

# Mobilizing Houston's Tri-Community for Change



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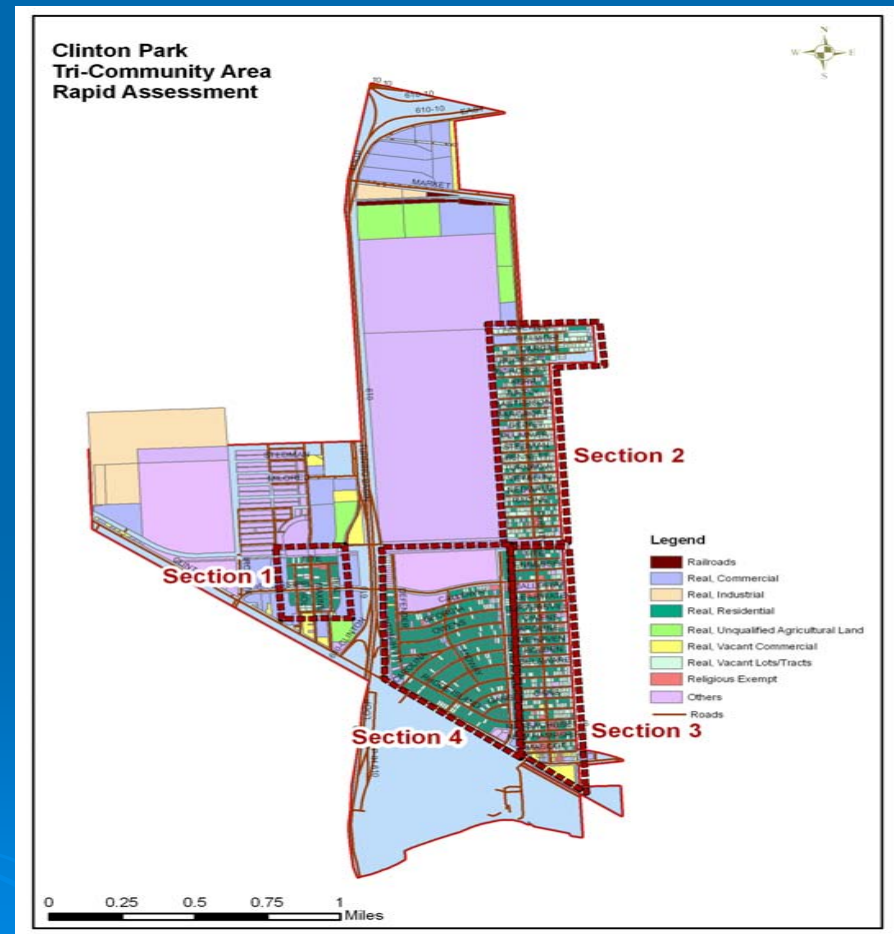
# Initiation of the Tri-Community Assessment and Intervention



The Houston Department of Health and Human Services (HDHHS) conducted the Tri-Community Assessment & Intervention (A&I) project in September 2006 after being approached by members of the community who felt that it lacked access to health care.

# Community Makeup

Clinton Park/Tri-Community is predominately African-American with approximately 900 houses and 2500 families. It is primarily a residential neighborhood located on the far eastern ridge of the Houston city limits and lies adjacent to the Port of Houston. Three sections comprise the neighborhood: Clinton Park, Fidelity Manor and Clintonview. It encompasses 2.75 square miles and takes up a portion of zip code 77029, most of census track 2336, and a portion of census track 2121.



# Mobilizing the HDHHS Workforce



Director Stephen L. Williams met with the Assistant Director of each Division within the Department and shared with them the concerns expressed by community members. He then charged the Department's leadership to work together to develop a plan whereby HDHHS would visit with or 'touch' members of every household in the Tri-Community Super Neighborhood to get a clear picture of community dynamics and issues affecting the community.

# Assessment and Intervention (A&I) Project Scope and Team

Access to care was identified as community's #1 priority.

## Scope

Community assessment and rapid intervention to understand/address “access to care” and other urgent health and environmental health issues.

## Team

Environmental Health Services

Arturo Blanco

Neighborhood Services

Vanessa Brown, Rick Gamble, Sheila Savannah

Disease Prevention and Control

Patsy Cano

Surveillance and Public Health Preparedness

Todd Griffin, Brandon Kimmins, Mark Perry, Angela Vasallo

# Purposes of the Tri-Community A & I

## Primary:

- To investigate access to health care issues;
- To explore environmental issues in the community;
- To link residents to needed health and human services; and
- To mobilize the department and community in an assessment and intervention effort.



## Secondary:

- To enhance HDHHS' capacity to mobilize itself to participate in a large-scale assessment and response effort;
- To mobilize Community partnerships and resources to broaden the department's service reach.

# Planning the Work

What does the community look and feel like?

- Compile demographic, health, & environmental health data
- Compile existing qualitative data

What should the A & I workforce look like?

- Identify field team members (Goal: 100)
- Identify potential volunteers from community agencies (Goal: 50+)

What resources can we bring into the community with us?

- Identify other City resources to join us
- Identify community resources to assist: (e.g., Gulf Coast, VISTA workers, AAA, metro-lift)

# Planning the Work

What will we do?

- Walk door-to-door to every home in the community
- Provide information on available services to every home 'touched'.
- Assess immediate and urgent needs for persons found at home
- Initiate intervention where needed/warranted
- Conduct an in-depth assessment/survey of each household

What will intervention look like?

1) Education (e.g.);

- One-on one health education, pre-packaged information including pamphlets/flyers

2) Direct assistance (e.g.);

- Eligibility screening, referrals to HDHHS and other agencies

3) Emergent care

- Nurses responding on-site, case managers initiating services onsite



# How to Get it Done

We realized that we need:

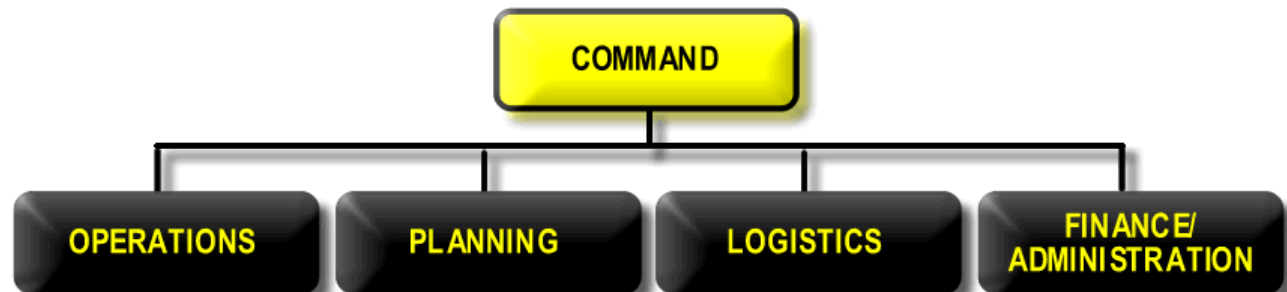
- Adequate staffing with clear accountability streams
  - Trainers, canvassers, data entry operators, timekeepers, service responders
- Safety personnel (Police, Animal Control, etc)
- Marketing materials to inform the community at large of our coming and purpose.
- An assessment tool
- Office supplies, hardware and software ( including laptops, database)
- Vehicle for transporting workers and materials
- A staging area for 'troop' deployment

# Building on What Works

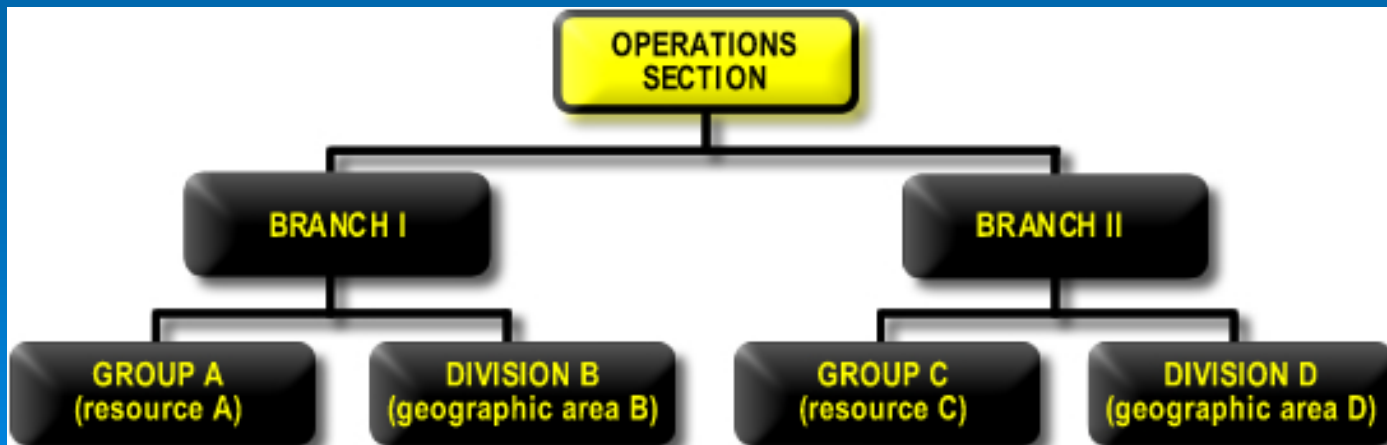
As a result of our experiences with hurricanes Katrina and Rita the department had begun identifying essential personnel that would be activated in the time of a natural or man-made disaster.

It was seen that an A & I would provide a prime opportunity for training departmental staff and acclimating them to the demands of responding to such an occurrence. It was decided that the A & I would borrow part of its operational structure from to the National Incident Management System (NIMS).

# What Does the Incident Command System Look Like?



INCIDENT COMMAND SYSTEM: COMMAND STAFF & GENERAL STAFF



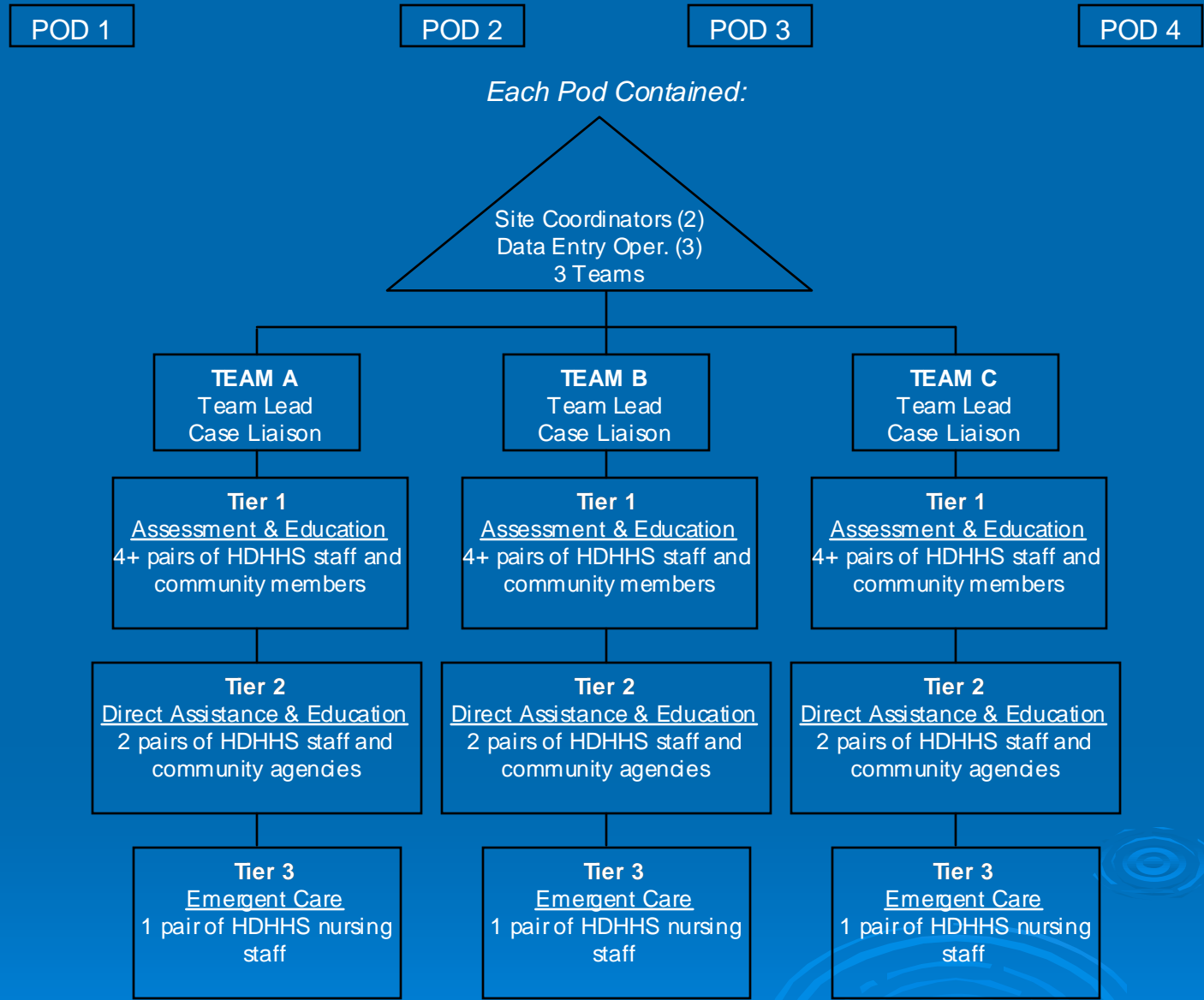
DIVISIONS AND GROUPS

# What did we get?

We got a hybrid

# Mobilizing HDHHS Staff and Volunteers

- *Approximately 220 people* (HDHHS staff and volunteers) took part in the two-day event.
- These people were divided into 4 large groups, or pods. Each pod had 3 teams and each team had 3 tiers.



## PODS with TEAM and TIER divisions

# Community Mobilization

*The following community partners were engaged:*

- Area Civic Clubs
- City of Houston General Services Department
- City of Houston Library Department
- Houston Hope
- Job Corps
- Neighborhood Centers, Inc.
- Neighborhood Protection (HPD)
- Sheltering Arms
- SNAP
- Tri-Community Super Neighborhood Council
- Youth Advocates, Inc.
- *A multi-agency team of partners (developing expanded services for the Tri-Community Center on Clinton Drive)*

# What We Did Not Find

**A community-wide problem with access to health care**

Medical Home and Supplies	Percent		
	Yes	No	No info
Does your household have a regular family doctor or clinic to go to when someone in the home is sick or needs a check-up? (N=322)	77.6	18.90	3.50
Does your household need help finding a regular family doctor or clinic? (N=322)	15.8	79.8	4.4
Has your household had problems getting medication or medical supplies in the past year (ie: getting medicine the doctor said you needed, getting bandages, or diabetic monitor strips)? (N=322)	14.3	82.3	3.4

# What We Found

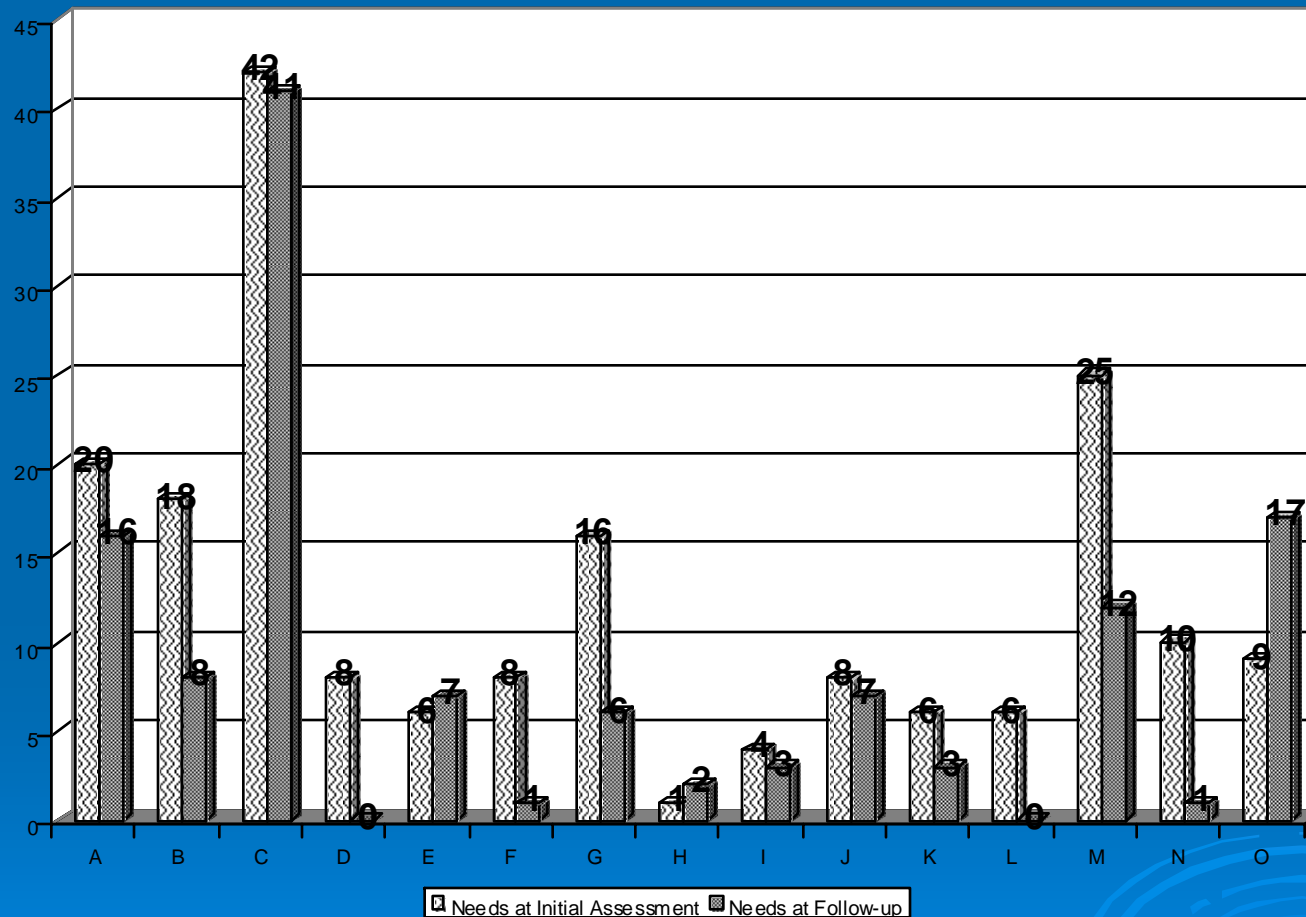
## Intervention Results

Based upon answers to survey questions, 183 referrals were received. Among those referrals:

85	(48%)	1 – 2 needs
64	(36%)	3 – 5 needs
16	(9%)	6 – 9 needs
7	(3%)	10 or more needs



# Findings: Comparison of Needs



A= Medical Home, B=Medical Supplies, C=Environmental Concerns, D=Counseling/Mental Health, E=Child Care, F=Recreation, G=Basic Needs (Food), H=Clothing, I=Housing, J=Education/Job Training, K=Financial Literacy, L=Legal Services, M=Senior Assistance, N=Disability Supports, O=Other

# Environmental Concerns Found

## Environmental Health Concerns

AIR, WATER, AND LAND CONCERNS	Percent		
	Yes	No	No info
<i>Are you concerned about the air you breathe? (N=322)</i>	67.4	26.1	6.5
<i>Are you concerned about your tap water? (N=322)</i>	56.5	37.3	6.2
<i>Are you concerned about the land in your community? (N=322)</i>	54.3	35.1	10.6

Table 3: Environmental Health Questions

# Continuing the Mobilization Push

Tri-Community Center, an HDHHS facility is being revitalized to serve as a hub for a variety of community action projects and interventions.

- The building will continue to house a senior congregate meal program.
- Houston Hope will locate a Community Technology Center with a neighbor-to-neighbor Time-banking program.
- The City's Library Department will bring a satellite e-library to the building
- The Environmental Health Division will continue to house an air monitoring station there and will initiate resident education and advocacy programs
- The Super Neighborhood organization will help provide referral and linkage services through the center.
- Houston Port Authority is partnering to install natural barriers to reduce the impact of road emissions and dust on property along Clinton Drive.
- HDHHS is developing plans assisting in improving the quality of life in the community through development of its Northeast Regional Plan.