Service Learning Project for Gramercy Park and the Stein Senior Center

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Abstract

The Stein Senior Center serves the elderly community of the Gramercy Park section of New York City. The clinical portion of the Community Health Nursing course from New York City College of Technology gave students access to assist this group of people through the means of a service learning project. Based upon the didactic learning of the lecture component of the course, in combination with research and clinical experiences, the students were able to fulfill a need that the community would otherwise not have met. Aside from weekly blood pressure readings, assistance given to serve lunch, and connecting with members, we incorporated various presentations. During the spring of 2016, we engaged senior citizens in active mental and physical activities in keeping with Stein Senior Center’s mission of promoting wellness and good health.

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**Project Details**

**Project Title**

Service Learning Project for Gramercy Park and the Stein Senior Center

**Names and Responsibilities of the Group Members**

Liza Bauzo-Nieves (Team Leader), Jungmin Choi (Recorder)**.**

**Other Team Members**

Group #1 (Boogie Trivia) Angelica Cilia and Hamatee Manick-Singh. Group #2 (When Safety Counts) Viktoriya Gorelik and Gayann Messam.Group #3 (Healthy Living Nutrition) Marina Morgulets and Estefania Urena. Group #4 (Blast from the Past) Shaiina Marston and Catherine Sunburnt.

**Dates and Times of Data Collection**

Dates and times of data collection varied, from February 3, 2016 – May 18, 2016. Project members engaged in data collection alone, in pairs, and in groups. All data was collected during as well as outside of clinical time. For example, some site-specific demographic and other information for the service learning project was gathered during clinical time via windshield survey and personal communication, whereas general organizational, city and nation-wide demographic information was gathered independently outside of clinical time. Students were given permission by the Stein Senior Center to work collaboratively during clinical time to gather and record data.

Group Dates and Times of Presentations: Group #1 (Boogie Trivia) Angelica Cilia and Hamatee Manick-Singh (March 16, 2016 at 10:45am). Group #2 (When Safety Counts) Viktoriya Gorelik and Gayann Messam (April 6, 2016 at 10:45am).Group #3 (Healthy Living Nutrition) Marina Morgulets and Estefania Urena (April 20, 2016 at 10:45am). Group #4 (Blast from the Past) Shaiina Marston and Catherine Sunburnt (May 11, 2016 at 10:45am).

All clinical sessions were held from 9 am to approximately 12:30 pm. Clinical dates follow included February 3, 2016; February 10, 2016; February 17, 2016; February 24, 2016; March 2, 2016; March 9, 2016; March 16, 2016; April 6, 2016; April 13, 2016; April 20, 2016; May 4, 2016; and May 11, 2016. The last clinical day was May 18, 2016, where the project was presented to the staff at the Stein Senior Center.

**Sources of Information Used in All Parts of the Assessment**

While canvassing the community, all team members became sources of information through photos and notes taken, in regards to visual assessments (windshield survey). The members of the Stein Senior Center, including the Deputy Director (Jane Barry), Associate Deputy Director (Bob Doxsey), and general members were essential sources to the assessment. Organizational websites such as New York City (NYC) Department of Health and Mental Hygiene, the United States Census Bureau 2010, Community Board 6 Manhattan, Bellevue Hospital Center, Compass, and nyc.gov were also used.

**Description of the Community Assessment**

**Boundaries of the Community**

The Stein Senior Center is located in Gramercy (Gramercy Park), although our assessment includes geographic data from Gramercy/Murray Hill as per the zip code. According to Compass (2012-2016), Gramercy Park’s borders are East 14th Street to the south, East River to the east, East 23rd Street to the north, and Park Avenue South to the west. All data was collected during as well as outside of clinical time. For example, some site-specific demographic and other information for the service learning project was gathered during clinical time via window survey and personal communication, whereas general organizational, city and nation-wide demographic information was gathered independently outside of clinical time.

**Summary of the Community as Seen Through a Windshield**

Gramercy Park is a small geographic district located in the heart of New York City. According to Olson, Van Wye, Kerker, Thorpe, & Frieden (2006), residents typically range in age from 18-24 years at 10%, 25-44 years at 44%, 45-64 years at 25%, and 65+ years at 14%. This community is largely populated with Caucasian Americans, the other residents include some minority races such as Spanish, Asian, African American, and others. Community members are well dressed, normally seen in business attire, and usually “on the go.”

Gramercy Park has a multitude of hospitals, restaurants, supermarkets, delis, and pharmacies. Some of New York City’s top hospitals, such as New York University (NYU) and Beth Israel Medical Center, are located in this area. Gramercy Park is also considered home to many other hospitals such as the Bellevue Hospital Center, the Manhattan Campus of the Veteran’s Administration (VA) NY Harbor Healthcare System, and a large group of urgent care centers. Supermarkets, delis, and fresh fruit and vegetable stands are plentiful, stationed at just about every block corner. However, a windshield survey by group members found that consumables appear to be more expensive in the Gramercy Park community as opposed to other geographic areas throughout New York City. Community members also have access to an abundance of bars and lounges located within walking distance.

Gramercy Park is known for its beautiful brownstones. Many residents are attracted to this area due to its manicured buildings. Currently, more buildings are being added, while older buildings are being renovated to suit its growing population. In fact, new construction that consists of modern high-rise buildings are increasingly seen throughout the area, adding to a high density of buildings as residences versus smaller brownstones as residences.There are a few small children centers, parks, schools, colleges and fitness centers neatly structured between these buildings. For local residents and visitors looking to commute by train, the nearest subway lines that run through this area are the: 4, 5, and 6, N, Q, R and L. For the people who prefer the bus route, the M23, M13, M2, M3, M4 M9, and M15 are available. This community is also equipped with yellow taxis for members on the go and crossing guards for those who enjoy walking through the neighborhood. Engine Ladder 7 is a small fire station located on East 13th Street, and a police station is located on East 14th Street for public safety.

**Areas of Assessment**

**Community-Based Needs**

**Patterns of morbidity and mortality.** According to the New York City Department of

Health and Mental Hygiene (NYC DOHMH) (2016), “The death rate in Gramercy and Murray Hill has decreased by more than 15% in the past 10 years, mirroring the rate drop in New York City (NYC) overall, and has remained consistently lower than both the Manhattan and NYC overall rates. In 2003-2004, the average annual death rate in Gramercy and Murray Hill was more than 20% lower than in Manhattan and New York City overall (532/100,000 vs. 697/100,000 in Manhattan and 718/100,000 in NYC)” (New York City Department of Health and Mental Hygiene, 2016). The NYC DOHMH (2016), also mentions that “the primary cause of premature deaths of those who died before or at age 75 in Gramercy and Murray Hill is cancer (28%). Other causes of death include heart disease (15%), Human Immunodeficiency Virus (HIV) (12%), drug-related issues (10%), suicide (6%), and others (29%) which include: accidents (2%), pneumonia and influenza (2%), certain perinatal conditions (2%), diseases of the nervous system (2%), diabetes (2%), and others (19%)” (New York City Department of Health and Mental Hygiene, 2016, p. 1).

**Demographics.** The Stein Senior Center is located in the heart of Gramercy. According

to the United States Census Bureau, the population of residents living in the zip code 10010 in Gramercy, consists of an estimated 31,834 people. The male population makes up an estimated 47.1% and the female population makes up an estimated 52.9% of the residence. The estimated median age for the year 2014 was 35.7 years old. Seniors over 65 years old comprised of 3,680 people. Males over 65 equal to 39.4%, while females equal to 60.6% of the population. The area is mostly comprised of an estimated total of one race averaging 97.4% and two or more races averaging 2.6% of the total population. These races include: Caucasian at 72.4%, African American at 6.5%, Asian at 15.3%, American Indian and Alaskan Natives at 0.5%, and others at 2.7%. For two or more races, the participants include: Caucasian and African-American at 0.2%, Caucasian, American Indian and Alaska Natives at 0.2%, Caucasian, and Asian at 1.7%, and African American, American Indian and Alaska Natives at 0.3%. Of the overall population, at Gramercy, Hispanic or Latino of any race was 10.9% of the total population (United States Census Bureau, 2010).

The community of Gramercy in zip code 10010 has a recorded educational attainment rate, according to the United States Census Bureau, of 96.3%. The statistics show that 93.2% of older adults, age 65 years and over, graduated from high school or a higher educational institution. Moreover, 54.9% of seniors, over the age of 65 and older, went on to attain a bachelor’s degree or higher (United States Census Bureau, 2010). The younger population of this community also has a high percentage of graduation rates and continuance of their educational goals. According to the United States Census Bureau, members of zip code 10010, ages 18 to 24, completed a bachelor’s degree or higher at an estimated 39.7%. Of members, age 25 to 34, 91.3% completed a bachelor’s degree or higher, members age 35 to 44 were at a rate of 78.8%, and member’s ages 45 to 64 were estimated to have 66.3% of these degrees completed (United States Census Bureau, 2010).

The Community Board Six website lists multiple and varying houses of worship in and around the Gramercy Park area, which signifies the community’s diverse religious background. For example, in the Gramercy area, there is The Christian Science Church on 223 East 25th Street, The Brotherhood Synagogue on 28 Gramercy Park South, The Chabad of Gramercy Park on 324 East 20th Street, and Cavalry - St. George’s on 61 Gramercy Park North reflect the various denominational houses of worship (Community Board Six Manhattan, 2013).

**Environmental concerns.** An environmental concern within the Gramercy area is air

pollution. As a result of ongoing construction, abatement and demolition of buildings and city streets, there has been a noticeable decrease in New York City’s air quality. Air pollutants such as fine particle matter and gaseous waste byproducts harm our environment and pose great safety threats to the health of New York residents. According to a research study conducted by Kheirbek, Wheeler, Walters, Pezeshki, Kass and New York City Department of Health and Mental Hygiene (2011), fine particle matter (PM2.5), sulfur dioxide, nickel, nitrogen oxide, and ozone have caused avoidable respiratory and cardiac related morbidity and death to New York City residents . It has been estimated that these air pollutants combined have contributed to more than 3,400 needless deaths, 2,800 hospital admissions and 10,000 emergency room visits for asthma related complications in children and adults (Kheirbek, 2011, p.3) . While great efforts have been put in place to reduce air pollution and improve air quality such as Plan NYC, a plan to achieve the cleanest air quality of any U.S city by 2030, more changes still have to be made.

Another environmental concern is the amount of clutter, garbage and debris that line the streets of Gramercy. These things mentioned do not only take away from the aesthetics of this area, it also imposes a great risk for falls and other injuries for the people who reside here. There are current initiatives in place to combat the issues with New York City’s sanitation system (DSNY). One proposal implemented in 2006, called the Solid Waste Management Plan, has worked towards minimizing the rate of air pollution and loud noise associated with our old truck based system when collecting and disposing of recyclables, residential, and commercial waste. Since initiated, this plan has allowed for the use of barge and railroad systems as an alternative method to decrease the number of trips and miles affiliated with trucks traveling to neighboring state’s disposal grounds. Recently, other actions have been taken as well, such as organic collection, sorting, and processing sites throughout New York City. Although work still needs to be done, these methods are cost effective, eco-friendly, and reliable substitutions for managing waste for the next 20 years (nyc.gov, 2006).

**Public services.** Public services such as police, fire department, and transportation are all

readily available and easily accessible in the neighborhood of Gramercy Park. The 13th precinct is located at 230 East 21st Street and it serves a population of 93,640. While observing and assessing the neighborhood, police cars and trucks were noted. Police officers patrol the streets, providing a safe environment for the elderly and the rest of the community. According to Weiss (2009-2011), the neighborhood’s grand larceny rate, 1,481 in 2010, or 158 incidents per 10, 000 residents, ranks 66th place. Overall, crime rates are trending down with a 70% drop from 1993 to 2010 and an 11% dip in 2010 alone. Burglaries in this district are higher than average, though that too is trending downward, with 252 incidents reported in 2010 compared with 354 in 2009, a 29% drop. The murder rate rose from 1 in 2009 to 3 in 2010. Violent sexual attacks have not abated much compared to the decreasing rates of other crimes. Rapes increased from 9 to 13 in 2010 and rose 30% overall from 2001 to 2010. Misdemeanor sex crimes, however, went down by 26% in 2010 from 2009.

The fire department of Gramercy Park are Fire House Engine 14 at 14 East 18th Street and Engine 5 at 340 East 14th Street NY, NY 10003. There is a variety of transportation available for the elderly and the rest of the community. While observing the neighborhood, access –a- ride vans were noted, taxis are everywhere, there were multiple busses, and the 4/5/6/L/N/Q/R trains are nearby.

**Aesthetics**. The aesthetics of Gramercy Park and its surroundings are exquisite. The

neighborhood is very clean, the streets are litter free for the most part, and trash receptacles were noted on most street corners. The Gramercy Park itself is located between East 20th and East 21st Streets and Park Ave South and Third Avenue. There is a statue of Edwin Booth in the center of the park. The Gramercy Park Hotel is located across the street and it is a great place to stay in and enjoy the beautiful views of the park and the remainder of the Gramercy area.

There are several places to see and things to do in Gramercy Park. The National Arts Club is located at 15 Gramercy Park South. Their mission is to foster and promote public interest in the arts and educate the American people in the fine arts. The National Arts Club was founded in 1998 by author and poet Charles De Kay, the literary and art critic for The New York Times. He, together with a group of distinguished artists and patrons, conceived of a gathering place to welcome artists of all genres, as well as, art lovers and patrons. At the turn of the 20th century, American artists began to look to the United States rather than to Europe for inspiration, as the American art world was alive with energy. The newly formed National Arts Club took residence in a mansion on 34th Street. American art had a new home (nationalartsclub.org, 2016).

Community pride is demonstrated in Gramercy Park in several different ways. There are several businesses that contain the word “Gramercy” in their name. There are several attractions for different age groups such as bars, different kinds of fast food restaurants, parks, and the Stein Senior Center, which caters to the elderly community.

**Health-related facilities**. Aside from clinics associated with the various hospitals in

the area, there are several health related facilities in reach located in the Gramercy Park area, including urgent care centers that are cropping up throughout the city. The Northwell Health Go Health Urgent Care Center is located at 176 3rd Avenue, where one can get urgent care, laboratory services, preventative medicine, and x-ray diagnostic services. Gramercy MRI and Diagnostic Radiology, PC is located at 380 2nd Avenue. This is a medical diagnostic imaging center where they offer MRI, CT scan and x-ray services. Gramercy Place Health Club is located at 280 Park Avenue South, where gym services are offered to maintain a healthy life style.

**Housing.** Some of the apartments off of the park don’t have prewar character but allow

you to live in Gramercy for less than a classic brownstone. Closer to Murray Hill are skyscraper apartment buildings with amenities like doormen, in building laundry, dry cleaning, and common rooftops. In addition, several of these new buildings have health clubs, swimming pools, parking garages, and are even pet friendly. As mentioned before, the stunning Gramercy Park Hotel is located right by Gramercy Park. The hotel has a beautifully lit roof during the summers, and downstairs, New York socialites drink champagne at the Rose Bar, straight from society events across the park at the National Arts Club. A 1 bedroom, 1 bathroom in Gramercy Park goes for $2, 800 – $3, 800 a month for rent (Zillow, 2016).

**Care Management Techniques**

Care management is, as per Holzemer & Kleinberg (2014), “Systems of care management existing to meet community-based needs within the possibilities and realities of resource allocation.” This means that it is a system to allocate resources and set up programs for resource distribution throughout the community based on its needs. There are five variables that affect care management techniques. These variables are the study of the mix of client problems, expectations of the public for care, competence of healthcare professionals, accepted standards of care, and use of interdisciplinary plans of care.

Mix of client problems may vary according to location. It may also depend on the success of resolving existing problems, and how effectively new problems can be identified. People in the community will need a varying amount of care, depending on their needs. Some patients may need total care while others may only need minimal care. When observing the seniors of the Stein Senior Center, there was a mix of client problems. Some clients at the location needed wheelchairs to move around, while others were able to ambulate with the assistance of a walker or cane, and some were fully ambulatory with no assistance needed whatsoever. This mix of client problems led us, as a group, to developing our exercise program in a way that would cater to all of their needs, therefore not leaving anyone feeling ostracized. Another group did a presentation on safety, which was also catered to seniors of all groups but especially those of limited and assisted mobility. For example, teaching them to keep their homes free of clutter to prevent falls. Another group had a game of Family Feud, renamed Community Feud, with questions and answers that taught the seniors about proper nutrition to manage medical problems that were most prevalent in the Stein Senior Center. Speaking to the seniors while doing assessment, we found that diabetes and hypertension were very common within this community. The game of Community Feud focused on questions that had to do with these two diseases. The final group presented a game of Jeopardy called “Blast from the Past.” This game was meant as something fun for seniors of all ages and activity levels. It simply asked questions in regards to favorite musicians and bands, to exercise mental recollection. This game was designed so that all seniors can be involved and lead to a happy, nostalgic feeling when speaking of their past. It also included dancing, music, and photographs.

Expectations of care, from the public, is a desire for healthcare services by the public and the services they expect to receive. This varies throughout the community, as some clients may have unrealistic expectations of the care they should receive and therefore, feel as if care is substandard when their expectations are not met. An example would be a client who expects a special treatment or service to be available everywhere and is disheartened when they are unable to receive this treatment at their local facility. In regards to the Stein Senior Center, the expectation of care for the public at this location was realistic for most clients. The seniors expected to come to the center and receive a low cost nutritious meal, participate in exercise activities, and socialize with their peers. All seniors were given this expectation. There were the few seniors who requested additional food and snacks, and were unable to receive these as the facility caters for a certain amount of clients and therefore cannot give out additional food until all clients are fed.

Competence of healthcare professionals is the responsibility of the healthcare provider and is a necessary public mandate. The providers, including registered nurses, need to be competent in all aspects of care. This includes not only the skills and knowledge of medical care but also assisting a client with financial reimbursement, and teaching the latest technical skills. This is seen at the Stein Senior Center in several ways. Clients received a healthy low cost meal. This helped with not only their diet but also financially, as many seniors in this community have a very tight budget. Also, while assessing clients, some were found to be noncompliant with their medications and were educated on the importance of taking their prescribed medications as directed. The clients assessed with any abnormalities were referred to continued medical care, such as EMS for transport to the hospital. The senior center also provided exercise activities to promote physical activity and increase mobility, therefore reducing risk of injury. Music is also played by the center to promote emotional well-being. Finally, books and reading clubs are provided, along with other peer activities, to help promote mental wellness. Overall, the healthcare providers at this location are registered nurses (RNs) who are enrolled in New York City College of Technology (City Tech), whom are very competent and provide excellent care for this community. If it were not for the City Tech RNs and other nursing students from different universities/colleges that use the Stein Senior Center for clinical experiences, nurses would not be present.

Accepted standards of care is a set standard of care for nursing professionals that requires the input of both, professionals and the people they serve. These set guidelines are the standard for community based care and allows the nursing providers to share their invaluable input. At the Stein Senior Center, the concerns of the seniors were met by the staff. Even a simple exercise such as dancing; when the seniors requested an additional song, the workers met their request. Another standard of care was meet by myself and the other nursing students by assessing all seniors using the same approach and looking for the same common diseases associated with this age group. An example is speaking slightly louder and slower to accommodate those with hearing impairment. All seniors had their blood pressure and heart rate assessed as a standard approach. This is an accepted standard of care as the seniors requested and expected vital signs to be performed.

Use of interdisciplinary plans of care, also known as action plans, are plans that incorporate different levels and disciplines, and forms a care plan setting up expectations for the patient outcome or response to interventions. These plans are utilized to fit the more common response to interventions and move the patient to a lesser level of care. In the case of the Stein Senior Center, there were high instances of medication noncompliance. An interdisciplinary plan was formulated: teaching and educating patients on proper usage and the importance of medication compliance along with the risks of not taking them. This plan set expectations of increasing medication compliance and had expectations that on the next survey, the instance of compliance will have improved.

**Influences on Resource Allocation Decisions**

The Stein Senior Center is partially funded by the New York City of Department of Aging at an amount of $700,000 annually (personal communication, J. Barry, May 11, 2016). It is also funded by private and anonymous donors. When the members enter, they sign in, take a number, and are asked for a suggested donation of two dollars. Every meal offered is pre-made by a dietitian. If you are not a member or under sixty years old, you are required to pay five dollars for a meal. The number card shows that they have registered their name, and when lunch is served, the workers collects the number card to ensure that they only receive one meal. The Stein Senior Center holds an annual budget meeting during the first week of June.

**Application: Diagnostic Community Statement**

**Overall Assessment of Community**

Gramercy Park, known for its rich cultural history in arts and theater, located in the borough of Manhattan, is bordered by East 14th Street to the south, First Avenue to the east, East 23rd Street to the north, and Park Avenue South to the west. The community is surrounded by neighborhoods such as Murray Hill, the Flatiron District, the East Village, Stuyvesant Town, Peter Cooper Village, and Kips Bay. Gramercy is a part of Community Board Six of Manhattan (Community Board Six Manhattan, 2013). According to a 2013 Community Health Needs Assessment conducted by the Bellevue Hospital Center, approximately 864 people from the zip code area of 10010 used their facility on an outpatient basis. The Bellevue Hospital study also shows health disparities reported from the New York City Department of Health. The data from the study reveals that Gramercy Park/Murray Hill residents have a 4.2% rate of diabetes as compared to New York City’s rate of 10.5%. The rate of obesity in Gramercy is at 11.2% in comparison to New York City’s rate of 23.7%. Elevated cholesterol rate is at 34.8% in comparison to 30.6% in NYC. The rates of hypertension, asthma, and tobacco use in the Gramercy/Murray Hill area are as follows: 20.3%, 10.6%, and 12.1%. NYC however, holds higher rates at 28.9% for hypertension, 11.9% for asthma, and 12.1% for current tobacco smokers. Binge drinking episodes (past 30 days) however, stand at a rate of 29.8% in Gramercy as compared to 17.9% in NYC (Bellevue Hospital Center, 2013).

**Diagnostic Statement**

During the time spent in the Stein Senior Center, one of the biggest concerns for many of its members was nutrition. Many members have diabetes, heart or kidney problems. Of these categories, nutrition has a tremendous impact on health of an individual. Food containing salt can be a major problem for the heart and the kidneys. One of the members of the Stein Senior Center told me that she loves drinking coffee. When asked how much she drinks in the morning, she replied, “three cups of coffee.” When assessed, her blood pressure was around 150/90 mmHg. I asked her about her medical history and she told me that she had heart problems in the past but coffee was the only way to get her moving. There are alternatives for coffee. Education and assessment are crucial in order to identify and assist with preventing complications.

**Planning and Implementation**

**Goals of Project**

The main goals of this service learning project are to promote preventative care for the

elderly, the importance of exercise, healthy nutrition, and the enjoyment of life.

**Date, Site, Address**

The project commenced on February 3rd, 2016 and ended on May 18, 2016. This project

was conducted at the Stein Senior Center located at 204 East 23rd Street, NY, NY 10001. The first presentation was on March 16, 2016 that consisted of “Boogie Trivia.”The second presentation was on April 6, 2016 “Safety and Fall Prevention.”The third presentation was on April 20, “Family Feud.” The forth presentation was on May 11, 2016 “Blast from the Past.”

**Community Participants**

Approximately 50 seniors attended our teaching sessions held in the lunch room of Stein

Senior Center each time. The staff members of the Stein Senior Center also participated in the execution of these programs. Dr. Aida Egues from the nursing department of CUNY New York City College of Technology participated as well.

**Community Organizations**

**Community organizations and assistance provided.** Let us, as a team, express a special

thank you to the following community organizations whose help and priceless input made our projects at Stein Senior Center more interesting, enjoyable and most importantly educating. McDonald’s provided us with free apple slices and cuties for the seniors who participated in our exercise education program. Vitamin Shoppe provided us with samples of vitamins and novelty bags which we used as a reward for seniors who actively participated in our exercise and nutrition projects. Walgreens/Duane Reade provided us with free pill boxes and water bottles to be given out to the seniors, and the pharmacist volunteered to educate the seniors on medication safety during our “Blast from the Past” project. Friendship Grocery provided us with free oranges that we handed out to actively participating seniors for our safety presentation. Thank you to Stuyvesant Town and Peter Cooper Village for helping us advertise our educational projects by placing our flyers in the buildings’ hallways. A special thank you to the New York State Chaplain Task Force for working with the American Red Cross to volunteer your time to go to the houses of seniors and install free, state of the art, smoke alarms. The information for this program was provided to the members of the Stein Senior Center. All community organizations are greatly appreciated for volunteering your time and resources to help us educate and entertain the seniors, and make their day a little brighter.

One essential invaluable player to the success of all of our presentations was Mr. Angel Burgos. Thank you for your ongoing efforts to ensure that the equipment for all programs was set up properly, for allowing us to assist with serving meals, and for helping us to get the crowd to exercise and enjoy their time with us. It is because of him and his staff that the nutritional needs of these seniors are regularly met. Also, thank you to Ms. LaToya Fowler for assisting us with all of the printing and copy issues.

**Implementation**

**How project was implemented/conducted.** The implementation of the project started by

designating a group leader and a recorder. We then distributed different sections of the service learning project amongst the group members. With responsibilities divided each group member had their own aspect of the project to focus on. As a team, we set out to assess the community. As we walked around the neighborhood the Stein Senior Center is set in, we were able to observe the demographics, housing, eateries, shops, medical offices, recreational centers, parks, etc. The neighborhood of Gramercy Park may imply the inhabitance of wealthy residents but it does not accurately represent the senior citizens of the same neighborhood. This further emphasizes the importance of a senior center in such a neighborhood providing varied resources to seniors who are being pushed out due to rising costs.

As a group we interacted with the seniors of the Stein Senior Center to assess topics they had interest in and would like to be discussed and presented. Working in pairs with the chosen topics of physical activity, safety, and nutrition we created games and projects that would creatively showcase each of our topics to be presented every few weeks.

**Publicity attained/acquired for event coverage.** Each pair of group members was given

the task to create flyers to represent their project with a set date and time to attend. The flyers were distributed to the seniors a week prior to the actual activity to hopefully bring a crowd. Our activities were also published in the Stein Senior Center’s monthly newsletter under their “activities” and “special programs” which can also be found online. Also by visiting their website at [www.steinseniorcenter.org](http://www.steinseniorcenter.org) under the tab “news + resources” within “Calendar of Events,” nursing presentations are scheduled in their online calendar with the topic, time, and location of the presentation.

**Activities engaged/carried out/presented.** Every week, our group members provided

blood pressure readings and served lunch to the seniors. The screening of the seniors BPs is significant because it evaluates dangerously high or low blood pressures that may have been easily overlooked but in need of medical attention.

Our group had multiple activities scheduled to present on a weekly basis with specific dates and times. Each topic having a different theme and game would also provide a great way to engage the audience but also provide teaching. Each activity had a pre and posttest which would be able to assess the seniors preexisting knowledge as well as what they learned from the presentation. This helps us as nurses to recognize and target any additional need for information the seniors may have.

On March 23, 2016 the project “Boogie Trivia” focused on physical activity where seniors, based on the spinning of a wheel, were asked questions based on exercise or were asked to perform an exercise activity. On April 6, 2016 “When Safety Counts” was presented, which addressed teaching about fire safety, fall prevention, and heat stroke. On April 20, 2016 we hosted “Healthy Living Nutrition” a family feud style game based on nutrition which provided teaching on foods that contributed to hypertension and high cholesterol, and foods that helped fight disease, build healthy bones, lower cholesterol, and treat hypoglycemia. On May 10, 2016, “Blast from the Past” addressed mental health and happiness. With the assistance from Walgreens pharmacy, medication safety was also taught.

Our team leader, armed with a letter from the Stein Senior Center, went out to the community to stores like GNC and McDonald’s to acquire free foods and supplies like fruits, health foods, bags and towels, to be offered to the seniors as prizes for participating in our activities.

**Means of advertisement**. The means of advertisement were generally in flyer format. At

the Stein Senior Center, we posted the flyers behind the front desk and on the bulletin board. The week prior to each presentation, flyers were left on the lunch tables to remind the seniors. Flyers were also posted in Stuyvesant Town and Peter Cooper Village.

**Cost of Project**

**All costs encountered for project.** $8.63- Art supplies to create spinning wheel

$8.76-Pens for seniors to fill out pre and post-test *Total Expenses- $17.39*

All other items were donated. We typed a letter with the Stein Senior Center letterhead requesting any donations for our seniors and personally visited several locations. Vitamin Shoppe donated towels and bags which were distributed to the seniors as prizes for participation. The American Red Cross donated brochures about safety, which were given as educational information. Aglow Dermatology donated lotions and body wash which were also given as prizes. All necessary copies, fliers, and handouts were made using the Stein Senior Center equipment. The color picture printouts were made courtesy of Viktoriya Gorelik. The binder, some sheet protectors, and some pens were provided by Liza Bauzo-Nieves. Some sheet protectors were provided by Gayann Messam.

**Evaluation**

**Goal Accomplishments**

**Describe goals you wanted to accomplish.** Seniors of the Gramercy Park neighborhood

rely on the programs and services of the Stein Senior Center for basic needs such as health, safety, and food. As community nurses, our goal for the residents of Gramercy Park at the Stein Senior Center was to enhance their health and wellness. We decided to do so with workshops about exercise, safety, nutrition, and overall living. We worked collaboratively, as pairs, in preparing and presenting our workshops. Our goals included: 1) Informing the residents of the benefits of exercise and using proper body mechanics, 2) Informing the residents of ways to provide safety if they didn’t have access to suggested equipment 3) Educate the residents of healthy foods from each food group; and 4) Informing the residents of ways to enhance their overall well-being by participating in enjoyable activities such as dancing.

**Collaborative process of goal setting**. Workshops were developed and created for the

seniors’ participation. Partnerships were created between students and a program was developed. Students created either a game or a lecture on their selected topic. Teammates worked together to create their workshop. Each member had a responsibility to perform research. Since these workshops were to be informative and presented to the seniors, it was important to use reliable resources such as governmental and organizational websites. The first workshop was based on exercise. A game was developed where the seniors either had to answer a question on exercise, or had to participate in an exercise activity. The second workshop consisted of a lecture-like activity on safety. The workshop on nutrition was formatted like Family Feud and the last workshop was a Jeopardy style game.

**Describe how the goals were accomplished**. Goals were accomplished by preparing

workshops based on the research performed. Flyers were also created, posted on the bulletin boards, and placed on the dining tables, to let the senior residents know what we had planned for them. We increased involvement by informing them of prizes that would be awarded for their participation. The team leader went out into the community in an attempt to get local businesses to provide us with incentives for the participating members. Thankfully, stores such as The Vitamin Shoppe were very welcoming and had no issue with providing us with free items. At the end of each workshop, we received positive feedback from the seniors themselves and from staff. Staff members informed us of the impact we had made, to some, on a personal level. For example, one resident who never gets up to participate in the dancing sessions got up to dance during one of our workshops.

**Project Evaluation**

**Benefits of the project to the community.** Creating projects for the community is

beneficial. Generating projects can bring out the best of us nurses, in terms of what we can do for the community and for people in need. During the time spent in the Stein Senior Center, our community projects and routine blood pressure screenings developed trust which then encouraged discussions of health concerns and advice-seeking conversations. For our Community Feud, the questions mainly focused on health. For example, we asked “What is the best way to control diabetes?” We then gave time for brainstorming, and if they answered correctly, or just participated, we gave them gifts such as lotion, bags, oranges, etc. These gifts were received from the local community members and the Stein Senior Center was informed of their donations. These organizations were willing to donate because they want to see the community succeed and flourish. We also talked to many members and one informed us that she’d never danced before in her life but, when we came to the Stein Senior Center, she was motivated to come up to the stage and dance. This definitely proves that even small scale projects, such as having a meaningful nursing clinical event weekly in a local community, can make a great impact on an individual’s life. Imagine what a big project can do for the community as a whole.

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