#### Title:

Improving the Health of Populations Through an Academic-Community Patnership

# Susan Grinslade, PhD1

Loralee Sessanna, DNS<sup>2</sup>
Priti Bangia, MBA<sup>3</sup>
Penelope W. McDonald, PhD, MSN, BSN<sup>2</sup>
Alexander Salinas<sup>4</sup>
Jada Douglas<sup>4</sup>
(1) School of Nursing, SUNY University at F

(1)School of Nursing, SUNY University at Buffalo, Buffalo, NY, USA

(2) School of Nursing, University at Buffalo, Buffalo, NY, USA

(3) Millennium Collaborative Care PPS, Buffalo, NY, USA

(4)University at Buffalo School of Nursing, Buffalo, NY, USA

#### **Session Title:**

Research Poster Session 2

Slot (superslotted):

RSC PST 2: Saturday, 29 July 2017: 12:00 PM-1:30 PM

Slot (superslotted):

RSC PST 2: Saturday, 29 July 2017: 2:45 PM-3:30 PM

#### **Keywords:**

academic-community partnership, health promotion and population health

#### References:

Angela, G., & MacLellan, M. (2013). Critical service learning in community health nursing: Enhancing access to cardiac health screening. *International* 

Journal of Nursing Education Scholarship, 10(1), 63-71. https://doi.org/10.1515/ijnes-2012-0031

De Los Santos, M. (2014). Interprofessional education and service learning: a model for the future of

health professions education. Journal of Interprofessional Care, 28(4), 374-375.

http://dx.doi.org/10.3109/13561820.2014.889102

Gawlik, K., & Melnyk, B. (2015). Integrating million hearts into nursing and interprofessional education

curricula and community settings: A key strategy for improving population health across the United States. *Journal of Professional Nursing*, 31(2), 112- 118. Retrieved from <a href="http://dx.doi.org/10.1016/j.profnurs.2014.07.002">http://dx.doi.org/10.1016/j.profnurs.2014.07.002</a>

Matsumoto, D. & Hwang, H. (2013). Assessing cross-cultural competence: A review of available tests.

Journal of Cross-Cultural Psychology, XX(X), 1 – 25. DOI: 10.1177/0022022113492891

Noble, A., Nuszen, E., Rom, M., & Noble, L. (2014). The effect of a cultural competence educational intervention for first-year nursing students in Israel. *Journal of Transcultural Nursing*, 25(1), 87-

# **Abstract Summary:**

The University at Buffalo School of Nursing (SON) initiated a community based interprofessional education activity using Ohio State University's Million Hearts ® curriculum. The SON guided formation of an academic-community health coalition. Community based Million Hearts® screenings were completed by students from nursing, exercise and nutrition science, medicine and pharmacy. Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Describe the implementation of a community-based interprofessional Million Hearts screening activity.	Process to integrate Ohio State's Million Hearts curriculum into SON program. Formation of community-academic health coalition. Interprofessional community based Million Hearts screening activity.
Discuss the impact of the service-learning activity on nursing student cultural awareness.	Cultural awareness student assessment prior to classroom presentation on cultural sensitivity. Student participation in community based Million Heart screening in undeserved communities with significant health disparities. Post cultural awareness student assessment at the end of semester. Focus group program evaluation of student service-learning activities.
Discuss how a program evaluation will be used to inform future community based interprofessional activities.	Focus group program evaluation conducted. Findings will be used to guide future community-based, interprofessional, service- learning activities.

## **Abstract Text:**

## Purpose:

According to the American Heart Association (AHA) (2016) heart disease is the leading cause of death among men and women. Major modifiable risk factors for cardiovascular disease include high blood pressure, high LDL cholesterol, stress, obesity, and smoking. In Buffalo and Western New York (WNY) region, a community assessment identified an existing and significant disparity in cardiovascular disease and stroke in the African-American (AA) population. The University at Buffalo School of Nursing (UB SON) initiated a community based interprofessional screening activity guided by the Million Hearts ® curriculum developed by the Ohio State University. To facilitate implementation, an academic-community health coalition was formed with members included the UB SON, Millennium Collaborative Care (MCC), Greater Buffalo United Ministries (GRUM), as well as two student representatives from the Multicultural Student Nurse Association (MNSA). The initial aim of the academic-community health coalition was to improve health behaviors and outcomes of a targeted underserved, and disparate population in the Greater Buffalo and WNY region. The current goal of the Health Coalition is to "empower the community to achieve the highest level of health and wellness through engagement with the community, healthcare professionals and community service organizations." Inherent in the goal is the underlying intent to ensure that community-based health promotion interventions were evidence-based, spiritually and

culturally appropriate, foocus on improving the health of vulnerable populations, and eliminating health disparities.

#### Methods:

The Million Hearts® curriculum was integrated into two junior level health promotion courses in the SON. The community-based Million Hearts® Screenings were completed as partial fulfillment of requisite service-learning hours for the SON. An invitation was extended to the University at Buffalo Schools of Exercise and Nutrition Science, Pharmacy and Medicine. Students from these schools completed the Million Hearts® curriculum and participated in the interprofessional health screening events as a course requirement or as volunteers.

Prior to beginning the community screenings, representatives from the SON and MCC met with the governing board of GRUM to develop the foundation for an engaged and trusting academic-community partnership. In spring 2016, Million Hearts® interventions were implemented in seven community churches with permission of the pastor and/or representatives of the health ministry. Churches were responsible for providing a place for the screening to take place, distributed information about the planned screening through community leaflets, and publicizing the upcoming event at church activities, including the Sunday service before the screening. Additionally, the church's health ministry agreed to provide ongoing follow-up if a parishioner's screening results warranted it. MCC was responsible for coordinating activities through the local American Heart Association Chapter, obtaining health resources for smoking cessation, providing individuals to screen participants for health activation measures, signing individuals (and families) up for health insurance, and securing appointments with primary care physicians if needed.

Students were provided with an in-depth lecture on cultural sensitivity provided by a community representative of the New York Area Health Education System (AHEC). A pre and post cultural competency assessment was completed before lecture and at the end of the semester after community based screenings. Health screenings for cardiovascular disease risk factors including high blood pressure, smoking, and weight as BMI were conducted by health science students. Nutrition science students provided comprehensive, individualized nutrition and diet information aimed at promoting heart health. Medical students targeted activities for children and young adults and provided health education on the heart using animal models of the heart and interactive on-line education for young children. Exercise science students assisted with screening activities, answered questions about exercise, and recommended strategies to increase exercise in daily living activities. Pharmacy students provided guidance and education on currently prescribed medications.

#### Results:

Through November 2016, the academic-community health coalition provided 11 community-based Million Heart Screenings at eight churches, two community events including one sponsored by the American Diabetes Association, and one inner-city charter school.

Data from the screening events demonstrate that participants are predominantly female, African-American, and between 51-80 years of age. One-quarter report smoking, and over 65% had a BMI between 25 – 39.9. 25%were identified as having Stage 1 hypertension while 8% were identified as having Stage II hypertension. On three occasions, screening results required an immediate intervention such as securing a primary care evaluation within 24 hours or follow-up with a church's health ministry.

After six months, Pastor Douglas, Director of the GRUM stated, "We are making progress. But we need to keep going. We need to eliminate health disparities, we need doctors and hospitals to treat people equally and inspire them to value their health and make better choices."

# **Conclusion:**

A program evaluation is being conducted. Focus groups comprised of participating faculty and students participated in guided discussions to determine how effective this activity was in promoting their understanding of population health, health promotion, culture awareness, and health disparities. Audio transcripts will be transcribed and a qualitative content analysis will be conducted. The results will be used for quality improvement.

Through MCC, the academic-community partnership was honored with the P2 Collaborative of Western New York's "Spotlight on Population Health (SOPHi) Award for Chronic Disease Prevention. Receipt of this award provides further evidence that when academia and community organizations work together, health can be improved and health disparities reduced.