

“Doing really great work on addressing social determinants means that a diabetic patient would be referred from the homeless shelter to the food bank and to health classes. In an ideal world, we don’t wait until they are in an acute situation to begin identifying relevant social services.”

— Safety-net public hospital administrator

Ensure Community-Wide Connectivity Between Clinical and Social Service Providers

INSIGHT: *There must be effective communication and data sharing between primary care settings and social service providers.*

Developing effective communication channels between health and social service providers is an important challenge. This type of communication is hindered by incompatible technology, privacy concerns including regulations like the Health Insurance Portability and Accountability Act (HIPAA), outdated workflows and job descriptions, and misaligned incentives between stakeholders with differing financial resources and influence within the community.

An additional challenge to functional connections is communicating whether a patient received the intended services, and documenting the resulting impact from that support. Facing budgetary constraints and frequent staff shortages, safety-net clinics and hospitals often lack the capacity to provide the necessary follow-up to close the loop on these referrals.

Health information exchange and care management platforms may be able to help medical and nonmedical providers share this information in the future. These feedback loops allow clinicians to consider patients’ social needs when developing care plans, and they also benefit social service providers by giving them an opportunity to document the impact of their work in ways that can bolster their arguments for continued support. Innovators need to consider the motivations and benefits related to each distinct audience to encourage the uptake of innovative technology.

While these loops can be beneficial to safety-net providers, the data they produce can also be overwhelming. Technology that enables providers to select the types of information they receive from social service organizations would limit data overload and increase the likelihood that clinic staff will act on information from social service providers. Improved data analysis would also enable providers to deliver population health management more effectively.

The most transformative solutions in this space will connect multiple medical and social service providers to one another. Independent medical and social services will be more successful in adopting and implementing a shared technology if they have relationships, trust, and shared goals for their community. Thus, innovators may benefit tremendously from working in concert with place-based collaborations aimed at improving health. These collaborative efforts could be instrumental in facilitating multisite adoption, which is necessary for transformative change.

SPOTLIGHT

Oakland Children’s Hospital’s Family Information and Navigation Desk

Some innovators are focusing on patient-centric communication platforms, including texting. At Oakland Children’s Hospital’s Family Information and Navigation Desk, patients text the hospital using a unique identifier code to let their care team know whether they received a service related to a need. This approach minimizes impact on already overwhelmed health care professionals and social service providers while deepening connections with patients and families in ways that build trust and strengthen relationships. Further, this system allows for population-level analysis to understand trends in social service needs, service use, and referral completion.

“There is a huge gap in the ability to screen, refer, connect, and then understand [at] a population level what is happening.”

— Pediatrician