that community - they're invested in helping their community," Marek said.

Marek says he only sees a growing need for CHWs in communities throughout South Carolina. "It's going to be where you can't move through the health system without having a CHW. Every organization won't be able to function without one," he said.

"You need to have a CHW, or someone under that umbrella of community health work, to navigate for individuals from the community. To navigate with patients, to navigate customers in your business, to help them get what they need to live and have a better quality of life - all to improve health and wellness in communities all over."

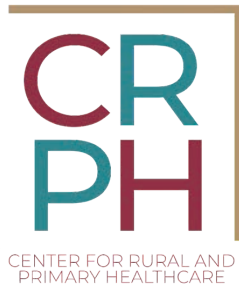


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CHWs Improving Health Outcomes in Rural South Carolina

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For more information visit: [SCruralhealth.org](https://Scruralhealth.org)

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