

Center for Civic Policy & Leadership – Health Innovations Prize

Case Study

Case Study is limited to 10 typed, single-spaced pages with 12-point font.

The length of each numbered section is at your discretion.

Pictures (no more than 5) are not included in the 10-page count and can be any size up to 8-1/2x11 or smaller.

I. Caste Study Title

WesternU Improves Health Care Outcomes for Inland Empire Resident Underserved Patient Populations

II. <u>Project Summary</u>

Conducting bilingual and multi-disciplinary health fairs in the Southern California region to improve health and wellness of underserved populations via immediate treatment and/or preventative consultations.

III. <u>Sectors That Worked on this Project</u>:

Education, Business, Individuals

IV. What is the Issue or Issues You Addressed through Your Project?

Improving health care outcomes for Inland Residents from medically-underserved populations in and around the southern California region.

V. What were the Negative Effects to the Health & Well-Being of Inland Residents of this Issue Before Your Project or Intervention?

Poor MTM (Medication Therapy Management) for Inland Residents with documented regular prescriptions, and/or aggravated medical condition(s) due to long-term treatment deferral because of lack of consistent medical insurance coverage due to expense.

VI. What Barriers Did You Face in Implementation?

Primarily logistical and expense barriers in acquiring both appropriate site locations to conduct the health fairs, and expense coverage for the purchase of the necessary examination and treatment supplies to be used during the health fairs.

VII. Solution

The concept at the foundation of the community outreach health fairs conducted by the Western University of Health Sciences (WesternU) College of Pharmacy in partnership with the on-campus Pharmacy in the WesternU Patient Care Center (PCC) is to proactively bring the broad variety of health care treatments and consultation capabilities, in a bilingual setting (English/Spanish primarily for the Inland Resident population), that are present at WesternU due to the nine (9) colleges of health sciences available (Osteopathic Medicine, Pharmacy, Nursing, Dentistry, Optometry, Podiatry, Physical Therapy, Physician Assistant, and Biomedical



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Science). Student practitioners from all of these health care disciplines are consistently encouraged to hone their didactic treatment and assessment skills in bilingual, experiential settings, like community health fairs, where their caring and knowledge actually impacts and immediately improves the lives of our Inland Resident patients.

VIII. How was this Project Implemented? What Steps Did You Take?

Working in partnership with the on-campus Pharmacy located in the WesternU Patient Care Center, and with the student pharmacist leadership from several of our College of Pharmacy student clubs and associations (APhA-ASP/CPhA, for example), we contacted local health advocacy organizations to participate in community health fairs in and around the Pomona, California area. We would then typically contact the student leadership for the similar clubs in the College of Osteopathic Medicine, Podiatry, Optometry, Nursing, Dentistry, and Physical Therapy to coordinate staffing for our WesternU Health Care booth at the given fair.

IX. How were the Health and Quality of Life of Inland Residents Improved by this Project?

Many of the participants we treated were homeless people who haven't been seen by any health care provider for some time. Many had health concerns that we were able to address, and we educated them on the seriousness of their conditions. For example, many had high blood pressure and diabetes, and because these were the two areas that we were providing specific screenings for, we were able to bring the urgency of these conditions to those patients' attention. In addition, because several of our students were English/Spanish bilingual, we were able to communicate recommended lifestyle, nutrition, exercise, and medication consultations far more effectively to our Inland Resident, medically underserved participants.

X. Lessons Learned

The main lesson we have learned in developing this project is coming to the realization of just how serious the lack of medical care for the homeless and uninsured Inland Resident patients truly is. This is a big problem which is nationwide, and not just isolated to the Inland Empire areas where we served.

XI. How Can this Project be Replicated in the Inland Region in Other Cities?

Addressing these problems to the city officials and having them reach out to institutions such as western u, we can at least slow down the progression of their disease state. We can continue to offer health fairs through our local jurisdiction and provide various health screenings such as medical, pharmaceutical, dentistry, optometry, and podiatric care. At least we can create awareness for these patients who may never know what ailment they may have.



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Please select ONE option for distribution of Prize dollars should your Case Study be chosen for 1^{st} , 2^{nd} , or 3^{rd} prize:

- Distribute prize dollars equally among the Authors, listed in the table above; or
- Distribute prize dollars to the following Inland Southern California 501(c)(3) nonprofit agency (if this option is chosen, 501(c)(3) status of the named agency will be verified prior to award of the prize dollars):

XII. Optional: Pictures





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