

Age-Friendly Health System  
Integration at the  
Spanish Speaking Neurology Clinic  
October 26, 2022

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MEDICINE *of* THE HIGHEST ORDER



# Disclosures

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- No conflicts of interest

# Learning Objectives

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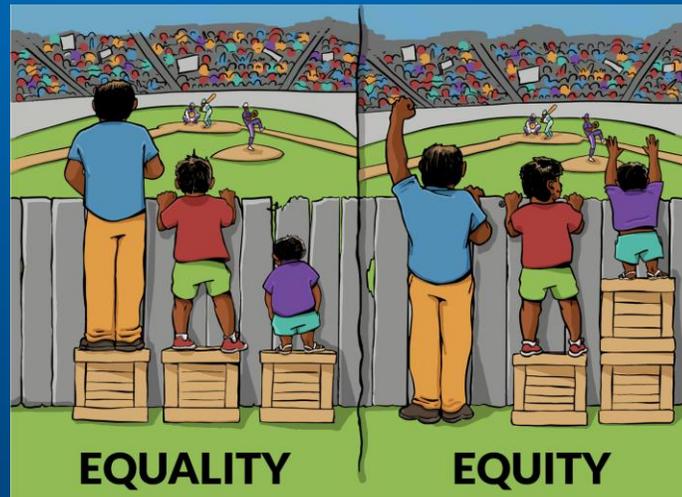
1. Understand how the AFHS has been applied to the Spanish Language Neurology Clinic and how it has optimized care for the geriatric Hispanic community
2. Understand the impact the “What Matters Diagram” has on building patient trust
3. Understand the importance of community engagement when trying to connect with an underserved geriatric community

# What are health disparities?

*"A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."*

# What is health equity?

*"Attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health care disparities."* - Healthy People 2020



# Racial distribution of the population in Rochester city, NY 2020



Black or African American alone, percent (a)	39.4%
Hispanic or Latino, percent (b)	19.4%
White alone, not Hispanic or Latino, percent	35.8%



# Why does this matter?

- Patient populations  $\neq$  actual population
- Based on prevalence rates, there are about 1000 Hispanics in Rochester with PD, but only 24 were seen in 2019
- Racial breakdown of neurologists in the US is not representative of the actual population

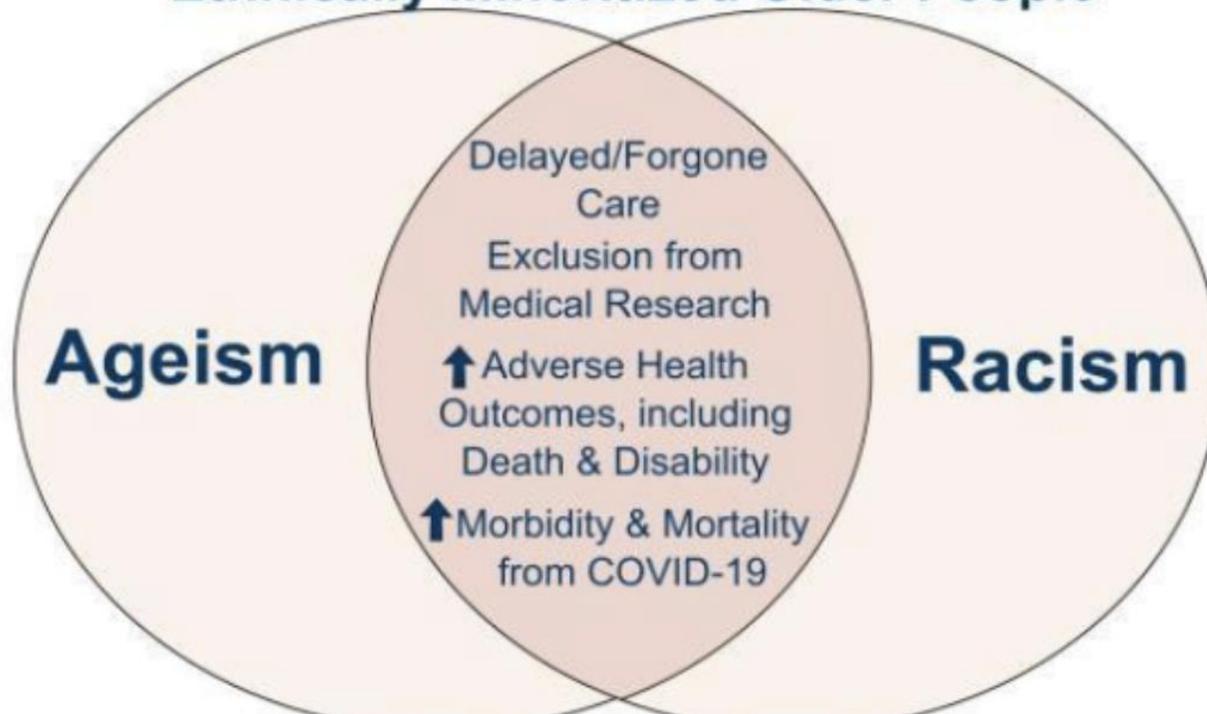
## GUIDANCE FROM AGS ON DIVERSITY PROVES “SEEING” OLDER PATIENTS IS ABOUT MORE THAN SEEING AGE

While health inequities are already well-documented among older people, they are even more pronounced for multi-cultural older Americans. Minority individuals over age 65 have higher rates of disease and disability when compared with Caucasian men and women, for example. Furthermore, of the 36 percent of Americans who report limited health literacy (the ability to obtain, process, and understand basic health information), most are older, less educated, and not white. And as AGS researchers note, mistrust of medicine and medical research remains a persistent barrier to high-quality multicultural care.

# Exploring the Intersection of Structural Racism and Ageism in Healthcare

Timothy W. Farrell MD, AGSF [✉](#), William W. Hung MD, MPH,  
Kathleen T. Unroe MD, MHA, AGSF, Teneille R. Brown JD ... [See all authors](#) ▼

## Implications for Racially and Ethnically Minoritized Older People



# What is the digital divide?



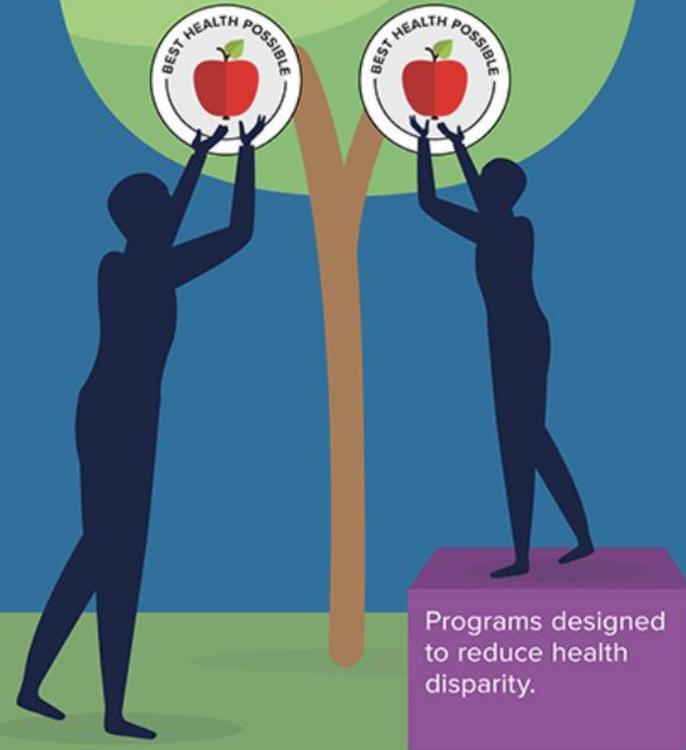
# Digital divide

- The gap between individuals who have access to digital technologies including the internet and having the digital literacy to use it and those who do not.
- Primarily affects low-income and underserved groups
- In the US, ~19 million Americans do have internet access
- 57% of adults with lower incomes had home broadband services compared to 93% of adults with higher incomes [Vogels].
- While telehealth use during the COVID-19 pandemic has helped many patients receive care, it has also further amplified existing health disparities among patients of color and those that are low-income

# What are some solutions?

## Reaching for **HEALTH EQUITY**

Reducing health disparities brings us closer to reaching health equity.



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# The Spanish Language Neurology Clinic



The screenshot shows the website for the UR Medicine Neurology Spanish Language Clinic. The header includes the UR Medicine logo and a search bar. A navigation menu lists: Patients & Families, Education, Research, Community, About URM, Referring Physicians, and MyChart. The main heading is "Neurology". A breadcrumb trail reads: [UR Medicine](#) / [Neurology](#) / [Our Divisions](#) / [La Clínica de Neurología en Español](#). A "Make a Gift" button is visible. The main title is "UR Medicine Clínica de Neurología en Español". Below the title is a photograph of three healthcare professionals in white coats and blue face masks sitting in a clinical setting. Below the photo is a paragraph of text in Spanish: "UR Medicine Clínica de Neurología en Español 'Cerebros Fuertes' espera mejorar el acceso a cuidados de neurología y las oportunidades para la comunidad Latina en Rochester. La clínica brinda cuidado especializado en trastornos del movimiento, dificultad de la memoria y neurología general. UR Medicine Clínica de Neurología en Español cuenta con el apoyo de una beca de los Centros de Excelencia Del Parkinson's Foundation."

- Opened July 2020
- 265 new patients with first time access to neurologic care
- Focus on health equity
- Goals
  1. Educate
  2. Expand access
  3. Improve care
  4. Assess impact

**TOOLS & RESOURCES**

Get Information Organized by Career Stage & COVID-19 Resources

**EDUCATION & RESEARCH**

Earn CME, Track Credits, & Advance Your Research

**POLICY & GUIDELINES**

Advocate & Improve Your Quality of Care

**CONFERENCES**

Network, Enhance, Learn to Lead

[HOME](#) | [PRESS ROOM](#) | [Archives](#)

Press Release

EMBARGOED FOR RELEASE UNTIL 4 PM ET, May 17, 2017

## **BLACKS, HISPANICS LESS LIKELY TO SEE NEUROLOGIST AS OUTPATIENT**

Hispanic people were 40 percent less likely to see an outpatient neurologist than whites, and blacks were nearly 30 percent less likely to see an outpatient neurologist than whites, even after adjusting for other factors that could affect access to care, such as income, health status, and whether they had insurance. A total of 1.18 percent of the Hispanic people in the study had seen a neurologist as an outpatient, compared to 2.06 percent of the black people and 3.26 percent of the white people.

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# Education

## Incorporating Health Equity Into An Initiative To Transform Care For Older Adults

[Faith Mitchell](#)

JANUARY 14, 2021

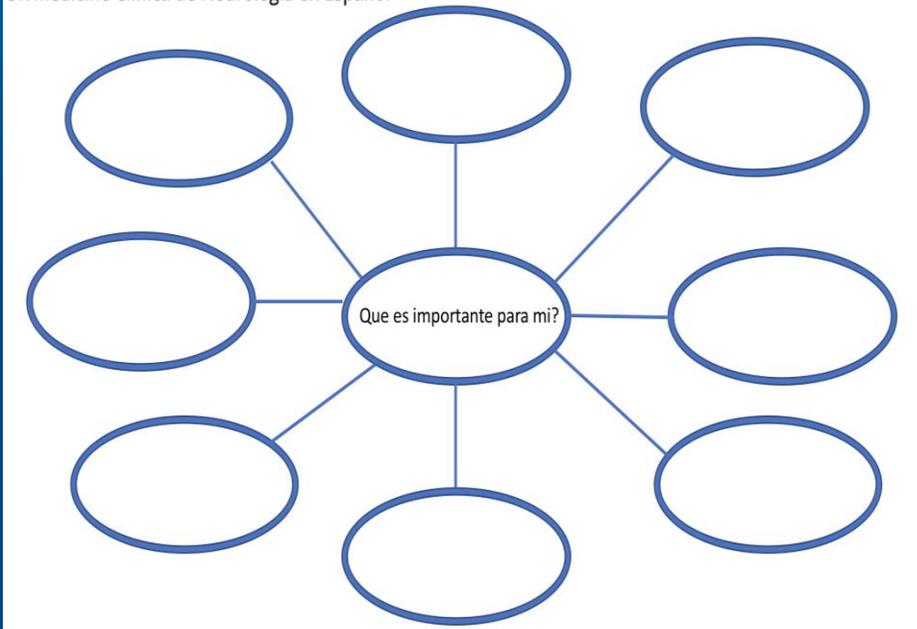
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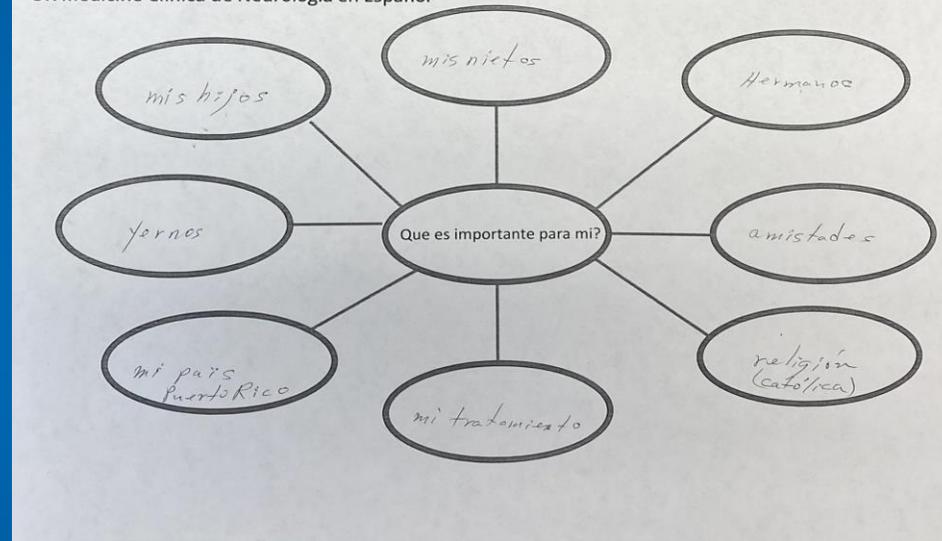
Journal Club

# Improve Care What Matters Diagram

UR Medicine Clínica de Neurología en Español



UR Medicine Clínica de Neurología en Español



# Spanish language neurology clinic patient views

- Assess impact through patient questionnaires
- Preliminary results show that 89% strongly agree with “I trust my doctor to know what matters to me when treating my medical problems”

1. Confío que mi médico sepa lo que es importante para mí al tratar mis problemas médicos.  
*I trust my doctor to know what matters to me when treating my medical problems.*

- A. *Muy rechazado*
- B. *Desacuerdo*
- C. *Ni de acuerdo ni en desacuerdo*
- D. *De acuerdo*
- E. *Muy de acuerdo*

2. Comprendo mejor los medicamentos que tomo después de revisarlos con mi equipo médico.  
*I have a better understanding of the medications I take after reviewing them with my health care team.*

- A. *Muy rechazado*
- B. *Desacuerdo*
- C. *Ni de acuerdo ni en desacuerdo*
- D. *De acuerdo*
- E. *Muy de acuerdo*



**89%**  
**strongly**  
**agree**

# Study Protocol – Currently under IRB review

**Spanish-Language Neurology Clinic: Patient Demographics and Perceptions**  
**Blanca Valdovinos, MD & William Barbosa, MD**  
**University of Rochester Medical Center**

## 1. PURPOSE OF STUDY

This study will examine the demographics and healthcare opinions of patients currently served in the Spanish-Language Neurology Clinic at the University of Rochester Medical Center. The purpose of this study is to assess patient views among Hispanic patients that are seen in our clinic with aim to optimize their care and measure how our clinic is making an impact in our Hispanic community.

# The issue of trust

## 'I Want a Neurologist Who Looks Like Me' How to Bridge Medicine's Credibility Gap Among Patients of Color



Article In Brief



Tuskegee Syphilis Study

1932-1972

Penicillin widely available 1947

400 enrolled with Syphilis, 100 died

# AFHS Lens



## What Matters

- Goals of Care
- Importance of family and religion

## Mobility

- Exercise
- Fall prevention
- Physical therapy
- Occupational therapy

## 4Ms Framework

## Medication

- Medication reconciliation in Spanish
- Deprescribing

## Mentation

- MOCA in Spanish
- Mental Health

# AFHS Lens – Goals of Care

- Familismo – Latino cultural value, referring to the importance of family loyalty, dedication and commitment
- Importance of God and their faith
- Majority of older Latinos not asked about their goals of care (some studies reporting up to 90%)

## End of Life Care Preferences

If unable to make medical decisions, nearly two-thirds of participants would favor family-centered decision-making (64%) rather than a single surrogate decision maker ([Table 2](#)). Forty six percent of respondents thought family should be involved in making medical decisions about life-sustaining therapies for patients with the capacity to make an independent decision.

# AFHS Lens – Medications

- Medication reconciliation in Spanish
- Prescriptions written in Spanish and English
- Systemic review from the NIH in 2020 found that
  - 49% of non-English speaking patients reported trouble understanding a medical situation
  - 42% reported having trouble understanding a label on a medication
  - 16% had an adverse reaction due to a problem understanding the instructions
  - 67% reported difficulty accessing care
  - 20% did not seek health care services for fear of not understanding their healthcare provider. Shami et al. 2020.

# AFHS Lens – Mentation

MOCA in Spanish (also available in nearly 100 different languages!)

**MONTREAL COGNITIVE ASSESSMENT (MOCA)**  
(EVALUACIÓN COGNITIVA MONTREAL)

NOMBRE: \_\_\_\_\_  
 Nivel de estudios: \_\_\_\_\_  
 Sexo: \_\_\_\_\_

Fecha de nacimiento: \_\_\_\_\_  
 FECHA: \_\_\_\_\_

VISUOESPACIAL / EJECUTIVA		Dibujar un reloj (Once y diez) (3 puntos)					Puntos
		<input type="checkbox"/> Contorno <input type="checkbox"/> Números <input type="checkbox"/> Agujas					___/5
IDENTIFICACIÓN							
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					___/3
MEMORIA	Lea la lista de palabras, el paciente debe repetirlas. Haga dos intentos. Recuérdelas 5 minutos más tarde.	ROSTRO	SEDA	IGLESIA	CLAVEL	ROJO	Sin puntos
	1er intento						
	2º intento						
ATENCIÓN	Lea la serie de números (1 número/seg.) El paciente debe repetirla. <input type="checkbox"/> 2 1 8 5 4 El paciente debe repetirla a la inversa. <input type="checkbox"/> 7 4 2						___/2
	Lea la serie de letras. El paciente debe dar un golpecito con la mano cada vez que se diga la letra A. No se asignan puntos si ≥ 2 errores. <input type="checkbox"/> F B A C M N A A J K L B A F A K D E A A A J A M O F A A B						___/1
	Restar de 7 en 7 empezando desde 100. <input type="checkbox"/> 93 <input type="checkbox"/> 86 <input type="checkbox"/> 79 <input type="checkbox"/> 72 <input type="checkbox"/> 65 4 o 5 sustracciones correctas: 3 puntos, 2 o 3 correctas: 2 puntos, 1 correcta: 1 punto, 0 correctas: 0 puntos.						___/3
LENGUAJE	Repetir: El gato se esconde bajo el sofá cuando los perros entran en la sala. <input type="checkbox"/> Espero que él le entregue el mensaje una vez que ella se lo pida. <input type="checkbox"/>						___/2
	Fluidez del lenguaje. Decir el mayor número posible de palabras que comiencen por la letra "P" en 1 min. <input type="checkbox"/> _____ (N ≥ 11 palabras)						___/1
ABSTRACCIÓN	Similitud entre p. ej. manzana-naranja = fruta <input type="checkbox"/> tren-bicicleta <input type="checkbox"/> reloj-regla						___/2
RECUERDO DIFERIDO	Debe acordarse de las palabras SIN PISTAS	ROSTRO	SEDA	IGLESIA	CLAVEL	ROJO	Puntos por recuerdos SIN PISTAS únicamente
	Optativo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Pista de categoría						
	Pista elección múltiple						
ORIENTACIÓN	<input type="checkbox"/> Día del mes (fecha) <input type="checkbox"/> Mes <input type="checkbox"/> Año <input type="checkbox"/> Día de la semana <input type="checkbox"/> Lugar <input type="checkbox"/> Localidad						___/6
© Z. Nasreddine MD Versión 07 noviembre 2004    Normal ≥ 26 / 30 <b>TOTAL</b> ___/30 www.mocatest.org    Anadir 1 punto si tiene ≤ 12 años de estudios							

# AFHS Lens – Mental Health

## Lazos Fuertes: Health Care for Spanish Speaking Families



Dr. Telva Olivares

# Community engagement

*“Community engagement is increasingly seen as a key component of such new collaborative models of care. Communities often have a more holistic view of health and wellbeing, thus enabling organizations to look beyond their own interests and traditional ways.”*

## **The importance of taking action.**



Ibero's Centro de Oro  
Alzheimer's talk in Spanish  
August 31, 2022

# Community Advisory Board

## Dr. Maria Quiñones



CAB meetings every Wednesday in the Latino community

Goals :

- CAB members participate in a unique training program that educates them about how research is conducted. This creates among community members and researchers a common language, an atmosphere of trust and mutual respect, and a philosophy of amplifying the voices of previously voiceless stakeholders
- Important cultural considerations in research development and adaptation of existing interventions and their delivery compel close collaboration with Latino community members, ideally through a Community Advisory Board, to improve Latino caregiving clinical research. It is important that the culture is well represented in the decision-making process when interventions are being adapted to fit that specific culture.

# Neurology Brain Health Community Workshops

- Charles White, Christine Annis, and Katie Webster, NP
- Community partners are Martha Hope, Phyllis Jackson (IHMC), and Flo Clemens (Foodlink) – 1<sup>st</sup> workshop in March, met with community members to learn about their interests
- Five workshops 2 hours in length (nutrition, mental health, exercise)
- Participants are middle-aged and geriatric adults

# Solutions

- Community engagement and knowing our community
- Specialty and multi-disciplinary care clinics
- Providing services in the language they speak
- Diverse faculty and staff
- Community centers

# Summary of our Learning Objectives

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1. Understand how the AFHS has been applied to the Spanish Language Neurology Clinic and how it has optimized care for the geriatric Hispanic community
2. Understand the impact the “What Matters Diagram” has on building patient trust
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# Thank you! It takes a village!

- Parkinson's Foundation
- Rochester Roybal Center for Social Ties and Aging Research
- Geriatric Faculty Scholar Program
- American Academy of Neurology's Diversity Leadership Program
- Dr. Telva Olivares
- Dr. Nimish Mohile
- Dr. Irene Richard
- Dr. Karlo Lizarraga
- Dr. Bob Holloway
- Dr. Kathi Heffner
- Dr. Kimberly Van Orden
- Dr. Maria Quinones
- Dr. Caroline Silva
- Dr. Annie Medina Walpole
- Aida Santiago, NP

# Thoughts or questions?

Thank you!

# References

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<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7201401/>

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