

Imagine that you are a MSN-prepared nurse leader in an out-patient cardiovascular clinic that serves low-income and homeless individuals. Consider the needs of the patient population that you serve, and respond to the following:

- As a result of cardiovascular disease, what specific health risks might be present within this vulnerable patient group?
- What physical and social determinants of health might influence the cardiovascular health of patients within this population?
- Describe three person-centered strategies that you suggest to promote the health of patients.
- How will competency in advanced health assessment, pathophysiology, and pharmacology strengthen your ability to address the health risks experienced by this group of patients?

Patients that have cardiovascular disease and are from the low-income/homeless population group are at a high risk of developing subsequent health issues due to the nature of their environment and lack of access to resources. These health issues include but are not limited to diabetes, malnourishment, hypertension, stroke, vascular conditions, depression and other mental health ailments, kidney disease, liver disease, and obesity. Physical and social determinants for this patient group include lack of shelter or poor living conditions, exposure to chemicals and toxins, low-income, poor education, poor health, lack of health insurance and/or access to adequate healthcare, inability to afford medications, unhealthy diet, lack of transportation, and poor or lacking support systems.

Person-centered care focuses on assessing the patient including their views, beliefs, concerns, and experiences that impact overall health to help encourage change and improve health outcomes (Edgman-Levitan & Schoenbaum, 2021). On a basic level, the goal is to help the patient help themselves by providing them with the tools and resources to be successful. When suggesting strategies to a patient of this population group, it is important to assess their needs and access to resources. Motivators and ability to implement change must also be assessed. But, before any changes can be suggested, a respectful and trusting relationship must be achieved and maintained. This will create a foundation on which to implement change and foster achievement of that change. The patient's health literacy level must also be assessed to ensure the information being presented is easily understood. The first strategy I suggest in promoting the health of patients is the provision of accurate and up-to-date information regarding their diagnosis including how it affects them physically and mentally, treatment options, and likely outcomes. This information will ensure the patient is making informed decisions about their health. The second strategy I suggest is improving access to care including ease in scheduling appointments, resources for transportation, referrals for financial, social, and physical support, and information about options for obtaining food and shelter. There is a plethora of resources aimed at improving health and access to adequate care, but patients from