Human Services

Mobile Health Outreach - Anatomical Models

**Overview:** The Public Health Nurse Mobile Health Outreach - Anatomical Models program educates older and/or disabled adults on self-examinations and identifying potentially life-threatening health issues.

**Challenge:** Social, economic, emotional and physical complications influence clients' abilities to access mental and physical health services. Clients with health issues are often frightened, which can lead to anxiety, depression, insomnia and stress. A critical component in prevention and early intervention is the education of clients regarding the recognition of changes in their bodies through tactile exercises that they perform on anatomical models.

**Solution:** San Bernardino County implemented the Public Health Nurse Mobile Health Outreach - Anatomical Models program in 2016 to provide hands-on instruction through expansion of the Prevention and Early Intervention (PEI) Older Adult Community Services Program. PEI is a collaborative effort between the Departments of Aging and Adult Services (DAAS) and Behavioral Health (DBH) that provides routine services, including blood pressure check-ups, blood sugar readings and health education specifically designed to address client health concerns an average of two times per month. Mobile PEI clinics serve the High Desert regions at senior centers, churches, health fairs, festivals and open-air markets and now offer the interactive and educational component of the anatomical models. DAAS is allocated educational funds annually, and in 2016, it was determined that purchasing anatomical models that symbolized serious health issues would support prevention and early intervention. Illnesses in the models included:

- Skin cancer
- Lung cancer
- Testicular cancer
- Breast cancer
- Breast cancer
- Heart disease
- Tooth decay
- Eye cataracts

Clients are encouraged to touch the anatomical models and learn to differentiate between a healthy body part and possible life-threatening symptoms. As clients practice on anatomical models, they are able to articulate questions and identify warning signs in a culturally-appropriate setting that is inviting and accessible. Public Health Nurses (PHNs) guide clients in the steps to take should they detect an issue when conducting a self-examination, increasing the opportunity for detection and linkage to treatment. Education of clients leads to increased capacity for recognizing symptoms and understanding the risks of delayed treatment. This program gives clients an active role in their own mental and physical health and is conducive to an effective delivery of services while adhering to the standards of evidence-based and community-focused practice.
Innovation: Early detection, intervention and treatment is redefined in the Public Health Nurse Mobile Health Outreach - Anatomical Models program. This innovation to introduce anatomical models to augment existing mobile health outreach underscores the ability of the PHNs to look at existing resources and practices and seek to create and deliver a unique service component for clients. This program has resulted in a successful and thriving system that created an expedited, thorough educational process for older and/or disabled adults while supporting the vision and mission of DAAS to improve or maintain choice, independence and quality of life. Improved health and well-being through education from PHNs and early detection and intervention strengthens the ability of clients to age in place in the least restrictive environment. The PHNs took into consideration the vast desert areas and designed this program to work seamlessly with the existing mobile PEI services. This allows clients in vulnerable populations, due to mental and/or physical health and economic restrictions, to be educated by PHNs in proper techniques for self-examinations and to speak with a PHN in person to address physical or mental health concerns. This dialogue may alleviate behavioral health stressors and provides a direct reduction to issues related to social isolation.

Results: The Public Health Nurse Mobile Health Outreach - Anatomical Models increases efficiency and effectiveness and produces cost-savings, as clients are provided access to anatomical models on which to learn the proper method of self-examination. The educational component presented by the PHNs stresses the importance of early detection and treatment and answers any questions. The success of this program is demonstrated by the optimization of staff time in the field as the PHN is already working with clients, and the anatomical models encourages conversation, builds rapport and educates clients while addressing early detection and prevention. Each client interacted with the anatomical body parts and completed a satisfaction survey following each clinic. All clients selected the box indicating a better understanding of their health after interacting with the models and speaking with the PHNs in real time.

Replicability: This program is an ideal innovation for replication by fellow California counties as it employs community outreach programs as the vehicle to carry information and education. A modest financial investment is required to purchase anatomical models. San Bernardino County looked to the Mental Health Services Act (MHSA), which allocates educational funds to San Bernardino County DAAS as a monthly reimbursement. DAAS purchased eight (8) anatomical models through this funding stream for a total cost of approximately $925.00. For the County of San Bernardino, this program of educating clients to identify health issues in the early stages is a cost-saving measure for clients, health insurance programs and taxpayers. By recognizing health issues early, mental health issues such as stress, anxiety, depression, insomnia, etc., may also be mitigated and thereby lives may be saved.

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