

Gabriella Pandolfelli, MPH,<sup>1</sup> Leah Topek-Walker, LCSW-R,<sup>2</sup> Amy Hammock, PhD,<sup>1,2</sup> Denise Snow, JD, RN,<sup>3</sup> Lynn Timko-Swaim, MS, PAC,<sup>4</sup> Carol Della Ratta, PhD, RN, CNE<sup>3</sup> and Lisa Benz Scott, PhD<sup>1</sup> <sup>1</sup>Stony Brook University, Program in Public Health, <sup>2</sup>Stony Brook University, School of Social Welfare, <sup>3</sup>Stony Brook University, School of Nursing, <sup>4</sup>Stony Brook University, School of Health Professions

## Background

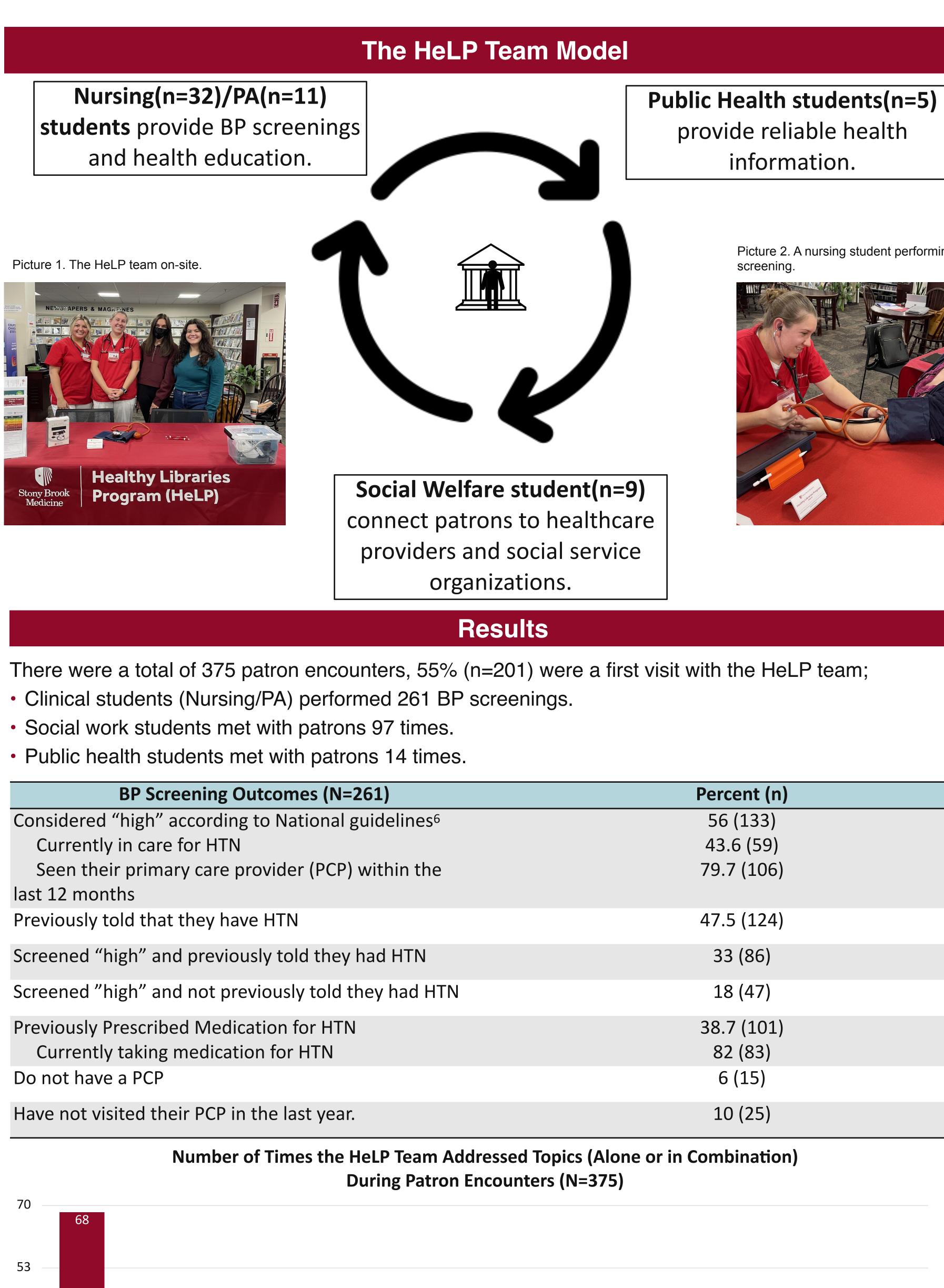
- Almost half of adults in the U.S. have hypertension (HTN).1
- HTN is a risk factor for Cardiovascular disease (CVD) which is the leading cause of death in the U.S.<sup>2</sup>
- HTN is most commonly screened for in the clinical setting which excludes those who do not visit a provider.
- Therefore, It is essential to assess strategies that may improve access to HTN screening, care and control in non-clinical settings where communities are at elevated risk of HTN frequen
- Public libraries are a trusted place among vulnerable populations for accessing health information and resources<sup>3</sup> yet are an underutilized setting for health interventions.
- The Stony Brook Medicine Healthy Libraries Program (HeLP) is an innovative intervention<sup>4</sup> in suburban public libraries which aims to:

collaborative practice

libraries:

- improve interprofessional education (IPE) and competencies for students.<sup>5</sup>
- provide the follow services at no cost to patrons or - BP screenings,
- culturally appropriate health education. - assistance with accessing care and social services, and case management.
- The purpose of this study is to evaluate the BP screening-related interactions between HeLP team members and library patrons.



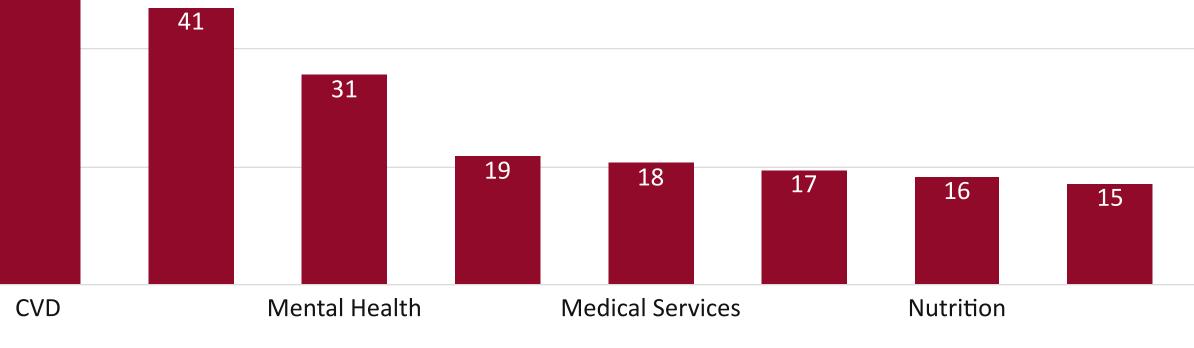


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## Methods/Measures

- Fifty-seven students were placed on interprofessional teams in 10 public libraries in Suffolk County, NY during the 2022 Fall semester.
- Students participate to fill course requirements:
- Clinical rotations for Nursing
- Community health service-learning course for PA
- Practicum/internship for Public Health
- Field education for Social Welfare
- BP was measured using a manual BP cuff, sphygmomanometer.
- High BP defined as  $\geq$ 130mmHg systolic or 80 mmHg diastolic.<sup>6</sup>
- Patrons self-reported prior BP history.
- HeLP students documented patron encounters in Qualtrics.
- Descriptive statistics were used to summarize screening outcomes (Qualtrics).

# An Interprofessional Team-based Service-learning Program to Promote Hypertension(HTN) Screening and Access to Care in a Non-Clinical Setting





## **IPE Model Implementation**

Model 1: Teams of Nursing, Public Health, and/or Social Welfare students rotated between 8 HeLP partner libraries over 8 weeks per semester. • Each library was visited four times per semester for 2 <sup>1</sup>/<sub>2</sub>

hours for each visit (~ 80 hours).

**Model 2:** Teams of PA students, Public Health and/or Social Welfare students visited 2 public libraries for onetime visits (~10 hours).

Model 3: Social Welfare students offered additional hours outside of the HeLP team at the 8 HeLP partner libraries. • Faculty supervisors on site with clinical students.

## Discussion

- This study demonstrates that public libraries are a viable setting for BP screenings, education and assistance to access care.
- The percent of patrons with a HBP reading (%) was higher than the local percentage of adults with diagnosed HTN (31.8%)<sup>7</sup> and national (45.4%). prevalence of HTN in adults.<sup>8</sup>
- BP screenings in public libraries may identify those who have undiagnosed or uncontrolled HTN, or who may be out of care.
- Limitations:

- Documentation is not patron specific. - Student documentation may not be complete. - Although patrons are encouraged to meet with a

Some patron interactions may be missing. provider, we do not have follow up data to confirm healthcare access/utilization.

 Further research is needed to understand how the HeLP team impacts the community through the library staff and patron perspectives.

## Acknowledgements

We would like to thank:

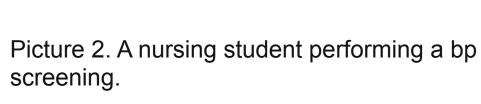
statistics/prevention/injury\_prevention/information\_for\_action/

- the Public Library Directors for hosting the HeLP team, • the Suffolk Cooperative Library System for supporting and promoting
- HeLP,
- the public library patrons for utilizing the HeLP team,
- the faculty from Stony Brook University, and the HeLP student team members.

# References

1. Ritchey, M. D., Gillespie, C., Wozniak, G., et al. (2018). Potential need for expanded pharmacologic treatment and lifestyle modification services under the 2017 ACC/AHA Hypertension Guideline. Journal of clinical hypertension (Greenwich, Conn.), 20(10), 1377–1391. https://doi.org/10.1111/jch.13364 2. Kochanek K.D., Murphy S.L., Xu J., Arias E. (2019). Deaths: Final Data for 2017. National Vital Statistics Reports. 68(9). National Center for Health Statistics 3. Horrigan, J. B., (2015, Sept 15). Libraries at the Crossroads. Pew Research Center.\_https://www.pewresearch.org/internet/2015/09/15/libraries-at-the-crossroads/ 4. Pandolfelli G, Hammock A, Topek-Walker L, et al. An Interprofessional Team-Based Experiential Learning Experience in Public Libraries. Pedagogy in Health Promotion. 2021:0(0). doi:10.1177/2373379921104851 5. Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice: 2016 update. Interprofessional Education

Collaborative.\_https://ipec.memberclicks.net/assets/2016-Update.pdf 6. Whelton, P. K., Carey, R. M., Aronow, W. S., et al. (2018). 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. Hypertension, 71(6). https://doi.org/10.1161/hyp.0000000000000065 7. New York State Department of Health . (n.d.). INFORMATION FOR ACTION REPORT 2018 - 08 Percentage of adults with diagnosed hypertension, by county, New York State, BRFSS 2016. Division of Chronic Disease Prevention: Information for Action Reports. Retrieved February 27, 2023, from https://www.health.ny.gov/



information.



Percent (n)	
56 (133)	
43.6 (59)	
79.7 (106)	
47.5 (124)	
33 (86)	
18 (47)	
38.7 (101)	
82 (83)	
6 (15)	
10 (25)	
Combination)	

