2021

Bridging the Gap: Improving the relationship between social service organizations and healthcare providers

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Background

- In Vermont, a significant social determinant of health is rurality. Barriers to healthcare services include distance to providers, lack of integration with social services, and failure to recognize community needs.
- Integration and robust collaboration between healthcare and social services can likely improve outcomes for individuals who have high utilization of both categories of services.
- Understanding relationships between healthcare and social services may provide an important framework for translating interventional research to rural communities to improve health equity.

Project Goal: To understand barriers affecting collaboration between social service providers and community health providers in order to promote research-based improvements in health outcomes in rural populations.

Methods

1. Included four organizations from Chittenden County that provide a wide range of social services to underserved communities.
2. Eleven focus group questions were created based on a literature review and discussions with the Northern New England Clinical & Translational Research (NNE-CTR) network.
3. Nine organizations were approached to assess interest and availability in participating in a 1-hour, remote focus group; of the nine, four (44%) attended the focus group on March 1, 2021.
4. Questions were open-ended and covered the following four topics:
   a. Service changes associated with the COVID-19 pandemic.
   b. Relationships between social services and healthcare providers.
   c. Barriers to efficient and effective collaboration between social service organizations and healthcare providers.
   d. Participation in research.
5. For every question, each social service organization's representative(s) were given the opportunity to provide their perspective in the context of their services and population served.
6. Notes were taken by multiple members of the team at the focus group. Three team members independently reviewed notes and identified preliminary common themes. The identified themes were reconciled into a common set of themes and organized into four categories: Physical/Logistical Challenges, Relationship Challenges, Proposed Solutions, and What Works/Positives.
7. Responses were coded into common themes. For each theme, the number of organizations who expressed a theme was tabulated and recorded.

Results

Number of organizations in agreement

Statement	Percentage
ORGANIZATION INDICATED APPREHENSION IN PARTICIPATING IN RESEARCH, CITING MISTRUST AS A FACTOR.	75%
ORGANIZATION IS OPEN TO PARTICIPATING IN RESEARCH	50%
IF PARTICIPATING IN RESEARCH, IT IS FOCUSED ON NEEDS ASSESMENT OR QUALITY IMPROVEMENT	100%
ACCESS DIFFICULTIES TO ORGANIZATION ARE COMPOUNDED FOR CLIENTS WITH MARGINALIZED IDENTITIES	75%
ACCESS DIFFICULTIES TO ORGANIZATION SERVICES ARE WORSENED WITH DISTANCE	100%
ORGANIZATION HAS SOME DEGREE OF WORKING RELATIONSHIP WITH HEALTHCARE PROVIDERS	100%
HEALTHCARE WORKERS HAVE MIXED KNOWLEDGE OF ORGANIZATION	75%
ORGANIZATION'S RESOURCES ARE ONLY AVAILABLE IN CHITTENDEN COUNTY	50%
COVID-19 BROUGHT SOME POSITIVE SIDE EFFECTS TO THE ORGANIZATION	50%
COVID-19 SIGNIFICANTLY IMPACTED THE ORGANIZATION NEGATIVELY ON A PHYSICAL AND LOGISTICAL BASIS	100%

"Our communities are similarly concerned and wary with research that categorizes our community because of the history of using research to target the community. When I share a research project, the person has put in the time to give me context. Why is this being collected? Who gets access to this information? What happens afterwards? Has there been talk about what adverse outcomes there could be? Is the community being compensated for their time?"

"Understanding complexity of services, understanding that there's barriers (real and perceived), understanding trauma of patients, working in compassionate listening, advocacy/education" (regarding how to strengthen relationship of organization with healthcare providers)

Discussion

- As a result of the COVID-19 pandemic, all the organizations' services were impacted. Some (50%) had to eliminate services due to capacity and delivery issues, while others (50%) highlighted some positive benefits, including new partnerships and further reach of their services.
- All organizations had a working relationship with healthcare providers; however, there was a notable disconnect between healthcare providers and social service organizations. Many (75%) felt that healthcare providers had mixed awareness about the complexity of services they provided and suggested that direct education and advocacy work would improve these relationships and their shared goals.
- Half of the organizations indicated they are the only organization of their type in Chittenden County and most (75%) cited that access difficulties are compounded for clients with marginalized identities.
- All organizations are currently using research to improve their current services. None of the organizations highlighted a formal or ongoing relationship to researchers but all were open to participating in research. Although they all had a broad interest in participating, most (75%) were apprehensive, citing mistrust due to lack of education, cultural competency, and history of bias as a factor.

Conclusion

- To improve relationships between healthcare and social service organizations, events such as community forums, outreach programs and even informational lunchtime sessions can be implemented with the goal of educating and building partnerships.
- A positive outcome of the COVID-19 pandemic was the innovative and creative ways that many organizations reached a wider distribution of service users. Much of this was done via telehealth events, mixers, and meetings that provided much-needed support. These measures can continue to be implemented to further increase access to both health and social services.
- There should also be physician-led education efforts. Physicians should lessen the load of social services organizations by striving to understand the services provided by local/rural community organizations and their clients.
- Incoming medical students can conduct a PHP project that is centered around building informational brochures or presentations to educate department staff/healthcare providers about community organizations that can improve the health outcome of their patients.
- Additionally, when conducting research, it is crucial that marginalized communities are well- informed and feel welcome to provide feedback in order to improve any mistrust or concerns that they may have.

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