Welcome to Module 6 of DBHDS Support Coordination/Case Management training. This module will cover Health Integration.
Module 6 covers the topic of health care and how the health of those served affect the Support Coordination/Case Management process.
The objectives of Module 6 are to:
- identify strategies to promote wellness;
- identify strategies Support Coordinators/Case Managers can use to integrate health care into their practice; and
- identify the major chronic illnesses commonly experienced by people who use services.
Wellness is essential to overall well-being and physical health. People with developmental disabilities, mental health disorders and substance use disorders need health care and health programs for the same reasons anyone else does—to stay well, active, and a part of the community. Having a disability does not mean a person is not healthy or cannot be healthy.

Being healthy means the same thing for people—getting and staying well so one can lead full, active lives. People with disabilities experience all the same common health issues as the general population, yet as a group, they have much greater health needs. People with disabilities can also be at higher risk for injuries and abuse.

For these reasons, health and safety are core concerns for people with disabilities but these concerns do not override a person’s fundamental right to the dignity of risk. Dignity of risk refers to the right to take risks when engaging in life experiences, and the right to fail in those activities.
Maintenance of optimal health is one of the basic supports provided by the team serving a person with a disability. This is a shared responsibility among all entities who work with the person. The level of active involvement with health care practitioners depends on the risk factors of each person.

The Support Coordinator/Case Manager plays an important role in helping people to manage chronic illnesses including:

- leading the support team in identifying and understanding which factors place people at risk for chronic illness;
- identifying a person’s specific risk factors and helping them to modify those risks;
- teaching people about their illness and helping them explore treatment options;
- coordinating services to ensure that appropriate treatment occurs when chronic illness is present; and
- encouraging, and monitoring adherence to medical treatment and follow-up recommendations.
There are proactive steps that can be taken that can contribute to optimal health in people with disabilities just as they do for the general population. These topics should be included in the discussion when developing a support plan.

These include:

- Health insurance is critical to obtaining optimal health. A Support Coordinator/Case Manager should work with the person on insurance options including Medicaid, private insurance etc.;
- good nutrition which includes proper weight management;
- attention to personal hygiene. Lack of attention to proper hygiene can impact a person’s self confidence and how other’s interact with them.
- a good exercise regime which can positively impact a person’s overall health, sense of well-being, and recovery;
- assistive technology which can provide more independence, more choice and result in increased confidence;
- regular medical and dental care to help avoid serious health complications; and
- medications and their side effects. Medications can significantly increase the quality of life for people, however, keep in mind that some medications can cause side effects which should be closely monitored to avoid further complications.
There are 8 health issues that are often overlooked and need to be more carefully monitored especially for people with developmental disabilities. These conditions can progress rapidly and result in bigger problems, even death. They are most likely to be identified and addressed by a Direct Support Professional who has regular contact with the person using services. However, all Support Coordinators/Case Managers need to be aware of the signs and symptoms of these health issues. This and the next slide cover the 8 health issues.

They include:

- **Skin Care**: Healthy skin aids in regulating body temperature, protecting internal organs from injury and environmental elements, and protecting against infection. Indicators that something could be wrong include unusual changes in texture and color, swelling, infection, tenderness and draining. Decubitus ulcers are injuries to skin and underlying tissue resulting from prolonged pressure on the skin. Bedsores most often develop on skin that covers bony areas of the body, such as the heels, ankles, hips and tailbone. People most at risk of bedsores are those with a medical condition that limits their ability to change positions or those who spend most of their time in a bed or chair.

- **Aspiration pneumonia**: An inflammation of the lungs and airways to the lungs from breathing in foreign material. It develops from inhaling food, vomit, liquids, or saliva into the lungs. Things to look for include, cough, chest pain, fatigue, nausea, shortness of breath and bluish skin color.

- **Falls**: Any situation in which someone falls suddenly and involuntarily toward a lower surface or the ground. Fall complications can include broken bones, head injuries, problems with daily activities, and need for home health care.

- **A urinary tract infection, or UTI**: An infection of the urinary tract, which is the body’s system for removing wastes and extra water. Signs that would indicate a UTI include pain when urinating, incontinence, increased urination, confusion, pelvic pain, and change in color of urine.
Dehydration occurs when someone loses more fluids than they are taking in. Diarrhea and vomiting are the most common reasons why someone loses excess fluid. Signs to look for include dry mouth, nose or skin, decreased tear production, headache, dizziness, and concentrated urine.

Constipation is the slow movement of feces through the intestine which results in infrequent bowel movements and hard, dry stools. Someone suffering from constipation or bowel obstruction might complain of infrequent bowel movements, belly pain, blood in their stools and bowel leakage.

Sepsis is a serious medical condition caused by an overwhelming immune response to infection. It can arise quickly and in severe cases can lead to organ failure and death.

Seizures will be covered later in the module.
There are many medical conditions that may be related to substance use disorders. These are known as substance use related medical concerns. This slide and the next list the conditions associated with SUMCs.

They include:

- injury from poisonings and/or overdoses;
- hypertension;
- asthma;
- diabetes;
- acid-peptic disorders;
- ischemic heart disease;
- pneumonia; and
- chronic obstructive pulmonary disease.
Additional substance medical concerns (SUMCs) include:

- cirrhosis;
- hepatitis C;
- disease of the pancreas;
- alcoholic gastritis;
- toxic effects of alcohol;
- alcoholic neuropathy;
- alcoholic cardiomyopathy; and
- prenatal alcohol and drug dependence with risk to mother and fetus.

The link provided gives additional information about these concerns. The link is also listed in the materials section of this module.
People with intellectual disabilities have been found to have particular health risks including:

- infectious disorders;
- dermatologic disorders;
- oral health issues;
- cardiac disorders; and
- musculoskeletal and other organ system disorders.

The link provided gives information about this topic. The link is also listed in the material section of this module.
Any chronic illness will have a significant impact on a person’s quality of life. The purpose of the rest of the module is to provide a basic overview of the primary chronic illnesses and other health conditions that impact those with behavioral health and developmental disabilities.

These are some of the more common illnesses and health conditions a Support Coordinator/Case Manager is likely to see:

- high blood pressure;
- heart disease;
- diabetes;
- seizure disorders;
- tuberculosis (TB);
- HIV/AIDS; and
- hepatitis.
High blood pressure is called the "silent killer" because many people don't realize they have it. High blood pressure often has no warning signs or symptoms. People with elevated blood pressure readings should be referred to their physician for diagnosis and treatment. Blood pressure is the force of blood pressing against the wall of the arteries that carry blood away from the heart. It is measured as systolic pressure, which means when the heart contracts, diastolic pressure, when the heart relaxes.

- A normal blood pressure reading is below 120(systolic)/80(diastolic).
- It is considered pre-hypertension with a reading between 120/80 and 139/89.
- Hypertension is diagnosed when either the systolic pressure is greater than 140 or the diastolic pressure is greater than 90.
- It is important to note that people with diabetes or kidney disease are considered to have hypertension if their blood pressure is greater than 120/80.
Some of the risk factors for high blood pressure include:

- family history of hypertension;
- obesity;
- high salt diets;
- smoking;
- alcohol use;
- excess stress; and
- a sedentary (inactive) lifestyle.
There are 5 major complications associated with high blood pressure. They are:

- heart disease;
- stroke, also known as cerebrovascular accident;
- peripheral artery disease or damage to blood vessels to legs and toes;
- kidney damage; and
- damage to the eyes.
Cardiovascular disease is a disease of the blood vessels, and symptoms occur because tissues are deprived of oxygen. Cardiovascular disease is a broad term used to describe three different disease states:

- coronary disease, which is the narrowing of the blood vessels to the heart; it is also the most common heart disease and it can cause irregular heartbeats, angina, heart attack, and heart failure;
- cerebral vascular disease which is the narrowing of vessels that supply the brain; and
- peripheral vascular disease which is the narrowing of the vessels to the legs and feet.
Symptoms of cardiovascular disease are:

- chest pain that gets worse with physical exertion and better after resting;
- shortness of breath that worsens with exertion;
- temporary loss of strength in arms or legs;
- temporary paralysis in any part of the body;
- dizziness, lightheadedness or fainting;
- blurred vision or loss of speech;
- cold, numb, or tingling feet and toes;
- sores and infections on feet or legs that heal slowly.
Conditions that increase a person’s risks of getting cardiovascular disease include:

- increasing age;
- male gender;
- heredity;
- diabetes;
- smoking;
- obesity & being overweight;
- a sedentary life style;
- high blood cholesterol; and
- high blood pressure.
Diabetes is a disease in which blood glucose or sugar levels are above normal. Most of the food we eat is turned into glucose, which our bodies use for energy. The pancreas, an organ that lies near the stomach, makes a hormone called insulin to help glucose get into the cells of our bodies. When you have diabetes, your body either does not make enough insulin or cannot use its own insulin as well as it should. This causes sugar to build up in your blood.
People who think they might have diabetes must visit a physician for diagnosis. They might exhibit SOME of the following symptoms:

- frequent urination;
- excessive thirst;
- unexplained rapid weight loss;
- extreme hunger;
- sudden vision changes;
- tingling or numbness in hands or feet;
- feeling very tired much of the time;
- very dry skin;
- sores that are slow to heal;
- more infections than usual.
The following are risk factors that may contribute to the development of diabetes:

- obesity;
- being over the age of 45;
- family history of diabetes;
- high blood pressure;
- history of cardiovascular disease;
- poor cholesterol levels;
- regular use of alcohol due to sugar content;
- HDL or "good" cholesterol is below normal, or triglyceride level is above normal; and
- a sedentary lifestyle.
Diabetes is associated with significant health risks. They include:

- blindness;
- kidney disease;
- heart disease;
- stroke;
- amputation due to neuropathy or vascular disease;
- susceptibility to infection; and
- poor wound healing.
Seizure disorders, also known as epilepsy, are characterized by recurring over-activity or misdirected activity of electricity in the brain, exhibited by temporary episodes of motor, sensory, or mental dysfunction, with or without unconsciousness or convulsive movements.
There are different types of seizures.

- Tonic-clonic or “grand mal” seizures are very severe. When the seizure is brought on, the person cries out suddenly and may then suffer a loss of consciousness and fall to the ground. After this, a person has severe muscle spasms and jerking throughout the body, may clench their teeth, bite their tongue, drool or froth at the mouth, and lose bladder control. After the seizure is over, the person usually regains consciousness in a confused and fatigued state, with no memory of the seizure occurring.

- Other seizures can range in severity. Someone may have a “simple partial seizure” in which a body part uncontrollably shakes or becomes numb, or an “absence or petit mal” seizure in which one blinks rapidly, stops moving and becomes unaware of what is happening.

- Another type, called a “complex partial seizure,” typically begins with a blank stare followed by chewing movements, fumbling with clothing, confused or mumbled speech, and wandering. The person may not respond to questions and usually becomes forgetful or confused afterwards.
Tuberculosis, or TB, is caused by a bacterium that usually attacks the lungs, but can also attack other parts of the body such as the kidney, spine, and brain. If not treated properly, tuberculosis can be fatal.

- TB is spread through the air from one person to another.
- It is not spread by sharing food or drink, shaking someone’s hands, or sharing toothbrushes.
- Not everyone infected becomes sick and, if someone has it without showing symptoms, it is called latent TB.
- Sometimes the TB bacteria becomes resistant to the medicines used to treat TB and this is known as “drug resistant TB”.

- Attacked the Lungs, Kidneys, Spine & Brain
- TB Spreads:
  - Through the Air
  - Person to Person
- TB is not spread by:
  - Sharing Food/Drink
  - Shaking Hands
  - Sharing Toothbrushes
- Not Everyone Infected Becomes Sick (Latent TB)
- Can Be Drug Resistant

Modul 6 - Health Literacy | 25
Symptoms of tuberculosis include:

- a bad cough lasting 3 weeks or longer;
- coughing up phlegm or blood;
- pain in the chest;
- weakness or fatigue;
- weight loss;
- lack of appetite;
- chills;
- fever; and
- sweating at night.

Please Note: All people using services who have been identified with a substance use disorder are required to be screened or referred for a TB screening. If the results are positive, they are to be referred for treatment. Licensing standards also require staff to be screened for TB. A Support Coordinator/Case Manager should consult their supervisor if they have concerns about themselves or the people served.
Human immunodeficiency virus, also known as HIV, is the virus that can lead to acquired immune deficiency syndrome, or AIDS.

HIV damages a person’s body by destroying specific blood cells, called CD4+ T cells, which are crucial to helping the body fight diseases. HIV is transmitted by body fluids. Only certain body fluids—blood, semen, pre-semenal fluid, rectal fluids, vaginal fluids, and breast milk—from a person who has HIV can transmit HIV. These fluids must come in contact with a mucous membrane or damaged tissue or be directly injected into the bloodstream (from a needle or syringe) for transmission to occur. Mucous membranes are found inside the rectum, vagina, penis, and mouth.
The modes of transmission in the United States are as follows:

- having anal or vaginal sex with someone who has HIV without using a condom or taking medications to prevent or treat HIV; and
- sharing needles or syringes, rinse water, or other equipment (works) used to prepare drugs for injection with someone who has HIV. HIV can live in a used needle up to 42 days depending on temperature and other factors.

Less commonly, HIV may be spread:

- from mother to child during pregnancy, birth, or breastfeeding; although the risk can be high if a mother is living with HIV and not taking medications, recommendations to test all pregnant women for HIV and start HIV treatment immediately have lowered the number of babies who are born with HIV; and
- by being stuck with an HIV-contaminated needle or other sharp object; this is a risk mainly for health care workers.

In extremely rare cases, HIV has been transmitted by:

- oral sex;
- receiving blood transfusions, blood products, or organ/tissue transplants that are contaminated with HIV. This was more common in the early years of HIV, but now the risk is extremely small because of rigorous testing of the US blood supply and donated organs and tissues.
- eating food that has been pre-chewed by an HIV-infected person. The contamination occurs when infected blood from a caregiver’s mouth mixes with food while chewing. The only known cases are among infants.
- being bitten by a person with HIV. Each of the very small number of documented cases has involved severe trauma with extensive tissue damage and the presence of blood. There is no risk of transmission if the skin is not broken.
- contact between broken skin, wounds, or mucous membranes and HIV-infected blood or blood-contaminated body fluids; and
- deep, open-mouth kissing if both partners have sores or bleeding gums and blood from the HIV-positive partner gets into the bloodstream of the HIV-negative partner. HIV is not spread through saliva.

The link provided gives more information about HIV. This link is also listed in the material section of this module.
A large percentage of people have flu-like symptoms within 2-4 weeks after HIV infection. Other people do not feel sick at all during this stage, which is also known as acute HIV infection. Early infection is defined as HIV infection in the past six months and includes acute infections. Flu-like symptoms can include:

- fever;
- chills;
- rash;
- night sweats;
- muscle aches;
- sore throat;
- fatigue;
- swollen lymph nodes; and/or
- mouth ulcers.

If someone believes they have been exposed to HIV, they should get an HIV test.
Acquired immunodeficiency syndrome, or AIDS, is caused by the human immunodeficiency virus, or HIV.

“Acquired” means that the disease is not hereditary but develops after birth from contact with a disease-causing agent, in this case, HIV.

“Immunodeficiency” means that the disease is characterized by a weakening of the immune system.

“Syndrome” refers to a group of symptoms that indicate or characterize a disease. In the case of AIDS, this can include the development of certain infections and/or cancers, as well as a decrease in the number of certain specific blood cells, called CD4+ T cells, which are crucial to helping the body fight disease.

Before the development of certain combinations of medications in the mid-1990s, people with HIV would progress to AIDS in just a few years. Currently, people can live with HIV much longer, even decades, before they develop AIDS.
Hepatitis is the inflammation of the liver and also refers to a group of viral infections that affect the liver. The most common types are hepatitis A, hepatitis B, and hepatitis C. Viral hepatitis is the leading cause of liver cancer and the most common reason for liver transplantation. An estimated 4.4 million Americans are living with chronic hepatitis; most do not know they are infected. About 80,000 new infections occur each year.
Overweight and obesity are both labels for ranges of weight that are greater than what is generally considered healthy for a given height or normal body mass index, known as BMI. The body mass index is calculated using someone’s height and weight. Calculating BMI may be found at many websites. The range of categories of underweight, normal, overweight and obesity are listed on the slide.
Obesity has been shown to increase the likelihood of certain diseases and other health problems. They are:

- type 2 diabetes;
- high blood pressure;
- heart disease and strokes;
- certain types of cancer;
- sleep apnea;
- osteoarthritis;
- fatty liver disease;
- kidney disease; and
- pregnancy problems, such as high blood sugar during pregnancy, high blood pressure, and increased risk for cesarean delivery (C-section).

The link provided contains additional information about obesity risks. The link is also listed in the material section of this module.
Tobacco use is the single most preventable cause of disease, disability, and death in the United States. Each year, over 480,000 Americans die prematurely from smoking or exposure to secondhand smoke and another 14.5 million live with a serious illness caused by smoking. On average, smokers die 10 years earlier than non-smokers.

Despite these risks, 15.5% of all adults in the U.S. smoke cigarettes, pipes, cigars or use smokeless tobacco. The use of smokeless tobacco products such as chewing tobacco or snuff can be a gateway to smoking cigarettes.
The associated risks of smoking are numerous. Cigarette smoking is the leading preventable cause of death in the United States. Smokers are more likely than nonsmokers to develop:

- heart disease;
- stroke; and
- lung cancer.

Smoking can cause cancer almost anywhere in the body and harms nearly every organ in the body. Smoking may also cause heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease, or COPD, which includes emphysema and chronic bronchitis. Smoking increases risk for tuberculosis, certain eye diseases, and problems of the immune system, including rheumatoid arthritis. Smoking is a known cause of erectile dysfunction in males. It affects a person’s overall health.

The link provided gives additional information on the health risks of smoking. The link is also found in the material section of this module.
Congratulations!

You have completed Module 6 of DBHDS Support Coordination/Case Management online training. Please note that all of the web links provided in this Module are contained in the accompanying training materials. Please complete the assessment for Module 6 before proceeding to Module 7.

Thank you for your participation!