

Community Partnership between UWB Nurses and Everett Housing Authority (EHA) for File of Life Access & Planning

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Introduction

EHA provides subsidized housing to high-need individuals in the community, primarily elderly individuals and adults with disabilities.

Bakerview Apartment Staff:

- provide a wide range of services including case management, community events, translation services, and job resources
- often have to utilize emergency services due to the nature of residents living at Bakerview Apartments
- constantly trying to coordinate discharge care with hospitals
- expressed desire for every resident to have a File of Life packet on their refrigerator so all current health information is in one location for easier coordination of care
- File of Life packet is a free and magnetized for individuals to store their healthcare information on the refrigerator, includes emergency contacts, preferred hospital, current medications, pertinent medical conditions, allergies, etc. It should be filled out with a pencil and updated about every six months

Problem Description

Elderly population utilize emergency medical services at a rate 4.4 higher than non-elderly (Platts-Mills et al., 2010).

150 residents at Bakerview Apartments, about 80% are elderly and approximately 20% do not speak fluent English

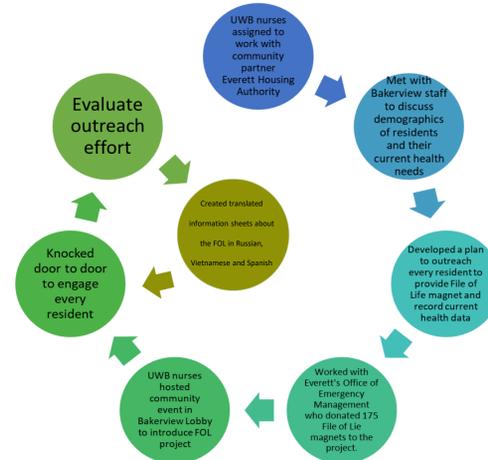
Bakerview staff described frequent barrier in communication with emergency services due to language differences, severe mental disabilities, or disorganization of the resident which hinders first providers ability to give the best care

An increase in case management work is created every time a client goes to the hospital and must be discharged back to Bakerview due to health care providers, hospitals, patients, and EHA staff not having the same information regarding current health status of resident.

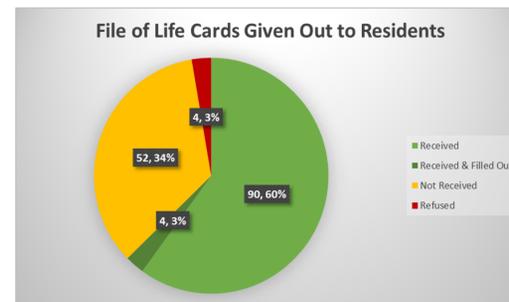
Community cohesion is known to increase a population's resistance against collective challenges (Seaman, McNeice, Yates, and McLean, 2014).

File of Life magnets were suggested by EHA as a tool to increase the cohesion between patient, family, primary care doctor, Bakerview staff, emergency first responders, and hospital staff.

Process / Methods



Key Findings / Results



- A problem faced by the UWB nurses while handing out the cards and explaining their purpose was a language barrier or with individuals that were experiencing paranoia
- Approximately 20% of the residents of Bakerview do not speak fluent English
- 3% of residents during our outreach campaign refused to take the card, some clients refused out of confusion in regard to the purpose of a File of Life or due to the language barrier
- Those individuals are still in high need of File of Life cards, especially in the case of emergency personnel need to respond to any calls from their apartments
- 3 translated versions of the File of Life were created in Russian, Vietnamese, and Spanish
- UWB nurses did not feel they had enough time to build trusting relationship with the more reclusive residents to be able to adequately communicate the importance of the File of Life packets
- It was important and helpful to have a known Bakerview staff member, Martha Macabare, assisting the UWB nurses because she had already built trust with the community
- Took roughly 20-30 minutes to fill out a File of Life card with a resident and since Martha Macabare had to accompany the nurses into residents' apartments for the safety of both residents and staff or volunteers

Recommendations

- Generate translated versions of File of Life packets in any language that is spoken by residents that will be outreached
- Increase education efforts around the benefits of EHA staff collected health data for residents to increase likelihood of clients willing to share personal information
- Provide follow up visits to residents to confirm that the File of Life packet is filled out completely and located on the refrigerator or freezer
- Brainstorm communication methods that would increase the inclusivity of the project, keeping residents that suffer from severe mental illness in mind
- Community education to increase awareness regarding the importance of Bakerview staff having access to FOL information to coordinate care with residents' providers

Conclusions

- File of Life packets provided to 63% of contacted residents
- Door to door engagement provided residents opportunities to ask RNs personalized questions
- Language barrier present with clients who did not speak fluent English-translated information sheets provided at later weeks
- About 3% of residents contacted agreed to share their health data with EHA

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