Enhancing the Use of Clinical Preventative Services for Older Adults Learning Collaborative (Session 2 of 4)

National Center for Health in Public Housing



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- The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.



Training and

Technical

Assistance



Research and Evaluation Outreach and Collaboration

Increase access, quality of health care, and improve health outcomes



Speakers and Moderators



Kevin Lombardi MD, MPH Director of Research



Fide Pineda Sandoval, CHES Training and Technical Assistance Manager



Housekeeping

- All participants muted upon entry
- Engage in chat
- Raise hand if you would like to unmute
- Meeting is being recorded
- Slides and recording link will be sent via email

Video Conference via



Learning Objectives

Identify key health related social needs that impact access to clinical preventive services.

Analyze the barriers faced by older adults in utilizing preventive care and propose actionable solutions.

Explore evidence-based strategies for improving preventive health services in public housing communities.

Discuss the role of healthcare providers, community organizations, and public health programs in enhancing access to preventive services.



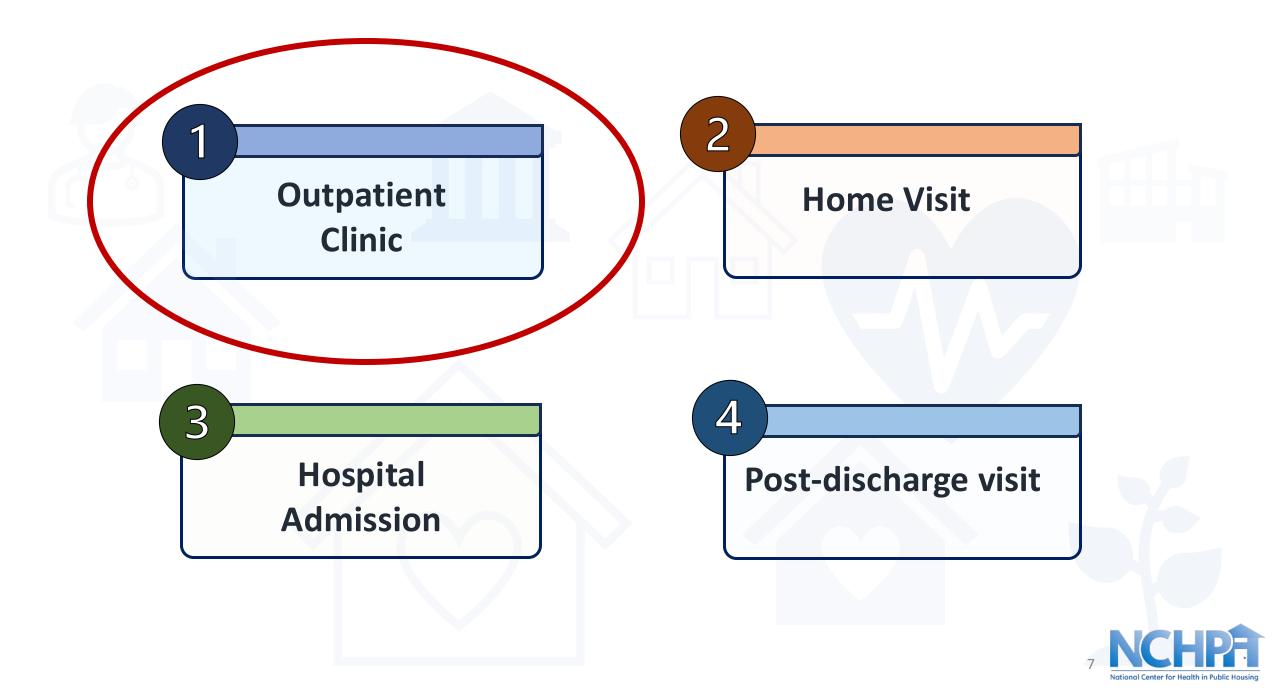
Enhancing the Use of Clinical Preventative Services for Older Adults

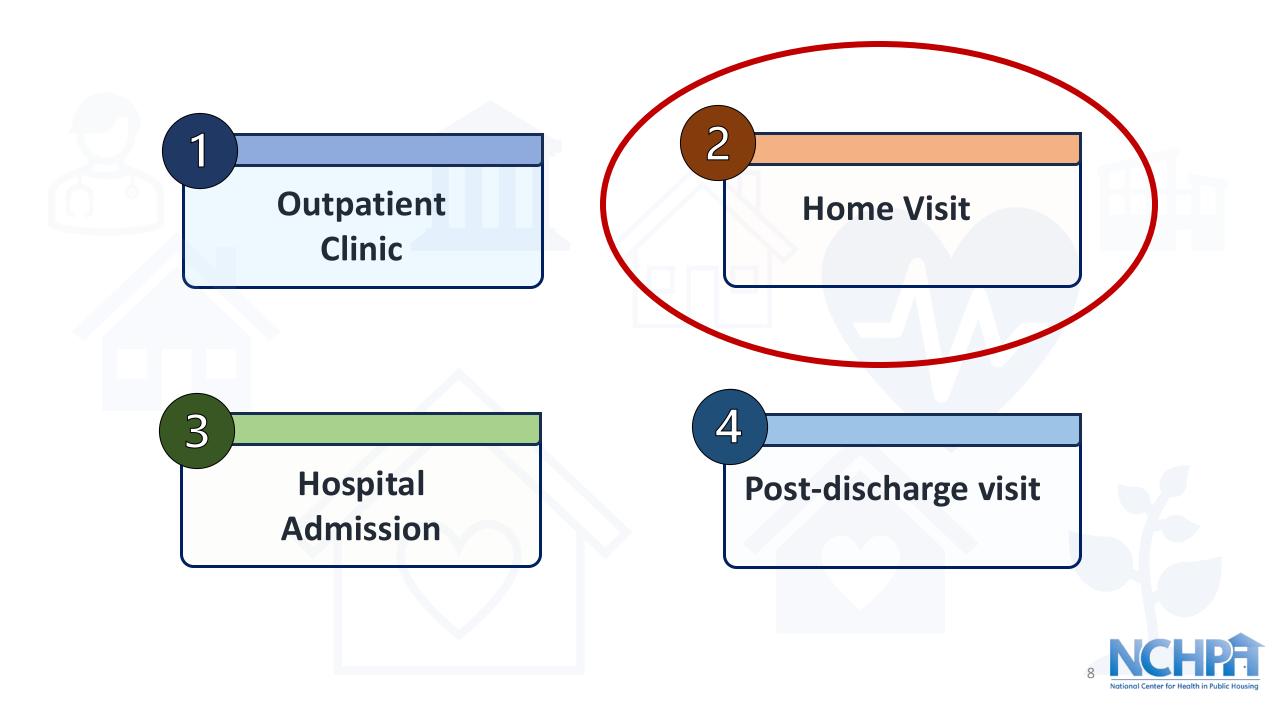
Dr. Kevin Michael Lombardi MD, MPH

Director of Research The National Center for Health in Public Housing North American Management



National Center for Health in Public Housing







Mrs. Tiller is a 73-year-old woman and resident of public housing who presents in your clinic for her 6-month wellness visit. The patient has a past medical history of:

- Hypertension
- T2DM (6.6)
- Osteoporosis
- Hysterectomy (2009)
- Breast cancer (2006) post double mastectomy.
- Vitamin D deficiency
- Anemia (microcytic)
- Generalized Anxiety Disorder (GAD)

The patient takes a total of 20 medications for these conditions. She has them listed on a piece of paper and a person that she says her daughter wrote for her.



Case Study: Preventative services in older adults

Mrs. Tiller tiller undergoes a standard intake, which includes a a vitals check and a social needs screen. The results are as follows:

Today:

BP: 145/72 HR: 72 RR: 14

Last visit (2024):

BP: 136/68 HR: 70 RR; 14



Stroke, Confusion, Headache, disability

Hypertensive Retinopathy

Heart Attack, Congestive Heart Failure

Chronic kidney disease (CKD), hypertensive nephrosclerosis, ESRD, Proteinuria, AKI

Insulin insensitivity, elevated blood glucose





Preventative Services in older adults

Please take a moment to type your response to the following:

1. What are the ways that Mrs. Tiller's Hypertension may impact her risk of injury?



Case Study: Preventative services in older adults

Appendix WellRx Questionnaire DOB Male___ Female _____ WellRx Questions

1. In the past 2 months, did you or others you live with eat smaller meals or skip meals because you didn't have money for food? Yes No

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2. Are you homeless or worried that you might be in the future?
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Yes

- 3. Do you have trouble paying for your utilities (gas, electricity, phone)?
- Yes
- 4. Do you have trouble finding or paying for a ride?
- Yes
- 5. Do you need daycare, or better daycare, for your kids? Yes













Link: To Resource



Case Study: Preventative services in older adults

Yes	No
6. Are you unemployed or without regular income?	
Yes	No No
7. Do you need help finding a better job?	
Yes	No No
8. Do you need help getting more education?	
Yes	No
9. Are you concerned about someone in your home using drugs or alcohol?	
Yes	No No
10 Do you feel unsafe in your daily life? Yes	
Yes	No
11. Is anyone in your home threatening or abusing you?	
Yes	Mo No

The WellRx Toolkit was developed by Janet Page-Reeves, PhD, and Molly Bleecker, MA, at the Office for Community Health at the University of New Mexico in Albuquerque. Copyright © 2014 University of New Mexico.

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Link: To Resource



Mrs. Tiller is questioned regarding her social needs screen and living situation, she discloses the following details:

- Mrs. Tiller lives alone in a one-bedroom apartment.
- Her adult daughter and son both live within 20 miles of her home. Two other children live in different areas of the country.
- She does not have a healthcare proxy or advanced directive of any type.
- She is active at her local church and public housing residents support group.
- Her daughter and neighbors often "help her" with her medications.





Preventative Services in older adults

Please take a moment to type your response to the following:

1. What social support resources are appropriate for Mrs. Tiller at this time?

2. What clinical resources are appropriate for Mrs. Tiller at this time?



Mrs. Tiller's provider refers her to their Health Center's Social Services Department.

The patient's Social Screen is reviewed by a Social Worker, who arranges for a Community Health Worker (CHW) to visit Mrs. Tiller at her home, to complete a home safety check and perform medication reconciliation.





Mrs. Tiller's CHW enters the patient's home and start's her visit with her medication reconciliation; While sitting in Mrs. Tiller's Kitchen she performs the reconciliation and observes the following:

- Mrs. Tiller takes a total of 23 medications daily. This includes vitamins and supplements. All are prescribed by her physician.
- The medication list that Mrs. Tiller carries with her is not up to date, and omits several new antihypertensives she has been prescribed in the last year.
- She does not use a pill organizer.
- Her pill bottles are neatly organized.
- Mrs. Tiller is occasionally helped by her daughter and neighbors with her medications. She usually does this herself.





Preventative Services in older adults

Please take a moment to type your response to the following:

- 1. What concerns do you have from Mrs. Tiller's medication reconciliation?
- 2. What are some ways that Mrs. Tiller's medication management can be improved?



Case Study: Preventative services in older adults

Next the CHW performs a health check, and records Mrs. Tiller's vitals. She notices the following:

BP: 172/80

HR: 82

RR: 18

BGC: 180





Preventative Services in older adults

Please take a moment to type your response to the following:

1. What is your impression of Mrs. Tiller's vitals check?



Mrs. Tiller's CHW next begins her home safety check. She walks through the patient's home checking her heating and cooling, her carbon monoxide and smoke detectors, assesses social isolation, food security and accessibility needs.

Her notes indicate the following:

- Mrs. Tiller lives in a Tidy one-bedroom apartment by herself.
- She is visited by neighbors twice per week, and her adult daughter or son once a month each, on average.
- She is active in several social groups with friends and neighbors.
- There is stale and spoiled food throughout her kitchen. No fruit or vegetables are present.



Her notes indicate the following:

- Mrs. Tiller's apartment is tidy but cluttered with belongings. Her home includes several pieces of furniture which may fall, and there are several electrical cords, floor transitions and carpets that she may trip on.
- She is afraid of falling while navigating in her home.
- Chemical detectors all lack batteries and are not functioning.
- Her bathroom is small and crowded, without any disability or accessibility features.
- There are exposed wires in the 6-step staircase leading to her apartment.
- There are no steps in her home.



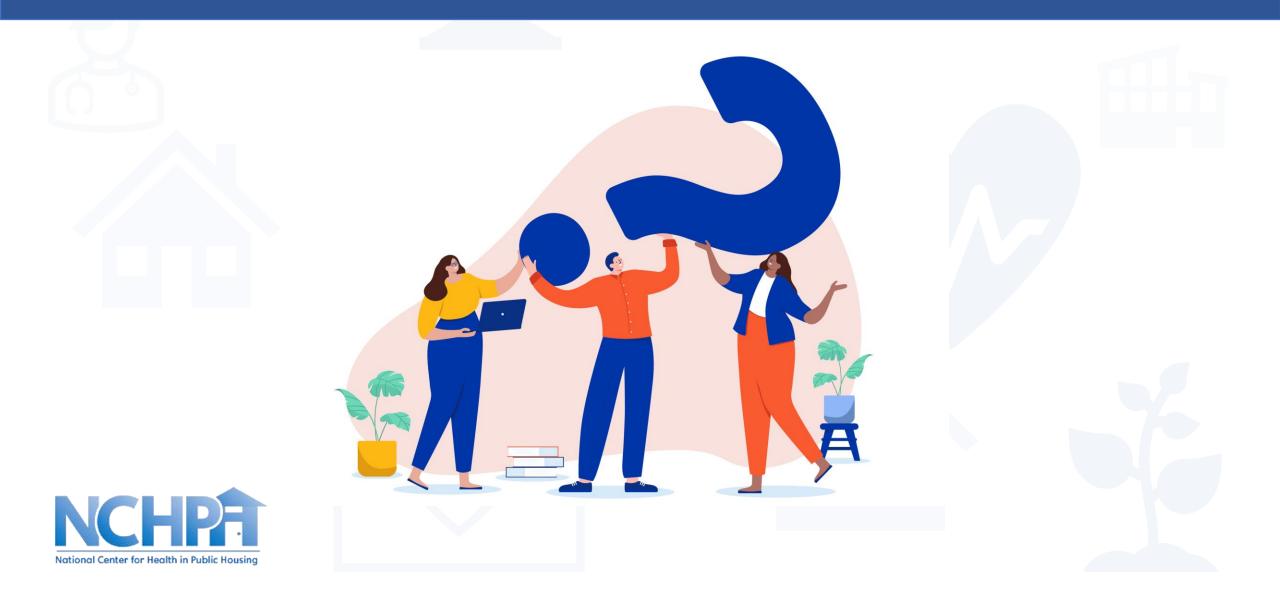


Preventative Services in older adults

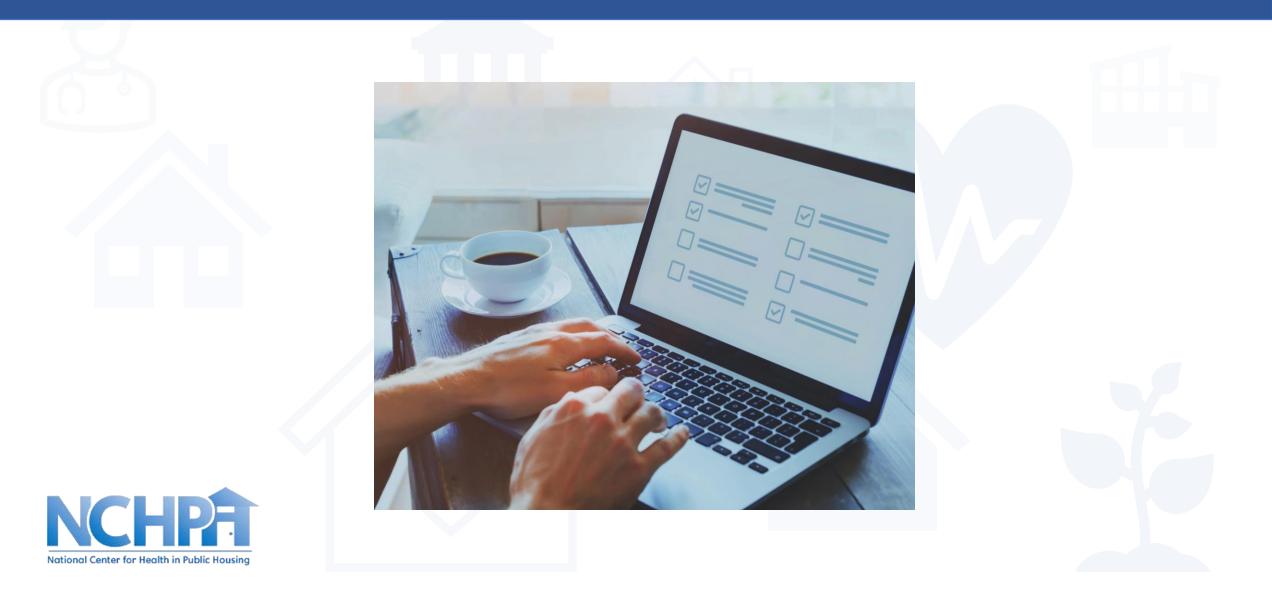
Please take a moment to type your response to the following:

1. What recommendations do you have for improving safety in Mrs. Tiller's home?

Q & A Session



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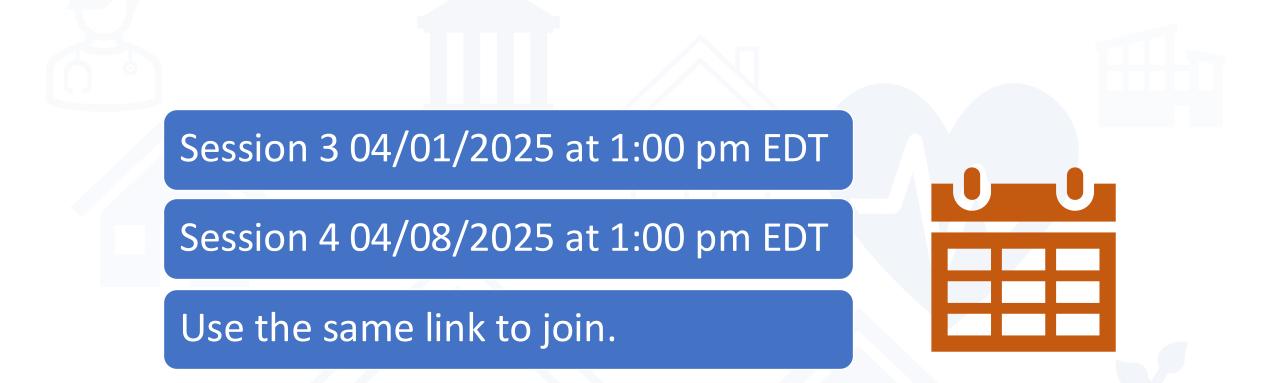


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Thank you!

