

# Proactively Addressing Social Determinants in Rural Health Care

Tami Fairbanks & Chris Larson • Quality Department • MercyOne Newton Medical Center

## OBJECTIVE:

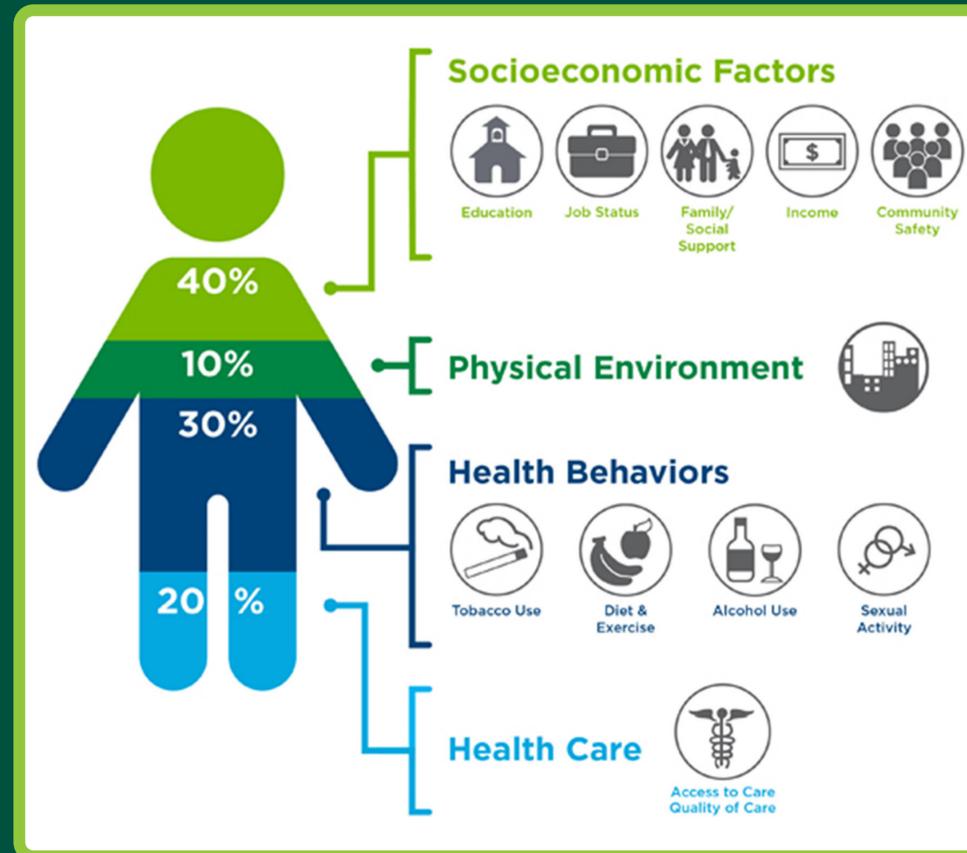
1. To improve patient health outcomes by identifying and addressing patients' health-related social needs. -OR-
2. To identify patients whose social needs are negatively impacting their ability to find and/or participate in health care opportunities, and assist those patients to connect with the appropriate community based resources to meet their social needs. -OR-
3. To identify patients whose social needs are negatively impacting their ability to find and/or participate in health care opportunities, and assist those patients to connect with the appropriate community based resources to improve our patients' health outcomes and their ability to meet their own basic needs.

## BACKGROUND:

1. Jasper County has higher than average chronic disease risk factors and diagnoses, as compared to the state of Iowa.
2. MercyOne's social needs screening indicates that patients who identify at least one social need (food, utilities, substandard housing conditions, stress from financial strain) are more likely to have a chronic disease diagnosis such as diabetes, COPD, CHF, etc.
3. MercyOne's mission focuses on providing care for the poor and underserved, leading MercyOne to implement the role of the Community Health Worker (CHW) in primary health clinics in Knoxville and Dallas County. MercyOne Newton, lacking a clinic, implemented the CHW into the hospital setting.

## ACTIONS TAKEN:

1. Develop and universally offer a bilingual screening tool to triage the social needs of patients presenting to the MercyOne Newton Emergency Department.
2. Develop and maintain a list of available resources in Newton and Jasper County, including which services are offered and any limitations or exclusions on who might qualify for assistance with the services offered.
3. Develop a relationship with community partners, and serve as a liaison between MercyOne Newton's health care staff, the patient population, and community resources.
4. Encourage patients to connect with necessary services and advocate for their own needs.



## ACTIONS TAKEN (cont.):

5. Educate health care staff on how social determinants can cause a negative impact on health, and the role of the CHW in alleviating those stressors in our patient population.
6. Spread the availability of the CHW from the Emergency Department into the rest of the hospital.

## METRICS:

- External factors affecting the overall health and well-being of individuals
- Number of patients screened
- Number of patients identifying needs
- Number of patients referred to a resource
- Number of resources contacted by patients

## ANALYSIS:

Socio-economic factors and the physical environment make up 50 percent of the overall health and well being of individuals. These factors are the most difficult for nursing staff to impact. We are successfully screening an increasing number of individuals and identifying those individuals who require assistance with a variety of socio-economic needs. We are seeing a significant increase in the number of resources contacted by patients, as well as an increase in the number of patients with full or partial needs met.

## NEXT STEPS:

1. Continue to encourage front line staff to utilize the CHW in connecting patients with community-based resources.
2. Continue to spread the availability of the CHW from the Emergency Department into the rest of the hospital, utilizing participation in daily multidisciplinary rounds and referrals from front-line staff.
3. Create a plan to sustain social needs screening and referrals beyond the original grant-funded period.

| Newton Screening Information                                     | 2020 to Present | FY 2020-2021 | FY 2021-2022 | FY 2022-2023 |
|--|-----------------|--------------|--------------|--------------|
| <b>Total Patients Screened (Positive and Negative Screening)</b> | <b>6,416</b>    | <b>1,950</b> | <b>3,553</b> | <b>913</b>   |
| Patients Having One or More Need(s)                              | 1,620           | 542          | 835          | 243          |
| Patients Requesting Assistance w/ CHW                            | 603             | 197          | 321          | 85           |
| Needs are URGENT   | 190             | 69           | 97           | 24           |
| Number of Patients Referred to a Resource                        | 267             | 120          | 115          | 32           |
| Number of Resources Contacted by Patients                        | 262             | 93           | 165          | 4            |
| Patients w/ Full or Partial Needs Met                            | 99              | 18           | 56           | 25           |
| Number of Needs Full or Partially Met                            | 148             | -            | 111          | 37           |
| Protocol Closed - Successful                                     | 258             | 70           | 135          | 53           |
| Protocol Closed - All other reasons                              | 181             | 78           | 77           | 26           |
| Open Protocols (Patient case load)                               | -               | -            | -            | -            |
| CHW Initial Patient Interactions                                 | 390             | 150          | 182          | 58           |
| CHW Patient Follow-Up Interactions                               | 323             | 91           | 174          | 58           |
| Colleague Consultations  | 4               | -            | -            | 4            |
| <b>Total CHW/Patient Interactions</b>                            | <b>717</b>      | <b>241</b>   | <b>356</b>   | <b>120</b>   |
| <b>Food Insecurity</b>   | <b>584</b>      | <b>174</b>   | <b>312</b>   | <b>98</b>    |
| <b>Housing Assistance</b>  | <b>415</b>      | <b>133</b>   | <b>221</b>   | <b>61</b>    |
| <b>Utility Assistance</b>  | <b>450</b>      | <b>151</b>   | <b>245</b>   | <b>54</b>    |
| <b>Medication Assistance</b>                                     | <b>359</b>      | <b>113</b>   | <b>198</b>   | <b>48</b>    |
| <b>Transportation</b>  | <b>452</b>      | <b>147</b>   | <b>237</b>   | <b>68</b>    |
| <b>Social Isolation/Loneliness</b>                               | <b>674</b>      | <b>238</b>   | <b>338</b>   | <b>98</b>    |
| <b>Health Literacy</b>   | <b>478</b>      | <b>141</b>   | <b>267</b>   | <b>70</b>    |