

April 2010 | Abstracts

The abstracts in this volume were submitted by UT Health Science Center students and reviewed by a committee of faculty and staff using a rubric. The authors of the top four abstracts are asked to present their projects in the student panel of outstanding CSL projects, which takes place during the annual CSL conference.

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* Presented in Student Panel of Top CSL Projects, April 8, 2010.

Arts and Aging in an Urban Context

Project Discipline: Nursing

Primary Presenter: Gretchel Gealogo, BSN, RN

Mentor: Adelita G. Cantu, PhD, RN

Community Partner: Bihl Haus Arts Gallery

Project Location: San Antonio, TX

Project Description:

Background: Bihl Haus Arts Gallery has an annual Goldens Art Exhibit. In May 2009 a mini-symposium was developed to provide information to the community about the health and healing benefits of art and movement for seniors that live in the urban areas of San Antonio. Dr. Cantu and Ms. Gealogo participated in the development of this symposium.

Methods: The symposium was held on an afternoon in May 2009 and had content experts in the arts, particularly painting, come to discuss the use of these techniques in positive health outcomes for seniors. Ms. Gealogo participated in the development of a flyer that described the events and spoke during the symposium as to her observation of the painting classes for the seniors.

Results: Overwhelmingly, it was discussed that participants attributed improved psychosocial and mental health to the painting classes, specifically, and also to painting, more generally. Motivations for joining the class, the process of the art class, and personal definitions of arts and aging interacted to produce increased self-awareness, relaxation, altered perspectives of others and the surrounding environment, increased social engagement, and new forms of family relationships. Each of these, in turn, led to a specific suite of class outcomes: a sense of calm and peace, a sense of belonging, and self-understanding and empowerment via the creative process. In this section, we offer a model to visualize the processes by which these outcomes are achieved, followed with detailed, qualitative evidence for each component in the model.

Conclusion: Based on the response, Bihl Haus is encouraged to continue having a symposium like this with the goal of encouraging funding agencies and city/county governments to understand the benefits of art to the health and healing process.

Community Needs Assessment of Stockdale, Texas

Project Discipline: Nursing

Primary Presenter: Veronica Williams

Students involved in project to date: Jenny Davis and Mariann Craddock

Mentor: Ruth B. Grubestic, DrPH, PHCNS-BC

Community Partner: Ministry Health Resource Center

Project Location: Stockdale, Texas

Project Description:

Background: Stockdale, Texas is a small rural community located approximately 35 miles Southeast of San Antonio in Wilson County. The population is approximately 1350 people with about 65% White and 35% Hispanic. The Ministry Resource Center in Stockdale started a large community garden located on land that is readily available to community members. The intent of the community garden is to involve the entire community in gardening and provide fresh produce and improvement of health outcomes to participants through physical activity, consumption of fresh produce and socialization/community empowerment.

Methods: A community needs assessment was conducted in the summer of 2009 during the Watermelon Jubilee Festival held at the City Park in Stockdale. The survey was used to determine the health needs of the community and their perceptions of community gardening. Students completed about 50 surveys from about 40 adult and 10 youth community members.

Results: Survey participants were very interested to learn more about the community garden. Youth were especially interested but needed guidance to participate. Initial contact was made with the Stockdale City Manager, youth coordinator for the 4H group, proprietors of the Reliance Community Farm, the “den mother” for the local Cub Scout group, and the Stockdale Garden club. Recommendations were made to collaborate with the Stockdale High School home economics, health and agriculture students to explore the garden as a “living learning lab”. Coordination of volunteers to work in the garden was developed.

Conclusion: It was difficult to coordinate the various groups to volunteer in the garden. Interest was genuine but ownership was very important. It became important to find out who was in charge of what. Energy was spent trying to coordinate youth into the gardening activities but key leaders were unable to participate due to health issues. A booklet was developed to provide a template for future groups of students to learn about the community garden, how to coordinate volunteers and who the key contacts are to develop collaboration between community groups.

Evaluation of Women's Health in Rural Haiti

Project Discipline: Medical

Primary Presenter: Melissa Beally and Beth Melia

Students involved in project to date: Jocelyn Campos, Christopher Gibson, Kirsten Newhams, Tyler Bloomer, John Bryne, Liz Chang, Valerie Libby and Chrystal Truong

Mentor: Ruth E. Berggren, MD

Community Partner: Project Medishare

Project Location: Thomonde, Haiti

Project Description:

Background: Haiti is the poorest nation in the Western Hemisphere. According to the World Health Organization, the under-five mortality rate is 80 per/1000 live births, ten times the United States rate. Neonatal causes attribute to 44% of those fatalities. Because the health of a newborn is intimately linked to the health of the mother, the prenatal care the mother receives, and the conditions for delivery, we were interested in identifying the status of women's health in rural Haiti.

Methods: UTHSCSA students worked with a Haitian Obstetrician/Gynecologist to develop an appropriate list of questions in Creole to ask patients while they waited to be seen by a doctor. Because of the illiteracy rate in Haiti, medical students with a French-speaking background administered an oral survey to volunteering patients.

Results: During three clinic days, 101 women were surveyed in rural villages around Thomonde, Haiti. Haitian women on average first became pregnant at 18.6 years old. Women reported on average having 5 pregnancies, 4 living children and one child who had passed away. Only 13% report delivering with a doctor, 78.9% deliver at home and 10.2% report difficulties with delivery. Just 54 (45%) were familiar with condoms while only 36 (34.6%) report using family planning. Most women (79.8%) comment that their children go to school, but the mothers surveyed completed on average only 1.9 years of school.

Conclusions: The status of women's prenatal care and health is poor in rural Haiti. In an overpopulated nation where many struggle to feed their families, many do not practice family planning or use contraceptives. In the rural setting, most mothers choose to deliver their children at home, increasing the risk for labor complications. In order to improve women's health conditions, programs should be identified to improve access to prenatal care, as well as encourage hospital deliveries.

Primary Prevention of Domestic Violence in Census Tract 1511

Project Discipline: Nursing

Primary Presenter: Heather A. King and Raquel L. Brown

Mentor: Kelly Dunn, PhD, RN, PHCNS-BC

Community Partner: Las Mujeres Nobles de Harlandale (LMNH)

Project Location: San Antonio, Texas

Project Description:

Census Tract (CT) 1511, with a total population of 7,161, is located on the south side of San Antonio. CT 1511 has a higher incidence of domestic violence related to lower socioeconomic status, low education level, and a high unemployment rate. There were a total of 1,496 reported cases of domestic violence in CT 1511 last year.

The students used ethnographic interviews to learn if the meaning of violence is changed by being exposed to skits portraying violence presented by Las Mujeres Nobles de Harlandale (LMNH) during National Night Out. The students conducted surveys of 25 people attending before and after they watched the skits on violence presented by LMNH. The topics of these skits covered family violence, teen dating violence, elder abuse and a poem on violence. The same survey was given before and after skits.

The students received great participation and positive feedback for our interviews. Most participants agreed that violence was a problem in their neighborhood and that groups like LMNH were a valuable asset in helping to end domestic abuse. Students gained a better understanding of how much time, effort and dedication is involved in attempting to accomplish goals to educate and assist those in need.

Quality Improvement Initiative at a Student-Run Free Clinic

Project Discipline: Medical

Primary Presenter: Katherine McQuade

Mentor: Kathryn Fiandt, DNS, FAANP

Community Partner: St. Vincent's House

Project Location: Galveston, TX

Project Description:

St. Vincent's House is a non-for-profit organization dedicated to serving the disadvantaged and working poor of the great Galveston area with social services and outreach programs with the aim of improving the physical, mental, and spiritual well-being of the community. St. Vincent's House hosts two free clinics on their grounds supported by UTMB: a nurse practitioner clinic that operates during the daytime and a student run free clinic that operates in the evenings and on Saturday mornings. Most patients have multiple chronic conditions that require intense management and follow-up. SVC has become a 'safety net' primary care service provider and medical home for many of these patients and as such the need for quality assessment and improvement has become evident with the philosophy that indigent health care does not have to be 'poor' health care. In fact, SVC is well situated to provide excellent management of chronic conditions due to its position in the community and holistic approach to wellness. Described here is the quality improvement initiative and initial data from our preliminary chart review. Also discussed is how this information will be used to improve services to our patients and educate students in providing those services. The goal of this project is to create and describe a sustainable quality improvement process that will aid student run free clinics in providing quality care to their patient population.

Strengthening Teen Role Models

Project Discipline: Medical

Primary Presenter: Anna Shuler

Mentor: Kristen Plastino, MD

Community Partner: UT Health Science Center Sex Education Program

Project Location: San Antonio, Texas

Project Description:

Background: Bexar county has a high rate of teen pregnancies and sexually transmitted infections among adolescents. UTHSCSA Sex Education Program (SEP) reaches out to local school districts with a curriculum that focuses on puberty, teen pregnancy, STDs, life skills, goal setting, refusal skills, legal consequences, peer pressure, contraception, and healthy relationships. Part of the UTHSCSA SEP is the Teen Advisory Board (TAB). It is a selective group of teens with a two fold purpose.

#1 to give members further motivation via education to avoid risk taking behaviors (i.e. alcohol, sexual activity) so that these teens can serve as peer role models.

#2 to give feedback for the UTHSCSA SEP.

I helped with a group community service project and a group meeting.

Methods: I helped with an organized community service project- - Graffiti Wipe Out. I held a meeting with the TAB where I discussed the “40 developmental assets” of successful adolescents. During the meeting oral feedback was given. The teens were asked if their involvement in the TAB helped them with resistance skills. We asked the teens if they wanted to continue education after high school as well as if they felt they made an impact on others.

Results: Teens in attendance, reported that they were more likely to resist peer pressures as a result of being members of the TAB. Additionally majority currently want to seek higher education. All felt they were impacting others- some reported an impact on over 5 people.

Conclusion: The teens reported that a peer role model was very inspirational. In the future, increasing the number of TAB members can strengthen more adolescent role models in Bexar county. The impact on positive peer pressure can be further studied to confirm the importance of peer groups such as the TAB.

Diabetes Screening Project

Project Discipline: Medical

Primary Presenter: Anne Johnson and Jerry Michael

Students involved in project to date: Beth Melia

Mentor: Sarah E. Lapey, MD

Community Partner: Wal-Mart, Regus Colonnade, Christmas Under the Bridge

Project Location: San Antonio, Texas

Project Description:

Diabetes is a major medical and public health concern that is particularly prevalent in San Antonio. In Bexar County, approximately 7% of the population has been diagnosed with diabetes, and an estimated 20,000 more do not know they have it. Regardless of their area of specialization, our community's future physicians need to be familiar with diabetes- including who it affects, how to detect it, how it can be prevented, and how it can be successfully managed over the long term. The Diabetes Screening CSL project trains UTHSCSA medical students to perform blood glucose screenings and to provide patient education on diabetes prevention and management. Patients who were found to have high blood glucose (suggestive of diabetes or pre-diabetes) were contacted within 1-3 months and were asked about medical visits, dietary changes, exercise habits, and to what extent they had involved friends and family in their efforts to maintain healthy changes. Building on last year's Diabetes Screening CSL project, medical students also followed up with these same patients after one year. After both the short and long term follow-ups students used the Stages of Change model to evaluate patients' progress and motivation in order to learn what long-term steps patients had taken to control or prevent diabetes, and they were able to gain specific insight into the challenges patients may face in maintaining behavioral changes.

Fiesta de Salud Health Fair and Blood Sugar Screening in the border city of Piedras Negras, Mexico

Project Discipline: Medical

Primary Presenter: Erica G. Jarrett

Mentor: Maria Munoz, MD

Community Partner: Crossroads Missions, Mission Trinidad

Project Location: Piedras Negras, Mexico

Project Description:

Background: Although there is free social medicine in Mexico, most facilities are under-funded and under-staffed. Furthermore, many of these facilities are not available to a pedestrian population in rural areas and preventative care is almost completely absent.

The Hispanic population is known for high rates of Type II Diabetes. The World Health Organization mortality data on Mexico (2006) indicates that diabetes is the number one cause of death in the country. Last year, I began an ongoing training program in Piedras Negras to prepare local women to be lay diabetes educators (Consejeras), to provide a local source of culturally appropriate diabetes education, and provide leadership opportunities and empowerment of women as they serve in the role of community educator.

Methods: The diabetes training is a 10 hour course using Spanish materials. Following the course Consejeras may provide diabetes education in many settings.

Current Consejeras are planning a one day health screening/health fair targeting new diabetics or those with diabetes risk factors.

During the day participants will:

- have BMI calculated, blood pressure and blood sugar levels evaluated by Consejeras.
- be provided written records of how their values compare with normal values.
- discuss their results with a Consejera capable of providing suggestions for lifestyle change and health education.
- receive health information handouts.

Results: Five participants were recruited and completed the diabetes training. They join the group of eight Cosejeras and will serve during the upcoming "Fiesta de Salud" Health Fair which will be conducted by the Consejeras to accompany an American-led medical mission trip on March 19th.

Conclusions: Response to offerings of diabetes education courses continue to be positive and participants continue to be encouraged by increasing their diabetes knowledge and teaching/counseling skills. They will be essential in bringing to diabetes education to communities in Piedras.

Fight Obesity

Project Discipline: Nursing

Primary Presenter: Bianca Fomukong

Students involved in project to date: Alexia Succedo

Mentor: Aurora Valderas, RN

Community Partner: Frank Madla Elementary School

Project Location: San Antonio, Texas

Project Description:

Frank Madla Elementary school serves grades PK-5 in the Southside of San Antonio. The school has a population close to 700 with 92% Hispanics, 3% blacks, 3% whites and 2% Asian or Pacific Islander. According to the Center for Disease Control (CDC) child obesity has tripled over the past 30 years from about 6% in 1980 to 18% in 2008. This community is among those with a higher risk due to cultural and socioeconomic factors.

Obese students were screened for *acanthosis nigricans*. A 12 week course was designed to teach a health and fitness class for 5th graders who tested positive for the screening with a focus on proper nutrition, diet and exercise with a goal to reduce body weight, improve overall health and reduce associated risks for chronic conditions. Fifteen students were selected for this program with an initial record of their weights, heights, blood pressures and BMI readings which will be used as a base to track progress for final analysis. During the course of the program, each student will maintain a food diary where food intake will be recorded along with their daily activities. A variety of exercise activities will be done every Wednesday including dancing, basketball, tracking, skipping etc. Healthy snacks will also be made and shared during the class with the recipes given to the participants to try at home with their families.

Most participants are aware of their health risks, remain motivated and very active while a few complain about the activities being difficult and challenging. They also complain of a lack of family support, especially from their parents. I think it will be of great help to the community if parents were also involved because most parents I've come across in the school are also obese.

Frontera de Salud - UT Health Science Center San Antonio Chapter

Project Discipline: Interprofessional

Primary Presenter: Anne Yu and Bode Ogunwole

Students involved in project to date: Toral Parikh, Andrew Chang, Brent Thiel, Sara Mittasch Koenig, Robert Strehlow, Lauren Gambill, Joseph Lynch

Mentor: Ruth Berggren, MD and Sarah Lapey, MD

Community Partner: Sisters of Mercy

Project Location: San Antonio, Texas; Laredo, Texas; Robstown, Texas

Project Description:

Background: Frontera de Salud is dedicated to providing health services to the underserved in South Texas, particularly in Robstown, Laredo, and San Antonio. With UTHSCSA faculty supervision, medical, nursing, and PA students are given a unique opportunity to provide vital healthcare while also developing new strategies for addressing the problems facing these communities.

Methods: The Laredo clinics provide sports physicals, flu vaccines, and healthy lifestyle and sex education to an underserved population. The Robstown health fairs and home visits provide preventative medicine screenings for hypertension, diabetes, and high cholesterol. San Antonio health services include preventative medicine screenings, HIV and TB screenings, and mentoring services for high school students considering a healthcare career.

Frontera de Salud gives health professional students the opportunity to work with each other toward a common goal, enhance their ability to teach patient health, learn and practice new skills, and gain exposure to underserved communities.

Results: By working in the South Texas communities of Robstown, Laredo, and San Antonio, Frontera students learn to provide vital services to a large underserved population. Student volunteers learn to address the socioeconomic and environmental effects that lead to healthcare problems while developing key clinical skills for treating patients. By listening to community concerns and needs, Frontera has been able to expand the number of patients we reach within the towns we serve.

Conclusion: Frontera is always evolving. In San Antonio, Frontera has established relationships with various schools and with other UTHSCSA organizations, which we will continue next year. Frontera has also been able to greatly expand on the Robstown 'front' by holding health fairs at new locations and increasing home visits. We hope to continue working with the local promotoras to further outreach into the colonias and integrate with pre-existing community programs. Finally, the patient services and education in Laredo remain very effective and are a valuable resource to the underserved inhabitants of the community.

The lessons our students learn in Frontera will remain with us as we become physicians. By working together with other healthcare providers, we have the ability to effect real change in the way healthcare is delivered.

Frontera de Salud - UT Medical Branch Galveston Chapter

Project Discipline: Interprofessional

Primary Presenter: Miles Farr

Mentor: Kirk L. Smith, MD, PhD and Christine M. Arcari, PhD, MPH

Community Partner: Proyecto Juan Diego (Cameron Park, TX), Brownsville Community Health Center (Brownsville, TX), Iglesia San Felipe (Cameron Park, TX), St. Vincent's Free Clinic (Galveston, TX), Jesse Tree (Galveston, TX), Cathedral de Fe (La Marque, TX); Macedonia Church (Galveston, TX)

Project Location: Cameron County, TX and Galveston County, TX

Project Description:

Introduction: Frontera de Salud (Frontera) is a service organization, founded and staffed by University of Texas Medical Branch (UTMB) students, dedicated to serving the working poor through preventive care and health education services; including well-woman exams, diabetes and cardiovascular screenings, home visits and community health fairs. For the past decade, Frontera has focused its efforts on Texas/Mexico border communities and is in the process of expanding the program across the state of Texas.

Methods: Frontera uses an interdisciplinary approach; enlisting medical, nursing, allied health and graduate students as volunteers in a mission to improve lives through preventive medicine and personalized health care. Student volunteers work in community settings to enhance clinical skills and increase their understanding of the socioeconomic and cultural factors that impact community health. Frontera works with under-served populations not participating in the healthcare system to proactively identify at-risk patients and promote health to prevent costly complications from chronic diseases such as diabetes and hypertension.

Results: There are three active Frontera chapters: UTMB-Galveston, University of Texas Health Science Center (UTHSC)-San Antonio and UTHSC-Houston. From 1998 to 2009, over 750 students have volunteered with Frontera to deliver approximately 1000 well-woman examinations, 500 home visits, 2000 screenings and numerous community health education events.

Conclusions: Frontera employs a service learning model that results in healthier communities as well as transformative educational experiences. It is recognized as the community intervention model for the state by the Texas Diabetes Council. Volunteers experience the reward of interacting with a community and practicing medicine with the sole purpose of improving lives. The experience of working with people in their community, their home, and their life is an incredibly humbling and rewarding experience. It is expected that Frontera volunteers will mature into caring and responsible health care practitioners committed to providing community-oriented preventive medical care.

Improving community awareness, diagnosis, and surgical treatment of skin cancer at Travis Park Dermatology Clinic

Project Discipline: Medical

Primary Presenter: Melissa Muszynski

Students involved in project to date: Jennifer Leininger and Catherine Pham

Mentor: John Browning, MD

Community Partner: Travis Park Methodist Church

Project Location: San Antonio, Texas

Project Description:

Background: According to the American Cancer Society, substantially more than 1 million unreported cases of basal cell and squamous cell cancers occur annually. There is a strong need for skin care in the homeless and indigent population of San Antonio, most of whom cannot afford to see a physician. Travis Park Dermatology Clinic was established in November 2009 to treat skin conditions and meet this need in the community.

Methods: Charts were reviewed for surgical procedures that were performed. Biopsies performed were also reviewed to determine the most prevalent skin cancer in this population.

Results: A total of five procedures were performed, including: electrodesiccation and curettage, excision, and Mohs micrographic surgery. The following skin malignancies were diagnosed: (1) lentigo maligna, (1) keratoacanthoma, and (2) basal cell carcinomas.

Conclusion: Of 45 patients seen in four clinics, the most prevalent cancer diagnosed was basal cell carcinoma. In addition, multiple patients with premalignant lesions, such as actinic keratoses, were seen and treated with liquid nitrogen. Travis Park Dermatology Clinic's impact reaches beyond these patients with cancerous and precancerous lesions, as all patients are counseled on the risks of ultraviolet exposure and encouraged to exercise sun protection.

Medical Management of Common Dermatological Diseases at Travis Park Dermatology Clinic

Project Discipline: Medical

Primary Presenter: Jennifer Leininger

Students involved in project to date: Catherine Pham and Melissa Muszynski

Mentor: John Browning, MD

Community Partner: Travis Park Methodist Church

Project Location: San Antonio, Texas

Project Description:

Background: There is a strong need for skin care in the homeless and indigent population of San Antonio, most of whom cannot afford to see a physician. Travis Park Dermatology is a non-profit, student run clinic that was established in November 2009 to treat skin disorders in this population.

Methods: Charts were reviewed for diagnoses to determine the most prevalent conditions in this patient population. The skin disorders diagnosed were also grouped into broader categories: skin disorders of infectious origin, benign growths, premalignant and malignant skin tumors, eczema, psoriasis and other papulosquamous diseases, acne, and other.

Results: Of 45 patients seen in four clinics, a total of 58 diagnoses were made. The most common skin conditions diagnosed were: eczema (6), postinflammatory hyperpigmentation (6), tinea (5), and actinic keratosis (5). The most common types of skin conditions seen were: skin disorders of infectious origin (13), and benign growths (12).

Conclusion: The most prevalent skin disorders in Travis Park's patient population are either of infectious origin or are benign growths. The most prevalent single skin condition diagnosed were eczema and postinflammatory hyperpigmentation.

PMIG HIV Screening: OraQuick ADVANCE Rapid HIV-1/2 Antibody Test

Project Discipline: Medical

Primary Presenter: Daniel Clark and Colin Court

Students involved in project to date: John Carey, Molly Thompson, Anne Johnson, Carolina Wilcox, Beth Melia, Brad Venghaus, Tracey Einem and Ani Jivani

Mentor: Ruth Berggren, MD

Community Partner: Travis Park United Methodist Church, San Antonio AIDS Foundation and San Antonio Metropolitan Health District

Project Location: San Antonio, Texas

Project Description:

Background: The Preventive Medicine Interest Group (PMIG) offers free HIV screenings monthly at Travis Park United Methodist Church (TPUMC), which provides free medical care primarily benefiting the low-income and homeless. Screening dates were selected to compliment TPUMC HIV screenings offered by San Antonio AIDS Foundation (SAAF).

Methods: Medical students were trained to administer the OraQuick ADVANCE Rapid HIV-1/2 Antibody Test through peer-led trainings with oversight from a SAAF HIV counselor to ensure internal consistency, accuracy, and thoroughness. Students also learned risk reduction counseling and STD education strategies (see "PMIG STD" grant). PMIG offered phlebotomy training for students to perform confirmatory blood draws on patients with a positive screening test. All patients were given informed consent and a risk assessment survey. Those with a positive confirmatory test are referred to Dr. Ruth Berggren (CLIA certified) at the Brady Green FFACTS clinic for treatment and case management.

Results: 39 students were trained in HIV screening, risk reduction counseling, and STD education. Nine students received phlebotomy training for the confirmatory blood draw. Volunteers dedicated over 310 person-hours and screened 29 individuals during 7 screenings. Of patients screened, 100% tested negative, 59% were homeless, 72% were male, and 45% were Hispanic. The most common risk factor for HIV contraction was unprotected sex, followed by IV drug abuse. Three patients reported previous STD contraction, including a prostitute with over 100 sex partners in the past year.

Conclusion: PMIG's screenings have provided low-income and homeless individuals an opportunity to learn about their HIV status, receive STD education, and receive personal risk reduction counseling. Nearly 9% of UTHSCSA first and second year medical students have participated in the project, gaining clinical skills, public health knowledge, and practice interacting with high-risk patients. First year medical student involvement offers promise of project sustainability and continuity in the future.

TB Screening in Conjunction with HIV Screenings

Project Discipline: Medical

Primary Presenter: Beth Melia

Students involved in project to date: Ani Jivani, Daniel Clark, Carolina Wilcox, Colin Court, John Carey, Sarah Lester and Jessica Koller

Mentor: Ruth Berggren, MD

Community Partner: Travis Park United Methodist Church, San Antonio Metropolitan Health District

Project Location: San Antonio, Texas

Project Description:

Background: Each night approximately 2,500 homeless persons in San Antonio sleep on the street. There are several shelters in San Antonio, but most require evidence that the person does not have Mycobacterium tuberculosis (TB) via a negative PPD test. The cost of the PPD test (\$15) is prohibitive to many who need it. We therefore collaborated with San Antonio Metropolitan Health District (SAMHD) and Travis Park United Methodist (TPUMC) to provide free PPD screenings to the local San Antonio homeless population.

Methods: UT Health Science Center at San Antonio (UTHSCSA) students were trained by staff from SAMHD on how to appropriately place and read a PPD skin test. Students held monthly screenings at TPUMC and screened any person wishing to have the test. Patients were given informed consent, evaluated for risk factors, and asked to return 48 hours later for evaluation of the results by a student.

Results: Eighty-two people were administered PPD tests during our screenings. Forty eight (58.5%) reported symptoms associated with TB such as cough, night sweats and unintentional weight loss. In those questioned, 61.5% had been previously incarcerated. Fifty-one returned to have their PPD tests evaluated 48 hours later. Of those, 49 were negative (96.1%) and 2 were positive (3.9%). One positive never received a chest x-ray and one had a negative chest x-ray.

Conclusions: Several patients expressed gratitude that we were able to provide this service without cost, and noted it proved access into the shelters. We did, however, face the limitation that not all patients returned for evaluation. In the future, it would be beneficial to develop protocols to increase patient return. Because of the success of this project, we hope to bring this service to Haven for Hope, the new downtown service center to the homeless.

Education

Breastfeeding Education and Support for Teenage Mothers (BEST)

Project Discipline: Medical and Nursing

Primary Presenter: Miranda Garcia

Students involved in project to date: Kate Todd-Thompson, Katie Reppa, Jenny Saenz, Shannon Potter, Erin Hoskins, Susan Seago, Laura Gross and Laci Waner

Mentor: Ruth Berggren, MD

Community Partner: Seton Home

Project Location: San Antonio, Texas

Project Description:

Background: The BEST project was designed to address barriers to breastfeeding by targeting young mothers who are residents at Seton Home in San Antonio, Texas. Seton Home is a residential facility for up to 40 homeless pregnant teens and teen mothers ages 12-19. According to the initial community needs assessment by the BEST student leaders in October 2009, most Seton Home residents who attempted breastfeeding discontinued doing so by the infants' third month of life, despite the American Academy of Pediatrics recommendation that "breastfeeding should be continued for at least the first year of life". Moreover, 50% of Seton Home residents were not aware that breast-fed infants have better cognitive development and less illness.

Methods: The student leaders BEST met the community need by 1) applying for local and national grants to cover the cost of supplies for the intervention 2) organizing a breastfeeding management course for UTHSCSA students and Seton Home staff on Seton Home's campus, 3) holding biweekly breastfeeding support group meetings for Seton Home residents 4) providing support to Seton Home residents in which a medical/nursing student was on-call to address any concerns or challenges they have.

Results: Preliminary subjective results show that Seton Home residents who attended BEST support groups were more likely to breastfeed and more likely to demonstrate a positive attitude towards breastfeeding than those who did not receive the intervention. Objective evidence is pending the final survey from Seton Home, to be completed 3/8/2010.

Conclusions: BEST will continue under the direction of newly selected UTHSCSA students, who could expand the project by including an intervention for Seton Home staff, or the hospital staff. Despite scheduling challenges, high turnover rate of Seton Home residents, and lack of support from some hospital staff where the residents gave birth, BEST has shown success by educating both future health care professionals and young mothers about the benefits of breastfeeding.

Community Service Learning (CSL) as a Method of Pedagogy

Project Discipline: Interprofessional

Primary Presenter: Rashunda Lewis, Melanie Stone, MPH, MEd

Faculty involved in Project: Ruth Berggren, MD, Thomas Cole, PHD, Kirk Smith, MD, PhD

Community Partner: Various

Project Location: Texas and abroad

Project Description:

Background: The University of Texas Medical Branch, The University of Texas Health Science Center at San Antonio, and The University of Texas Health Science Center at Houston have established an intercampus collaboration to promote community service among medical, nursing, dental and health professions students. The core strategy of the collaboration is to utilize service learning as a method of pedagogy in order to link community service projects undertaken by students to specific academic goals, provide real world experience not available in the classroom, and to enhance students' capacity to work in and strengthen communities.

Methods: These goals will be accomplished through, among others things, 1) The development of a definition of service learning and implementation of didactic content, coursework, and community based experiences appropriate for health professions students and 2) Increasing the number of students, faculty, and community partners participating in inter-professional service learning activities, including web based modules, courses, clerkships, and electives utilizing CSL.

Results: During year one of the collaboration the CSL as Pedagogy program has made significant progress towards or met the majority of its first year objectives. New partnerships with community agencies were created, around 80 students participated in courses that incorporate CSL, and expansion of student service sites served increased numbers of community residents. Service learning courses are available at all campuses.

Conclusion: With greater availability of opportunities that were made possible by this program, campus-wide increases in the number of students participating in CSL have been noted. One particular challenge faced throughout all the institutions is the lack of available faculty mentors and recognition of the need for CSL to comprise part of the required curriculum. These obstacles can be overcome by providing financial support for faculty time, integrating CSL into regular coursework, and establishing well-defined parameters to measure the outcome of these programs. These issues will continue to be addressed as we develop and embed CSL programs at our institutions.

Educational In-Service of Oral Palliative Care for Chemotherapy Nurses and Radiation Technologist

Project Discipline: Health Professions

Primary Presenter: Jodie Gonzales-Hostetter

Students involved in project to date: Elvia Garcia, Laura E. Hernandez and Brooklyn Woehl

Mentor: Sue Cunningham, PhD, RD/LD, CDE

Community Partner: Cancer Therapy Research Center (CTRC)/Oncology Department

Project Location: San Antonio, Texas

Project Description:

Background: Evidence has shown that when pro-active measures are implemented it can greatly reduce oral manifestations (Hogan, 2009). Nurses and other health care professionals can positively influence patient care by incorporating the evidence-based practice of an oral care protocol, improving consistency of care while promoting an intervention of proven benefit against painful oral manifestations. The purpose of this project is to educate chemotherapy nurses and radiation technologists employed at Cancer Therapy & Research Center (CTRC) to recognize the most common oral manifestations from cancer therapy such as xerostomia, oral mucositis, candida, and dental caries. The goal is to improve compliance and patient outcomes by introducing palliative care strategies.

Methods: A series of four in-service sessions were delivered in thirty to forty-five minute sessions from a convenience sample of five nurses and four technologists employed at CTRC, Department of Oncology. A nursing survey, pre/post test and Lickert scales were adapted from the literature. Activities included hands-on demonstrations of educational tools and therapeutic strategies. Brochures, oral physiotherapy aids, and samples were used to address relief of oral manifestations.

Results: This service-learning project led to improved palliative care knowledge and created enthusiasm about oral care for nurses and technologists. Specific skills learned were recognition of oral manifestations following cancer treatment, construction of mouth props from readily accessible clinical materials, and determination of appropriate chemotherapeutic agents. Results of this project are currently being evaluated.

Conclusion: The clinical implications of this project helped to promote consistency of care through an intervention of confirmed benefit against painful oral manifestations. Multiple teaching modalities engaged the health professionals to transfer short term learning into daily nursing patient assessments. As a result, knowledge and attitude toward oral hygiene care improved. The expectation is that this training will result in positive behavioral changes in daily palliative patient care.

Healthcare Transition of Young People with Developmental Disabilities, San Antonio Experience

Project Discipline: Health Professions

Primary Presenter: Katherine Perez

Students involved in project to date: Venessa Agado, Megan Cunningham, Gino Garza and Chun Yeung

Mentor: Carol Nguyen, RDH, MS

Community Partner: Reaching Maximum Independence

Project Location: San Antonio, Texas

Project Description:

BACKGROUND: People with developmental disabilities, DD often need long term help planning and coordinating services like housing, employment, and healthcare. The goals of Healthcare transitional (HCT) services are to give knowledge and skills needed to independently navigate the healthcare system, prevent co-morbidities, promote autonomy, and maximize potential. Due to a vast increase in complexity of care and life expectancy for people with DD, HCT services must account for the inevitable possibility of having this population face chronic health conditions.

MATERIALS AND METHODS: An exploratory research design was used to identify a convenience sample of 15 adults using descriptive and qualitative data in structured interview format to identify gaps in health care for this population. This was an IRB approved study -HSC2009033H. Participants were young adults with DD who completed a transition program at Reaching Maximum Independence. Upon completion of data collection, data entry was placed on the UTHSCSA server.

RESULTS: The study showed a lack of communication between Medicaid and young adults with DD. It also demonstrated that parents often manage their health care, demonstrating a lack of autonomy. Based on our findings, there is not a problem from the lack of information; leading us to consider, a problem in our health care delivery system.

Approaches that did help facilitate improved care included using sedatives for procedures, longer appointment times, and using a papoose board during dental care.

CONCLUSION: Patients in this study are not prepared for their roles in managing health care, have difficulty understanding and processing health information, and have limited access to appropriate healthcare practitioners for guidance. HCT services for people with DD should be tailored to anticipate and, therefore, prevent many of the problems facing young adults with special needs, their families, and the different entities which they consult for care.

Healthy Choices for Kids

Project Discipline: Medical and Nursing

Primary Presenter: Azalia Martinez

Students involved in project to date: April Carr, Kristin Blouin, Lauren Carter, Randell David Jones, Jessica Guerico, Carly McDonald, Marin Medina, Ashley Harrington, Azalia Martinez, Kate Todd-Thompson, Marriyam Jawad, Shweta Murthi, Crystal Esquivel, Evan Patterson and Brentley Gage

Mentor: Ruth Berggren, MD and Adelita Cantu, PhD, RN

Community Partner: Good Samaritan Community Services

Project Location: San Antonio, Texas

Project Description:

Background: Healthy Choices for Kids (HCK), an inter-professional community service learning course for medical and nursing students, partners with the Good Samaritan Community Center during their 12-week summer camp to help educate and enrich the lives of 10-14 year olds regarding 'healthy choices.' A statistical snapshot of the 78207 zip code reveals a predominantly Hispanic community with an average household income under \$20K, close to half of households with single parents, and a teen pregnancy rate 3 to 4 times the national average.

Methods: HCK begins with a three-week didactic course that enhances students' understanding of the cultural/contextual risk factors of Hispanic adolescent health issues and the challenges of making healthy choices within a low-income environment. Strategies are then developed by the students to address these challenges and thus the Camp curriculum evolves.

Top community concerns, as identified by parents in a needs assessment survey, included sex education, self-esteem, drugs/alcohol, teen pregnancy, exercise/sports, and internet safety. These issues along with nutrition, abstinence-plus education/STD prevention, violence and healthy relationships, and cell phone safety were addressed during Camp.

HCK lead campers in one-hour sessions each of physical fitness and classroom instruction per day. Highlights of activities include: sex education using "Big Decisions" curriculum, competing in the President's Challenge for Fitness, a local park clean-up to teach giving back to the community, and a field-trip to reward campers for their hard work and participation.

Results: Campers were given pre and post surveys about their attitudes and knowledge of the topics covered and results showed that HCK made a positive impact. Results from the President's Challenge were inconsistent due to camp turnover. Results of other surveys are still being finalized in preparation for the poster.

Conclusion: Overall the experience was richly rewarding for all involved. Challenges included: maintaining order in the classroom, presenting material in an engaging way, and camper turnover. Suggestions for improving HCK include: maintaining a year-long mentorship with Good Sam youth, stressing physical fitness as an overall lifestyle change, and creating informational flyers for parents on topics covered at Camp. By incorporating these changes, HCK can strive to make a lasting impact on the Good Sam Community.

Holy Family Services

Project Discipline: Medical

Primary Presenter: Jessica Vernon

Mentor: Crystal Stewart, RN and Adela Valdez, MD

Community Partner: Holy Family Services

Project Location: Weslaco, TX

Project Description:

Holy Family Services is an outpatient birthing center that provides women and their families with an alternative way to go through the pregnancy and delivery process. The center is run mostly by a volunteer staff of nurses and midwives and funded through grants and donations. My goal was to create and implement educational materials for the patients at the center, focusing on nutrition and diabetes in pregnancy. I created PowerPoint presentations and handouts to utilize during classes, and also a pre/post quiz to gauge the knowledge gained during the classes. For personal enrichment I also met with patients and participated in the prenatal care and birthing process to better understand the patients and why they preferred to give birth in an alternative setting. After creating the teaching materials, it was discovered that the center lacked many of the tools needed to implement the classes. At that point a representative from AHEC was brought in to meet with members of the center. We discussed their needs and are working on finding ways to get them the tools and funding needed to better achieve the missions of the center. The project was not successful in its original goal of implementing classes to large groups of patients; however it succeeded in other ways by assessing the needs of the center and bringing in AHEC to help bring in needed resources and funding. I learned a lot about the CSL module and how to be flexible in the direction of a project, as the original goals and targets may shift as further needs are uncovered. Also, I believe that now that a relationship has been formed with Holy Family Services and a needs assessment has been performed, future students can easily take over and further the project.

Integrating Student-Run Clinics into the Curriculum

Project Discipline: Medical

Primary Presenter: Stephanie Gardner

Students involved in project to date: Tiffany Herrera, Autumn Atkinson and Nelda Itzep

Mentor: Richard Usatine, MD

Community Partner: Student-Run Free Clinics

Project Location: San Antonio, Texas

Project Description:

Background: Two elective courses offered at the UT Health Science Center San Antonio – “Homelessness and Addiction” for first and second year medical students and “Humanism in Medicine” for fourth year medical students. These and other similar electives can help foster a long-term commitment to our student-run clinics to the populations they serve. Medical school electives focusing on student-run free clinics allow medical students to deepen their understanding of vulnerable populations. Also students that are enrolled in these electives are able to volunteer more regularly by receiving credit for their time and therefore can help improve continuity and quality of care to the patients at the clinics

Methods: Two student electives were created. The senior elective is composed of 48 hours - clinical time, 12hours of seminar time and 20 hours for an individual student project. One credit per semester may be obtained by attending a Center for Medical Humanities and Ethics event. The MSI and MSII elective is composed of 24 hours clinical hours 4 lunch hour sessions required for election.

Result: Medical school electives focusing on student-run free clinics allow medical students to deepen their understanding of the population they serve and to provide a higher quality of care. Also students that are enrolled in these electives are able to volunteer more regularly by receiving credit for their time and therefore can help improve continuity and quality of care to the patients at the clinics.

Conclusion: The goals of these electives are to support and nourish the inherent altruism of our students. Bring together like-minded students and faculty who have a passion for caring for the medically underserved in their communities. Encourage students to take a leadership role in managing and directing the student-run clinics under faculty supervision. Provide medical services and compassionate care to vulnerable populations

PA Students for Health Literacy; Safe Medication Answers and Review Training (SMARxT)

Project Discipline: Health Professions

Primary Presenter: Julia Atencio

Students involved in project to date: Elizabeth Castillo, Mallory Heard and Zelda Perez

Mentor: Dennis Blessing, PhD, PA

Community Partner: UT Health Science Center San Antonio, Bob Ross Community Center, San Antonio Public Library, NE Multi- Service Senior Center and Ella Austin Community Center

Project Location: San Antonio, Texas

Project Description:

Nearly half of all American adults have difficulty understanding health information. Physician Assistant Students for Health Literacy (PASHL) is a student group established with two specific aims. The first specific aim was to bring awareness of low health literacy to our peers in Health Professions. Our second specific aim was to design a community outreach educational program for low health literacy groups in San Antonio, Texas. The program, Safe Medication Answers and Review Training or SMARxT is the focus of this presentation.

As part of SMARxT, PASHL provided educational workshops including free medication bags and pill boxes to community groups in San Antonio. SMARxT classes employed an interactive teach-back method with emphasis on good communication with the health care provider, effective interpretation of a medication label, and safe use, storage and disposal of medication.

PASHL designed Pre and Post assessment tests for SMARxT participants' knowledge prior to and after attending a SMARxT class. We collected demographic data to evaluate our effectiveness in reaching low health literacy groups. Seventy six SMARxT participants took the pre-test assessment. Fifty six participants took the post-test. Data analysis indicates an improvement in knowledge of medication safety, storage and disposal for SMARxT class participants.

Limitations to our study include lack of program completion by all who were pre-tested and an inability to assess participant satisfaction because of the design of the pre- and post- tests.

PASHL hopes to apply health literacy awareness in our future practice. It is our desire that another student group will use our model to deliver SMARxT to other areas of the city. We would like to see future classes offered in Spanish.

PMIG: HIV and STD Education and Health Promotion Counseling

Project Discipline: Medical

Primary Presenter: Carolina Wilcox

Students involved in project to date: Daniel Clark, Anne Johnson, Beth Melia, Collin Court, John Carey, Tracy Einem, Molly Thompson, Ani Jivani, Brad Venghaus

Mentor: Ruth Berggren, MD

Community Partner: Travis Park, San Antonio Metro Health, San Antonio AIDS Foundation (SAAF)

Project Location: San Antonio, Texas

Project Description:

Methods: For the HIV Risk Assessment, patients are asked about past HIV test results and behavior that may have put themselves at risk for contracting HIV. Based on their responses, patients are counseled on ways to reduce their risk. In recent screenings, patients have also completed a HIV Knowledge Assessment on HIV transmission and progression. A Post-Screening Knowledge Assessment is then administered to help gauge the effectiveness of the education and health promotion counseling. In addition to testing for HIV, we recently began offering testing for Chlamydia, Gonorrhea, and Syphilis. This testing also involves education and counseling by medical students. Pamphlets about STDs and condoms are available to all patients.

Results: Of the 29 patients screened for HIV and 2 patients screened for Chlamydia, Gonorrhea, and Syphilis, all test results have been negative. Data from the Risk Assessment shows that 28 of 29 patients had placed themselves at risk for contracting HIV and/or STD's: 22 had had unprotected sex (including sex with a HIV-positive partner); 9 used IV drugs, including sharing needles; and 5 abused alcohol. In addition, 2 patients had prior STD's. Limited data from the Knowledge Assessment surveys shows that patients' knowledge of HIV transmission and disease progression improves after the educational component of the screenings.

Conclusion: HIV/STD education and counseling is an invaluable component to PMIG's monthly screenings for the homeless at TPUMC. Because counseling is based on responses to patient surveys, it is tailored specifically to the needs of each patient.

P.R.I.D.E.

Project Discipline: Medical

Primary Presenter: Laura Geiger

Mentor: Terrance Doran, MD

Community Partner: Merced Housing

Project Location: San Antonio, Texas

Project Description:

BACKGROUND: The after school program at the Artisan provides children of low-income individuals, including single parent families and the “working poor,” with a safe place to socialize and learn once they leave school. The goal of this project is for children to gain an understanding of P.R.I.D.E. (pride, respect, integrity, dedication, and excellence); core values which are largely absent from the parental influence bestowed upon this group of children. The male and female participants range in age from 5-12 years.

METHODS: We strive to improve the understanding of values within a group of young students so that they may play and study in an atmosphere of mutual respect, and carry these values in future endeavors. Students participate in a pre-program focus group to discuss their understanding of the P.R.I.D.E values. This is followed by a guided explanation of each of the P.R.I.D.E. values. Subsequently, students will be asked to demonstrate their understanding of P.R.I.D.E. by exhibiting each of the values in the classroom. P.R.I.D.E. cards will be given to a student by any other individual when a student has demonstrated P.R.I.D.E. with a goal to earn all 5 cards. When a student earns 5 cards they will be recognized for having P.R.I.D.E. with a classroom announcement and a congratulatory letter sent home. The student will also receive a small token prize. Upon completion of the project, if all students have received 5 P.R.I.D.E. cards there will be a classroom celebration with refreshments. A post-project focus group will be held to reassess the students’ understanding of P.R.I.D.E.

RESULTS: This service-learning experience increased the students’ understanding of P.R.I.D.E. and created enthusiasm for continued awareness of values. Enhanced interactions within the classroom and increased parental awareness of the importance of P.R.I.D.E.

CONCLUSION: An improved learning environment was achieved through the P.R.I.D.E. educational intervention. Results showed students were able to offer a realistic definition of pride, respect, integrity, determination, and excellence as well as personal examples of how they had either demonstrated or been the recipient of P.R.I.D.E. Increased awareness of the benefits of possessing values lead to positive behavioral changes among the students enrolled in the after school program at the Artisan.

Project WORTH Big Decisions™

Project Discipline: Nursing

Primary Presenter: Catherine Torralva, RN and Keld Pia, LVN

Mentor: Mario Martinez, MBA

Community Partner: Project Worth, San Antonio Metropolitan Health District

Project Location: San Antonio, Texas

Project Description:

Background: Bear County has a significantly higher teen pregnancy rates than the national average. Specifically, there are ten zip codes with rates over four times the national average. The settings for this project are high school class rooms. Freshmen level classes are targeted.

Methods: The Big Decisions key message is: “Having sex is a BIG DECISION, ABSTINENCE is the healthiest choice, Teens who have sex must: use CONDOMS and BIRTH CONTROL Correctly, EVERY time!” The curriculum consists of ten lessons, and a pre and post questionnaire which is used to determine how effectively the students can recall the information presented.

The ten lessons taught are:

1. RULES OF THE GAME: Forming a Respectful Group
2. ANATOMY AND REPRODUCTION: How it Works
3. RELATIONSHIPS AND ROMANCE: What is Healthy? What is Love?
4. SEXUALLY TRANSMITTED DISEASES (including HIV/AIDS)
5. ABSTINENCE: Why Should I Wait?
6. CONTRACEPTION: Pregnancy at the RIGHT Time
7. INFLUENCE: Friends, Culture, the Media, and Sex
8. GOALS AND DREAMS: My Decision
9. THE POWER TO SAY “NO”: Sticking to My Decision
10. WRAP-UP AND EVALUATION: How Did We Do?

Results: Some projects are still being conducted at this time. However, the Lanier High School curriculum has been completed and showed positive results for each student.

Conclusion: The post questionnaires show increases in student’s response for choosing activities less likely to result in teen pregnancy. Many of the students verbalized the importance of staying safe when choosing to have sex or recognizing that not having sex at all is the best decision. The Project Worth Big Decisions™ curriculum is effective in getting a change in responses on post questionnaires, longer monitoring of students and their pregnancy rates compared to students who did not participate in the Big Decisions™ curriculum would be required to establish long term effectiveness. It is also noted that when the teacher stayed in the classroom students were much more attentive than when the regular teacher left the room. It is important to have the class attentive for effective teaching to occur.

The Culture of Patient Centered Care: Essential Observed Approaches in Quality Care for the Developmentally Disabled in San Antonio

Project Discipline: Health Professions

Primary Presenter: Chun Yu Yeung

Students involved in project to date: G. Garza, M. Cunningham, K. Perez, V. Agado

Mentor: Carol A. Nguyen, RDH, MS

Community Partner: Reaching Maximum Independence, Inc.

Project Location: San Antonio, Texas

Project Description:

BACKGROUND Currently there is a movement in social and medical sciences to educate providers about patient centered care, which focuses on “empathy, listening, and compassion.” The goal of this project was to conduct a pilot interview that would engage all communities of interest in a serious dialogue on how to improve the health services of vulnerable populations. The objective of this poster is to discuss observed approaches and initiatives that all stakeholders can support, to address health disparities and improve access for this population by adopting a patient centered care model for young adults entering health care transition.

MATERIALS AND METHODS An exploratory research design was used to identify a convenience sample of 15 using descriptive and qualitative data in structured interview format. This was an IRB approved study. Participants were young adults with DD who have graduated from either North Side Independent or North East Independent School Districts who were enrolled in a transition program at Reaching Maximum Independence. Upon completion of data collection, data entry was placed on the UTHSCSA server.

RESULTS Findings of the sample indicate that communication barriers exist between health care professionals, and family members. The communication themes that prevailed included lack of sufficient direct communication. Other findings included environments that were not conducive to keeping patients with DD calm and relaxed in an already stressful environment. People felt like the Medicaid system was not supportive of treating patients with DD.

CONCLUSION Patient centered care principles were necessary for these participants. These principles included improved communication with family, improved physical comfort, added clinical time, and a quiet environment to alleviate fear and anxiety. Providers must improve on active listening skills to address patients’ needs. More research is required to develop and implement a robust educational program for health care professionals to treat adults with DD.

The Pyramid Connection

Project Discipline: Nursing

Primary Presenter: Donnah Ana G. Reyes

Mentor: Judith Arrington

Community Partner: Bethany United Methodist Church

Project Location: San Antonio, Texas

Project Description:

BACKGROUND: Bethany Methodist Ministry on Eisenhower Road is the setting where I chose to do my clinical. This is a place where senior citizens, men and women of 50 years old and above, congregate on a daily basis, except for weekends, to socialize, receive some food rations, and have meals served to them. Most of these senior members lead an active life. While some are coming alone, a few come with their spouses. For the last few weeks that I have been with them discussing about the subject of dietary needs and nutrition, I aroused enormous interest in them which motivated seeking for more answers or information. In response, I would then generously indulge them the education they long for about diet and nutrition using the classic food guide pyramid principle. In the process, I found out that many of them, although very health-conscious and vigilant about right food, are still very ignorant and lacking knowledge in this subject.

METHODS: To teach the senior citizens the general principles of diet and nutrition through series of discussions, giving multiple presentations about food groups in the Pyramid. In the Pyramid of Food are the following groups, namely Grains, Vegetables, Fruits, Meat and Beans, Milk and Oil. Each one group is a vast resource in a particular need. For example, Meat and Beans group is rich in Protein and therefore is beneficial in building of muscles; Grains group is good for the Digestive System and energy source; and so on and so forth. The benefit of each food group and the effect of which in relation to the improvement of their health cannot be overly emphasized. It will be explained the relationship of a healthy balanced diet and a proper physical exercise that if combined can result in maximum energy, physical and mental alertness, longevity and quality of life, which they deserve.

Results: At the end of the program, it is hoped that each and every one of the senior citizens at Bethany's Methodist Church will have learned the usefulness of the Pyramid of Food Groups, will be able to differentiate each food group and choose properly what is appropriate for their needs, and learn to maintain the practice to keep it as their lifestyle, so as to have a healthier and a happier life.

CONCLUSION: The Pyramid Groups of Food is a helpful tool or guide for determining the right and correct kind of food necessary for healthy diet and nutrition. If followed strictly, this food system can prove effective and significant in improving health and general condition. It only needs information dissemination, learning and education, and proper application and practice of the system to achieve maximum benefits. This type of project can impact greatly if applied massively and as a necessity in a community. And that is why it should be included in as a part of an academic curriculum, or a community service learning project compulsory to healthcare giver and professionals.

Gaps in Health Professionals' Education: Caring for Patients with Developmental Disabilities

Project Discipline: Health Professions

Primary Presenter: Megan Cunningham

Students involved in project to date: Venessa Agado, Katherine Perez, Chun Yu Yeung, Gino Ramirez Garza

Mentor: Carol Nguyen, RDH, MS

Community Partner: South Central AHEC

Project Location: San Antonio, Texas

Project Description:

Background: Many young adults with developmental disabilities face healthcare disparities because healthcare providers often lack training to address this population's specific needs. This can lead to poor health outcomes, limit social interactions, and increase healthcare costs. We studied young adults with developmental disabilities in San Antonio, Texas who had completed a transitional school program.

Methods: This pilot study used an exploratory research design to identify a convenience sample of 15 in which descriptive and qualitative data were gathered in a structured 45 minute interview to identify gaps in medical and dental care in the study population.

Results: 13% were very dissatisfied with the quality of dental care received; 27% felt their general dentist was not prepared to treat patients with developmental disabilities; 13% were very dissatisfied with the quality of medical care received; 33% felt their general physician was not prepared to treat patients with developmental disabilities. Patients and families often felt that healthcare providers did not communicate effectively, had difficulty recognizing specific patient needs, and did not seek patient and family input when creating treatment plans.

Conclusion: Health professionals for this group of participants lack specific training that focuses on interacting with young adults with developmental disabilities. Patients and their families would like healthcare providers to empathize with their situation. Training of health professionals should address issues that young adults with developmental disabilities encounter when they seek healthcare, and such training should include effective measures to provide optimal patient and family centered care in this population.

Hospice Volunteer Companion

Project Discipline: Nursing

Primary Presenter: Claudia Araiza

Mentor: Kristin Webber

Community Partner: VITAS

Project Location: San Antonio, Texas

Project Description:

Background: VITAS provides hospice care for patients with a life expectancy of less than 6 months. Their mission is to increase the quality of life in each patient. VITAS volunteers provide companionship and respite for patients.

Methods: Volunteers are available to give companionship to the patient and help provide a break for the caregiver. They are sent out to the residence of each hospice patient suffering from loneliness or with caregivers suffering from fatigue. Each volunteer is expected to visit their patient for at least 1 hour a week and report back to the hospice team. The hospice team is composed of physicians, nurses, and social workers. Teams meet on a weekly basis to examine the progress of each patient. Documentation of each visit is provided by the volunteer. At these meetings, the team decides whether a volunteer should continue the visits.

Results: The results are highly individualized and dependent upon whether the objectives of the visit have been met.

Conclusion: A major challenge for this program is how to measure the effect of companionship. Each team must use the information provided by the patient, caregiver and volunteer into consideration. The final decision to continue is made based on prior experience and the response of the patient to the companionship. I've learned that companionship is more than just an opportunity to socialize. It provides a sense of inclusion. Some patients never talk to their volunteer, either because they cannot or because they choose not to, but they are excited to receive a visit. It goes to show that small gestures can affect another person in a big way. VITAS is trying to create a community outreach project so more people are aware of the volunteer opportunities. They would like to increase the number of volunteers and trainings available.

Improving Healthcare Communication Among Elderly

Project Discipline: Medical

Primary Presenter: Shirley Osadebe

Mentor: Sandra Sanchez-Reilly, MD and Anand Karnad, MD

Community Partner: Cancer Therapy Research Center (CTRC) and Nix Clinics

Project Location: San Antonio, Texas

Project Description:

Many factors influence the elderly with healthcare decisions including caregivers, mental health, and feelings of powerlessness. Some elderly are reluctant to engage with their physician due to insecurities regarding their decision-making skills and in their communication with the doctor. Cancer health disparities in the elderly may be magnified by age-bias and these factors. Geriatricians and geriatric oncologists have a system in place to address these issues but have patients continue to feel the need to use CTRC and Nix support services to address health education and have unanswered questions about their care. Therefore, improving the communication between physicians, patients, and their caregivers may be the key to mitigate patient issues more acutely. At Cancer Treatment and Research Center (CTRC) and Nix clinics, the needs of elderly patients were identified (with and without cancer) during pre-surveys and identified if their concerns were addressed during post surveys. Patients were asked questions on their “total pain” (physical, social, spiritual, psychological pain) and provided educational brochures to improve their quality of care. As a result, 100% of patients’ concerns, questions, and physical were addressed. However, 60% with social pain and only 20% with spiritual pain and were addressed. Eighty percent of patients with psychological pain were addressed as activities of daily living or depression (not dementia specifically). All patients were satisfied with the visit despite not addressing some “total pain” issues. In conclusion, there is general satisfaction with focus on questions, concerns, and physical pain only. Not addressing spiritual and psychological pain did not affect patient satisfaction. Although when these issues were addressed, patients felt comfortable communicating with the outcome of more information-giving, participatory decision-making, and feelings of empowerment.

Interactive Game Play to Build Upon the Emotional Well Being of Nursing Home Seniors

Project Discipline: Nursing

Primary Presenter: Wendy J. Mercer and Pollyanna Smotherman

Mentor: Aleta Grimsley

Community Partner: Regent Care

Project Location: San Antonio, Texas

Project Description:

Background: Seniors that reside in nursing homes are vulnerable to biophysical and psychosocial deterioration and diseases that could be delayed through interaction with others and active lifestyles that are often deficient in managed care facilities. Interactive game play may be used to facilitate involvement with peers and open trusted lines of communication between each other and staff.

Methods: We partnered with a local senior care facility to provide snacks, games, and crafts on a voluntary basis for its residents. We assessed not only the active and repeat participation, but statements from participants and staff about our program.

Results: Attendance and enthusiasm was remarkable. The same participants returned to each session and there is always a new face in the crowd. The participants reported high satisfaction and enjoyment through learning new activities. Staff members feel that the program has been a valuable asset for the participants. They appear to be excited and happier.

Conclusions: Our findings show that actively engaging the senior population with meaningful activities can improve the quality of life. It has been truly an endeavor to arrange projects that provided the right amalgam of complexity and simplicity. Our project, while hardly a new or even innovative concept, is an imperative one.

Wurzbach Manor Refugee Health Clinic

Project Discipline: Nursing

Primary Presenter: Marlene Palit

Students involved in project to date: Essie P Mathews, BSN, RN, Maizal Rivera, BSN, RN, Sijimol Jose, BSN, RN

Mentor: Ruth. A. Grubescic, DrPH, PHCNS-BC

Community Partner: St. Francis Episcopal Church, Neighbor Helping Neighbor

Project Location: San Antonio, Texas

Project Description:

BACKGROUND: Wurzbach Manor is a low – income apartment complex with approximately 160 families, including immigrants from various African, Middle Eastern, and Asian countries, and Hispanic families living in poverty. Many arrived in this country seeking asylum and a peaceful life. They encounter many struggles including poor English language skills, inadequate health care access, and post traumatic stress disorder. These refugees often lack the skills to properly navigate the complex health care system once they do have access to programs such as CareLink. Therefore, nursing case management services are in dire need.

Methods: Data collection via a community assessment by conducting a windshield survey, a Meet and Greet program, individual and family interviews which showed a need for immunization and primary health care information. Interventions included a health care file folder for each family which contained immunization records, points of contact for health care providers, information regarding transportation access and health education materials for prevailing disease conditions.

Results: Health care folders were initially prepared for six families. A health care folder template was created for future use. Techniques were learned about how to approach and meet families gaining their trust. Information was added to the existing Wurzbach Manor Health database.

Conclusion: Challenges included dealing with multi cultural, multi linguistic populations. The community is faced with poverty, low socioeconomic status, unemployment, lack of safety and security due to violence and crime, and health disparities including knowledge and access. We learned how to approach the community and gain their confidence through the use of incentives and the impact of working with community partners like Neighbors Helping Neighbors. The future directions include combined efforts of various health care professionals and community groups to develop a free health care clinic for the residents. There is a need to empower the residents of the community to manage their own health care.