

Spotlight on the Safety Net

*A Community Collaboration
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Gaston County Collaboration

Gaston Family Health Services (GFHS) was created by the Gaston County Health Department (GCHD) to help provide comprehensive medical care to indigent citizens. Today the two organizations collaborate to ensure the Gaston County safety net remains intact. Together, they provide primary care for adults, children, and special populations including HIV positive and mentally ill patients; pediatric and adult dental services; hospital care; reproductive health services; immunizations; behavioral health services and case management; and access to specialty providers.

The Gaston County collaboration, developed in 1989, brought these two safety net health care providers, under the same roof. This proximity allows them to share many of the same resources such as lab and billing staff and enables the provision of unduplicated comprehensive health care to the uninsured, low-income community. The GCHD primarily serves women and children whereas GFHS tries to fill in the gaps by providing primary care, acute care, and treatment for chronic diseases in populations who do not receive care at the health department.

Both GFHS and GCHD have physicians on staff to care for patients. In addition, GFHS has volunteer clinics staffed by specialists, such as ophthalmologists and podiatrists, as well as volunteers who work on pharmaceutical medication assistance programs for patients. Case management also is provided and is primarily targeted to chronic disease or HIV positive patients. There are no eligibility criteria for patients desiring to be seen by GFHS or GCHD; however, patients must reside within county lines for some health department programs. Both GFHS and GCHD use a sliding fee scale, although some services at the Health Department are provided free of charge. Together, the Gaston County collaboration sees about 78 000 patients annually—60 000 through the health department and 18 000 through GFHS. Approximately 55% of the patients seen at GFHS are uninsured, while the remaining 45% are covered by Medicaid (22%), Medicare (18%), or private insurance (5%).

Colleen Bridger, MPH, Gaston County Health Director, shared several valuable lessons for other communities considering this type of collaboration. Colocation is ideal because it facilitates the flow of information and communication between providers and patients. Preventing duplication of services is important because competition for insured patients can weaken care to uninsured, indigent consumers. Collaborations should utilize the strengths of each collaborating organization to best serve the patients' needs. By working together, organizations can fill in gaps in the services that are provided and the populations that are reached—frequently neither organization receives enough funding to provide all needed services to indigent patients. Collaborators should advocate for one another because doing so can build confidence in the community and in the collaboration. Finally, partners should communicate openly and honestly. Incorporating these lessons can help develop a tight knit environment for the collaboration and strengthen the work and success of both organizations.

*Contributions from Colleen Bridger, MPH, Gaston County Health Director, and Morgan Jones, MSPH,
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