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Wound Care in the Homeless Population- CHCB and Safe Harbor Clinic

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Badrinarayanan, Niveditha, "Wound Care in the Homeless Population- CHCB and Safe Harbor Clinic" (2021). *Family Medicine Clerkship Student Projects*. 701.
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Wound Care in the Homeless Population- CHCB and Safe Harbor Clinic

Niv Badrinarayanan

July-August 2021

Dr. Jacob Shaw



Problem Identification- The Need for Wound Care

- Clinician interaction for the homeless community prioritizes acute needs over preventative healthcare
- General preventative guidelines are not tailored for specific needs of the homeless community, like infectious disease, substance use and mental health issues
- Lack of consideration of other barriers like transportation, childcare and stable housing making it harder for visits
- Wound care is an important prevention measure that can reduce infections and risk of morbidity and mortality in IVDU and patients that do not interact with the healthcare system often.
- Few of the patients I saw at Safe Harbor comprised of people coming in for care of chronic wounds, which were often infected and raw.

Effect on Public Health-

Quotes from providers at wound clinics

'Within weeks, we had a full schedule every day and were having a hard time finding space for new patients'

'When you have a lot of wound care patients, they tend to use up primary care time, and other patients may have difficulty accessing care because so many spots are filled by wound care patients.'

'medical assistants may find themselves doing the same thing over and over, just changing the dressings, which can cause wounds to dry out and healing to stall.'

Community Perspective

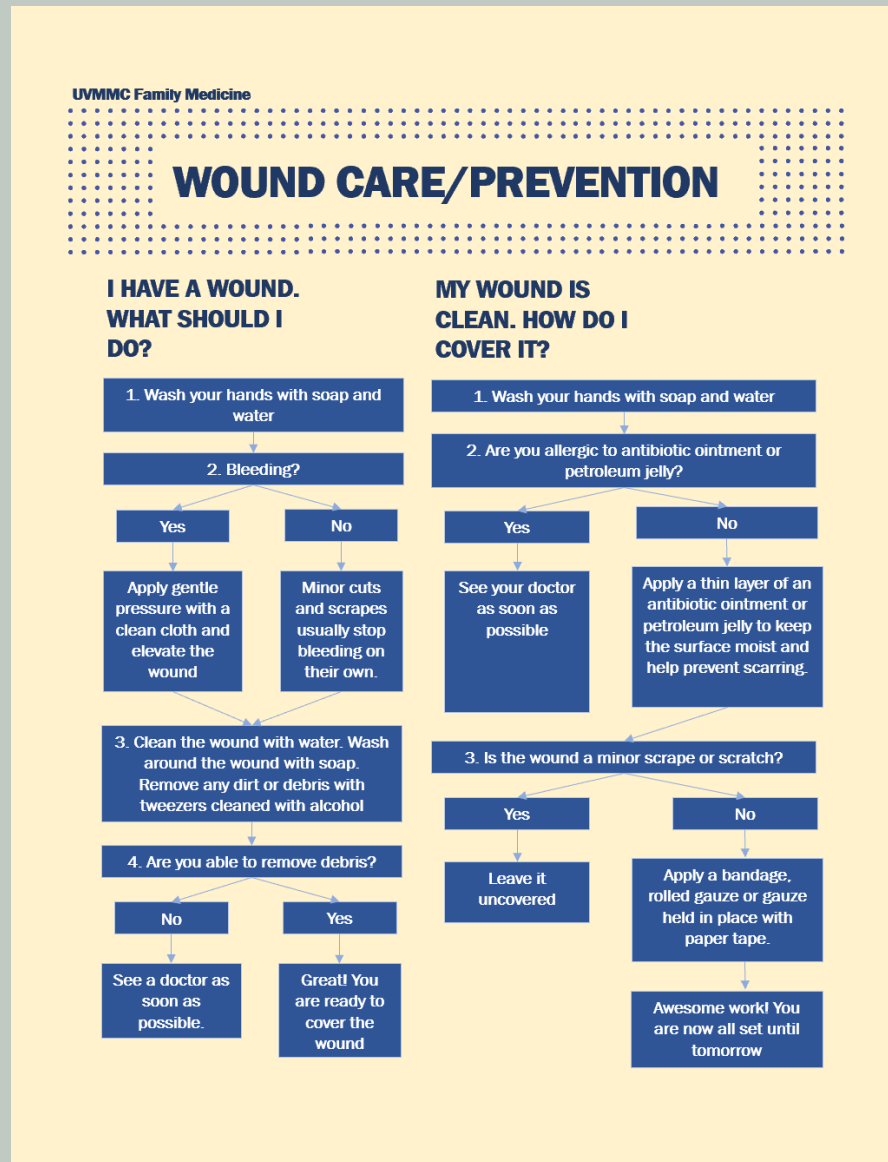
(from doctors who work with the homeless community)

- ‘The most common wound care in the homeless population is infected/uncovered wounds.’
- ‘One of the most pressing concerns when it comes to wound care in the homeless population is recognizing the signs of infection and treating infection completely.’
- ‘There needs to be an emphasis on Tdap and staying up to date on the vaccines.’
- ‘There is concern of provider burden in populations where wound care could be provided outside the clinic.’

Intervention and Methodology

- Pamphlets were made and distributed to the community through Safe Harbor Clinic Outreach and Community Health Centers of Burlington.
- Spoke with providers at CHCB and Safe Harbor on what the most important parts of a pamphlet would be.
- Decided to offer pamphlets to patients presenting with wound related concerns.
- Pamphlets were placed in patient rooms to take them as they need as well.

Results



Evaluation and limitations

- Several patients presenting for wound care were unwilling to speak of their experiences, which they attributed to their distrust in the healthcare system.
- Effective wound care also involves the usage of bandages and gauze to cover up wounds, which some people may not have access to.
- There needs to be an effective system where patients can send queries about the pamphlet to providers, without overwhelming them.
- Since the pamphlet was a new idea, further research is necessary in the efficacy of the presentation of information.

Recommendations for future interventions/projects

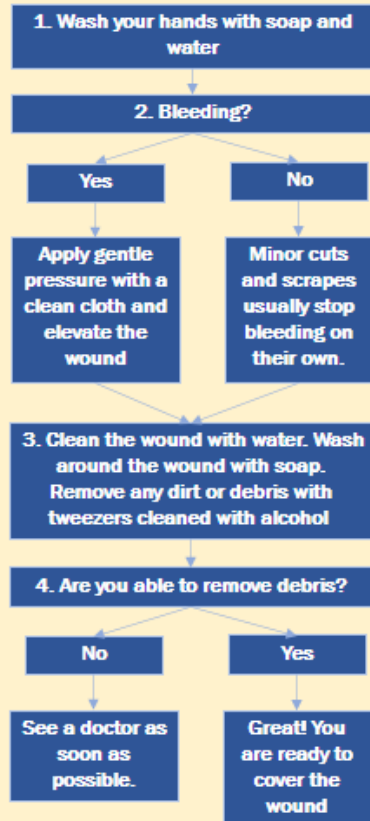
- Since the pamphlet is a recent intervention, we will need more feedback from patients and providers for improvements.
- Another intervention could involve direct outreach to community through Safe Harbor where direct communication to the homeless community about the pamphlets and wound care can be provided.
- Some form of communication lines, where the community can ask providers questions about the pamphlet/wound care.
- Addition of more information as required by community members, including using this template for any future interventions deemed necessary by patients.

References

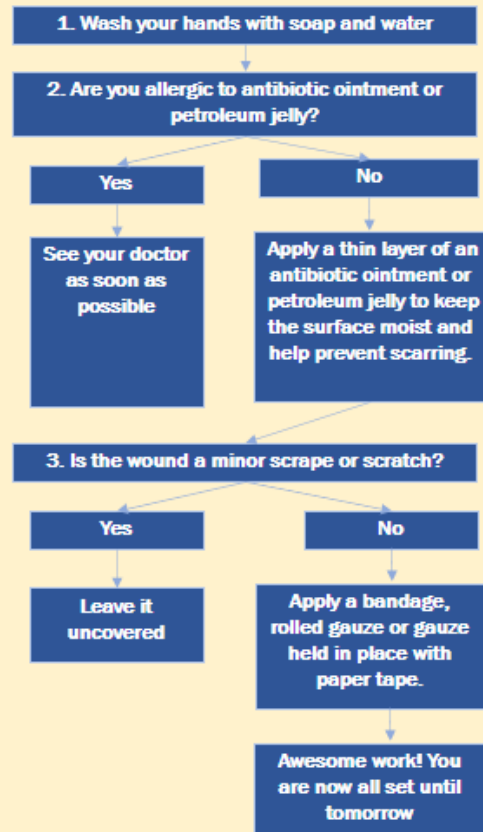
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- "Wound Care Difficult for Homeless Patients and Providers." *Healing Hands*, 3rd ed., vol. 8, HCH Clinicians Network, 2004, pp. 1–4.

WOUND CARE/PREVENTION

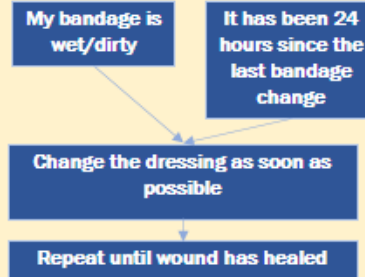
I HAVE A WOUND. WHAT SHOULD I DO?



MY WOUND IS CLEAN. HOW DO I COVER IT?






IT'S THE NEXT DAY. HOW DO I CONTINUE TO TAKE CARE OF MY WOUND?



HOW CAN I PREVENT WOUND INFECTIONS

- Wash the wounds immediately
- Antibiotic ointment as soon as possible
- Keep larger wounds covered
- Keep the wound clean and dry for the first 24 hours
- Stay up to date on your tetanus vaccines

IS MY WOUND INFECTED?

- Pus or cloudy fluid is draining from the wound. 
- Crust has formed on the wound. 
- A fever occurs.
- The lymph nodes nearby become large and tender. 
- A red streak is spreading from the wound outwards. 
- The wound has become very tender.
- Increasing redness occurs around the wound. 
- The scab has increased in size.
- Swelling is increasing 48 hours after the wound occurred.
- The wound hasn't healed within 10 days after the injury.