CORAZONES SANOS PROGRAM

Westminster **Free Clinic**
& Community Care Center

CORAZONES SANOS PROGRAM

TABLE OF CONTENTS

EDITORIAL
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RESOURCES

Healthy People 2020
www.healthypeople.gov

American Heart Association
www.2.heart.org

Centers for Disease Control and Prevention
www.cdc.gov

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Health, and especially cardiovascular health, starts in our homes, schools, workplaces, neighborhoods, and communities. Taking care of ourselves by eating well, staying active, getting the recommended immunizations and screening tests, and seeing a doctor when we are sick all influence our health.

The ***Corazones Sanos*** (Healthy Hearts) program was established in 2014 to improve the health outcomes of low-income, uninsured Latinos suffering from or at high risk of heart disease due to diabetes, obesity, and/or lifestyle habits.

The program uses **culturally sensitive, participant-centered services** such as:

- **early detection** at community health screenings for high blood pressure and high glucose levels;
- **early access** to free preventive health, dental, and vision care with volunteer medical specialists;
- **nutritional education** with healthy lifestyle support programs and services;
- **experiential learning and life-enriching services**;
- one-on-one **social-emotional support**, including one-on-one mental health counseling, group workshops, and health coaching;
- providing **empowerment and health equity programs**, including improvement of the environments where low-income Latinos live, work, and shop;
- **free fruits and vegetables and exercise classes** at our clinic site;
- **leadership experiences and job skills training** for low-income, Latino high school students as community health workers and medical assistants.

Each component plays an important role in the program's success.

CORAZONES SANOS

Those at high risk of heart disease are referred to Westminster Free Clinic (WFC)'s Corazones Sanos (Healthy Hearts) program and have regular access to a team of volunteer medical specialists, including physicians, dietitians, podiatrists, and nurses, along with weekly bilingual health education sessions. Other services include cooking demonstrations and food tasting, Zumba and yoga classes, bilingual food/exercise logs to help track healthy behaviors, pedometers, props to learn portion sizes, visual aids, experiential learning activities, educational resources, raffle tickets, and incentive prizes. **Program participants are encouraged to volunteer and assist with food demonstrations and other activities.** Physicians refer those who are overweight to Corazones Sanos and the 6-week Llegando a la Meta (Meeting the Goal) weight-loss classes. **WFC's bilingual teen interns and community health workers who are from the participant community help implement the program** and coordinate a Healthy Hearts Kids Club while parents attend programs and services. They also lead advocacy efforts in the community, such as improving access to healthful foods at local Latino markets in the 5 cities where most participants reside. In addition to the bilingual teen community health workers, **staffing includes a team of warm and empowering, bilingual Latinas who are immigrants themselves or are first-generation professionals** who understand the cultural biases, challenges and barriers, and lifestyle habits of the community being served.

EVALUATION is essential in every aspect of the program, and both quantitative clinical and health assessment data as well as self-reported changes in knowledge, attitudes, and behaviors measured by a likert scale at the beginning and end of each year the program is offered to measure health improvements, determine what approaches are most effective, and what adjustments need to be made to have the best health outcomes.

INNOVATION is a critical component of WFC's Corazones Sanos program. We reach participants in community settings and engage local, Latino youth in all aspects of program implementation. Bilingual, culturally competent

WHY WE CARE

2018 cardiovascular health statistics from the American Heart Association:

- **Heart disease** (including coronary heart disease, hypertension, and stroke) remains the leading cause of death in the US and accounts for **1 in 3 deaths annually**.
- About **2,300 Americans die of cardiovascular disease each day,** an average of 1 death every 38 seconds.
- **About 92.1 million American adults** are living with some form of **cardiovascular disease or the after-effects of stroke.** Direct and indirect **costs of cardiovascular diseases** and stroke are estimated to total more than **$330 billion annually** (includes both health expenditures and lost productivity).

70% Adults in the U.S. who are **obese** or **overweight**

1 in 3 Kids in the U.S. affected by **obesity**

60+ Chronic diseases linked to **obesity** including diabetes, heart disease, hypertension, and stroke

HEALTHY HEARTS

interventions; community outreaches and health screenings; a free primary care medical home; lifestyle change supports (including social-emotional and socioeconomic programs), and services; and improved environments where people shop, work, and live, provide people with the tools they need to feel inspired to improve their health and reduce their risk of cardiovascular disease.

INTERGENERATIONAL WFC's innovative model of health promotion and healthcare delivery brings together the skills, and knowledge of adult volunteer healthcare professionals and high-school students interested in pursuing careers in the field of health. In doing so, WFC serves as a safety-net provider to low-income uninsured Latinos, and also prepares underrepresented minorities with the training and job skills needed to enter the healthcare workforce. As community health workers and medical assistants, Latino teens create a safe environment for participants from their communities to access services to improve their heart health. In turn, participants support youth in utilizing and developing new skills. The benefits are multi-generational.

Our team hopes you find this toolkit helpful in developing your own cardiovascular risk reduction program for your target population. This tool kit is set up to help you understand the five overarching determinants of health we address (which is the framework for our whole-person centered program), and the social determinants of health we include that make our program successful. We explain how we implement this framework, and we highlight some of our best one-year and sustained health outcomes. We also include some of our participant and high school student success stories and offer you best practices and lessons learned to make your program development easier. The benefits of having youth and adults working together as a team in a whole-person prevention model similar to ours is worth the effort!

Best Wishes!

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WHOLE-PERSON APPROACH

Cardiovascular risk reduction is best achieved with a whole-person approach that is planned around the social determinants of health. This section provides examples of how the Corazones Sanos Program was developed around this model and other program-specific details.

FIVE DETERMINANTS OF HEALTH

The range of personal, social, economic, and environmental factors that influence health status are known as social determinants of health. It is the relationships among these factors that determine individual and population health. The more these factors present in a positive manner, the greater the population's health and longevity.

THE CORAZONES SANOS MODEL OF SERVICE

1 ACCESS TO CARE

Lack of access to healthcare services greatly impacts individuals' health status because they are less likely to participate in preventive services and are more likely to delay medical treatment, especially among those who are uninsured. Lack of access can be due to cost, transportation and other factors.

The Corazones Sanos program operates in conjunction with Westminster Free Clinic and is a one-stop location for both services. Access to care is essential to participants and is an important entry point into the program. Services offered at Westminster Free Clinic include:

- Primary care
- Ophthalmology
- Dental care
- Physical therapy and chiropractic services
- Acupuncture
- Orthopedic consultation & podiatry
- Nutrition counseling
- Individual and group mental health, and grief counseling
- Case/Care management
- Free medications, labs, x-rays, mammograms, and diabetic health kits (supplies)

FIVE DETERMINANTS OF HEALTH

2 INDIVIDUAL BEHAVIORS

Individual behaviors play a large role in health outcomes. Positive changes such as decreased substance abuse, a healthy diet, and physical activity can reduce and improve cardiovascular health.

Health education: The program offers diabetes and cardiovascular risk management including free glucose testing health kits, hands-on learning experiences, and educational games to inform participants and show them how to monitor and improve their own health and the health of their families.

Weight management: The program supports weight management by providing free pedometers and free exercise classes. Activities include a 21-day challenge, goal setting, food diaries, overcoming cultural expectations, and MyPlate.

Exercise: Group hikes are available on the weekends and and are organized by a participant volunteer. Zumba classes are provided regularly, and a "Zumbathon" is organized once a year.

Stress management: The program supports stress management through activities such as art therapy, vision board sessions, educational sessions with a bi-lingual lawyer, yoga, grief and loss classes, financial literacy sessions, etc.

Nutrition: To support the participant in choosing healthy foods, cooking demos are provided on a weekly basis with foods donated and given to the participants through a food bank partnership. Each participant receives healthy recipes and meets with a dietitian, creates a food diary to track food intake at home, and creates an individual eating plan.

WHOLE-PERSON APPROACH

3 PHYSICAL ENVIRONMENT

The environment where an individual resides can greatly impact their health. Decreasing exposure to toxic substances, easy access to healthy foods, and places to exercise safely are important in the physical environment to promote health. Other examples include the natural environment (such as plants, clean water, and air), the built environment (such as safe walking paths, non-smoking housing and worksites, good public transportation, or eliminating the need for transportation by bringing services to the people), and safe, local recreational settings.

Community partnerships are necessary to make the physical environment healthier for low-income communities.

Latino markets: WFC partners with Latino markets to offer healthier food options to their clients such as whole wheat flour, brown rice, whole wheat tortillas, low-sugar cereal, and skim and almond milk. WFC also works with the Latino markets to educate low-literacy people about heart healthy foods by placing red dot stickers on cardiovascular-healthy foods and green dot stickers on diabetes-healthy foods. Our teen community health workers maintain this partnership.

Parks and Rec departments: WFC partners with the local Parks and Recreation program to offer free exercise classes in the participants' language (Spanish) once a week for free at WFC's clinic site so transportation and an unfamiliar setting are not barriers to participation. This agency and other fitness and exercise providers may be willing to come offer free classes to your low-income population who are at risk for cardiovascular disease or diabetes to give back to a community that is otherwise not served.

Food share: WFC partners with the local food bank to offer participants and low-income community members free fresh fruits and vegetables once a week.

Possible partnerships to consider:

- Working with housing to make sure apartments are smoke-free and include safe play areas for families.
- Bringing services to low-income housing sites.
- Partnering with local Zumba instructors to plan a "Zumbathon" that includes health promotion/advocacy.
- Partnering with the county public health department for additional free services.
- Partnering with other non-profits with wrap-around services.

FIVE DETERMINANTS OF HEALTH

4 SOCIAL-EMOTIONAL AND SOCIOECONOMIC FACTORS

Where people are born, live, learn, work, play, worship, and age affects a wide range of health issues, and quality-of-life outcomes and risks. Resources that enhance quality of life have a significant influence on population health outcomes. Living and working in a safe, less stressful environment, having a supportive community, learning stress management skills, and having the opportunity for advanced education and training, all impact stress levels, health outcomes, and longevity.

MENTAL HEALTH

WFC offers 3 mental health support programs in Spanish:

SANO: A grief and loss class called Start Again, Not Over (SANO) by psychologist, Leticia Ximenez, PsyD. to promote changing "grief and loss" to "grief and gain" so people feel ready to make positive health changes.

One-on-one counseling: Family counseling and individual counseling provided for as long as needed.

Z-TAP family empowerment train-the-trainer program: This program uses a train-the-trainer model to teach participants to help their community identify mental health issues, seek help for domestic violence and mental health challenges, and raise non-violent healthy children. Program participants become leaders and positive role models in their community and teach adults and children the importance of violence prevention, as well as signs and symptoms of depression and anxiety, all of which affect heart health.

CHILDCARE The Healthy Hearts Kids Club, led by teen community health workers, educates Latino youth about emotional health, healthy eating, and active living choices by building their knowledge and promoting mental and physical habits that maintain a healthy heart. The program also inspires the teen leaders and the children they teach to inform their community, family members, and friends about healthier lifestyles, as well as adopting and maintaining a healthier lifestyle themselves.

WHOLE-PERSON APPROACH

TEEN PROGRAM (WORKFORCE DEVELOPMENT TRAINING AND SKILL BUILDING)

Teens volunteering as medical interns and community health workers receive comprehensive training and develop leadership roles in serving their community. Adult staff serve as facilitators to support the students' efforts and help them succeed. Students gain skills in leadership, healthcare, public speaking, program planning, and evaluation and can become certified as a medical assistant. Students gain confidence in their abilities and set higher goals for their future, especially when they see graduates like themselves getting into college and receiving scholarships. The program provides the support necessary for college success, including; tutoring, SAT prep, and college and career counseling. Stipends help parents allow their teens to participate, as it decreases the financial burden to their families.

5 GENETICS

Some biological and genetic factors also influence health and can affect specific populations in different ways. Participants learn about biological and genetic determinants of health through counseling about inherited conditions, an understanding of their family history, and suggestions of lifestyle choices to decrease the effects of these risk factors.

Research has found that genetics only have about a 20% impact on individual health outcomes. Helping participants understand that almost 80% of their health is in their control is essential to inspire lifestyle changes, especially in cultures that believe there is nothing they can do to change their family history.

The Corazones Sanos program works to educate the participants about family health history, specifically those who are at risk of heart disease and diabetes, but also empowers them to have a different health outcome.

Incorporating education and activities around the 5 social determinants of health in your planning will help your program achieve successful outcomes and provide families with the supports they need to make healthy changes.

IMPLEMENTATION

Detailed planning helps the program run well and maintain program funding. Assessing community assets that can enhance the program and considering possible barriers to be overcome will support program success through tailored heart-healthy services and increased community engagement.

STEP 1	STEP 2	STEP 3	STEP 4	STEP 5	STEP 6
IDENTIFY	EVALUATE	ENGAGE	PRAISE	EVALUATE	CELEBRATE
Plan Advertise Recruit	Screen Pre-test Enroll	Inspire Hands-on learning Involve & empower Economic supports	Incentives Stress reduction tools Emotional Supports	Follow-up clinical measures Follow-up lifestyle surveys Group feedback	Fiesta! Recognition Inspirational stories

KEY ELEMENTS OF IMPLEMENTATION

STEP 1

IDENTIFY PROGRAM PARTICIPANTS & TRAIN COMMUNITY HEALTH WORKERS

Patients/potential participants with hypertension, elevated glucose levels (i.e., hemoglobin A1c), and elevated lipid levels, as well as those who are overweight and obese are identified through WFC's electronic health record system. People screened in the community with elevated glucose levels and elevated blood pressure who have no insurance and are low-income are also eligible and referred to WFC and the Corazones Sanos Program.

The Corazones Sanos program is also promoted at WFC with announcements in the health education and exercise classes, as well as with flyers that include a list of incentives for joining the program and participating in the activities. People can also self-refer or be referred by a friend in the program.

All participants who qualify for the Corazones Sanos program are invited to participate in the program for at least 1 year. Anyone can attend the programs and services offered, but only participants who sign up to be tracked for 1 year are required to complete at least 2 panels of labs and other pre/post evaluation measurements, and are eligible to receive incentive prizes.

All community health workers, adults and students, will:

- Be trained on their roles and responsibilities,
- Have monthly planning meetings with student feedback and suggestions, and
- Have weekly activity sign-ups.

Adults are responsible for high school student supervision and facilitating student leadership. Bilingual high school students are involved in all aspects of program implementation and evaluation. These student community health workers receive stipends for their time to help alleviate the financial hardship on their families for allowing them to participate.

IMPLEMENTATION

STEP 2
PRE-PROGRAM EVALUATION

All participants interested in participating in the program will sign a 1-year contract as proof of commitment to the program. Participation includes meeting with a dietitian at least twice a year, participating in physical activity, participating in health education classes at least twice a month, and applying 3 healthy goals to their lives. As part of the sign-up for the program, the participant must complete pre- and post-lifestyle assessments, initial lab work, and a baseline health assessment. It is recommended that a pre/post evaluation also be conducted with the teen community health workers to show changes in their heart health knowledge, attitudes, and behavior as well.

Plan to reach out to five times the number of people you would like to enroll in your one-year program. Usually participants who do not enroll to be tracked and do not complete all the evaluations required, have more short-term participation. This is OK too. We build incentives into our program to encourage people to make the one-year commitment. When working with hard-to-reach communities, it must be acknowledged that participants may face many barriers that are out of their control, like work hours that change, inflexible employers, and family crisis'. Making sure participants feel welcome when they can attend is important. If participants know it is understood they will come when they can, they are also more willing to sign up.

STEP 3
PROGRAM COMPONENTS

All tracked participants will be given a pedometer, a food diary, a 21-day challenge calendar, a calendar to monitor their blood pressure and glucose levels on a daily basis, and a 3-month calendar of activities and events.

Participants will have the option (it is not required) to check their weight and take vitals when attending health education classes.

Lab work and health assessments (ie. BMI, BP) will be obtained at least 2 times a year at the start and the end of the program.

A quarterly celebration takes place to celebrate those who have made positive changes (especially those who have improved their lipid levels, blood pressure levels, glucose levels, and those who have lost weight) and to motivate everyone. Prizes, such as grocery store gift cards, are given to the top 5 participants who have made the biggest changes. Those who make the biggest improvements are encouraged to share their success with the group and serve as trainers in their community for healthier living.

To encourage healthy eating, free bags of fresh fruits and vegetables are given to the participants on a weekly basis. Along with free fresh fruits and vegetables, a food demonstration and tasting is offered to teach the participants healthy recipes that can be made with the fruits and vegetables provided each week.

Zumba and yoga classes are also offered weekly.

Holiday fiesta celebrations are fun community-building events and participants are invited to make a healthy dish and share the recipe with others in the program. Success stories are also shared at these events.

STEP 4
PROGRAM INCENTIVES AND RECOGNITION

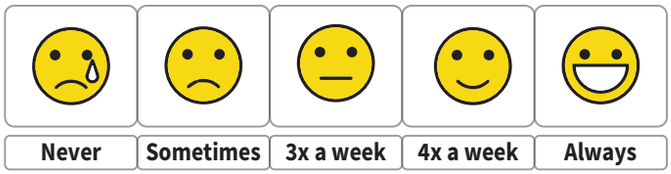
Participants who commit to the one-year program receive prize tickets as an incentive at each class or activity they attend. Prize tickets can be exchanged for household items or gift cards at the end of the quarter. More tickets earns better prizes. You must find out what your group values earning, for our group it is gift cards at a store that has low cost food, household items and clothing.

All participants are encouraged to shop at local Latino markets who have partnered with the program to offer healthy food options. This ensures a mutually beneficial partnership. The participants use a card with places to stamp when they shop at partner markets. The store owner/manager stamps the cards which helps the owner know WFC participants are using their market. The participant receives a free item after 10 stamps. Participants also receive prize tickets at WFC when they bring a receipt from one of WFC's Latino market partners, showing their purchase of healthy food items. This helps participants have access to low-cost healthy foods and helps the markets see that it is profitable to offer these foods.

Teen community health workers are involved in making sure all the heart- and diabetic-healthy food options are marked at the Latino markets with red and green dots. This helps participants know which items are heart- and diabetic-friendly. The teens must regularly make sure the dots are only next to healthy foods, as store workers often change product placement. The student community health workers are also involved in marketing, passing out stamp cards to participants, and creating a bi-monthly health newsletter for the community to share health information in Spanish and advertise the partner markets in each city.

STEP 5
POST-PROGRAM EVALUATION

At the end of the year, all participants must complete final lab work, vitals, and a final lifestyle assessment form. Low-literacy participants have the questions read to them by a community health worker so they are able to complete the pre/post evaluation form. The lifestyle assessment is set up in a 5-point Likert scale format so that the responses can show measurable change.



STEP 6
END-OF-YEAR CELEBRATION

An end-of-the-year celebration takes place to honor all participants who made positive changes and completed a year of participation.

All participants are welcome to participate in the program for more than 1 year and encouraged to continue to make positive health changes and maintain the changes they have made. Sustained, long-term lifestyle change and health improvement is the goal for every participant.

EVALUATION TOOLS AND PROGRAM MATERIALS

CONTRACTS

Participants fill out a 1-year contract to confirm their commitment to program.

ATTENDANCE SHEETS

Participation in program activities is monitored. Sign-in sheets are used for all activities, and data is tracked in the electronic health record system.

MARKETING FLYERS

Flyers with program details are also made for potential new participants who may be among WFC's patients or for those in the community with no insurance who could benefit from the program. Flyers are passed out at the clinic, and during health screenings and outreach events in the community.

Flyers with program details are also made for Latino markets who partner with WFC to promote healthier eating habits, agree to offer heart-and diabetic-healthy food options, and want their businesses to receive free marketing.

CALENDARS AND TICKETS

Calendars for all activities are provided to the participants on a quarterly basis.

Prize tickets are handed out to participants who participate in any of the activities on the calendar, or to those who bring a receipt from a partner Latino market showing purchases of healthy food items.

LOW-LITERACY TOOLS, ACTIVITIES, AND HANDOUTS

All health information games and activities are provided to the participant in their native language. Many participants have low-literacy in any language, and special consideration is taken to avoid embarrassment for those who are illiterate. For example, all instructions and activities where reading is required are provided verbally by the program leader or community health worker. No one is called upon to read, so no one knows who is illiterate and all feel welcome to participate.

Some examples of fun activities include:

1. Creating a healthy meal plan through "My Plate" and the "Traffic Light"
2. BINGO "What's the better choice?"
3. Health Jeopardy game to review concepts
4. Team competitions
5. Creating a vision board using old magazines to show "what my healthy life will look like"
6. Guided art work to promote health and stress management

EVALUATION TOOLS

We conduct 3 types of evaluation:

Process evaluation

Process measures are collected throughout the program by using attendance sheets and participant satisfaction surveys.

Impact evaluation

To obtain impact measures, participants complete pre- and post- lifestyle assessments that measure changes in knowledge, attitudes, and behaviors by the end of the program.

Outcome evaluation

In order to obtain outcome measurements, participants must complete clinical blood work and health assessment measures like body mass index (BMI), at the beginning and end of the program. The results are compared to show change in health over time.

TEAM MEMBERS NEEDED TO BUILD A SUCCESSFUL PROGRAM

Some program roles are ideal for volunteers, while others may require funded positions. For the population served by WFC, it is essential to have bilingual, culturally sensitive professionals for leadership positions. Volunteer medical professionals offer free services to the community and are essential to the program's success. These volunteers often funnel participants into the program as patients seek medical care, dental services, physical therapy, etc. and then stay for the Corazones Sanos Program.

Program Coordinator

- Plans and coordinates the program and its activities
- Helps build positive relations within the team and external parties
- Schedules and organizes meetings and events
- Ensures technology is used correctly for all activities (video conferencing, presentations, data collection, electronic health record [EHR] tracking, etc.)
- Completes paperwork and orders materials
- Keeps updated records and creates reports
- Supports program growth and development
- Allows for team input, innovation, and program modifications
- Helps the team understand the program vision and outcomes expected
- Monitors on-time data collection and communicates the importance of data to the team

Health Educator

- Provides health and wellness education
- Evaluates, designs, presents, recommends, and disseminates high-quality, culturally appropriate low-literacy health education information and materials
- Facilitates classes according to the program's guidelines
- Maintains participant log of all participants
- Creates hands-on learning experiences, such as food demos and tastings
- Creates interactive learning and stress management experiences (art therapy, learning games, etc.)
- Provides learning experiences that consider varied education levels and sensitivity to non-readers

IMPLEMENTATION

TEAM MEMBERS NEEDED TO BUILD A SUCCESSFUL PROGRAM

Care Manager/Case Manager

- Teaches one-on-one health literacy and health empowerment
- Facilitates care coordination (information sharing, advocacy, and referrals)
- Helps participants make informed decisions by acting as their advocate regarding their health status, treatment options, and referrals
- Develops effective working relations with stakeholders and cooperates with medical team
- Interacts with participants to track their progress, to ensure satisfaction, and to create personal relationships with each participant
- Maintains secondary database of all participants' clinical measures for analysis and backup
- Promotes quality and cost-effective interventions and outcomes
- Shares motivational and psychosocial participant issues at staff meetings

Nurse

- Monitors all lab work and informs participants and physicians of abnormal results. Provides one-on-one health literacy training
- Assists with health education classes
- Serves as a health educator or takes on some case manager responsibilities depending on staffing

Dietitian

- Assesses participants' health needs and diet
- Counsels participants on nutritional issues and healthy eating habits
- Develops meal plans, taking both cost and clients' preferences into account
- Evaluates the effects and compliance of meal adjustment plans and changes the plans as needed
- Promotes better nutrition by speaking to groups about diet, nutrition, and the relationship between good eating habits and preventing or managing specific diseases
- Writes reports in EHR to document participant progress
- Helps provide nutrition education classes to teach more technical information and to answer nutrition questions. *This also gives participants a chance to feel more comfortable seeking individual counseling.*

Counselor/Psychologist

- Empowers participants and their families who are dealing with issues that affect their mental health and well-being
- Uses a "wellness" model (as opposed to an "illness" model)
- Offers workshops with specific topics, such as grief and loss
- Provides hands-on activities that promote well-being

Community Health Workers (CHWs)

- Trains teens and adults from the target population as CHWs
- Leads outreaches and health screenings in the community
- Creates partnerships with Latino markets, 99 cent stores, laundromats and other places uninsured people live, work and shop to conduct health screenings and recruit new participants
- Helps implement the Corazones Sanos program and conducts pre and post evaluations
- Coordinates and implements the Healthy Hearts Kids Club for children of program participants
- Creates bi-monthly health newsletter in Spanish for participants, community members and partner markets to promote health, and advertise partner markets who offer healthy food options
- Prepares heart healthy food tastings from fresh fruits and veggies distributed each week at the clinic and community care center for adult and child program participants
- Makes follow-up calls to participants to remind them to complete their labs and other assessments
- Distributes free lancets and glucose test strips to participants with diabetes who show they have been monitoring their sugar levels on their pocket calendars
- Supervises fruit and veggie distribution and the volunteers who help bag the fresh produce

Stakeholders

- Service providers who can decrease stress or address other social determinants of health for the target population *(immigration lawyer, financial consultant, school administrators, housing specialist that knows renter's rights, an artist to do guided painting class, exercise instructors, etc.).*
- Businesses, organizations, or individuals that can offer free resources to make the program successful *(computers, school supplies for children, incentive prizes for program participants, clothing, household items, glucometers, pedometers, art supplies, space for program activities, gift cards, etc.)*

FUNDING

DONATED GOODS AND SERVICES

- ✓ **Local food bank**
- ✓ **Community parks and recreation programs**
- ✓ **Local Latino markets**
- ✓ **Community service groups such as the Rotary, Kiwanis, scouts, National Charity League, Assistance League, school clubs, women's groups, faith groups, etc.**
- ✓ **For-profit community partners such as companies who provide discounted or free diagnostic lab services, medications, glucometers, blood glucose test strips, printing, etc.**
- ✓ **Space donated for programs and services**
- ✓ **Free advertising through other non-profits, community/government agencies, schools, radio stations, newspapers, etc.**

SOURCES OF FUNDS

- ✓ **Foundations**
- ✓ **Individual donors, GoFundMe campaigns**
- ✓ **Fundraising events, raffles, non-events and other efforts**
- ✓ **Service clubs, the faith community, organizations**
- ✓ **For-profit partners/businesses and corporations**

HEALTH OUTCOMES CLINICAL AND BEHAVIORAL TRENDS

BEHAVIORAL IMPROVEMENTS OF ALL PRE/POST PARTICIPANTS

5 YEAR DATA OUTCOMES

66% of participants drink more than 4 glasses of water a day.
8% improvement from baseline

83% of participants exercise more than 3x a week for 30 minutes.
21% improvement from baseline

94% of participants eat 4-5 fruits and veggies 3 or more days a week.
11% improvement from baseline

72% of participants stopped adding additional salt to meals.
18% improvement from baseline

73% of participants regularly monitor their BP (blood preasure),
8% improvement from baseline

37% of participants reduced or don't drink soda anymore.
11% improvement from baseline

N=672 2014 - 2019

INNOVATIONS

- Reach participants in community settings
- Engage local, minority youth in outreach and interventions
- Bilingual, culturally sensitive interventions
- Provide a medical home and supportive services together
- Create one-stop services to overcome transportation barriers and time limitations of low-income participants
- Combine medical treatment, lifestyle change support, socio-emotional support, socio-economic support, and changes in environments where people shop, work, and live
- Rethink traditional clinical models of care and programming for improved outcomes

Sustained long-term change is essential when claiming program success. Maintenance of clinical and behavioral improvements demonstrates true lifestyle changes and a real benefit to cardiovascular health.

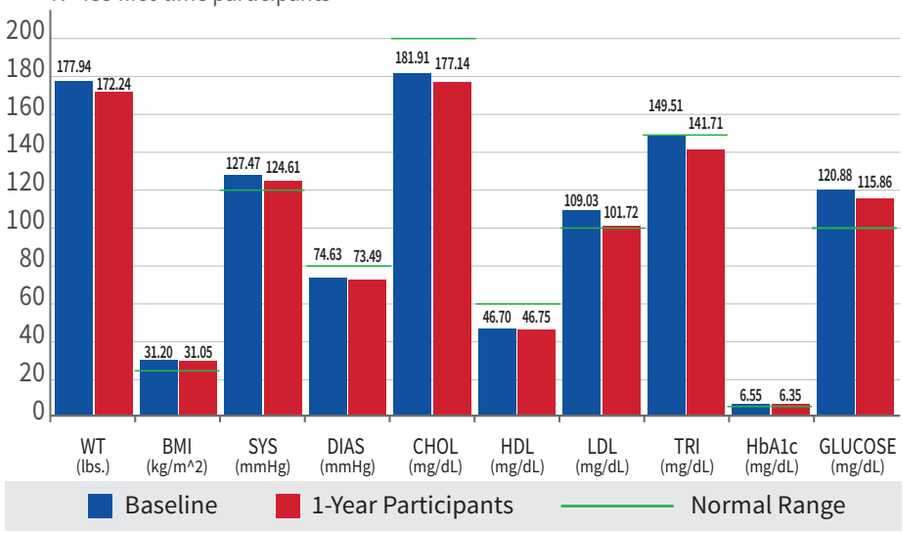
With the following graphs WFC highlights some of our 1-year and multiple year clinical and behavioral successes for 672 unique participants in the Corazones Sanos Program. This data includes all participants with pre and post clinical and behavioral results and represents 79% of over 849 people involved in the program.

N = 672 unique participants over time with pre/post measures

MEAN PARTICIPANT IMPROVEMENT IN CLINICAL HEALTH OUTCOMES

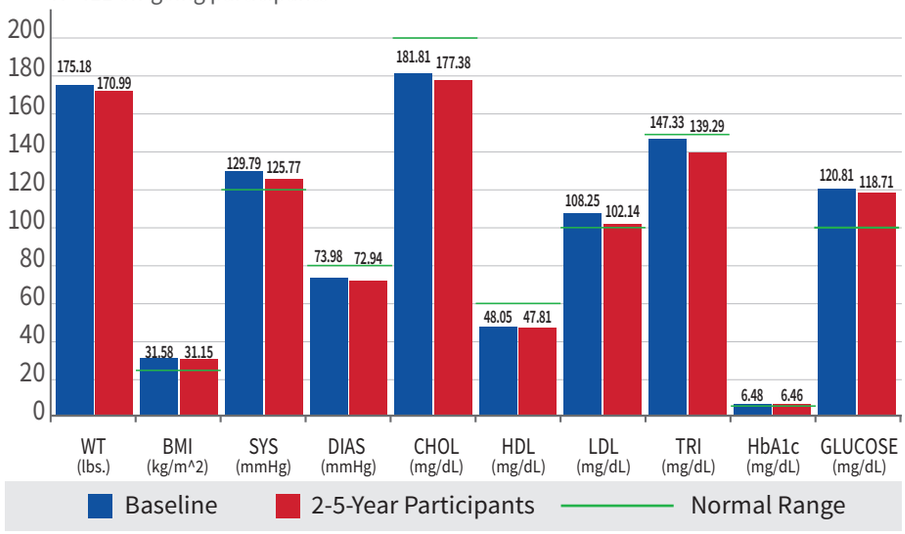
Improvements from baseline to 1 year

N=485 first-time participants



Continuing improvements by type 2-5 years

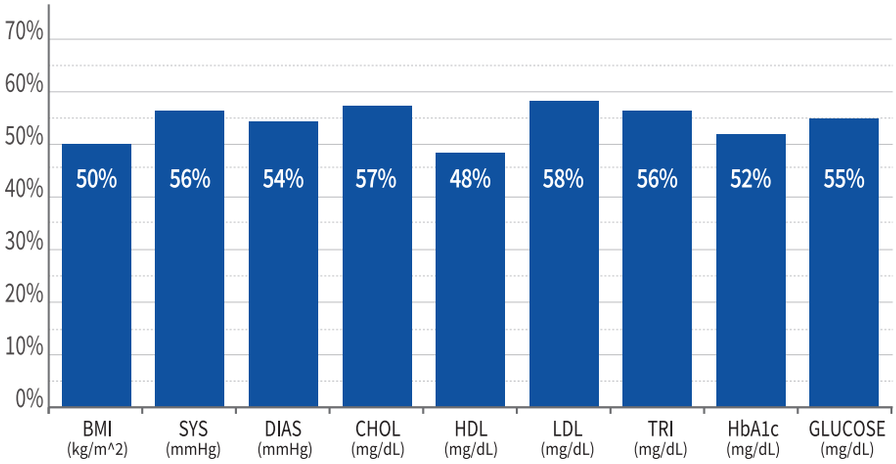
N=411 on-going participants



PERCENTAGE OF PARTICIPANT IMPROVEMENTS IN CLINICAL OUTCOMES

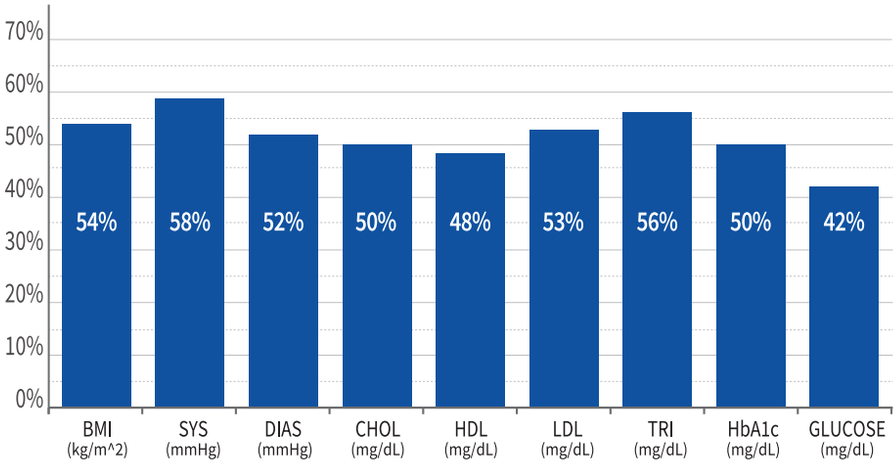
Improvements from baseline to 1 year

N=485 first-time participants



Continuing improvements by type 2-5 years

N=411 on-going participants



SUCCESS STORIES

MEET ANTONIA!

My name is Antonia. My weight was 225 lbs when I started the Corazones Sanos (Healthy Hearts) program. The doctor at WFC said I had diabetes.

I have lost 35 lbs so far!

My cholesterol went from 198 to 129, my triglycerides went from 162 to 97 and my HbA1c went from 7.3 to 5.9.

I have learned a lot through the program. I used to drink 2 sodas a day, but now I drink water, eat less tortillas, and eat more vegetables. At first it was hard, now I am used to it. I do yoga at the clinic each week and I go hiking. I noticed my emotional health is also improving, not only because I am losing weight, but also because we do art therapy and learn about emotions and how they affect health. I am able to let go of negative emotions better now. I really feel everyone at the clinic cares about me.

The Corazones Sanos program has given me the tools, love, and support that have helped me accomplish my goals.

CORAZONES SANOS

SUCCESS STORIES

MEET VICTOR!

I am a WFC patient. I wasn't feeling well and decided to see a physician. The physician sent me for lab work and my Hemoglobin A1C result was 10.4, which is very high. I knew I had to do something to lower my glucose to change how I was feeling. One of the clinic's nurses recommended I join the Corazones Sanos program at WFC.
I knew I would need help changing my eating habits and wanted to learn about diabetes and heart disease, so I decided to join. I also wanted to exercise so I began attending the Zumba and yoga classes at WFC. I also attend the weekly health education classes and the SANO emotional health group sessions. I began feeling better and started running 3 times a week on my own and walking the other days.
I learned a lot about what it means to be healthy. I have completely given up soda and I drink a lot of water.

I have lowered my Hemoglobin A1c from 10.4 to 6.8!

Seeing these results has motivated me to continue to exercise and eat well. I thank all the class instructors for taking the time to teach me the importance of maintaining a healthy lifestyle, and motivating me to start this journey and to continue it.

MEET MARCUS!

I am a college student now and I am the first generation in my family to complete high school and go to college. While I was in high school I was a volunteer healthcare student intern for WFC and community health worker for Corozones Sanos. I helped with community outreaches at Latino Markets, laundromats, churches, 99 cent stores and other places. I also was a medical assistant at WFC, and helped start the Healthy Hearts Kids Club for Corozones Sanos, so parents with children could participate in the program. I worked with a WFC volunteer with a background in public health to establish a healthy eating, active living, and emotional support curriculum for children of Corazones Sanos participants that mirrors the messages being shared with parents. I learned a lot about cardiovascular health, and risk factors like obesity and high blood pressure. It motivated me to make healthy lifestyle changes in my own diet and to start an exercise routine to manage my stress. Some changes I made included cutting out chips, candy, pizza, and soda, which were common staples at home. While I drink a lot of water and avoid unhealthy foods now, my younger brother still eats these things and finds it hard to walk or be active because he has gained a lot of weight.
I have talked to my mother about changing the food available at home and have encouraged her to walk with my brother.

Everything I have learned through volunteering in Corazones Sanos and WFC has had a big impact on my life and has helped me to get to where I am now.

Whenever I am back in town, I return to WFC and the Corazones Sanos program to mentor the new high school students and to join my "clinic family" again.

BEST PRACTICES & LESSON LEARNED

BEST PRACTICES

Offer classes that are not strictly structured or that do not have a required weekly commitment, as participants' schedules vary. This allows participants to feel they can participate whenever it is possible.

Provide train-the-trainer programs because program participants and high school students are more likely to make changes in their own homes, when they have the opportunity to teach others in their communities.

Offer stress-releasing activities to help with participants' emotional health. These activities are very popular and give participants the ability/emotional energy to make lifestyle changes.

Offer free childcare services at the same time you offer services for adult participants so parents with children can attend: Include a curriculum that incorporates health education, exercise, emotional support, and homework help. Have healthy eating and active living messages match parent's education classes at a kid-friendly level so that they have a uniform message to apply in their homes.

Offer social-emotional and socioeconomic programs to help lessen stressors for participants. An improved sense of well-being and economic support inspires participants to feel they have the capacity to make healthy changes and that your program is a safe space.

Provide one-on-one coaching with a dietitian, a case manager, a nurse, and/or a counselor depending on the needs of the person.

Create one-stop services to overcome transportation barriers and time limitations. When a participant can utilize many services with one visit they are more likely to come.

Engage and involve youth from your program participants' community. They like to see their own youth helping their community and making it better. They try harder because they want to show the youth it is worth their time to help.

LESSONS LEARNED

Offer transportation options.

Engage the participants in hands-on activities to raise attendance levels, make learning fun and help participants understand the material better.

Check with participants to track any changes in contact information, such as changes in phone numbers.

Offer prizes, gift cards, etc., that are of value to participants. Incentives are big motivators for participant recruitment, attendance and completing labs and other evaluations. They must view what you are offering as having an economic benefit to their family. It helps them justify doing something for themselves.

Provide participants with culturally sensitive healthy meal plans. They want clear examples to get started.

Literacy in any language is a challenge for some participants. Offer to read evaluation questions to participants, do not call on participants to read in group settings, avoid embarrassment for people with low literacy.

Provide some type of financial compensation to the low-income youth involved to off-set the financial burden it causes their families having them participate and so the parent can feel their child is helping with their personal expenses.

Make it easy for participants to get labs done. Consider time of the day and location, work schedules, transportation, childcare, etc., when scheduling labs.

Westminster Free Clinic & Community Care Center (WFC) is a private, non-profit in Ventura County, CA. WFC has developed an innovative model of healthcare delivery that brings together the skills, knowledge, and cultural competency of adult volunteer health care professionals and high school students interested in pursuing careers in health. In doing so, WFC serves as a safety net provider to low-income, uninsured Latinos, and also helps Latino youth to gain the training and skills needed to enter the healthcare workforce.

As a community care center, WFC's goal is to provide low-income Latinos with early, free access to health, dental, vision, and mental health services, as well as health-supporting programs, in order to prevent more long-term, costly mental and physical health problems. To achieve this, social determinants of health are addressed, including the environment where Latinos live, work, and shop. WFC partners with the community to inspire both individual and larger-scale system changes to create health and education equity for all.

We thank our volunteers and donors for making it all possible!

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