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Development and Implementation of a Social Needs Screener in Primary Care Practice

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BACKGROUND

- CMS and others have recommended initiatives to identify and address social determinants of health (SDH) as part of routine care¹
- Standardizing data collection of SDH within EHRs may result in improved health outcomes²
- Practice workflows are needed to systematically identify SDH within the EHR using a social needs screener (SNS) without creating excessive practice burden
- Once identified, systems are needed to connect patients with health system and community resources to address unmet needs

METHODS

- Identification of priority social needs and perceptions of data collection with a tablet computer within patient focus groups (n=18 FG, 115 patients)³
- Development of tailored screening tool within a multidisciplinary stakeholder group
- Workflow development for SNS within primary care practice
- Pilot testing of SNS within 3 primary care practices (Figure 1)
- Evaluation of utilization of resource provided (211) to address unmet needs (Figure 2)

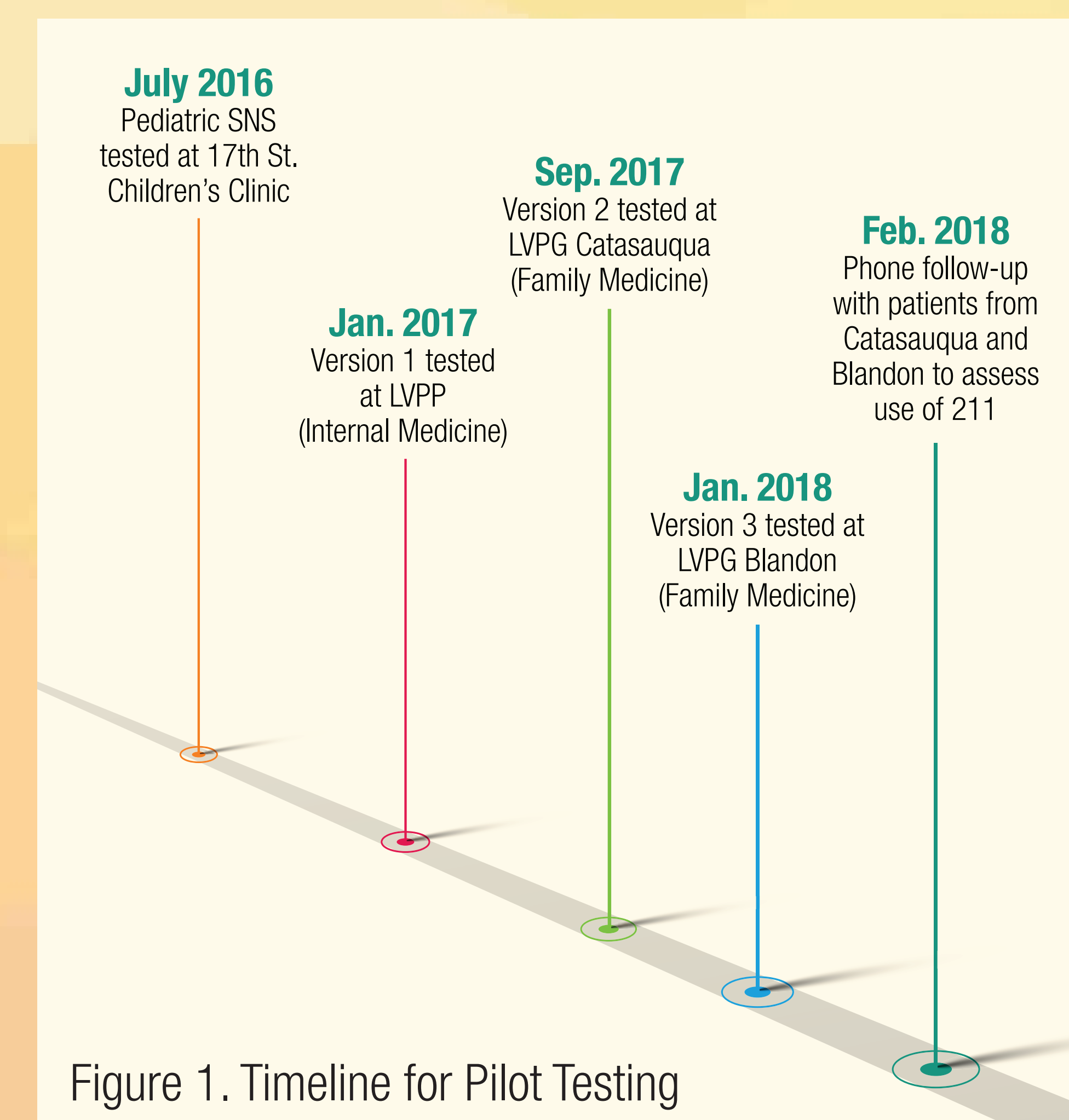


Figure 1. Timeline for Pilot Testing



Figure 2. Informational Handout on PA 211 East

RESULTS

PATIENT FOCUS GROUPS (N =18)

Assessed perceptions of collecting information on social needs via tablet computers

Participant characteristics: Focus groups organized by age, ethnicity (Hispanic/Non-Hispanic), preferred language

PILOT TESTING OF CLINICAL WORKFLOWS IN 3 PRIMARY CARE PRACTICES

Practice	Total # Screeners Completed (n= 389)	Average Time to Complete (min)
LVPP (1)	200	4.1
Catasauqua (2)	134	2
Blandon (3)	55	2

Table 1. Pilot Testing of SNS

UTILIZATION OF PA 211 EAST

None of the patients reached by phone from Practices 2 and 3 made an attempt to access community resources via PA 211 East.

REASONS CITED

MULTIDISCIPLINARY STAKEHOLDER COMMITTEE

DISCUSSION

- Creating a tailored SNS tool and collecting data via a tablet computer during primary care office visits was feasible
- Given patient preference to complete the SNS in a private setting, processes need to be streamlined to minimize additional time for office visits
- Patients may benefit from navigational support to connect with resources, as those in this study did not initiate contact without further support
- Further study is needed to identify optimal processes for addressing identified needs, particularly for priority needs including housing and food insecurity

FUTURE DIRECTIONS

- Incorporate SNS into EHR for systematic use
- Refine practice workflows to facilitate ease of implementation
- Leverage patient portals to enhance patient privacy and limit risk of practice/staff burden in administering the screener
- Strengthen partnerships with Community Based Organizations to direct patients to resources for unmet needs

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Patients and staff preferred completion of the SNS in the exam room (as compared to in the waiting room or at check out)

MOST COMMON UNMET NEEDS:

Housing (7–36%)
Food Insecurity (8–62%)

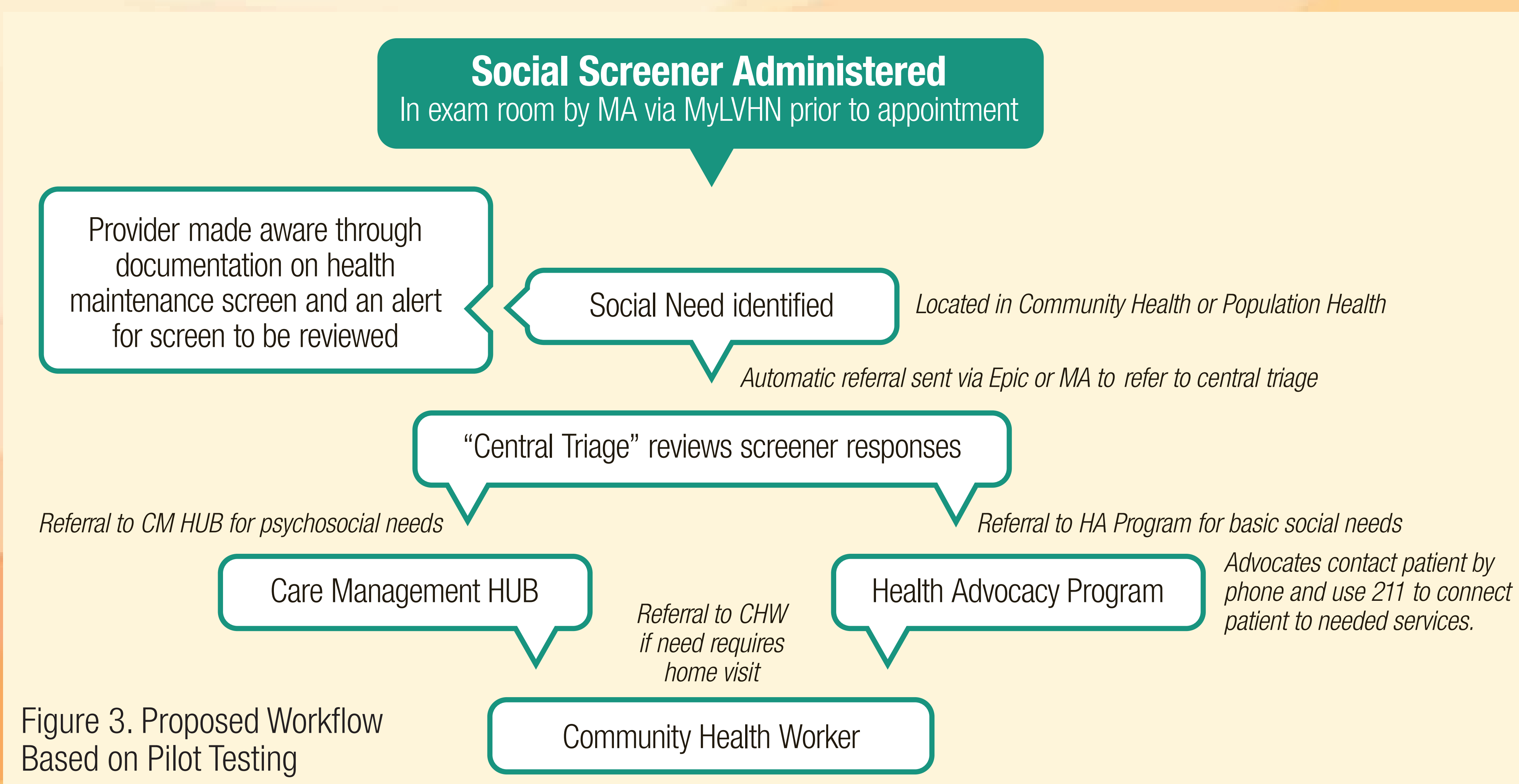


Figure 3. Proposed Workflow Based on Pilot Testing