# Health Disparity Reduction Project

Putting Clinical Prevention Into Action

Larry Vitale, RN, MPA, MPH School of Nursing



# San Francisco State University School of Nursing

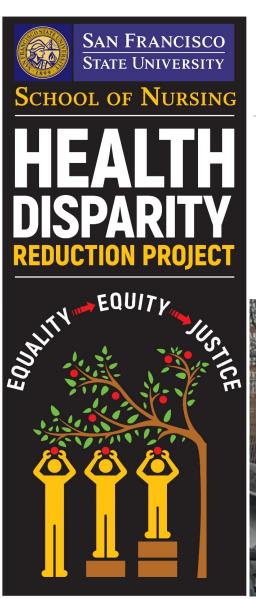
- Dedicated to social justice
- Commitment to reduce health disparities in our local communities
- Provide future nurses with an educational and experiential foundation in clinical prevention
- Intention to shape the ethical behavior of our future nurses who will certainly have marginalized persons as their patients



# From our Mission and Philosophy webpage

All students, regardless of chosen emphasis, will complete community health practicums in the pre-licensure phase of the program. In accord with the SF State mission, the School of Nursing is dedicated to the practice of social justice. As a result, we have an unwavering commitment to reducing health disparities in our local communities. To fulfill that commitment, most of our community health practicums are located in underserved San Francisco neighborhoods. While work in these communities may be challenging, we believe that the experience prepares our students to become productive, ethical and active citizens.





# Health Disparity Reduction Project

- SF is a city with stark social inequities
- Estimated 7,500 homeless persons
- Severe housing 'shortage' and high rents





# 1<sup>st</sup> semester course in clinical prevention

- Utilizing the Clinical Prevention and Population Health Curriculum Framework (ATPR)
- Clinical Preventive Services and Health Promotion
  - 1. Screening tests
  - 2. Behavior Change Counseling
  - 3. Preventive medications
  - 4. Information/Education

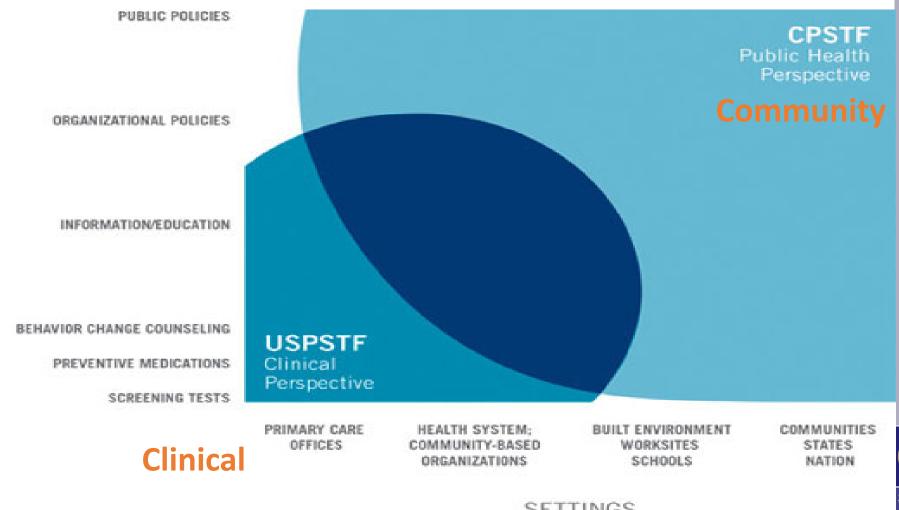
#### Clinical Practice and Population Health

- Practicum in multiple low-income housing facilities
- Spring 2019: 8 clinical sections of 8 students, each had 9 health screening events over a 5-week period. Average 16 residents per screening session x 9 = 144.
- Total for the 8 sections = 1,152 low income residents assessed



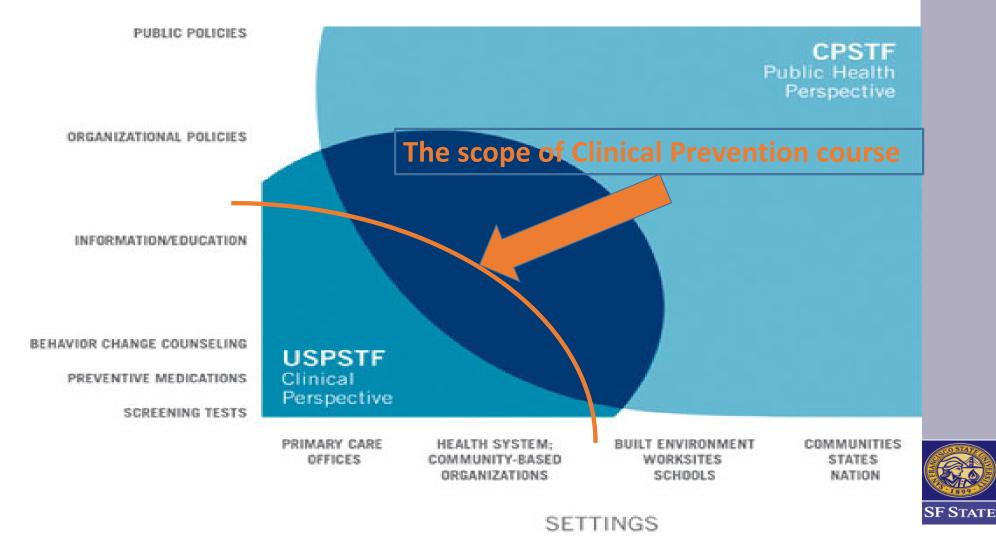


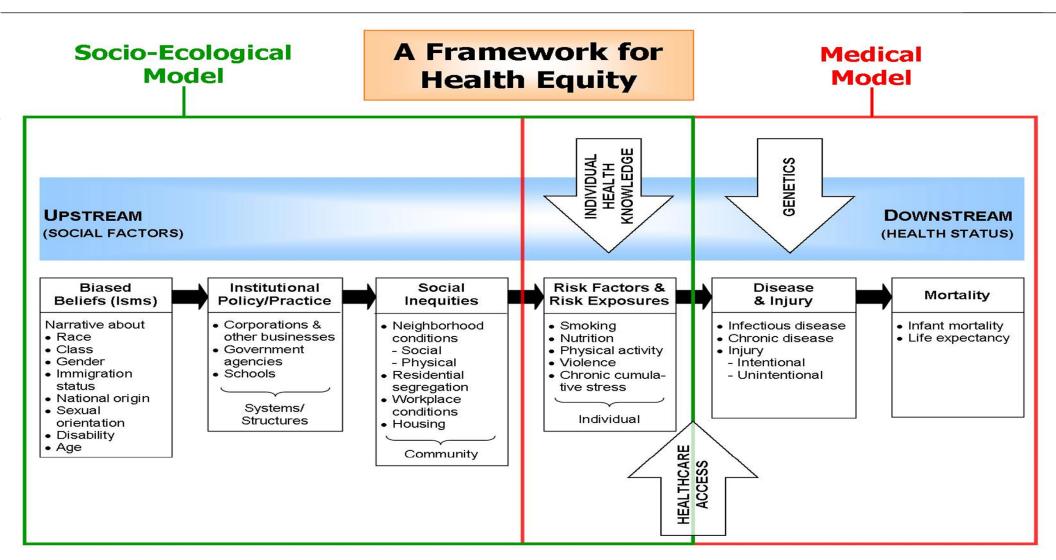
# Improving the health of the population



SETTINGS

# Health Promotion in Nursing







## Course Content

#### **Based on practice guidelines**



- Concepts of Clinical Prevention
- Cardiovascular Disease: Risk Assessment, Control and Prevention, CVD Preventive Medications
- Diabetes: Risk Assessment, Control and Prevention
- Promoting Senior Health in the Community: falls risk, hearing, vision, cancer screening
- Effective Health Communication: implicit bias, cultural humility, harm reduction, motivational interviewing
- Infectious Disease: Basic Concepts of Control and Prevention. Antibiotics and antibiotic resistance
- Immunization and Vaccine-Preventable Disease
- Healthcare-Associated Infections and Prevention
- Promoting Health while Traveling Overseas: global health issues, vector-borne disease, diarrhea
- Latent Tuberculosis Infection (LTBI) and TB
- Sexually Transmitted & Bloodborne Infections: Chlamydia, Gonorrhea, Syphilis, Hep B, Hep C, HIV.
- Protecting Patient Health and Safety: errors, patient advocacy, complexity



J.S. Preventive Services

Screener's initials on the line preceding the test	Atherosclerotic Cardiovascular Disease (ASCVD) Risk Estimation (Intended for use in persons 40 -79 years old, if no ASCVD present and LDL-		
Screening Date:	Cholesterol is <190 mg/dL)		
Date of last medical visit: Primary care provider:	Adults 40 to 79 years of age		
Date of last hospitalization: Reason/cause?	10-Year ASCVD Risk:% calculated.		
Sex, Age, Race (circle one) WH, AA, Other	Recommendations based on American College of Cardiology Guidelines:		
Blood Pressure:/			
Previous diagnosis of hypertension? □Yes □No □Unknown			
Treatment for hypertension? □Yes □No			
Taking blood thinners? $\square No \square Yes$ or Aspirin? $\square No \square Yes$	Weight:, Height:(inches)		
Current Smoker (within last year)? □Yes □No □Former	BMI:, Waist circumference: (inches)		
Total Cholesterol (mg/dL):			
HDL Cholesterol (mg/dL):	Fall Risk Factor Assessment		
LDL Cholesterol (mg/dL):(estimate)	Timed Up and Go (TUG) Test ( <u>Gait</u> ) ≥12 seconds? □No □Yes  4-Stage <u>Balance</u> Test. Full tandem stance <10 seconds? □No □Yes  30-Second Chair Stand Test ( <u>Strength</u> ). Below average score? (See table) □No □Yes  Postural hypotension? □No □Yes, Systolic drop Diastolic drop  Fall Risk: Low□ Moderate□ High□		
Treatment with statins? □No □Yes, which?			
Non-fasting Glucose (mg/dL):			
Non-fasting A1C:			
Last meal (how many hours ago?)			
Previous diagnosis of diabetes? □Yes □No □unknown			
Taking diabetes meds? □No □Yes, which?	Date of last dental visit: Dental care provider:		
If diabetic: Foot assessment done? □No □Yes, impression:	Dental assessment done? TNo TVes impression/recommendations		
Vicion ros	ults:   With glasses   Pass   Needs Referral, comments / recommendation:		
Vision: Right 20 / Left 20 /	Liveus Referral, comments / recommendation.		
Hearing:	Hearing results		
	Right Ear         Left Ear           □Pass         □Pass		
Frequency: 1000 Hz 2000 Hz 3000 Hz 4000 Hz	Hearing Loss (HL)		
Right (dB) Decibels	□Slight HL □Slight HL		
	□Moderate HL         □Moderate HL           □Severe HL         □Severe HL		
Left (dB) Decibels	□Profound HL □Profound HL		
	□Needs MD or audiologist referral, comments / recommendation:		



#### Additional Screener Recommendations and Comments

CDC Vaccine Schedules

Recommended Adult Immunizations Based on Age and Medical Conditions:

Other recommendations or health screening tests based on your age: e.g., AHRQ Electronic Preventive Services Selector (ePSS)

#### KNOW YOUR NUMBERS

Blood Pressure (mmHq)

<120 systolic and <80 diastolic Normal 120-129 systolic and <80 diastolic Elevated

130-139 systolic or 80-89 diastolic High Blood Pressure, stage 1 ≥140 systolic or ≥90 diastolic High Blood Pressure, stage 2

>180 systolic or >120 Hypertensive Crisis

Blood Glucose (mg/dL)

Random: 60-140. Diabetes: ≥200

2 hours after eating: 60-140. Diabetes: ≥200

Fasting: Normal: 60-99. Prediabetes: 100-125. Diabetes: ≥126 A1C: Normal: <5.7%. Prediabetes: 5.7-6.4%. Diabetes: ≥6.5%

Total Cholesterol (mg/dL)(lower is better) <200-desirable, ≥240-very high LDL Cholesterol (mg/dL) (lower is better) <100-desirable, ≥190-very high HDL Cholesterol (mg/dL) (higher is better) <40, major risk. ≥60, desirable

BMI <25 - Normal | 25-29.9 - Overweight | >30 - Obese High Risk Waist circumference Men: >40 inches | Women: >35 inches

Vision. Normal vision is 20/20 20/40 and above is a risk for falling

Hearing

No Hearing Loss (normal): ≤25 dB Mild Hearing Loss: 26 - 40 dB Moderate Hearing Loss: 41 - 60 dB Severe Hearing Loss: 61 - 80 dB Profound Hearing Loss: > 90 dB

Chair Stand - Below Average Scores		
Age	Men	Women
60-64	< 14	< 12
65-69	< 12	< 11
70-74	< 12	< 10
75-79	<12	< 10
80-84	< 10	< 9
85-89	< 8	< 8
90-94	< 7	< 4





#### Health Screening Record for

#### Name

#### Date of Birth

San Francisco State University, School of Nursing 1600 Holloway Ave, BH 357, San Francisco, CA 94132 Office telephone: 415-338-1802. Internet: http://www.nursing.sfsu.edu/

"In accord with the mission of San Francisco State University, the School of Nursing is dedicated to the practice of social justice. As such, we have an unwavering commitment to reducing health disparities in our local communities. We sincerely hope that by offering these selected clinical preventive services, we have contributed to your health and the health of your community."

- Larry Vitale, RN, MPA, MPH, Community Clinical Practicum Coordinator

Please consider a tax-deductible donation to our Health Disparities Reduction Project https://www.nursing.sfsu.edu/content/health-disparity-reduction-project



# Health Disparity Reduction Project

The HDRP is supported by donations, and volunteer nursing students, which provide clinical preventive services on a voluntary basis, outside of clinical practicum.



The initiative has two main objectives:

- provide clinical preventive services to marginalized populations, and
- 2. contribute to the ethical comportment of future nurses.









Outreach to homeless IV drug users (in partnership with SF AIDS Foundation's Syringe Access Services) to screen for diabetes, hypertension, and assess any untreated wounds





# Hepatitis B outreach and education services

Long-standing Hep B Free SF Ambassador program that provides 'on the ground' services for the SF Hep B Free Coalition, that they would otherwise be unable to afford









San Quentin State Prison, August 2018



Annual flu immunization SAN FRANCISCO campaign in all of San Francisco's homeless shelters More than 300 flu vaccinations

given in more than 20

homeless shelters last year

### Rafiki Coalition for Health and Wellness

Regular health screening at a wellness program serving African-Americans in the Bayview district of San Francisco







# Kai Ming Head Start Annual Parent and Staff Health Fair in SF Chinatown











# Shared governance







NSA Directors of Community Health, Directors of Hep B Ambassador Program. Establishing schedules, recruiting volunteers, coordinating equipment and supply hand-offs.



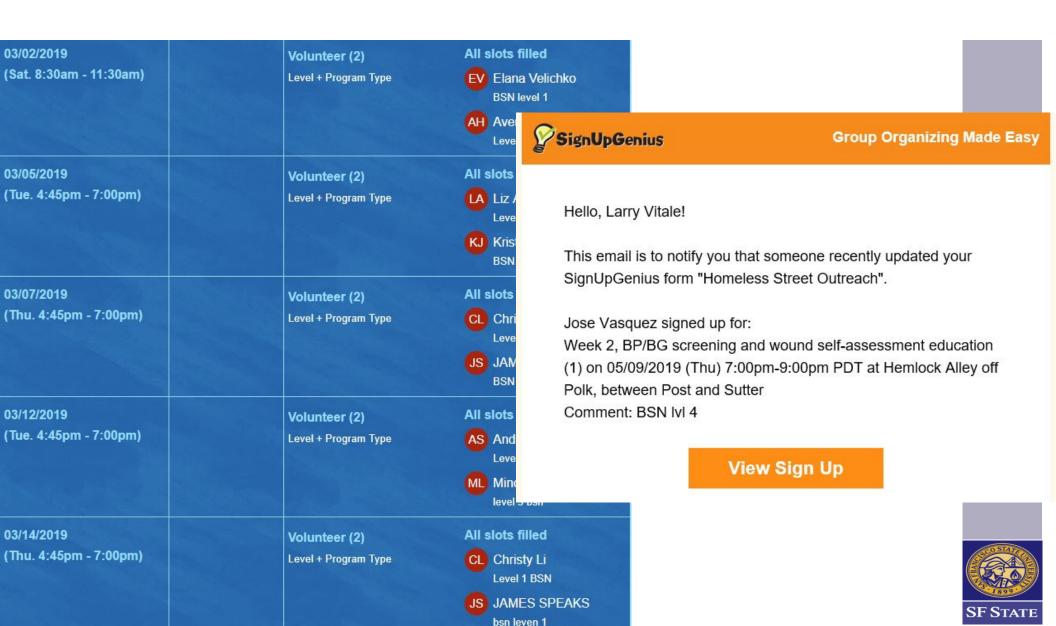
Don't miss our special offer - up to \$100 off premium plans!

Signup Genius is a free online scheduling service that has been an invaluable aid to keep our many volunteer events staffed and organized.

# Group Organizing Made Easy

Schools Family Business Volunteers Sports Church Temple Potluck Fundraising College

Create a Sign Up



# Conclusion

The volunteer opportunities give our nursing students additional clinical experience in community health, and helps them 'put a human face' on marginalized populations.

Our intention, besides providing needed health services, is to shape the ethical behavior of our future nurses, who will certainly have marginalized persons as their patients.

The HDRP also serves as a fund-raising mechanism to support the cost of medical supplies and equipment used for health-promotion activities that improve the health of our community while training the nurses of tomorrow.





School of Nursing

# HEALTH DISPARITY REDUCTION PROJECT



EQUALITY ------ EQUITY ------- JUSTICE

