



**METROPOLITAN
HEALTH DISTRICT**

MONTHLY HIGHLIGHTS WOMEN'S HISTORY MONTH

March is Women's History Month in the United States. The commemoration began in 1981 as Women's History Week, and in 1987, Congress designated March as Women's History Month. While the contributions of women to American and Texas history are too numerous to account for in a little old monthly newsletter, this year, we focus on the contributions of Emma Tenayuca (1916-1999).

Born in San Antonio, Texas, in 1916, of both Native American and Mexican heritage, Tenayuca became a labor leader and staunch advocate of women's and workers rights. Tenayuca began her political involvement while still attending Brackenridge High School, when she joined a strike at the Finck Cigar Company.

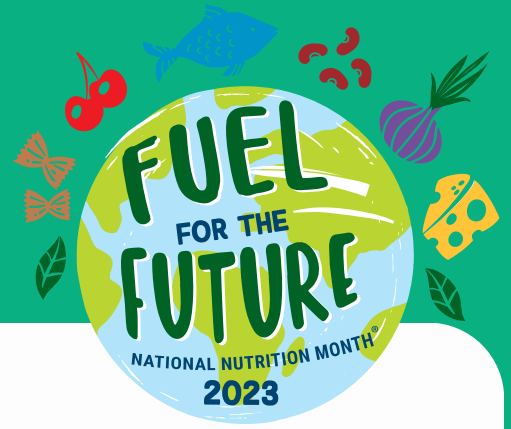
Throughout her career she partnered with other female activists, labor groups, and unions and organized women workers, building a coalition called the Workers Alliance. She focused on issues affecting Mexican Americans in San Antonio, leading protests and other forms of civil disobedience to bring awareness to the plight of Hispanics in the city. Best known for leading the 1938 Pecan Sheller's Strike, she brought attention to the low wages and poor working conditions of the mostly women workers. Her political ideation would eventually align her with the Communist Party, which she would later leave.

In recognition of the impacts of her activism, Tenayuca was inducted into the San Antonio Women's Hall of Fame in 1991. She died in San Antonio in 1999. (<https://www.nps.gov/people/emma-tenayuca.htm>)



**WOMEN'S
HISTORY
MONTH**

National Nutrition Month®



SCREEN AND INTERVENE

The Special Supplemental Nutrition Program for Women, Infants and Children, popularly known as WIC, offers access to healthy, nutritious foods including fresh produce to pregnant and breastfeeding women and families with children younger than 5. Since its inception in 1972, WIC has proved to be one of the nation's most successful and cost-effective nutrition intervention programs. Maternal WIC participation is associated with a lower risk of preterm birth and low birth weight infants, reduced infant mortality, and more healthful child diets. Yet fewer than half of families eligible for WIC are enrolled.

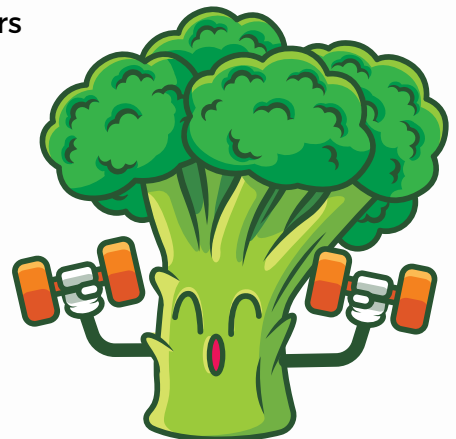
Connecting patients to WIC is an evidence-based strategy to address poor nutrition, poverty and food insecurity. As a health care provider, you are a trusted messenger, so your referral and education about WIC can help eligible families receive critical nutritional resources. The American Academy of Pediatrics and the Food Research & Action Center created "Screen and Intervene: A Toolkit for Pediatricians to Address Food Insecurity," accessible [here](#). To watch a related webinar, click [here](#).

PROPOSED USDA CHANGE

Currently, WIC participants are required to use their benefits in person and are unable to order foods online, a barrier made more apparent by the pandemic. Salud America is encouraging people to make comments in favor of a new USDA proposal to allow online shopping with WIC vouchers. You can submit comments before May 24 through Salud America [here](#).

FOOD INSECURITY IN OLDER PATIENTS

The Food Research & Action Center (FRAC) and AARP Foundation invite you to participate in a 15-minute [online survey](#) to learn about provider opportunities to address food insecurity among patients age 50 and over. Eligible participants are active health care providers (i.e., not retired) who currently provide care to patients aged 50 and over. Respondents have the opportunity to enter a drawing to win a \$100 Amazon gift card. The survey closes Mar. 13 and needs to be completed in one sitting. [Click here](#) to take the survey or visit bit.ly/frac-survey (case sensitive).



Eat Well, Feel Great!

SACRD.ORG

How do you point your patient to community resources like bereavement support, low-cost dental care or even their closest food pantry? The [San Antonio Community Resource Directory](#) (SACRD) is a web guide that started as a project of the City of San Antonio's Faith Based Initiative. It is now a freestanding non-profit that maintains a directory of more than 9,200 human services resources, searchable by zip code. Search results can be printed out to give to patients, or shared by email, text or QR code. At least once a year, SACRD speaks to someone at each listed organization to confirm and update their listing.

Two of the most popular features are a [mental health service portal](#), which provides recommendations based on zip code, diagnosis or condition, and desired service format, and a [rental housing finder](#) created in partnership with My City Is My Home.

To request an in-service for your staff and promotional cards, contact Executive Director Bill Neely at bill.neely@sacrd.org.

The screenshot shows the SACRD website interface. At the top left is the SACRD logo with the tagline "San Antonio Community Resource Directory". To the right of the logo is a search bar containing "78201" and a dropdown menu with options: "Español", "Places", "Partners", "What are we missing?", "About Us", "Donate", and "Login". Below the logo is a horizontal navigation bar with icons and labels for: Portals, Care, Education, Food, Goods, Health, Housing, Legal, Partner, Transit, and Work. A light blue banner below the navigation bar reads: "Are you seeking Mental Health Resources? Try the [SACRD Portal to Mental Healthcare Services](#)." Below the banner is a search section with the text "Ver esta página en español" and "Search near zip code". There is a search input field with "78201" entered, followed by "for" and another search input field containing "Search food, housing, medicine...". Below the search fields is a "Need help?" section with the text "We've identified 9,276 resources in the San Antonio area." and "Tell us where you are, and then click on one the categories above or type...". On the right side of the screenshot is a "Spotlight Program:" section titled "Portal to Mental Healthcare Services" with a share icon. Below the title is the text "by San Antonio Community Resource Directory (SACRD.org)". There is a "Share by..." dropdown menu with options: Email, Text, Print, and QR. Below the share menu is a list of items, including "The SACRD Portal to Mental Healthcare Services lists over 1 provide mental health services throughout Bexar County. By answering a few questions, a user can narrow down pro specialties and attributes that match their specific need. Ac allow users to look for programs based on language, age ra payment arrangements, and more." and "Free".

WORLD TB DAY — MARCH 24 —

March 24 is World TB Day, a global day to raise awareness about TB. On this date in 1882, Dr. Robert Koch announced his discovery of the mycobacterium tuberculosis bacteria.

Did you know that treatment can now be completed in as little as 3 months for TB infection, and 4 months for TB disease, thanks to research done in part right here in San Antonio? Check out this handy infographic on current [LTBI treatment regimens](#), and watch this CDC video in which a patient describes her experience with LTBI diagnosis and treatment. <https://youtu.be/2FAtSVCQM9s>

Despite huge advances in care and treatment, TB remains a leading cause of death around the world.

EDUCATIONAL OPPORTUNITIES

Wed. Mar. 15 – Join your Clinician Ambassadors and South Central AETC for the second session in our Virtual Lunch & Learn Series – Sexual Health in Primary Care: STI Treatment Guidelines. We will discuss the 2021 updates to the CDC Sexually Transmitted Infection Treatment Guidelines, and best practices for treating STIs in primary care settings. Register [here](#). Free CME, CNE, PharmD, and Social Work Credits available.

Wed. Mar. 15 - The San Antonio Food Bank will host its 8th annual nutrition summit. The goal of this year's summit is to bring to the table healthcare and education professionals to discuss food insecurity as a barrier to the health of vulnerable populations and as a determinant in the early onset of chronic diseases such as obesity, diabetes and hypertension. A light breakfast will be available, and parking is free. [Register here](#).

Fri. Mar. 24 – Join the Heartland National TB Center from 9 AM – 12:10 PM for [World TB Day: TB in Texas Webcast](#). Register for this free webcast [here](#).

The Road to Ending Stigma –The Office of the Assistant Secretary for Health and the Substance Abuse and Mental Health Services Administration (SAMHSA) introduce a 6-part webinar series addressing the unseen impact of stigma on substance use disorder treatment and recovery, as well as the life-saving role of harm reduction strategies and programs. Sessions on Mar. 15 and Mar. 29 will address trauma-informed care and perinatal patients, respectively. Register [here](#).

Virtual Conference on Preventing Disabilities in Children – The Texas Health and Human Services Commission (HHSC) is hosting free weekly webinars every Tuesday in March, from 10 AM – 12:30 PM, in recognition of National Developmental Disabilities Awareness Month. The webinars will focus on preventing childhood injuries and identifying disabilities early. Topics include connecting communities to build a support system, supporting children diagnosed with autism, water safety education, women's health, childhood injury prevention and the importance of newborn screenings. Register [here](#).

DISABILITYSA WORKSHOPS

Help break down the barriers that may inhibit people living with disabilities from visiting your pharmacy or clinic by increasing your knowledge about disability-friendly health care environments. Pharmacists, clinicians and nurses are all welcome to participate in the Vax-abilitySTRONG workshop presented by [DisABILITYsa](#) and its Vax-abilitySTRONG Vaccine Education and Outreach program. This 2.5-hour free workshop will offer up to 3.5 CEUs from Alamo Colleges. **For more information and future dates, visit the VaxabilitySTRONG page [here](#).** The next Provider workshop is scheduled for March 23.

INSTITUTE FOR TRAUMA-INFORMED CARE TRAINING OPPORTUNITIES AND EVENTS CALENDAR

[Institute for Trauma-Informed Care Training Calendar](#)



CDC courses that offer CE

The CDC Learning Connection offers public health and healthcare professionals additional trainings to help keep them informed. To access free, quality online trainings from CDC, other federal agencies, and federally funded partners, follow this link: [CDC Learning Connection](#).

The CDC has more learning opportunities when you create an account in [Training and Continuing Education Online \(TCEO\)](#).

VaxabilitySTRONG
COVID-19 Vaccination Information and Access

SA KIDS BREATHE



A Lesson in Correct, Consistent Asthma Device Technique for Resiliency

Repeated emphasis on proper use of medication and related devices can prove an effective strategy to mitigate asthma flare-ups. In the case of a 5-year-old SA Kids BREATHE participant who was referred by their PCP because he had round-the-clock respiratory distress, repeated urgent care visits and sleepless nights, a review of proper metered dose inhaler (MDI), mask and spacer techniques resulted in restful breathing, relieved caregivers, and quiet nights. Most importantly, this led to the child's asthma resiliency, his ability to weather an infection without also having an asthma exacerbation!

During the initial home visit, the assigned community health worker (CHW) categorized the child's asthma level as uncontrolled according to the medical history and recent symptoms. The child had an asthma control test (ACT) score of 12 out of 25, with 20 and above indicating well-controlled asthma. A prescribed single-agent controller medication used morning and night brought little relief, and the caregiver reported the child's nightly coughing serious enough to wake up other family members. Frequent symptoms and asthma attacks led to monthly urgent care visits.

Upon observation of MDI technique, the CHW saw the child taking 5 rapid, shallow breaths per dose administration and an inadequate mask seal. Education, including using the teach-back method with a placebo MDI and a discussion of the importance of proper mask seal, resulted in the child taking fewer and deeper breaths.

Upon return two weeks later for Home Visit 2 the caregiver expressed doubts about the benefits of continued use of the controller medication while also reporting a slight improvement in the child's coughing frequency and severity. Our CHW recorded a refill of the controller medication, and the dose counter confirmed the medication was being taken regularly. The CHW asked the child to demonstrate the MDI with spacer and mask technique, which was improved including good breathing and a tight seal of the face mask. The caregiver expressed a renewed motivation for continued controller medication use.

Four weeks later during Home Visit 3 the caregiver expressed frustration over her child's recent earache and fever and had concerns of the effectiveness of the controller medication given these symptoms. The CHW redirected the conversation back to the symptoms of asthma and discovered that the child was not having any nighttime cough and he slept undisturbed. There was not an urgent care visit for asthma between the second and third home visits which previously happened monthly.

The consistent use of controller medication with proper delivery technique allowed the child to maintain asthma control regardless of an upper airway infection. The caregiver expressed increased confidence in the child's asthma self-management techniques.

NEW DSHS BLOOD LEAD REFERENCE VALUE

As of Jan. 1, the Texas Department of State Health Services (DSHS) now uses a 3.5 mg/dL blood lead reference value (BLRV) to identify children who should receive medical and public health follow-up. The full health advisory can viewed here: [HEALTH ADVISORY: DSHS adopts new blood lead reference value of 3.5 ug/dL | Texas DSHS](#)

EXTENSIVELY DRUG-RESISTANT (XDR) SHIGELLA

The CDC is monitoring an increase in extensively drug-resistant (XDR) Shigella infections (shigellosis). In 2022, about 5% of reported Shigella infections were caused by XDR strains, compared with 0% in 2015. Historically, shigellosis has predominantly affected young children (age 1–4 years) in the United States. More recently, CDC has observed an increase in antimicrobial-resistant Shigella infections among adult populations, especially:

- Gay, bisexual, and other men who have sex with men (MSM)
- People experiencing homelessness
- International travelers
- People living with HIV

Read the full health advisory [here](#)

MPOX UPDATE

Mpox Vaccines

The CDC's Advisory Committee on Immunization Practices voted to recommended the 2-dose JYNNEOS vaccine series for high-risk people ages 18 years and up during an mpox outbreak. This recommendation has been adopted by the CDC Director and is now official.

Mpox vaccines continue to be available to patients at the Metro Health Clinic at 512 Highland Blvd, Ste 150. Appointments are no longer required. Immunization hours are 8:30 – 11:30 a.m. Monday-Friday, as well as 1:30 p.m. to 6:30 p.m. on Wednesdays.

STOMP Trial

Have a patient looking for Mpox treatment with TPOXX? Patients can readily access it through the STOMP trial at UT Health San Antonio. STOMP is a NIAID-funded clinical trial to evaluate the effectiveness of the antiviral tecovirimat, also called TPOXX, for the treatment of human mpox infection. People can self-enroll by visiting stomptpoxx.org. For more information, providers can visit clinicaltrials.gov.

Contact information:

University of Texas San Antonio Clinical Research Site
7703 Floyd Curl, Dr, San Antonio, TX 78229
210-567-4823

WHAT DO I NEED TO KNOW? TRANSITIONING OUT OF CMS WAIVERS AND FLEXIBILITIES

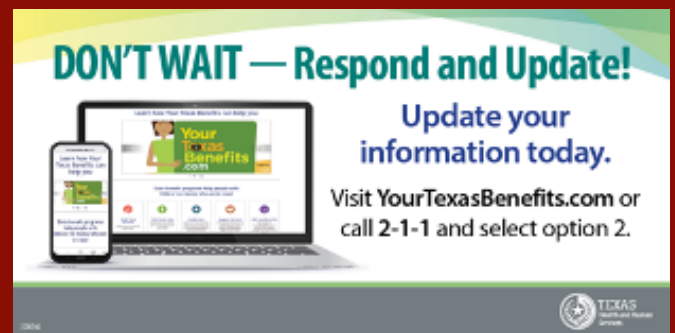
The Center for Medicare & Medicaid Services (CMS) issued a [fact sheet](#) on Feb. 27 with details about the transition forward from the COVID-19 Public Health Emergency. In addition, CMS updated its provider-specific fact sheets to explain which waivers and flexibilities already ended, were made permanent, or will end at the end of the PHE. For example:

- CMS will continue to pay approximately \$40 per dose for administering COVID-19 vaccines in most outpatient settings for Medicare beneficiaries—and an additional \$36 for administration in the home for eligible patients—through the end of the calendar year.
- Medicare coverage for 8 free at-home tests per month will end May 11, 2023.
- Under the Consolidated Appropriations Act of 2023, the Acute Hospital Care at Home initiative was extended through December 31, 2024.

A physician-specific fact sheet is [here](#), and all fact sheets can be found [here](#).

MEDICAID UNWINDING REMINDER

The clock is ticking away to the end of the continuous Medicaid coverage provided during the COVID-19 Public Health Emergency. Help your patients prepare today. How can you help?



1. Look for the notice saying “Action Required” in a yellow envelope from HHSC and respond quickly when they get it.
2. Update their information as soon as possible, especially if their contact information has changed. They can do this by logging into their account at [YourTexasBenefits.com](#) or through the Your Texas Benefits mobile app.
3. If they don’t have an account, they can create one on the website or mobile app. Or they can call 2-1-1 and choose option 2 to update their information.

(Source: <https://www.hhs.texas.gov/sites/default/files/documents/provider-info-sheet.pdf>)

There will be a special enrollment period on the Affordable Care Act marketplace from Mar. 31, 2023, to Jul. 31, 2024, for those who lose their Medicaid coverage due to the public health emergency unwinding. Applicants must be eligible for ACA marketplace coverage and must have lost their Medicaid or Children’s Health Insurance Program coverage within the last 60 days. In San Antonio, people can contact [EnrollSA](#) for free enrollment assistance.

COVID CORNER

NURSING STAFF AND RESIDENT VACCINATION RATES

Did you know that you can easily look up staff and resident vaccination rates at specific nursing homes? Well, you can! You can find the information here: data.cms.gov/covid-19

IMMUNIZE.ORG CLINIC SUPPORT TOOLS

[Immunize.org](https://immunize.org) expanded its job aid, [Checklist of Current Versions of U.S. COVID-19 Vaccination Guidance and Clinic Support Tools](#), to help you keep up with changes to COVID-19 vaccine guidance and resources. This expanded version now includes links to:

- Translations of COVID vaccine fact sheets for recipients and caregivers
- Expiration-date tools, storage-temperature logs, and guidance for transporting vaccine to off-site locations

[Immunize.org](https://immunize.org) updates this checklist at least monthly, prominently indicating when it was last updated at the top of the page.

LISTENING TO LONG COVID: ECHO

Participate in this unique telementoring series focused on management strategies for providers caring for those suffering with Post-Acute Sequelae of COVID-19 (PASC) or Long COVID. The series will include presentations from experts, stories shared by those affected, and peer discussion. The next session is March 24 from 12 PM - 1 PM and is titled Indigenous Approaches to Healing. Click [here](#) for more information, recordings of past sessions and a calendar of upcoming sessions. View the series flyer [here](#). Register for the series [here](#).



FREE COVID TESTING

People without insurance who have symptoms or were exposed can use the free test locator [here](#).

People with commercial health insurance, Medicare and Medicaid can still order 8 free rapid tests each month through May 11.

As of December 2022, each household could claim four more free rapid tests at covid.gov/tests.

RESOURCES FOR DISCUSSING COVID-19 TREATMENTS

COVID-19 Patient FAQs

[Frequently asked questions from patients about COVID treatments](#)

COVID-19 Provider Talking Points

[Talking points about COVID and treatments for health care providers](#)

ASK YOUR CLINICIAN AMBASSADOR – QUESTIONS FROM THE FIELD

This month's question isn't an actual question from a clinician in the field, but one that I recently came across in my personal life. I recently had two family members in different households diagnosed with COVID-19 despite being fully up to date with their vaccines. Neither of them was offered treatment during their visits, even though both had risk for severe infection, and each had to request the medication themselves. Available data tells us that even though widely available, antiviral medication for the treatment of COVID-19 is still under-prescribed, so this month's question comes from the FDA's own Updates on Paxlovid for [COVID Providers](#).

Q: Does the EUA require a positive result from a direct SARS-CoV-2 viral test prior to prescribing Paxlovid to a patient who is at high risk for severe COVID-19?

A: No. The Agency removed the requirement for positive test results effective February 1, 2023.

Q: How should health care providers assess a patient for "high risk for progression to severe COVID-19"?

A: Patients in the authorized population with a risk factor for progression to severe COVID-19 are eligible for Paxlovid under the EUA even if they are fully vaccinated. Patients do not have to have more than one risk factor to be considered "high risk".

Have a burning public health question? Ask a clinician ambassador!
Email lucinda.zeinelabdin2@sanantonio.gov or sign up for an [academic detailing session!](#)

YOUR CLINICIAN AMBASSADOR

Schedule an appointment
with us today!



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