



1770 967 FM - Buda, TX - phone: 512-312-2700 - fax:512-312-1600

INCREASE ACCESS TO CARE FOR MIGRATORY AND SEASONAL AGRICULTURAL WORKERS AND THEIR FAMILIES MIGRANT HEALTH PROGRAM SELF-ASSESSMENT TOOL

ORGANIZATION INFORMATION			
Organization Name			
CEO/Executive Director			
Address			
City		State	Zip
Telephone		Email	
CONTACT PERSON FOR MIGRANT HEA	ALTH/S	PECIAL POPULATIO	NS
Name		Title	
Telephone		Email	
DEMOGRAPHIC INFORMATION			
How many total patients served (include Medical	I & Denta	al users and those seekin	g mental health, substance abuse
services, etc.) served:			
2016 # of Patients served:	2017 #	of Patients served:	

How many total Migratory and Seasonal Agricultural Worker (MSAW) patients served (include Medical & Dental Users and those seeking mental health, substance abuse services, etc.)

2017 # of MSAW Patients served:

Total =	M =		S =		Total =		=	S =	
Name of Service Delivery S (please list – add m rows if necessary	ore		es Served Site		Total Number of Ag Worker Patients at Site		Year 2016	Year 2017	
ASSESSMENT QUESTIONS 1. Describe your Ag Worker population (i.e. types of tasks, industries, are they migratory workers, seasonal workers, what they do when not working in agriculture, etc.)									
what they do when not working in agriculture, etc.)									
2. What funding resources are dedicated to Increasing Access to Care for agricultural worker population? Ex. 330 MHC funding; other grant support?									
3. Which type and how many staff are dedicated to serving Special Populations? For example, do you have outreach workers or nurses, case managers, etc. If so, how many?									
4. After reviewing past year? ☐		ealth center U	IDS numbers, ha ☐ Not S		you seen an increa s	se ii	n Ag Worker pati	ent numbers in th	ne
						se ii	n Ag Worker pati	ent numbers in th	ıe

5. If yes, what do you think has contributed to the increase?

2016 # of MSAW Patients served:

	Improved outreach strategies Word of mouth		elcoming environr ailability of bilingu	ment and customer service
	Marketing			ical Assistance received
	Extended service hours	☐ Sys	stem changes	
Ш	Other: please indicate		_	
6.	After reviewing your health center UDS numbers, past year?	have you	u seen a decrea	ase in Ag Worker patient numbers in the
7.	If yes, what do you think is contributing to the decreased competition Challenge with customer services Change in hours of operation Communication challenges Lack of bilingual staff No money to hire outreach workers MSAWs don't know that the health center exists	MS No No Chi	SAWs don't know insurance money to pay fo allenge with trans as MSAWs in the ar of accessing s ner: please indic	sportation area ervices
8.	Do you have a patient registration policy? Yes – please attach policy	0	☐ Not sure	
9.	Do you have a patient registration policy for Special Yes – please attach policy		ions that include:	s Ag Workers?
	Do you have Ag Worker specific patient registration Yes – please attach procedures		res to assist staf	f in identifying Ag Worker status?
	Do you have a patient registration form that includ in both English and Spanish?	-		t migratory or seasonal Ag Worker status
ш	Yes – please attach registration forms No	J		
12.	Are any of the following questions below asked dur Yes – please attach registration forms		egistration proces Not sure	ss?
	In the last 2 years, have you or anyone planting, picking, preparing the soil, packi animals like cows, chicken, etc.			
	In the last 2 years, have you or a member agriculture (farm work)?	of your fa	amily lived away	from home in order to work in any type of
	Have you or a member of your family st disability or age (too old to do the work)?	topped m	igrating to work	in agriculture (farm work) because of a
13.	Do you currently provide training to your patient repatients?	gistration	staff on how to a	accurately identify and register Ag Worker
	Yes – please describe. (Attach training materials.) w often do you provide the training and who provide:	s the trair	☐ No ning?	☐ Not Sure
	Y ,			
14.	Does your new employee training include training of Yes – please describe	•	I populations, like	e Ag Workers?
15.	Does your new employee training include how to ac Yes – please describe		identify and regis	ster Ag Worker patients?

16. What are some issues your health center has encountered pertaining to increasing access to care for Ag Workers? How did you address the issue/s?
17. What opportunities would you like to explore that can help you further increase access to care for Ag Workers?
GOAL SETTING
18. What are some NEW strategies/programs that you can implement to increase access to care for the Ag Worker population?
19. What kind of Training and TA do you need to help you improve services to the MSAW population?
20. Would you like to make a commitment to increase access to care for MSAWs? ☐ Yes ☐ No ☐ Not Sure
21. If yes, what is your one year goal for a percent increase in the number of MSAW patients to be served? 5%

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