Prevention Navigation

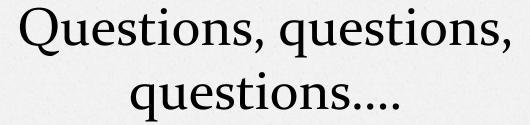
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- Define difference between public health and population health
- Understand the role of navigation in disease screening, prevention interventions and abnormal results
- Identify potential barriers to care
- Recognize cultural, societal, language and health literacy impact on overall health





- How do you know where to go?
- How do you know what you need to do?
- How do you know something is wrong?
- Who can you ask for answers?
- Who do you trust to do the right thing?
- What is health literacy and why is that important?
- What if you don't speak the language?
- What exactly is culture, and how does it matter?





- What exactly is population health?
 - Health outcomes of a group of individuals, including the distribution of such outcomes within the group
 - Improving the health of entire human population
- What is public health?
 - Science based focuses on protecting/promoting population health, preventing illness and injury, eliminating health inequities and working to improve the health of vulnerable communities and populations





Social Determinants of Health

"conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks"

- Includes Availability of resources to meet daily needs (e.g., safe housing and local food markets)
- Access to educational, economic, and job opportunities
- Access to health care services
- Quality of education and job training
- Availability of community-based resources in support of community living and opportunities for recreational and leisure-time activities
- Transportation options
- Public safety
- Language/Literacy

- Social support
- Social norms/ attitudes (e.g., discrimination, racism, and distrust of government)
- Exposure to crime, violence, and social disorder (Socioeconomic conditions (e.g., concentrated poverty and the stressful conditions that accompany it)
- Residential segregation
- Access to mass media and emerging technologies (e.g., cell phones, the Internet, and social media)
- Culture



Health Literacy

"degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions"

- Those with limited health literacy often lack knowledge or have misinformation about the body as well as the nature and causes of disease.
 - Without this knowledge, they may not understand the relationship between lifestyle factors such as diet and exercise and various health outcomes





- Affects the ability to:
 - navigate the healthcare system, including filling out complex forms and locating providers and services
 - Share personal information, such as health history, with providers
 - Engage in self-care and chronic-disease management
 - Understand mathematical concepts such as probability and risk
- Often, those who are in the medical field speak in words that people don't understand
- Or, an influx of information cannot be retained
- Add a language barrier to that and double the problem!





- Anything that limits or prevents people from receiving adequate health care
 - High cost of care
 - Inadequate or no insurance (underinsured/uninsured)
 - Lack of availability of services
 - Lack of culturally competent care
 - Transportation





- Community outreach social determinants
- Reverse the access issue
- Meeting people where they are
- Minimize health literacy issues
- Remove language barrier
- Data collection
- Navigation post screening









- Our goal is to serve at least half of our patients in underserved areas
- Use data from census bureau and other sources to determine high risk areas:
 - uninsured
 - Limited access to care
 - Higher cancer rates
 - Populations traditionally reluctant to screening





- Mobile screening mammography
- Mobile wellness exams for women (pap/HPV)
- Colon cancer screening
- Tobacco cessation
- BP, BMI, glucose standard for cardiovascular screenings
- Cholesterol screening
- Sun damage screening
- Bone density ultrasound (not dexa!)
- Ask a Nurse Practitioner/Nurse







- Obviously, cancer screening and early detection is important
- Quitting tobacco is difficult
- Undiagnosed hypertension or diabetes
- "Gadgets"
- Educate, educate, educate!

These are strategies to encourage people to get screened, get help, and get connected to care.



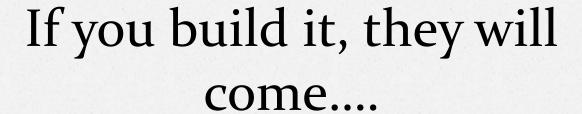
Outreach and Navigation

- Occurs in 3 stages for any screening type:
 - Getting people to come to the screenings
 - The screening itself
 - Post screening contact





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- Not so much!
- Staff and promotoras work within the community
- Development and cultivation of partnerships with community groups, agencies, employer groups to be host for screenings
- The team works with the organizer to attract attendees.





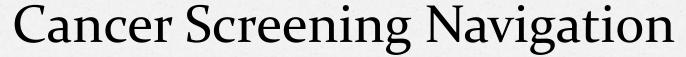
- One to one discussions, education, information
- Maximize face to face time cardio -> cancer prevention
- Meet people where they are
- Simple language, short and targeted
- Recommend healthy interventions, actions and advise possible additional contact





- Patients are encouraged to see their doctor or go to ICC/ED from screening depending on results
- Cancer screening results take longer, and are followed by nurses who are responsible for different navigation
- Cardiovascular navigation for those with high blood pressure or blood glucose also happens post screening





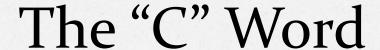
- Abnormal results reviewed by APRNs and/or nurse
- Patients are notified via telephone same day as results are received
- Results are explained to the patient in lay terms, and discussion of next steps
- Work with pt to fit testing in their schedule
- Follow patient to diagnosis (negative or cancer)
- If short term follow up (6months-2 years) will follow and navigate those patients



And everyone shows for their appointment....

- Calls wrong numbers, no answer, won't return calls, etc.
- Letters, lots of letters! Result letters, call us letters, please call us letters, certified letters
- No shows competing priorities for people, don't think they need it because their screenings have been "fine" before
- Reappear months later
- Nurses are diligent in contact attempts





- So if we target the high risk areas, we find cancer
- Costs! It is expensive to treat cancer
 - Connections to CDC funding administered via the local health departments (eligibility requirements)
 - Work with patient and NHC Financial Assistance program
- Transition care to the appropriate cancer navigator





- Elevated BP, Glucose
 - All information gathered into a database, and report generated biweekly
 - Nurse will send information or call the patient to follow up based on severity of abnormality
 - All materials have our contact number should patients want more information
 - Each patient is given a copy of results and educational materials if indicated or wanted





- Who pays for this?
- If insured, we bill insurance for mammograms and wellness exams (include pap and HPV testing)
- Grants
- NHC absorbs operational costs as well as the cost for care for many – some out of PW budget, and some via financial assistance





- Why? How do you determine the effectiveness of your interventions/ navigation?
 - Reporting
 - Obtain funding
- Documentation how do you determine what to document and where does it go?





- Disease prevention and health promotion can be done by ANYONE
- Relationships are key honest, open, trust
- All you need is a passion to want to help
- Compassion and empathy
- Willing to learn and talk about it!
- Cancer prevention vs cancer screening
- Don't take rejection personally some aren't ready



Contact Information

Norton Prevention & Wellness 502-899-6842

