

HEALTH & WELLNESS

Healthbeat

Baptist selected for project to help improve health care system

Wake Forest University Baptist Medical Center is one of the first health systems in America to team with The Joint Commission's new Center for Transforming Healthcare to use systematic methods to identify and prevent breakdowns in patient care and safety.

The Center's first initiative focuses on hand hygiene, a critical step in preventing many of the health-care-associated infections that annually cause nearly 100,000 deaths and cost U.S. hospitals \$4 billion to \$29 billion to combat.

The Joint Commission is the nation's leading health care accrediting organization and is dedicated to ensuring and improving health care quality.

"We are proud to work with the Center to end preventable breakdowns in health care," said Donny C. Lambeth, president and chief operating officer of North Carolina Baptist Hospital, part of the Medical Center. "As an academic medical center, it is part of our mission to improve health care quality and safety."

Wake Forest Baptist undertook a comprehensive environmental and workflow assessment to identify and overcome barriers and challenges to hand hygiene compliance in selected intensive care and medical/surgical care units. The Medical Center is piloting a radiofrequency identification system called Real Time Location System (RTLS) that monitors hand hygiene compliance. Specially made hand hygiene dispensers are wired to track the approach of employees wearing special electronic tags on their identification badges and to record their use of the hand hygiene dispenser.

The Center's work with leading hospitals and health systems to identify, measure and tackle patient safety problem areas that will lead to the development and testing of targeted, long-lasting solutions.

Fellows sought for state health disparities program

Applications are now available for the the North Carolina Health and Wellness Trust Fund's 2010-2011 NC Health Disparities fellowship, a program designed to engage talented public health and social work professionals in ongoing efforts to help close the health disparities gap in the state.

HWTFF has allocated \$23.6 million towards the overall initiative, which includes 23 community grants and a multi-media campaign. HWTFF is partnering with the Duke Global Health Institute to manage the fellowship. The two-year fellowship program aims to increase awareness of health inequalities in North Carolina by enabling a group of mid- to senior-level public health or social work professionals to effectively design, implement and evaluate interventions that address these complex issues. The new class of fellows will complement HWTFF's first class of fellows, all of whom have begun working on health projects in their communities.

Those interested in the NC Health Disparities Fellowship may apply online at HWTFF's Health Disparities Initiative website at: <http://www.caretoactnc.com/HDFellowship.aspx>. The deadline for submitting applications is Oct. 21. All mid- to senior-level public health or social work professionals are welcome to apply.

Documentary spotlights infant mortality in black community

The U.S. Department of Health and Human Services (HHS) released a documentary on the work of student peer educators seeking to raise awareness of disparities in infant mortality rates that affect African American communities. The students participated in the HHS "A Healthy Baby Begins with You" campaign, which involves community, civic and public health organizations.

The video follows the peer educators as they work with high-school and middle-school students, and in church and community venues, to teach people that healthy living is one of the interventions needed to reduce the community-wide prevalence of infant mortality.

Health officials define the national infant mortality rate as the number of deaths per 1,000 live births. Within the African American community, the rate is 13 infant deaths per 1,000 live births, compared to 6.5 infant deaths per 1,000 live births for non-Hispanic whites.

Tonya Lewis Lee, bestselling author, award-winning television producer and campaign spokesperson, produced the video. Lee's husband is filmmaker Spike Lee.

"I'm so proud of what these students are accomplishing and excited by the possibility that the work we are portraying in this documentary, and the attention we are calling to healthy living and preconception health can help us accomplish real change in our community," said Lee. "We hope this video encourages more students, schools and communities to join the campaign."



Tonya Lee



A UNCG School of Nursing alumna meets SimMan during a recent reunion event.

Students to study use of 'fake' patients

CHRONICLE STAFF REPORT

A UNCG nursing professor is working to prove her theory that the use of patient simulators are of great benefit to nursing students.

Dr. Laura Fero has received a \$10,495 grant from the National League for Nursing to explore the advantages, if any, of students using SimMan, a high-fidelity patient simulator, as opposed to the standard training style that uses videotaped vignettes. She hopes to recruit about 80 final-semester senior BSN nursing students for the eight-hour testing experience, scheduled for March 2010.

Fero was a nursing administrator prior to earning her Ph.D. at the University of Pittsburgh. In that role, she watched new nurses struggle with their lack of experience, anxiety and decreasing orientation periods.

"The reason I went back to do a Ph.D. was because I was convinced there was an alternative, more effective system to prepare nurses," she says.

"Simulation, I believe, is that system. My goal is to put a light on how best to prepare and assess students."

UNCG's School of Nursing has two SimMan mannequins that can be controlled by computer to exhibit various symptoms and stages of illness. Instructors, unseen by students, provide the voices necessary to mimic the reality of the situation.

The student volunteers will complete standard, written critical thinking assessments as well as an assessment consisting of a clinical scenario on videotape. They will also be tested individually in a live scenario using SimMan.

Each student will review his or her performance with a nursing instructor privately, identifying strengths and weaknesses.

Fero ran a trial in March with all 92 final-semester nursing students.

"The feedback was incredible," she says. "It really opened students' eyes about what they need to work on as they transition into full-time practice."

Bon Appétit

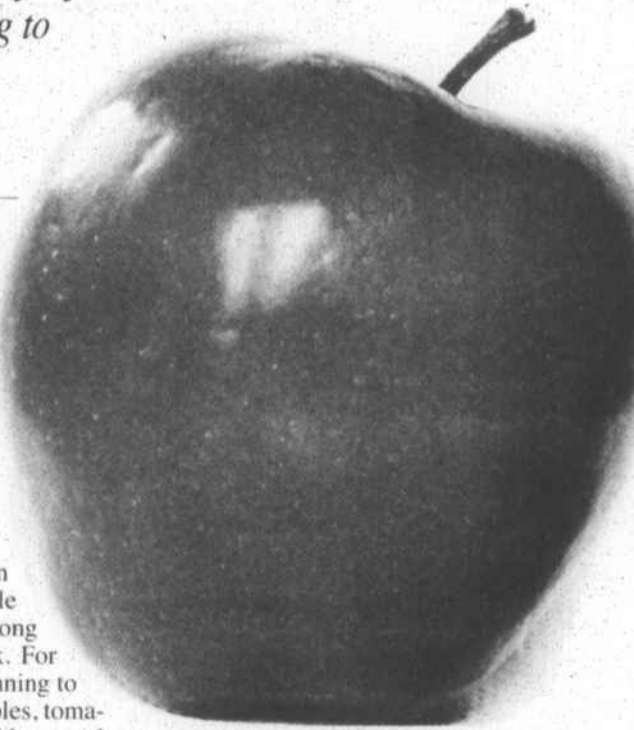
Locally-grown produce coming to school cafeterias

CHRONICLE STAFF REPORT

Chartwells School Dining Services, with whom Winston-Salem/Forsyth County Schools has a contract to serve breakfast and lunch at all the system's schools, will take part in the "It Takes You - Eat Local" promotion Sept. 21 - 25. During the week, Chartwells schools across the nation will be encouraged to feature at least one or more locally-grown produce items on their menus daily. Locally grown produce is touted as healthier because it doesn't have to be transported great distances before it reaches breakfast, lunch and dinner plates.

Pickings from area growers such as Patterson Farm of Taylorsville, N.C. and Deal Apple Orchards of China Grove, N.C. will be among items served to local students during the week. For the week alone, WS/FCS Child Nutrition is planning to serve over 250 cases of fresh, locally-grown apples, tomatoes, corn, peppers, yellow squash, zucchini, cabbage and eggplants.

But Chartwells says its commitment to serve local produce is year-round. The company has a partnership with Foster Caviness, a produce distributor based in Greensboro, that provides produce grown at farms throughout the Piedmont/Triad.



Students not following preventive flu measures

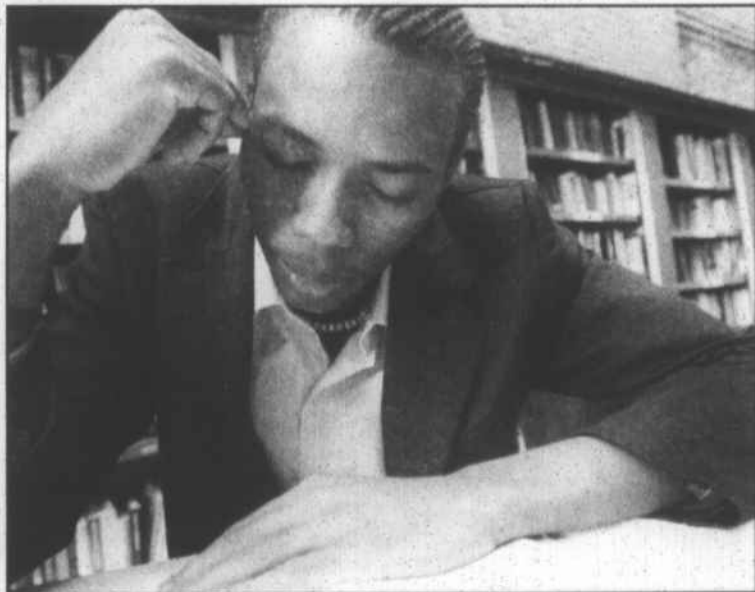
CHRONICLE STAFF REPORT

A North Carolina State University study finds that students are not taking basic preventative measures to protect them from H1N1 (swine flu), although it is predicted that schools will be the hardest hit this flu season.

Preventive measures as simple as washing one's hands aren't being adhered to, according to the study.

"Hand washing is a significant preventative measure for many communicable diseases, from respiratory diseases like H1N1 to foodborne illness agents, such as norovirus," says Dr. Ben Chapman, assistant professor of family and consumer sciences and food safety extension specialist at N.C. State.

The new study, which examined student compliance with hand hygiene recommendations during an outbreak of norovirus at a university in Ontario, finds that only 17 percent of students followed posted hand hygiene recommendations - but that 83 percent of students reported that they had been in compliance. Norovirus causes gastrointestinal problems, including vomiting and diarrhea. Every year there are 30 to 40 outbreaks of norovirus on



university campuses, affecting thousands of students.

Chapman, who co-authored the research, says this is the first study to observe student hygiene behavior in the midst of an outbreak. Previous studies examined self-reporting data after an outbreak - and the new research shows that the self-reporting data may be inaccurate.

"The study shows that while health authorities may give people the tools we think they need to limit the spread of an outbreak, the

information we're giving them is not compelling enough to change their behavior," said Chapman. "Basically, it doesn't work. But we do it again with every outbreak, and we're doing it now with H1N1."

Chapman says the study shows that health officials need to target specific audiences, such as students in a particular dorm or who eat at a particular cafeteria, and tailor their information to those audiences.

Prostate Cancer



September is National Prostate Awareness Month. Though prostate cancer remains a formidable threat to all American men, black men are more likely to develop and die from this cancer than their white peers. According to the CDC, one in five African American men will develop prostate cancer at some point during their lives! The American Cancer Society estimates that over 27,000 new cases of Prostate Cancer will be diagnosed in African American men in 2009, and almost 4,000 African American men will die from the disease. With these grim statistics, it is essential for black men to learn about prostate cancer so they can make appropriate health decisions.

What is Prostate Cancer, and how is it detected?

The prostate is a walnut-sized gland that lies just below the bladder and produces seminal fluid (the fluid that carries sperm). Prostate cancer forms when cells in the prostate continue to divide unchecked by the body's normal regulatory mechanisms, producing a mass of abnormal cells called a tumor. These abnormal cells can travel to other parts of the body (called metastasis) and lead to death.

What are the risks for Prostate Cancer?

Risk factors for prostate cancer include:

Age - the chance of developing prostate cancer increases after age 50;

Family history - having a father or brother with prostate cancer more than doubles a man's risk;

High fat diet - a diet with an abundance of meat, high-fat foods and limited fruits and vegetables appears to confer a slightly higher risk; and

Race - prostate cancer occurs more often in African American men.

Many men experience no symptoms initially; if they do occur, symptoms may include urinating frequently at night, having blood in the urine, difficulty urinating, or experiencing sexual dysfunction. These symptoms may also indicate other disorders, so it is important to talk to your doctor as soon as possible if you are experiencing them.

Early detection leads to early treatment, which results in getting a head start on treating a potentially dangerous cancer. Prostate cancer screening is two-pronged, involving (1) a digital rectal exam, or DRE, and (2) prostate specific antigen (PSA) test. According to the American Cancer Society, health care providers should offer both PSA and DRE tests annually to all men over age 50. For those at high risk (including African American men), testing may be recommended as early as age 40 - 45 years.

What are the latest treatment options for prostate cancer?

No two cancer cases are exactly the same; therefore, treatment will vary from person to person. In early-stage prostate cancer—that is, cancer that has not spread beyond the prostate—there are several treatment options. These options include:

Watchful waiting: Physicians monitor prostate cancer and treat it only if it begins to cause symptoms or shows signs of growing. During the monitoring phase, PSA tests and DREs may be performed regularly.

Radical prostatectomy: Radical prostatectomy is a sur-