

Increasing the usage of public resources to improve patient health outcomes at Jackson Hinds Comprehensive Health Center

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Abstract

Mississippi suffers disproportionately for cardiovascular disease, diabetes, kidney disease and cancer. Identifying patients with certain lifestyle risk factors for these health disparities is essential to positive patient outcomes. My objective is to identify some of the major social barriers that are impeding positive health outcomes in the general patient population receiving care at Jackson Hinds Comprehensive Community Health Center (JHCHC). Through the conduction of windshield surveys, subjective and objective data analysis major social needs were identified in the adult medicine, women's health and pediatrics departments of JHCHC. Following analysis, I will create a resource book that includes contact information on programs offered through JHCHC and other agencies that meet the needs of the general patient population of JHCHC.

Key Words

Jackson, Mississippi, Jackson Hinds Comprehensive Community Health Center, JHCHC, social service, community outreach, low socioeconomic status, diet, adult medicine, pediatrics, women's health, social determinants of health

Introduction

Community Health Centers (CHCs) are organizations that are designed to serve populations with high medical need and limited access to healthcare by providing primary care services and some supportive services. CHCs were created to meet the needs of underserved and uninsured individuals consequently the patient populations that are primarily served are from lower socioeconomic status. CHCs play an indispensable role in our society because they are often the sole source of primary care for many individuals.

Jackson Hinds Comprehensive Health Center (JHCHC) is a federally qualified health center (FQHC) entity with its founding dating back to 1970. JHCHC is, indeed, a comprehensive health center providing preventive, primary healthcare and dental services at eighteen sites including several free-standing clinics in rural and urban areas, school-based clinics, mobile units and a homeless clinic. A main objective of JHCHC is to “eliminate disparities in health care access for these groups which often fall between the gaps of private insurance and personal income.”

According to the National Association of Community Health Centers, in 2012 there were a reported 21 federally supported healthcare centers in Mississippi. Among these 21 centers 303,079 patients were seen that year; approximately 9,000 of these patients were homeless. JHCHC and other CHCs around the country provide a means of continuity of care to a large population of individuals and families. This in turn, decreases the numbers of patients going to Emergency Departments for non-emergent acute medical problems and uncontrolled chronic diseases manifestations.

Background

The Biopsychosocial model is a theory that is becoming increasingly supported in the medical community. This particular model explains that biological/genetic makeup, psychological/mental health and particular social aspects are all major determinants of the overall health of an individual. While clinicians are rigorously trained to assess and treat biological and psychological dysfunction they are often not equipped with the time or resources at hand to address social needs.

Social determinants of health are things outside of one's self that directly influence health status and outcomes. For example, economic status, educational attainment and living environments are all factors that play an active role in one's health. Many times these social aspects are interconnected and build upon each other. For instance, one's educational attainment directly effects one's employment options which determine one's socioeconomic status which goes on to play a role in the type of communities that individual will be able to afford to reside in.

Mississippi suffers disproportionately from chronic diseases such as cardiovascular disease, diabetes, kidney disease and cancer. Furthermore, residents of Mississippi have significantly higher mortality rate from these chronic diseases than the national averages (1). According to the 2004-2013 Mississippi State Plan, cardiovascular disease was the cause of 41% of all deaths in the state in 2011; making Mississippi's cardiovascular disease mortality rate the highest nationally. Health statistics like these have helped the state receive recognition as being a part of the country's "Stroke Belt".

There are certain common risk factors that play a major role in the development of many chronic diseases such as cardiovascular disease, hypertension, obesity, diabetes type 2 and osteoarthritis. Some of these risk factors include poor eating habits, sedentary lifestyles and tobacco use. The Youth and Adult Behavioral Risk Factor Surveillance Systems are surveys conducted on a state and national level that collect data on health risk factors, preventative health practices and health care access primarily related to chronic disease (1).

Statistics for Adults

For clarification purposes, adults are classified as individuals over the age of 18. According to the 2010 Adult Behavioral Risk Factor Surveillance (BRFSS), 34.5% of adults in MS were obese, compared to a national statistic of 27.5%. The prevalence of obesity was highest among those with lowest income levels. Nationally, 51% of adults met the recommended level of physical activity while only 37.5% of adults in MS met the recommended physical level. Individuals who consume 5 or more fruits and vegetables a day are at reduced risk for coronary heart disease; however only 16.8% of adults in MS met this goal while 23.4% adults nationally met the goal. The likelihood that individuals met the diet recommendation increased with increase in income. Cigarette smoking is known to be harmful to the smoker as well as individuals close enough to receive secondhand smoke; however in 2010 22.9% of adults in MS were cigarette smokers compared to a national percentage of 17.3%

Statistics for Children

The Youth Risk Behavior Surveillance System (YRBSS) includes self-reported data from students in grades 9-12. According to 2011 data, 15.8% of MS adolescents were obese compared to a national 13%. While 42.3% of MS adolescents met the recommended level of

physical activity compared to a lagging national average of 28.7%. In 2011, 23.9% of MS youth self-reported to consuming 5 or more fruits and vegetables a day compared to a national 18.4%. 17.9% of MS adolescents reported to be current cigarette smokers compared to a very close national 18.1%.

Methodology

For five weeks I had the opportunity to participate in one week long “miniature rotations” through the Women’s Health, Pediatrics and Adult Medicine departments at JHCHC. These rotations were conducted at the main site, medical mall and Woodrow Wilson clinics in Jackson, Mississippi. During the rotation the physicians would train me on a clinical skill they deemed important, such as patient interviewing and history taking or physical exams. This gave me the opportunity to have maximum patient contact. Before entering a patient’s room I would review their electronic medical record to gather objective data such as vitals, medication list, and general medical history. During the patient interviews and exams I was able to gather subjective data on the patient’s individual health history and social needs. Many patients would openly discuss issues such as their inability to afford their medication, or their frustrations about not knowing their Medicaid application statuses. I conducted a windshield survey of the city of Jackson to get a better understanding of the area that many patients were living and a glimpse at some of the readily available resources.

Based on the concerns voiced directly from patients, medical records and the information gathered during the windshield surveys I assessed the specific social needs of the patient population. Once needs were assessed I began to research appropriate resources and agencies that would meet the needs of the patients. Following, contacts and health information were

organized into books that were placed at the nursing stations of the JHCHC so that patients will be able to view them and gather the tools they need to play an active role in their health.

Results

Windshield survey

West Jackson:

The neighborhood known as West Jackson is situated south of Fortification Street. While conducting a windshield survey of West Jackson, there were several restaurants in the area. There were buffet-style restaurants, restaurants showcasing generational southern cuisine and fast food chains such as McDonald's and Captain D's. There was a 24-hour gym and dance studio located in the area. There was also a Save-A-Lot grocery store in the area.

Belhaven:

The neighborhood known as Greater Belhaven is situated south of East Woodrow Wilson Ave and North of East Fortification Street. Belhaven neighborhood is sits east of North State Street and is situated around Belhaven University. While conducting the windshield survey of the area I noted a small "hometown style market" grocery store. There were several ethnic restaurants and fast food options.

Fondren/ Cherokee-Heights:

The Fondren/ Cherokee- Heights neighborhood is situated North of East Woodrow Wilson Ave. and between North State Street and Highway 55. Located in this vicinity is the University of Mississippi Medical School and medical center, the Methodist Rehabilitation Center, Veterans Affairs medical center and St. Dominic Hospital. There were many ethnic restaurants, a grocery store and streets flanked with small boutiques and art galleries.

Medical Mall Area:

For the purposes of this study the Medical Mall area includes West of North West Street and East of Medgars Evers Blvd. It is comprised of neighborhoods Virden, Poindexter and Delhaven. There is a Save-a-Lot grocery store located right near the large medical mall complex. There are many fast food restaurants located on East Woodrow Wilson Avenue, the main street leading to the medical mall. There are several schools in the vicinity.

Subjective and Objective Data Analysis

Adult Medicine

My adult medicine rotation was conducted at JHCHC main clinic site and the Woodrow Wilson clinic site. During my experience I had the opportunity to see wellness visits as well as patients coming in for acute medical issues. The majority of the patients coming in had been diagnosed with multiple chronic diseases. The most common ailments were diabetes, hypertension and obesity. I saw also got to see several patients with dementia, neuropathy, and respiratory diseases like asthma and Chronic Obstructive Pulmonary Disease (COPD).

Patients seen at the clinic fell under categories of uninsured, private insurance coverage and Medicaid. While reviewing medical records before going in to see patients I couldn't help but notice that many patients had running balances with the clinic. I spoke with a young man working at the patient registration desk to inquire on the process of outstanding balances. He notified me that if a physician deems a laboratory test or visit "medically necessary" then the clinic would provide care even if the patient is unable to pay at that time of the visit.

Several social determinants were found to be impeding patient outcomes. Patients stated that a lack of resources prevented them from maintaining healthy diets. Patients expressed feeling unsafe and/or uncomfortable walking in their neighborhoods and the surrounding areas because of a lack of sidewalks. Several patients also expressed concern because they were currently uninsured and weren't sure who to inquire with about the status of submitted Medicare applications.

Pediatrics

My pediatric rotation was conducted at JHCHC main clinic site and medical mall clinic. I was able to witness routine wellness appointments, visits for acute illnesses as well as follow ups stemming from hospitalizations and emergency room visits. Some common medical ailments were eczema, asthma and obesity. There was a high volume of parents bringing in children under the age of two years old for routine immunizations.

The majority of the patients seen in this department were covered under either private insurance or Medicare family plans. Despite insurance coverage there was still some evidence of other potential roadblocks. There were a few social aspects identified that I believe are potentially effecting patient outcomes. Some of the social factors noted were low socioeconomic status of patients and a high prevalence of teenage mothers.

Women's Health

My miniature rotation in Women's Health was conducted at JHCHC's main clinic site. During this rotation I had the opportunity to see a lot of routine wellness appointments as well as STD screenings and visits for acute obstetric or gynecological issues. I was surprised by the high prevalence of teen pregnancies. During my rotation, I noted that there were many patients that were documented as having started prenatal treatment later in term than recommended. There

were many patients that were obese and had been documented as being obese prior to their pregnancy via their electronic medical records.

The Women's Health department accepts patients that are uninsured, privately insured and covered by Medicaid. With ultrasounds averaging at \$120, care can become extremely costly for "self paying" uninsured patients that experience complicated pregnancies. One particular social determinant that appeared a lot among patients was low socioeconomic status. Fortunately there are more government aid programs in place for expecting mothers compared to other patient groups.

Discussion

In order to have a frank discussion about the health status of Jackson, MS, we must first discuss the social aspects such as poverty levels and education levels of Mississippi's residents. Many of the patients that I saw while at JHCHC self-identified as being of lower socioeconomic status and were currently receiving government assistance or could greatly benefit from receiving such aid. Mississippi is consistently ranked as one of the poorest states in the nation (2). Hardship of living below the poverty line is not just something experienced by households and individuals; poverty can weaken communities and even entire cities. For example, without adequate financial support, new business cannot be established or maintained and schools may go without beneficial renovations and upgrades. This in turn leads to a vicious cycle of geographical locations with lower financial stability developing disparities in social areas such as education and healthcare. A study was conducted investigating income inequality in each of the 50 states of the U.S and compared it with various rates of disease and social issues such as unemployment and incarceration (3). This study concluded that with greater inequality of the distribution of wealth, comes higher rates of unemployment and incarceration, increased

numbers of uninsured individuals. States with the most unequal distribution of income spent the least money on education per person and had the greatest cost per person for police protection and healthcare.

It is not possible to expect improved patient health outcomes without first correcting the social determinants that directly affect patient's health statuses. Poor diet and sedentary lifestyles are common risk factors for many chronic diseases seen in the United States, such as hypertension, diabetes type 2, osteoarthritis and heart disease. Results from the windshield study of Jackson, MS showed that fast food restaurants heavily outnumber grocery stores and other entities offering healthy food options such as fresh produce. Some areas of the city had multiple areas to exercise such as parks, recreational centers and general green space while other areas of the city had none.

Future studies for this project would be to extend the windshield survey into other major cities surrounding Jackson, Mississippi as many of the patients served at JHCHC commute from other cities just as Brandon, Terry, Byram and Pearl. One particular weakness of this study was time constraints. Each "miniature rotation" only lasted for one week; however during that time I had the opportunity to see established and new patients coming in for wellness and sick visits. One particular strength of this study is the fact that subjective data was gathered conversationally during patients' visits, which eliminated literacy and education level biases that may have been possible with other methods of data collection such as surveys. An additional strength of the study is the fact that data was gathered from multiple departments within multiple JHCHC clinic sites. I believe this gave a more accurate depiction of the general patient population served by JHCHC.

Recommendations

The ultimate goal is to bring about positive changes not just in JHCHC's patient population or the city of Jackson. The social determinants discussed in this paper are visible across the country. It is imperative that our physicians and community leaders continue to have a hands on approach in rectifying social disparities. Some general recommendations are to increase patient and community awareness about resources available on the local and national level. It is important to increase the usage of patient education material. Patient education material must be available in multiple formats so that all individuals are able to gain the knowledge they need regardless of educational level or disability. Because physicians may not be adequately trained to address certain social problems it is imperative to increase funding for social service programs as well as increasing the presence and number of social service staff in community clinics, outpatient facilities as well as hospitals.

Conclusion

According to the Biopsychosocial Model, theorized back to the 1970s, an individual's overall health is dependent on biological predispositions, one's psychological state and social determinants. Based on many published and peer reviewed studies as well as my own observations this summer it is evident that social factors such as economic status, educational attainment and living environments do indeed play a direct role in the overall health of an individual.

The state of Mississippi continuously ranks among the highest for prevalence of chronic diseases such as cardiovascular disease, obesity, hyperlipidemia and hypertension. In addition, Mississippi ranks high for mortalities of said chronic diseases. In order to have a discussion about poor health outcomes of this state it is necessary to address the underlying causes of the

wide onset of these diseases. By continuing to target modifiable risk factors and social disparities such as poor diet and sedentary lifestyles there should be an improvement in patient outcomes.

References

- 1) Chronic disease indicator 2012. MS State department of Health [cited July 2014] Available from:http://msdh.ms.gov/msdhsite/index.cfm/43,5727,91,pdf/MS_Chronic_Disease_Indicators.pdf
- 2) Thinking aloud about poverty and health in rural Mississippi. *Prev Chronic Dis* 2007 Jul [cited *July 2014*]. Available from: http://www.cdc.gov/pcd/issues/2007/jul/07_0002.htm.
- 3) Kaplan GA, Pamuk ER, Lynch JW, Cohen RD, Balfour JL. Inequality in income and mortality in the United States: analysis of mortality and potential pathways. [Published erratum in: *BMJ* 1996;312(7041):1253]. *BMJ* 1996;312(7037):999-1003

Appendix

JACKSON HINDS
COMPREHENSIVE HEALTH
CENTER

THE

Patient Resource
Book

Created Summer 2014

Table of Contents

Healthy Eating

- Farmers markets
- Healthy options at Fast Food Restaurants

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- Sports & Camps

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- Teen Crisis/ Abuse
- Suicide Prevention
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- Gambling

Getting around

- Public transportation
- Pays to have Medicaid



Places to Buy Fresh Produce

Mississippi Farmers Market

929 High Street
Jackson, MS 39202
Contact: Frank Malta
601-354-6573

www.msfarmersmarket.com

Tuesday, Thursday, Saturday
8am-2pm

Fresh at Five

Downtown on Jefferson St.
Clinton, MS 39060
contact: Tara Lytal
601-924-5472

www.mainstreetclintonms.com

Tuesdays 5pm June-August

Yazoo Farmers Market

417 North Main
Yazoo City, MS
Contact: Phyllis Haynes
662-590-5415

Copiah County Farmers Market

201 Downing Street
Hazlehurst, MS 39083
Contact: David Yowell
769-232-2657
www.vicksburgfarmersmarket.org

Vicksburg Farmers Market

Corner of Jackson and Washington St
Vicksburg, MS 39180
Contact: Herschel Hale
601-801-3513
farmersmarket.hazlechamber.com

Piggly Wiggly

225 Meadowbrook Rd
Jackson, MS 39206
601-981-1632

Healthy Items at Fast Food Restaurants

McDonald's

Instead of medium fry (340 calories & 190mg of Sodium)

- Side Salad without dressing is only 20 calories!
- Fruit 'n Yogurt Parfait= 150 calories & 70mg of Sodium

Instead of Sausage & egg Biscuit (510 calories & 1170 mg of sodium)



KFC

Instead of Original Recipe (320 calories/1130mg of sodium) or Extra Crispy Breast (490 calories/1140 mg of sodium)

- **Kentucky Grilled Breast** - 220 calories and 730mg of sodium

Instead of Potato Wedges 290 calories/ 810 mg of sodium

- **Side salad** with light Italian dressing- 30 calories/ 520 mg

Sonic

Instead of Chili Cheese Coney (420 calories/ 1280mg of sodium)

- Jr. Burger- 340 calories/ 550mg of sodium

Instead of Chili Cheese Fries (430 calories/ 730g of sodium)

- Apple Slices + caramel (110 calories/ 60mg sodium)



General Tips

- Choose **GRILLED** instead of fried
- Choose a **SIDE SALAD** or **VEGETABLES** instead of French fries
- Choose vinaigrettes instead of heavy dressings like ranch and blue cheese

Places to get ACTIVE

Parks

BattleField Park- 953 Porter Street

- Playground, Tennis Court, Swimming pool, Basketball, Baseball/ softball

LeFleur's Bluff State Park- 2140 Riverside Dr.

- Playground, Golf Course, Nature Trails, Fishing, Boating

Parham Bridge Park- 5055 Old Canton Rd.

- Playground, Tennis court, Walking Trail

Tougaloo Park- 300 Brown street

- Playground, Walking Trail

Grove Park- 4126 Parkway Ave

- Playground, Tennis Court, Swimming Pool, Walking Trail, Baseball/Softball

Hico Park- 4851 Watkins Drive

- Walking Trails, Tennis Courts, Basketball, Playground

Places to get ACTIVE

Youth Camps

Southwest Jackson Soccer League

Sanford Knott- 601-278-2423

Jacques Reynolds- 769-798-2886

www.swjssl.org

Central Jackson Soccer Assoc.

Al Camaro, Commisioner, 601-376-9751

www.cjsoms.com

Boys Baseball Assoc. (Grove Park)

Thomas Cheatham, Jr. President

601-982-3901 or 601-497-0865

www.groveparkbaseball.com

Leavell Woods Youth Assoc.

Craig Tate, Coach 601-940-9176

Andrea Trotter, Assistant 601-212-5194

Boys and Girls Club

1450 W. Capitol St. Jackson, MS. 39201

601-948-7211

337 N. Union Street, Canton, MS 3046

601-855-0001

470 Sykes Road, Jackson, Ms. 39212

601-372-4111

4350 Raymond Road, Jackson Ms. 39212

601-372-9090

3084 John I. Hay Road, Hazlehurst, MS. 39083

601-277-3397

Youth Team Sports

Contact: Angela Buck, Recreation Coordinator

abuck@jacksnms.gov 601-960-0653

Cartoon Basketball

Ages: 7-14

Team Registration: Dec

League begins Jan

Slammin Jammin Basketball League

ages: 7-14

Team Registration: May

League begins: late May

Metro Jackson Girls Softball

Ages 9-14

Team Registration: May

League begins in June

BattleField Baseball

ages 9-17

Team Registration May

League begins in June

Youth Flag Football

ages: 9-14

Team Registration Aug

League begins in Sept

Adult Sports

Contact: Dana Williams-Jenkins, Recreation Coordinator

dlwilliams@jacksonms.gov 601-960-2173

Spring Basketball (women)

Parks & Recreation Dept.

Registration: Jan-Feb

League begins: March

Summer Basketball

Parks & Recreation Dept.

Registration: April-May

League begins: June

Fall Winter Basketball

Registration: Sept- Oct

League begins: Nov

Men, Women & Co-Ed Softball

Registration: Feb-March

League begins: April

Men's Football

Registration: Aug-Sept

League begins: Oct

Getting Help

Contact Crisis- Adolescent Crisis Hotline..... 601-713-4357

- (601-366-9298 en español)

National Coalition Against Domestic Violence..... 1-800-799-SAFE (1-800-799-7233)

www.ncadv.org

Mississippi Coalition Against Domestic Violence1-800-898-3234

National Suicide Hotline1-800-273-TALK (1800-273-8255)

www.suicidepreventionlifeline.org

National Child Abuse Hotline..... 1-800-422-4453

Rape, Abuse and Incest National Network (RAINN)..... 1-800-656-HOPE www.rainn.org

Senior citizens Abuse1-800-222-8000

Alcohol & Drug Abuse Help Line..... 1-800-821-4357

Cocaine and Crack Hotline 1-800- COCAINE

Coalition against Drug Abuse1-888-895-2719

Marijuana Anonymous 1-800-766-6779

Tobacco Quitline 1-800- QUIT-NOW

Mississippi Gambler's Anonymous 228-864-0442

Getting Around

JATRAM

- Monday–Friday from 5:00a.m. -7:45p.m.
- Saturday 5:00a.m. -7:00p.m.
- Business Office: 601- 948- 7140

HandiLift- offers door-to-door, demand response transportation to eligible passengers. Provides safe and efficient transportation within the city limits of Jackson.

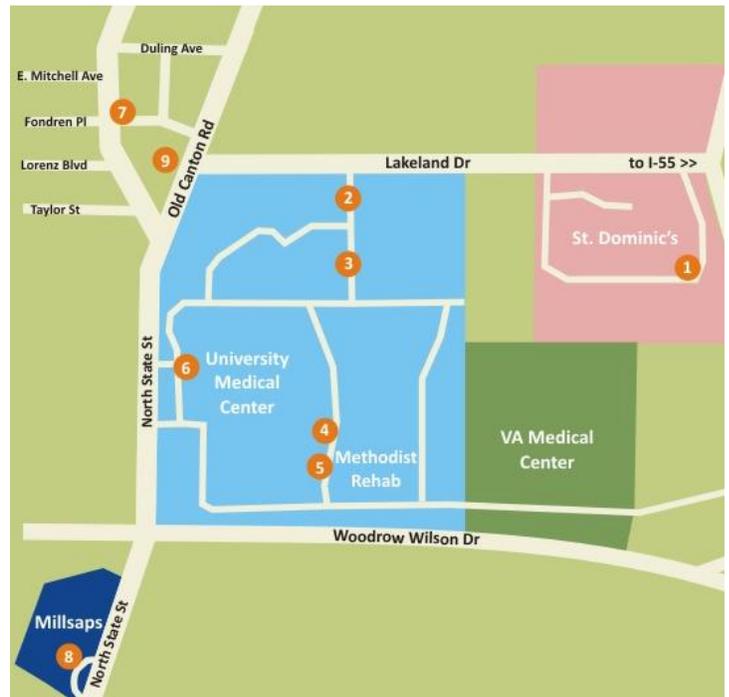
- Monday – Friday 5:00a.m.-7:00p.m
- Saturday from 6:30 a.m.-6:45p.m.
- 601- 948-3776 or 601-948-5438 TTY 601-326-0490

The Fondren Express

- Call 601-213-RIDE to arrange a pickup along route or JUST WAVE at the Driver of any trolley you see in transit.

- Designated Trolley Stops at:
 - St Dominics - Main Entrance
 - UMC- Front entrance
 - UMC- Rehab Center
 - UMC-Methodist Rehab

- .75 cents roundtrip during lunchtime



It pays to have Medicaid

Medical Transportation Management (MTM)- Non-Emergency Transportation (NET) Services

- Medicaid will help eligible persons to travel to and from medical appointments when they have no other way to get there. To find out how to get help with transportation to your appointment, call toll-free at 1-866-331-6004

Medicaid Office Locations

Central Office

Walter Sillers Building
550 High Street, Suite 1000
Jackson, Mississippi 39201

Brandon, MS

Serving Rankin, Simpson, Smith
3035 Greenfield Road, Pearl, MS
39208
601-825-0477

Canton, MS.

Serving Madison, North Hinds
5360 I-55 North, Jackson, MS
39211
601-978-2399

Jackson, MS

Serving Hinds
5360 I-55 North, Jackson, MS
39211
601-978-2399

Hattiesburg, MS

Serving Forrest, Lamar, Perry
6971 Lincoln Road Extension
Hattiesburg, MS
601-264-5386

This is just a glimpse of some of
the resources in your
community!

Schedule an appointment today
with the social worker at your
local Jackson Hinds
Comprehensive Health Center
Clinic!