

Washington, D.C.

Steering Clear of Emergency Rooms Leads to Better Health Care

Public Health Problem

Whenever uninsured Washington, D.C. resident, Eric Shropshire, needs to renew his medication supply for his diabetes, he goes to the emergency room (ER) at Greater Southeast Community Hospital. On any day, he is likely to be among an estimated 85% of ER patients who go to ERs for their basic health care. Due to a 10,000-person (2.57%) increase in ER visits, plus the closing of several major facilities since 2000, D.C. hospitals have faced continued overcrowding.

It is estimated that approximately 300,000 adequately insured District residents (50%) are still experiencing difficulty finding a doctor close to home. About 52% of District residents are said to live in federally designated primary care Health Professional Shortage Areas (HPSAs) and 30% live in federally designated Medically Underserved Areas (MUAs) or populations. This results in poor health, high costs, crowded emergency rooms, more hospitalizations for avoidable conditions, and higher rates of disability.

Taking Action

Hoping to steer low-income patients needing basic care away from ERs and into neighborhood clinics, the PHHS Block Grant funded the D.C. Area Health Education Center (AHEC) to provide the "Find Yourself Healthy Program". During 2005, AHEC developed a comprehensive training manual and hired community health navigators to educate and guide residents in Wards 7 and 8, two of the poorest areas in the district, through the health care system. Training included basic health information, introduction to opportunities for health care, and assistance in seeking care at nearby clinics. Block Grant funds were used to train 18 health navigators who helped 1,323 residents, including diabetics like Eric Shropshire, find basic health services in nearby clinics instead of in emergency rooms.

Implications and Impact

As a result, the average yearly increase in ER visits for this group decreased by at least 80%. In addition, with the availability of a reliable source of ongoing care, many residents will potentially avoid developing disabilities and chronic conditions. This will save the District thousands of dollars in health care costs.

At the end of its 5-year federal funding period, the AHEC faced extinction unless it could show the value of its health services as well as an ability to continue providing these services based on other sources of funding. The Block Grant "Find Yourself Healthy Program" was critical to AHEC's ability to attract future support and continue providing valuable health care to District communities.

Success of the "Find Yourself Healthy Program" led the District's state governing body to award \$600,000 to AHEC so it can continue to provide health education programs in 2006. In addition, the PHHS Block Grant will continue to fund AHEC to help other community organizations build health navigator programs throughout the District of Columbia.