Telehealth Outreach during the COVID19 Pandemic: Transforming NC Farmworkers’ Health

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With RNs who are DNP Students at UNC-CH
Sophie Draffin, Betty Martinez, and Leonora Tisdale
Background and Significance:

- **March 13, 2020** – President Donald Trump declared the coronavirus pandemic a National Emergency. This declaration allowed CMS and every hospital to go into emergency preparedness plans. The National Emergency Declaration presented the U.S. healthcare delivery system unprecedented challenges, but also encouraged rapid adoption of telehealth that transformed healthcare delivery ([JAMiA, 2020](#)). Also, during that presidential news coverage, they discussed increasing diagnostic testing, removing restraints to testing and beginning social distancing, but being mindful of the fact there was a shortage of personal protective equipment (PPE) with N95 mask, goggles and gloves reserved only for healthcare workers.

- **March 27, 2020** – North Carolina’s Governor Roy Cooper Issues Statewide “Shelter-in-Place” Proclamation; to begin 3/30/20 to protect against the spread of COVID-19. This was during the time when many H2A workers were arriving in NC. Many outreach workers that assist agricultural / farmworkers were lacking PPE as NC agricultural season began.
Background and Significance:

Farmworkers at risk for COVID 19 - There are over 80,000 migrant and seasonal farmworkers in NC during agricultural season. Farmworkers are considered essential works and are at risk for developing COVID 19 due to crowded living and working conditions, unsanitary housing, uninsured and often language barriers when seeking health care, low wages and fear of losing work if one reports feeling sick with COVID 19 like symptoms. (NC Health News and Migrant Clinicians Network)

The NC Farmworkers Project (NCFP, https://ncfwp.org/) is a private, non-profit 501c3 organization of community health workers that serves an average of 3,000 migrant and seasonal workers a year in five counties around Benson, NC. The NC Farmworkers Project outreach workers have established themselves as trusted providers of health education and case management with these farmworkers over the past 20 years and also provides a mobile health clinic on evenings during the agricultural season working with physicians, NPs, PA, medical and nursing students from UNC- Chapel Hill, NC under the direction of Gayle Thomas, MD. the medical director of the NC Farmworker Health Program (https://www.ncfhp.org/).
Objectives:
At the end of this presentation, participants will be able to:

1. Discuss why farmworkers are at risk for contacting COVID 19 and how to decrease the risk of infection
2. Strategize on how to set up telehealth for farmworkers working with CHWs and healthcare providers and nurses
3. Screen for COVID 19 symptoms and decrease barriers to testing along with education for prevention.
4. Discuss outcomes and Q & A from audience
Objectives:
At the end of this presentation, participants will be able to:

• 1. Discuss why farmworkers are at risk for contacting COVID 19 and how to decrease the risk of infection

• Jean Davison, DNP, FNP-BC
Clinical Associate Professor at UNC – Chapel Hill
Health Disparities
COVID 19
NC Dashboard

Is it the leading cause of death?

CDC weekly report
Common concerns with low income, Migrant and Seasonal Farmworkers (MSFW) especially related to COVID 19 includes:

- **Lack of health insurance/inability to become insured; Lack of access to health care;**
- Lack of childcare; Lack of adequate education and nutrition programs when schools close;
- **Lost work and lost wages** and the serious consequences that can follow, including inability to pay for basics like food, rent, and utilities, and the results of that inability, including hunger, eviction, and/or lack of basic services.
- **Lack of unemployment compensation;** Lack of paid sick leave; and even for those with paid sick leave, pressure from employers or from the reality of poverty to continue to work despite illness.
- **Unsanitary, crowded housing** and the risk of losing housing due to job loss.
- Stress and anxiety, and lack of mental health resources.
- **For farmworkers there is also uncertainty regarding the H-2A agricultural guest worker program and the closing of US consulates’ visa processing along with language barriers.**
The COVID-19 Pandemic

- LOW-LITERACY & MULTILINGUAL RESOURCES
- FARMWORKER & ESSENTIAL WORKER FAQ
- SUPPORT FOR FRONTLINE CLINICIANS

https://www.migrantclinician.org/
Adjusted for age, other racial groups are this many times more likely to have died of COVID-19 than White Americans

Reflects cumulative mortality rates calculated through March 2, 2021.

<table>
<thead>
<tr>
<th>Racial Group</th>
<th>Times More Likely</th>
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<tbody>
<tr>
<td>PACIFIC ISLANDER</td>
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</tr>
<tr>
<td>LATINO</td>
<td>2.4</td>
</tr>
<tr>
<td>INDIGENOUS</td>
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<tr>
<td>WHITE</td>
<td>1.0</td>
</tr>
<tr>
<td>ASIAN</td>
<td>1.0</td>
</tr>
</tbody>
</table>

Indirect age-adjustment has been used.

Source: APM Research Lab • Get the data • Created with Datawrapper
Requirements for Telehealth

Prior to providing telehealth services:

Check State Requirements – in NC, NP must have license and patient must be in NC

• Verify the identification of the patient
• Use appropriate technology to ensure encryption and privacy (except that non-HIPAA compliant platforms may be used during COVID pursuant to a federal waiver)
• Establish safety protocols in case of emergency (where is the patient and phone # if EMS must be called)
• Notify the patient of all individuals in the room/on the call during the telehealth visit
• Ask for verbal consent from the patient before beginning
Objectives:
At the end of this presentation, participants will be able to:

2. Strategize on how to set up telehealth for farmworkers working with CHWs and healthcare providers and nurses

Q & A with the Outreach Worker and DNP Student

• Gabriela Elvir (Vicky) Hernandez
• Betty Martinez, PNP and DNP student
NC Farmworkers Project

- https://www.ncfhp.org/
WhatsApp
Objectives:
At the end of this presentation, participants will be able to:

• 3. Screen for COVID 19 symptoms and decrease barriers to testing along with education for prevention.

DNP students and interviewers, nursing educators Sophie Draffin, and Leonora Tisdale
COVID-19 disproportionately affects communities of color for several reasons, including existing social, environmental, and health inequities. Despite making up 22 percent of North Carolina’s population, as of June 1, African Americans account for 30 percent of confirmed COVID-19 cases and 34 percent of COVID-19 deaths in cases where race is known. Similarly, Hispanics account for 39% of confirmed COVID-19 cases, in cases where race or ethnicity is known, despite only making up about 10% of the population in North Carolina.
Symptoms of COVID 19 – screen for at the beginning of each Telehealth visit:

Conozca los síntomas del COVID-19, que pueden incluir:

- Tos, falta de aire o dificultad para respirar
- Fiebre o escalofríos
- Dolor en el cuerpo o los músculos
- Vómito o diarrea
- Pérdida reciente del gusto o del olfato

Los síntomas pueden ser de leves a graves, y aparecer de 2 a 14 días después de la exposición al virus que causa el COVID-19.
Who should be tested: NC

- Anyone with symptoms suggestive of COVID-19.
- Close contacts of known positive cases, regardless of symptoms.
- The following groups are some of the populations with higher risk of exposure or a higher risk of severe disease if they become infected. People in these groups should get tested if they believe they may have been exposed to COVID-19, **whether or not they have symptoms**.
  - People who live in or have regular contact with high-risk settings (e.g., long-term care facility, homeless shelter, correctional facility, migrant farmworker camp).
  - Historically marginalized populations who may be at higher risk for exposure.
  - **Frontline and essential workers** (agricultural workers, construction sites, processing plants, etc.) in settings where social distancing is difficult to maintain.
  - Health care workers or first responders (e.g. EMS, law enforcement, fire department, military).
  - People who are at high risk of severe illness (e.g., people over 65 years of age, people of any age with underlying health conditions).
- People who have attended protests, rallies, or other mass gatherings could have been exposed to someone with COVID-19 or could have exposed others.
Education Provided at the End of Every Telehealth Visit

Know your 3 Ws!

WEAR a cloth mask over your nose and mouth.

WAIT 6 feet apart. Avoid close contact.

WASH your hands or use hand sanitizer.

¡Recuerda las 3 Ms!

MASCARILLA Usar una mascarilla de tela cubriendo nariz y boca.

MANTENER 6 pies (2 metros) de distancia. Evitar estar cerca de los demás.

MANOS Lavate las manos con frecuencia o usar desinfectante para manos.

#StayStrongNC @NCDHHS #MantenteFuerteNC
Objectives:
At the end of this presentation, participants will be able to:

4. Discuss outcomes and Q & A from audience

Jean Davison, DNP, FNP-BC
- More than 50% of patients had symptoms of COVID 19 and were recommended for follow up screening.
- Even with screenings mobile going out to farms, the farm workers were reluctant to be tested.
- 1 farmworker did go directly to the hospital and was admitted with serious disease.
- Future telehealth: continue collaboration with Community Outreach Workers
Strategies to Decrease Risk of Infection

At the beginning of agricultural season:

- Screen and test upon arrival before going into housing
- Provide information on the 3 Ws and free masks/hand sanitizer
- Growers and farmworker organizations should promote vaccination and make it culturally and easily accessible.
- Paid time off and isolation housing should be provided for sick farmworkers
- Policies should be in place for enforcement
Thank you! Gracias!

Contact information:
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Resources
CDC guidelines for agricultural workers:
Migrant Clinician Network: https://www.migrantclinician.org/
Telehealth transformation: COVID-19 and the rise of virtual care:
https://academic.oup.com/jamia/article/27/6/957/5822868