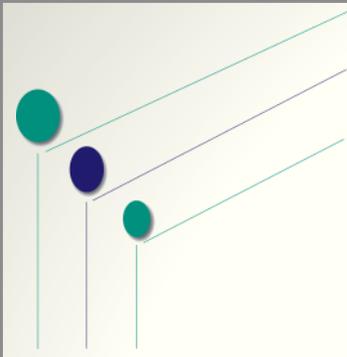




An Assessment of the Barriers to Rendering and Receiving Preventative Care at the Center for Community Health

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GE – National Medical Fellowship, Primary Care Leadership Program

■ Purpose:

- To provide students with the unique opportunity to gain a better understanding of the challenges and rewards that come along with practicing primary care in community health centers across the country.

■ Goals:

- To encourage future health care professionals to pursue a career in primary care
- To foster leadership development by pairing each participant with a health center senior staff mentor



How I Spent My Time at the CCH

- Exploring some of the resources, services, and programs in place at the JWCH
 - PCMH
 - PATH Mobile Unit
 - Downtown Women's Center
- Shadowing different clinicians
- Leadership Training
- Independent Project



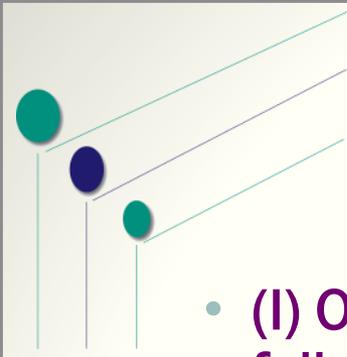
Introduction

- Downward trend in preventative care health screening,
 - Specifically mammograms, PAP, and Hemoccult testing
- **Purpose: To assess the specific challenges and barriers faced by the homeless patient population at the CCH in receiving preventative care**



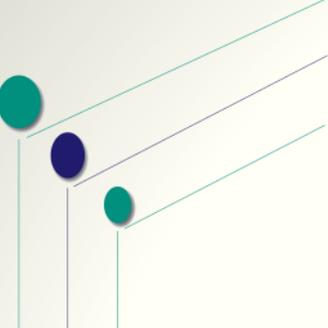
Background

- Barriers to care according to previously conducted studies:
 1. “Difficulty meeting subsistence needs (securing food, shelter, clothing, a place to wash, bathroom facilities) may be contributing to the observed pattern of health behavior whereby homeless adults do not seek preventative care or care in the early stages of illness, but delay seeking care until their need is acute.”
 - *"Competing priorities as a barrier to medical care among homeless adults in Los Angeles." Gelberg, Lillian, et al.*
 2. “Health is not a priority for homeless people.”
 - *"Access to women's health care: A qualitative study of barriers perceived by homeless women." Gelberg, Lillian, et al.*
 3. “Transportation and scheduling can be particularly burdensome.”
 - *"Access to women's health care: A qualitative study of barriers perceived by homeless women." Gelberg, Lillian, et al.*



Methodology

- **(I) One on one interviews with patients assessing the following:**
 - Regular source of care
 - Family history
 - Thoughts and beliefs about preventative care
 - Perceptions about barriers to care
- **(II) One on one interviews with providers assessing the following:**
 - Beliefs about barriers patients face
 - Challenges providers face in rendering preventative care
 - Suggestions for improving the trends in preventative health screenings
- **(III) Comparison between what patients believe are the barriers they face to accessing preventative care and the providers' beliefs**



Key Findings – From the Patients’ Perspective

- **Regular source of care:**

1. Do you have a regular provider here?

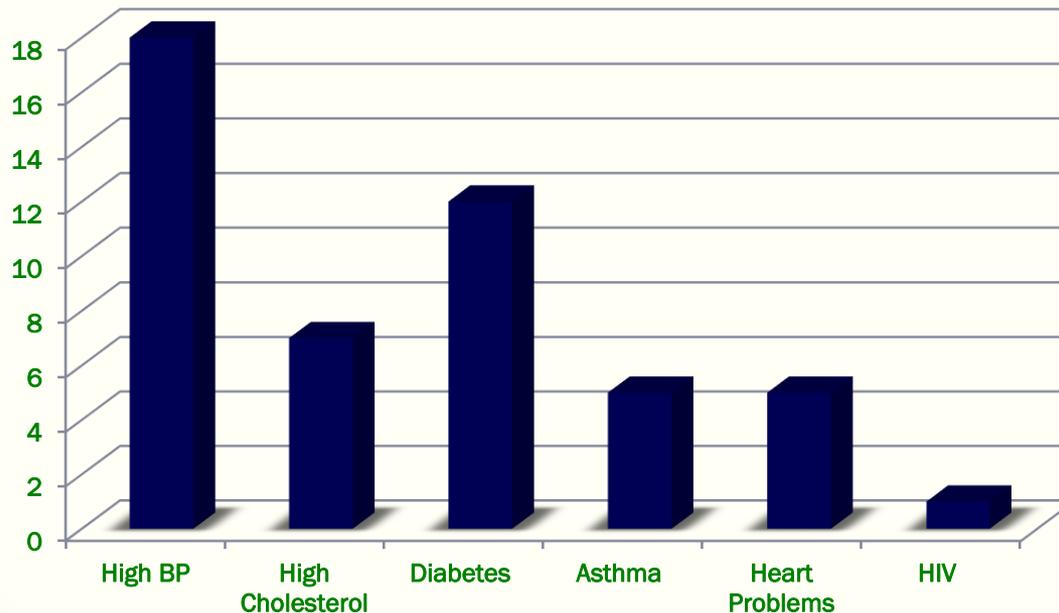
- Majority of participants are regular patients of the CCH, 20 of 30 responded yes to having a regular provider here

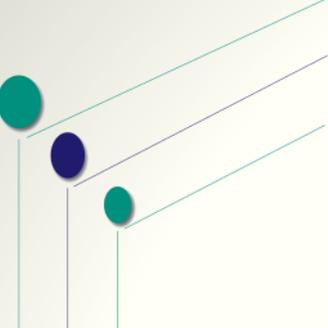
2. How often do you see this provider? Of the 20 who responded yes to the above question:

- Once a month: 13
- Every three months: 1
- Sparingly OR when presenting symptoms: 4
- Didn't answer: 2

Key Findings – From the Patients’ Perspective

- **Regular source of care:**
 3. Do you have any chronic medical conditions such as hypertension or diabetes?
 - 24 of 30 participants had at least one chronic illness
 - Of those 24, 16 had more than one of the chronic illness

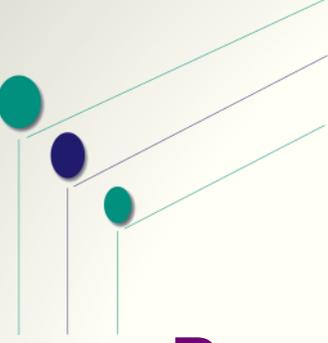




Key Findings – From the Patients' Perspective

- **Family History:**

1. Are you aware of any illnesses that are common in your family? (Such as cancers, diabetes, high blood pressure...)
 - The majority (24/30) had a positive family history for one or more preventable chronic illness



Key Findings – From the Patients' Perspective

- **Perceptions about Preventative Care:**
 1. Has anyone here or anywhere else ever talked to you about preventative care?
 - About half answered yes (14/30) and half answered no (16/30)

Key Findings – From the Patients’ Perspective

• Perceptions about Preventative Care:

- What do the patients think preventative care is?

- ✓ “Doing things that you need to do to keep you healthy”

- ✓ “Exercising and eating right”

- ✓ “Doctor explaining ways to get diabetes and ways to keep from getting diabetes”

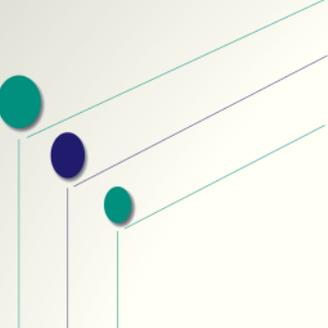
- ✓ HIV testing

- ⊗ “A disease”

- ⊗ “Medical treatment you get if you can’t get to the doctor”

- ⊗ “Getting on Healthyway LA”

- ⊗ “I don’t know”



Key Findings – From the Patients’ Perspective

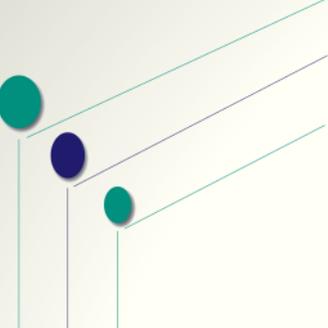
- **Perceptions about Preventative Care:**
 3. If the doctor recommended some tests that would help them see whether or not you are at risk for certain cancers and illnesses would you be willing to take those tests?
 - All of the patients said that they would take the preventative tests if the doctor recommended them
 4. How important do you think it is to take these tests on a scale from 1 to 5, 5 being extremely important?
 - Almost every patient ranked the importance of health screenings at a 5 and expressed a desire to know what is going on with their health especially as they are aging



Key Findings – From the Patients’ Perspective

- **Barriers Care:**

- Is there anything can you think of that keeps you from coming here?
 - Overall most people could not think of any barriers that would keep them from coming here or from coming back. Of those that did come up with possible barriers, the following were given:
 - **Not having a place to live created many obstacles**
 - Makes it difficult to keep up with medications
 - No place to store belongings while at the clinic
 - **Having to take public transportation to get here**
 - Many of the people that relied on public transportation to get the CCH either had to take multiple buses to get here or often times did not have money to pay the bus fare
 - **Making it to referral appointments for PAP/mammograms can be difficult**
 - **Wait time**



Key Findings – From the Providers' Perspective

- **Beliefs about the barriers patients face**
 - What do you believe are the biggest challenges/competing needs patients here face in accessing preventative care?
 - **Mental illness**
 - **Lack of transportation**
 - **Unstable housing**
 - **Not having all services available at one site**
 - **Preventative care is not high on patients' priority list**

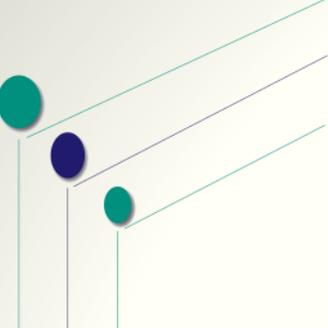


Key Findings – From the Providers' Perspective

- **Challenges providers face in rendering preventative care**
 - As a provider, why do you think there has been a downward trend specifically in colon cancer screenings, mammograms, and PAP smears here at the CCH?
 - Patient Non-compliance
 - Many patients have severe health issues that take up the entire visit
 - NextGen Issues
 - Hard to tell if patient has had the health screening
 - Even if it was completed, auditor may have missed it because it's difficult to find
 - So many other things that have been made priorities such as disease management, getting organized with integrated services, PCMH, etc

Key Findings – From the Providers’ Perspective

- **Suggestions for improving the trends in preventative health screenings**
 - What can you think of that can be done to change the downward trend the CCH has been experiencing in colon cancer screenings, mammograms, and PAP smears?
 - Having some sort of reminder
 - Providers have to really believe in the importance of the health screening tests and take on the responsibility of constantly and consistently urging patients to comply with them
 - Make it easier on the providers to actually get it done
 - Example: “knee-jerk” method: if the patient fits the criteria then the test should just be ordered
 - Improvements to Next Gen so that auditors can see that the tests have been done
 - Patient education



Discussion

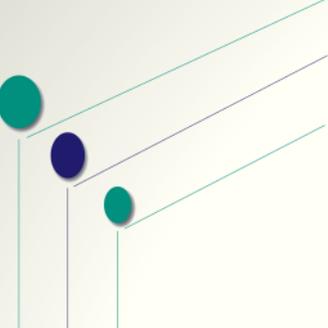
- **Comparison of Beliefs**

Patients

- Not having a place to live
- Having to take public transportation
- Making it to referral appointments for PAP/mammograms can be difficult
- Wait time

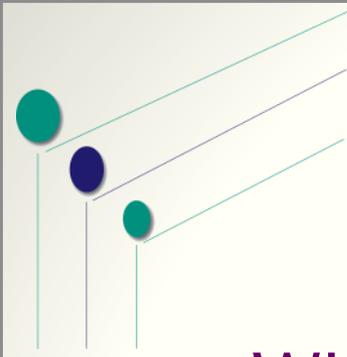
Providers

- Unstable housing
- Lack of transportation
- Not having all services available at one site
- Mental illness
- Preventative care is not high on patients' priority list



Discussion

- **Patient Non-compliance**
- **Limited Time with Patients**



Discussion

- What needs to be done?
 - **Health care reform**
 - Diffuse some of the responsibility placed on providers
 - Finding a new payment method that allows for a bigger team approach to care

Discussion

- What needs to be done?
 - Health care reform
 - Bigger team approach to care

Expansion of infrastructure



Shared responsibility



Increased patient education



Decreased patient non-compliance



Conclusion

- What can be done at the CCH?
 - **Maximize NextGen**
 - Reminders can be electronically generated to providers to prescribe timely tests or procedures based on the patient's personal healthcare maintenance needs
 - **Make preventative care a priority**



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