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KEY CONSIDERATIONS FOR DESIGNING YOUR ORGANIZATION'S SOCIAL NEEDS STRATEGY

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INTRODUCING YOUR NEIGHBOURS

At your tables:

- Name
- Place you work
- Role
- Read one of the questions on the colored slips of paper out loud and answer it

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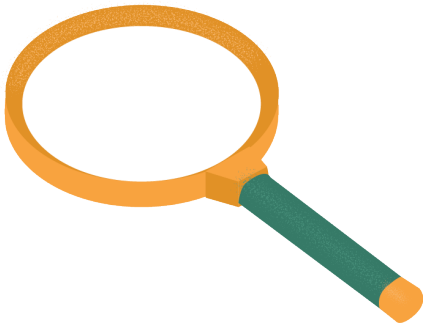
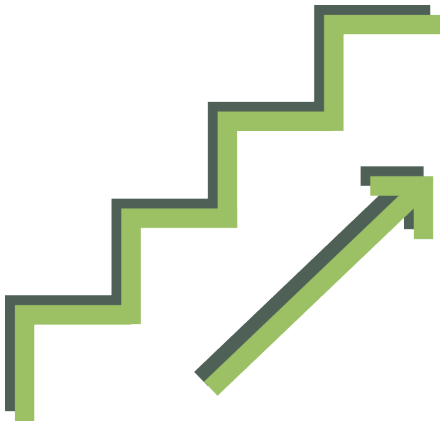
WHAT WE'LL DO IN THIS LEARNING LAB



Definitions

Share and Learn



Action

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DETERMINANTS OF HEALTH

- Income and social status
- Education and literacy
- Social support network
- Employment/working conditions
- Social environments
- Physical environments
- Personal health practices
- Healthy child development
- Biology and genetic factors
- Health services
- Gender
- Culture

DETERMINANTS OF HEALTH

http://determinantsofhealth.org

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SOCIAL DETERMINANTS OF HEALTH - DEFINED

The conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels.

- World Health Organization

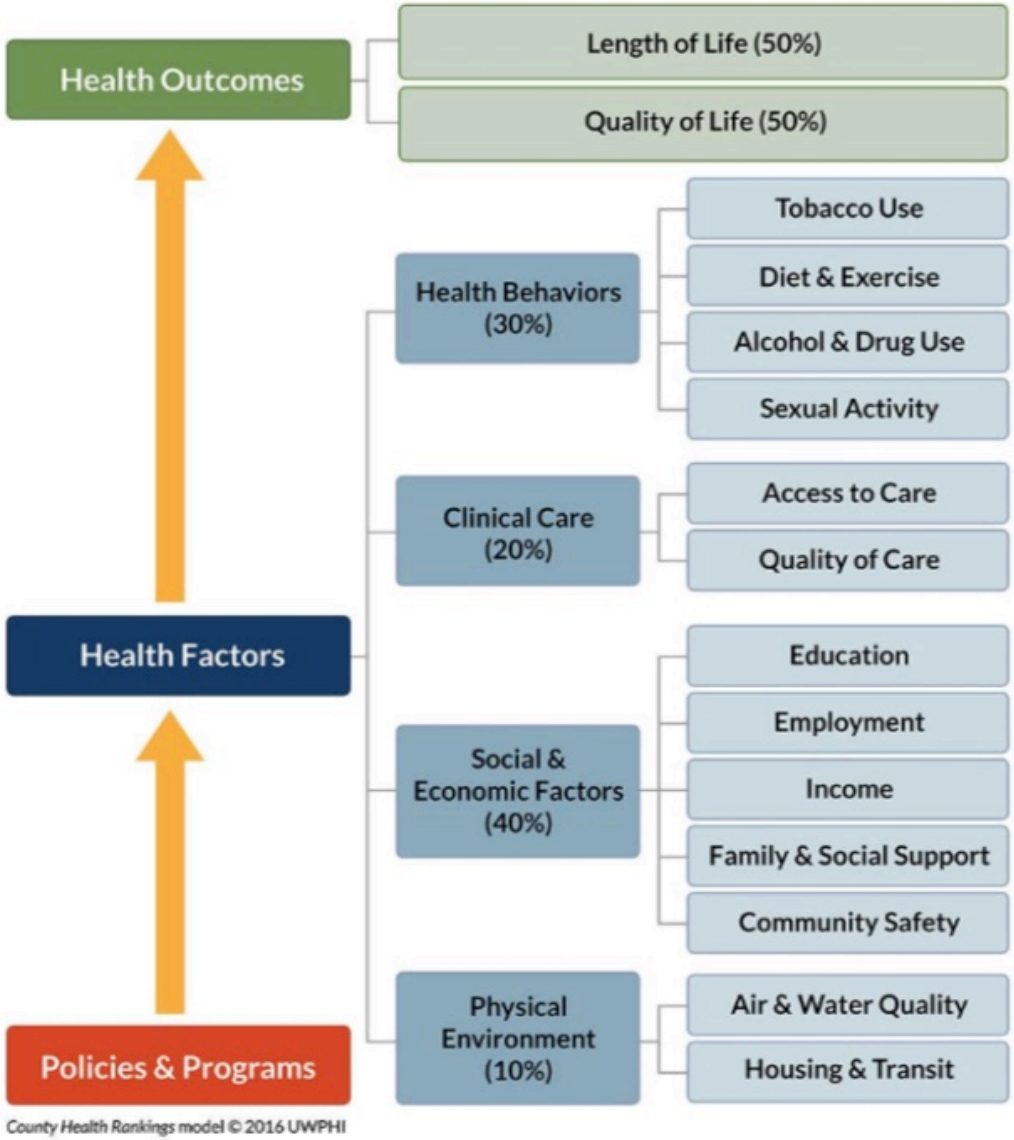


Figure 1 | County Health Rankings & Roadmaps | *Source: Reprinted with permission from County Health Rankings & Roadmaps, http://www.countyhealthrankings.org/our-approach (accessed July 18, 2017).*

https://nam.edu/wp-content/uploads/2017/10/Social-Determinants-of-Health-101.pdf

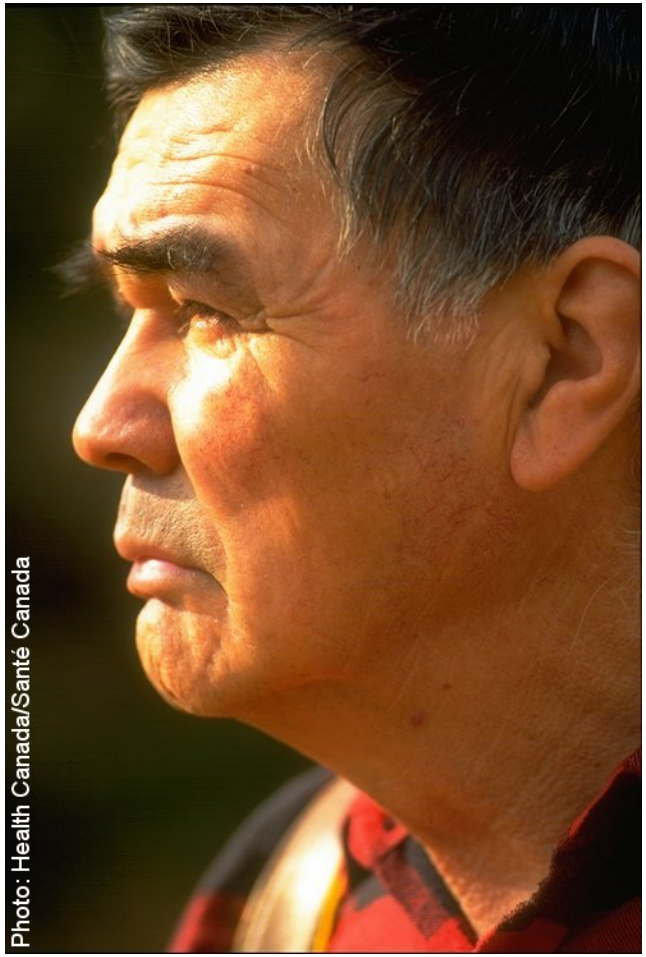
CORE DOMAINS & MEASURES FOR EHR

WITH SUGGESTED FREQUENCY OF ASSESSMENT

DOMAIN/MEASURE	MEASURE	FREQUENCY
Alcohol Use	3 questions	Screen and follow up
Race and Ethnicity	2 questions	At entry
Residential Address	1 question (geocoded)	Verify every visit
Tobacco Use	2 questions	Screen and follow up
Census Tract-Median Income	1 question (geocoded)	Update on address change
Depression	2 questions	Screen and follow up
Education	2 questions	At entry
Financial Resource Strain	1 question	Screen and follow up
Intimate Partner Violence	4 questions	Screen and follow up
Physical Activity	2 questions	Screen and follow up
Social Connections & Social Isolation	4 questions	Screen and follow up
Stress	1 question	Screen and follow up

NOTE: Domains/Measures are listed in alphabetical order; domains/measures in the shaded area are currently frequently collected in clinical settings; domains/measures not in the shaded area are additional items not routinely collected in clinical settings.

SOMETHING TO REMEMBER…



Statistics are human beings with the tears wiped off.

- Paul Brodeur

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SHARING OUR EXPERIENCES

Photo by Andreanna Moyer

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SEEING PEOPLE IN THEIR SOCIAL CONTEXT

I diagnosed “abdominal pain” when the real problem was hunger, I confused social issues with medical problems in other patients, too. I mislabeled the hopelessness of long-term unemployment as depression and the poverty that causes patients to miss pills or appointments as noncompliance. In one older patient, I mistook the inability to read for dementia. My medical training had not prepared me for this ambush of social circumstance. Real-life obstacles had an enormous impact on my patients’ lives, but because I had neither the skills nor the resources for treating them, I ignored the social context of disease altogether.

Laura Gottlieb, MD
San Francisco Chronicle 8/23/10

DISCUSSION

- Good or not-so-good stories about addressing social determinants of health
- Share the story with your group (< 2 min ea.)
- Decide on one story to share to represent your table

SHARE STORIES

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IMAGINE A FUTURE…

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VIDEO

https://www.youtube.com/watch?v=Ee4CKIPkIik&app=desktop

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HOW MIGHT WE…? SENTENCE

- Working by yourself, start with 1 of your "How Might We's" and complete this sentence

  How might we _____

  (verb that implies change)

  that lets _____

  (specific audience)

  feel _____

  (emotion)

  while _____.

  (where/when/doing what)

HOW MIGHT WE….? EXAMPLE

How might we partner with community resources
(verb that implies change)

that lets our patients
(specific audience)

feel empowered to access healthy food
(emotion)

while challenged with transportation issues.
(where/when/doing what)

OUR THEMES

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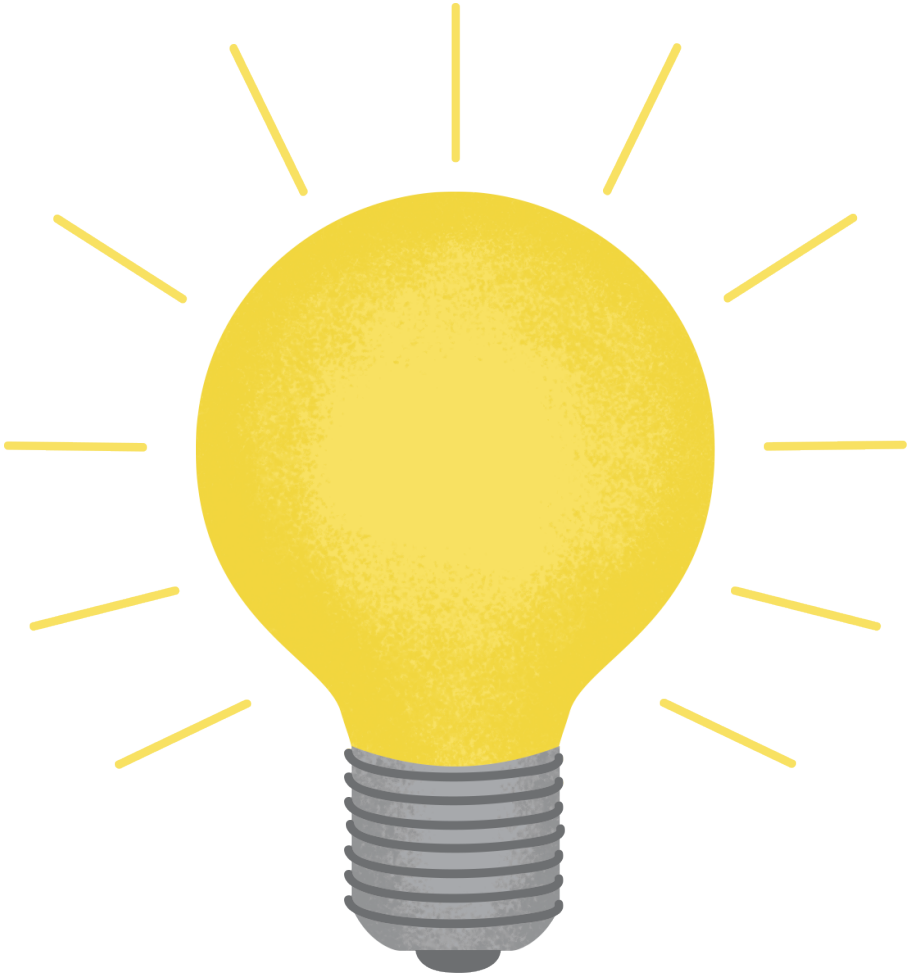

OUR IDEAS

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GATHERING IDEAS

- Working alone, write down your ideas for addressing Social Determinants of Health, one idea per post-it note. Use the themes to guide you.
- Think back to what you heard from the stories.
- Make sure it is a specific idea.
- You have 2 minutes.

STRETCH BREAK

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VIDEO

https://www.youtube.com/watch?v=ACfsjyR3Hxc&list=PLoL7mi3iOLMLO3BC_2M-ZkDgDYhLOW0Pn&index=14

REFLECTIONS ON VIDEO

Bowron Lakes, BC

Photo by Alice Domes

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RESOURCES

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RESOURCES ASSIGNMENT

- Investigate the link you are provided. Answer these questions to report out:
  - What is the goal of the resource or service?
  - What are the key features of this resource or service?
  - Would this resource help your setting address social determinants of health?

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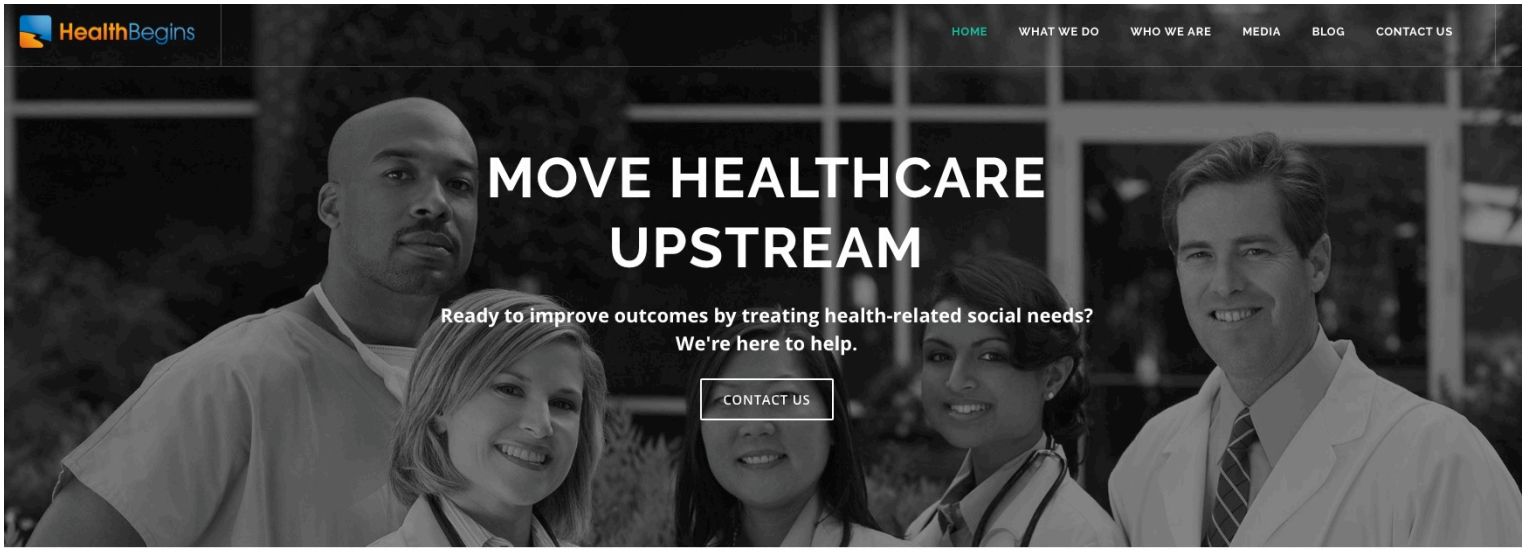
CARING WITH COMPASSION

https://caringwithcompassion.org/about

HEALTH BEGINS



Improve outcomes by treating your patients' health-related social needs.

http://healthbegins.org/

HEALTH LEADS

https://healthleadsusa.org/wp-content/uploads/2018/02/CASHI_Change_Package_2_8_18.pdf

HEALTH LITERACY AND HEALTH INEQUITY

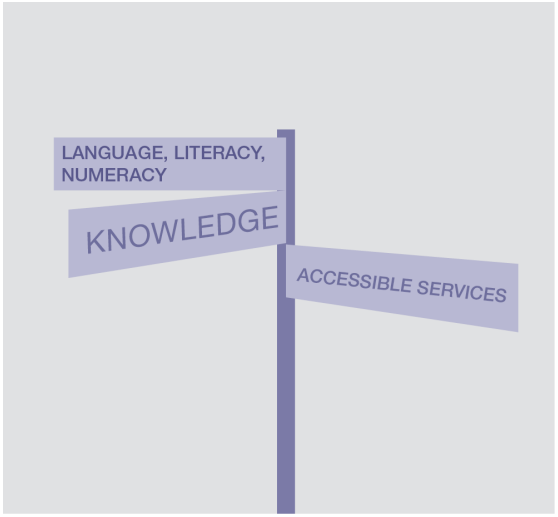
Public Health England

UCL Institute of Health Equity

Local action on health inequalities

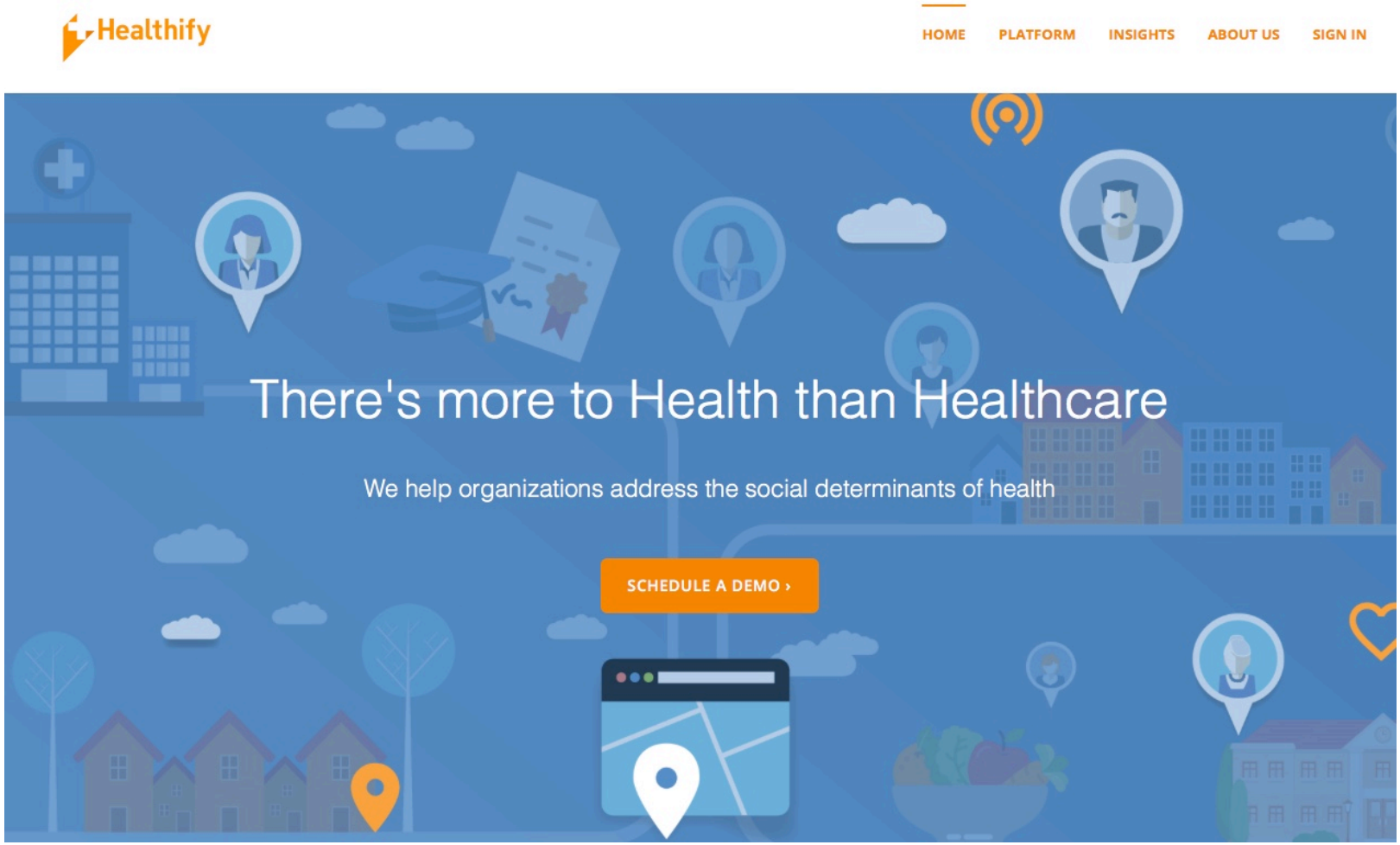
Improving health literacy to reduce health inequalities

Practice resource summary: September 2015



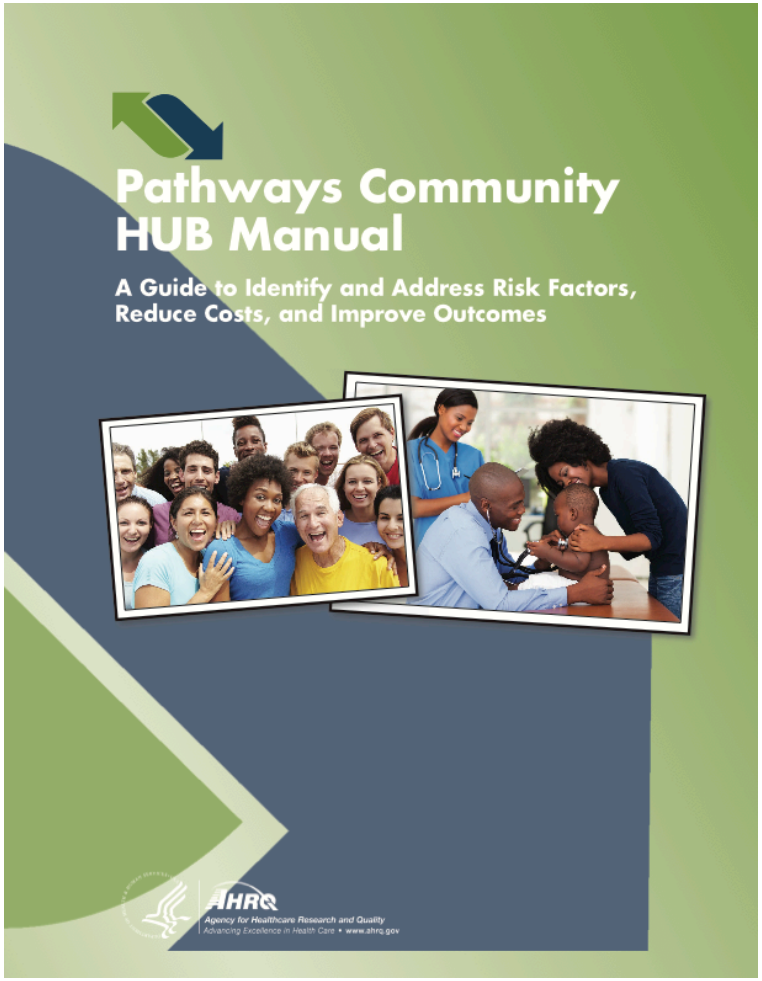
https://www.gov.uk/government/publications/local-action-on-health-inequalities-improving-health-literacy

HEALTHIFY



https://www.healthify.us/

PATHWAYS COMMUNITY HUB MODEL



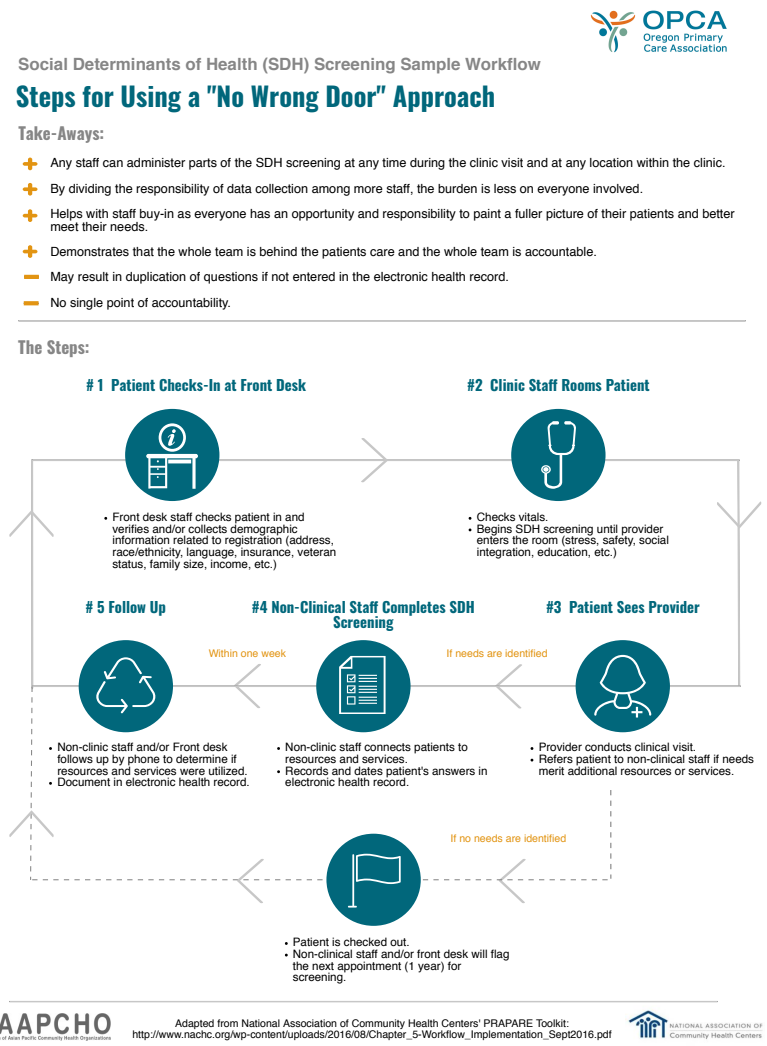
https://innovations.ahrq.gov/sites/default/files/Guides/CommunityHubManual.pdf

OPCA TOOLS AND RESOURCES

- Screening tools
- Current efforts
- **Screening and workflow**
- Food insecurity tools and resources
- Housing insecurity tools and resources
- Tools and resources to integrate SDoH into clinical care
- Tools and resources for CHC-Community partnerships

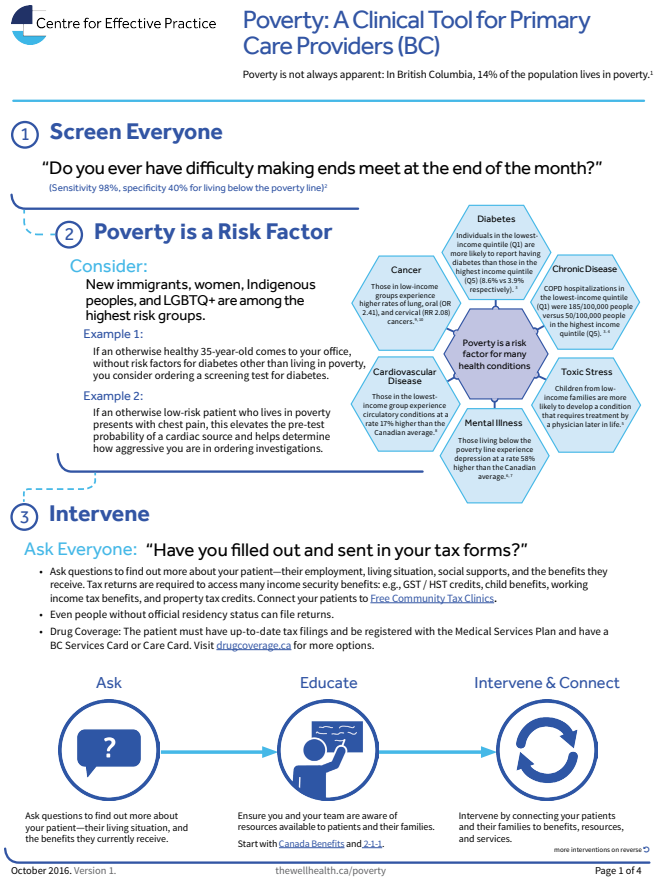
https://www.orpca.org/initiatives/social-determinants-of-health/251-sdoh-tools-resources

OPCA WORKFLOW EXAMPLE



https://www.orpca.org/initiatives/social-determinants-of-health/251-sdoh-tools-resources

POVERTY SCREENING TOOL



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Poverty: A Clinical Tool for Primary Care Providers (BC)

Poverty is not always apparent: In British Columbia, 14% of the population lives in poverty.[1]

1 Screen Everyone

"Do you ever have difficulty making ends meet at the end of the month?"

(Sensitivity 98%, specificity 40% for living below the poverty line)[2]

2 Poverty is a Risk Factor

Consider:

New immigrants, women, Indigenous peoples, and LGBTQ+ are among the highest risk groups.

Example 1:

If an otherwise healthy 35-year-old comes to your office, without risk factors for diabetes other than living in poverty, you consider ordering a screening test for diabetes.

Example 2:

If an otherwise low-risk patient who lives in poverty presents with chest pain, this elevates the pre-test probability of a cardiac source and helps determine how aggressive you are in ordering investigations.

Poverty is a risk factor for many health conditions

- Diabetes: Individuals in the lowest-income quintile (Q1) are more likely to report having diabetes than those in the highest income quintile (Q5) (8.6% vs 3.9% respectively).[3]
- Chronic Disease: COPD hospitalizations in the lowest-income quintile (Q1) were 185/100,000 people versus 50/100,000 people in the highest income quintile (Q5).[3,4]
- Toxic Stress: Children from low-income families are more likely to develop a condition that requires treatment by a physician later in life.[5]
- Mental Illness: Those living below the poverty line experience depression at a rate 58% higher than the Canadian average.[6,7]
- Cardiovascular Disease: Those in the lowest-income group experience circulatory conditions at a rate 17% higher than the Canadian average.[8]
- Cancer: Those in low-income groups experience higher rates of lung, oral (OR 2.41), and cervical (RR 2.08) cancers.[9,10]

3 Intervene

Ask Everyone: "Have you filled out and sent in your tax forms?"

- Ask questions to find out more about your patient—their employment, living situation, social supports, and the benefits they receive. Tax returns are required to access many income security benefits: e.g., GST / HST credits, child benefits, working income tax benefits, and property tax credits. Connect your patients to Free Community Tax Clinics.
- Even people without official residency status can file returns.
- Drug Coverage: The patient must have up-to-date tax filings and be registered with the Medical Services Plan and have a BC Services Card or Care Card. Visit drugcoverage.ca for more options.

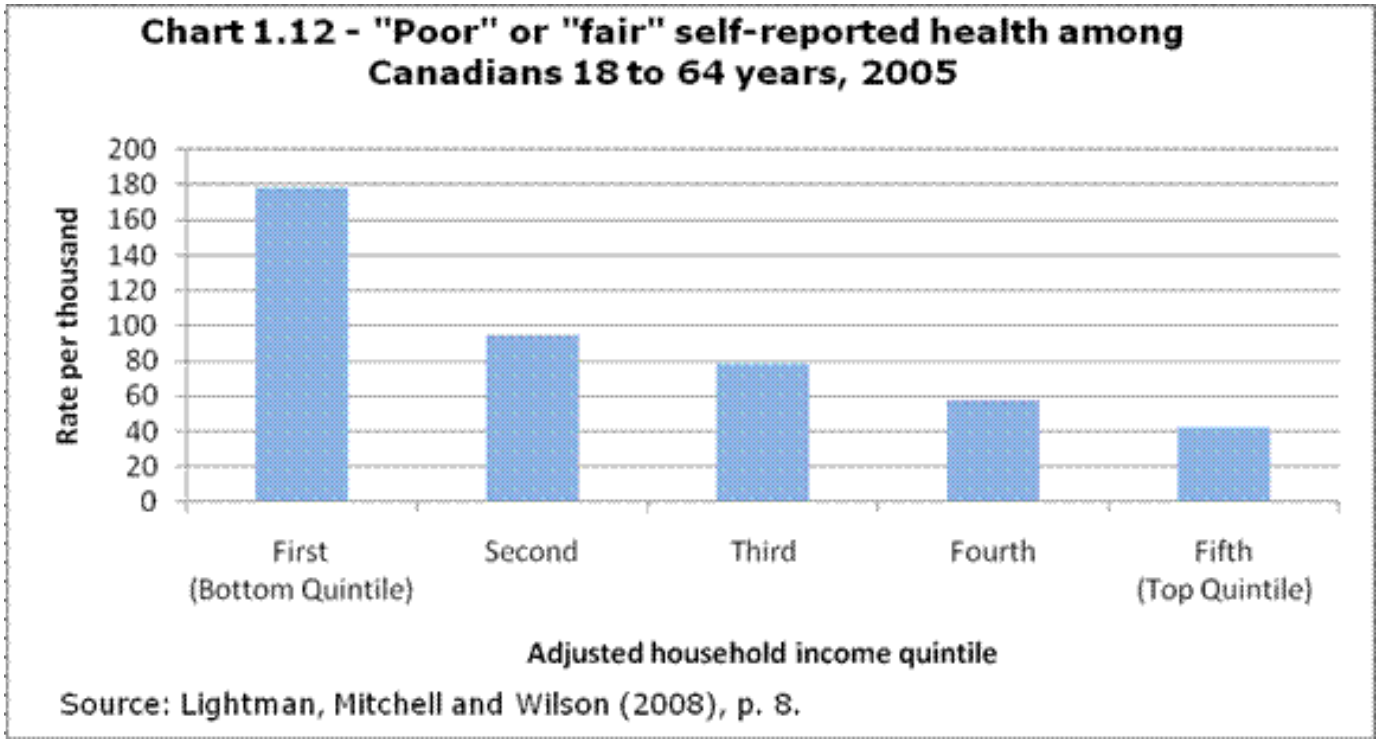
Ask	Educate	Intervene & Connect
Ask questions to find out more about your patient—their living situation, and the benefits they currently receive.	Ensure you and your team are aware of resources available to patients and their families. Start with Canada Benefits and 2-1-1.	Intervene by connecting your patients and their families to benefits, resources, and services.

more interventions on reverse

October 2016. Version 1. thewellhealth.ca/poverty Page 1 of 4

http://www.cfpc.ca/uploadedFiles/CPD/_PDFs/Poverty_flowBC%202016%20Oct%2031.pdf

POVERTY AS A RISK FACTOR



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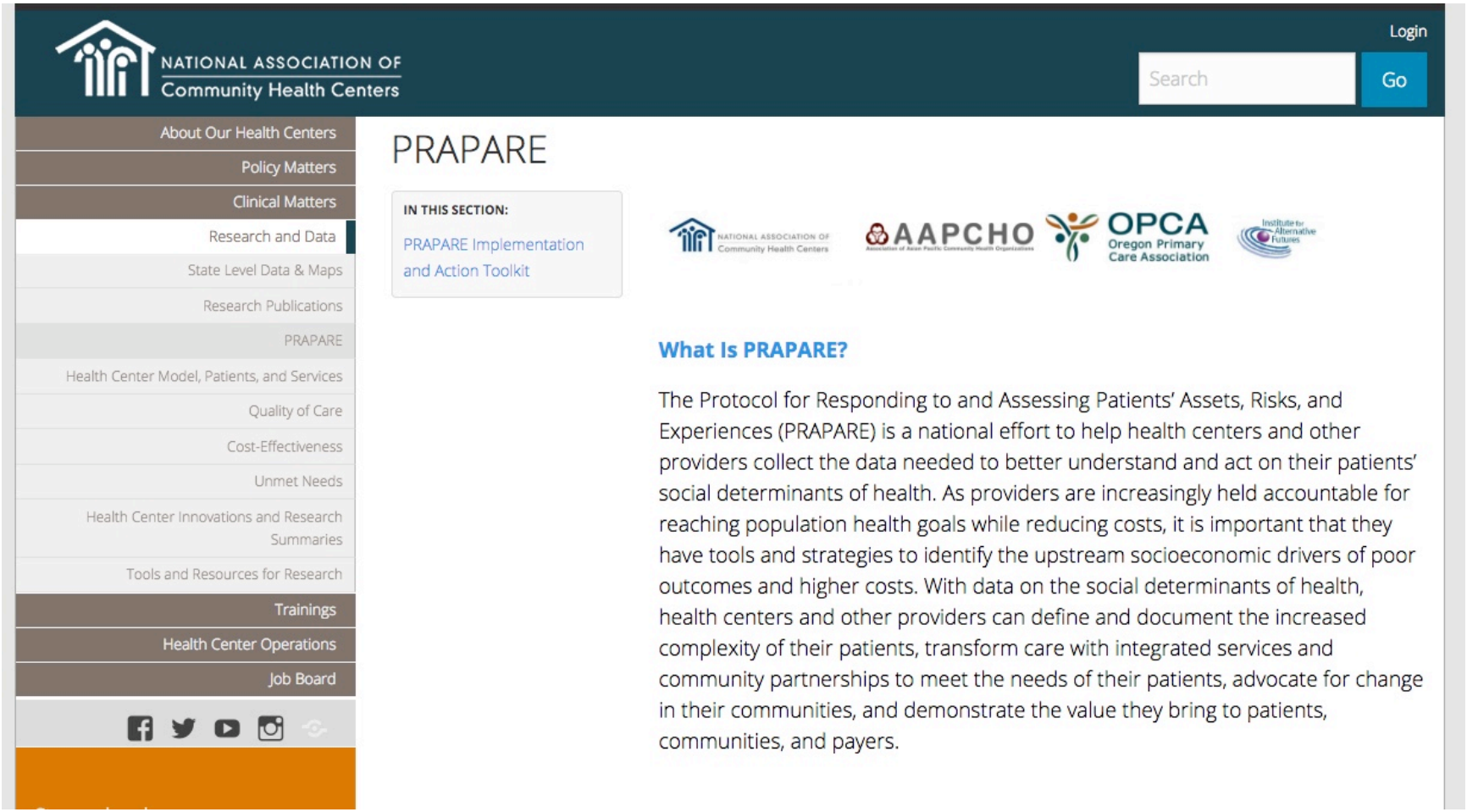
PRAPARE ASSESSMENT AND TOOLKIT



http://www.nachc.org/research-and-data/prapare/toolkit/

ROI CALCULATOR

http://www.commonwealthfund.org/interactives-and-data/infographics/2018/social-services-roi-calculator

ROOTS PROGRAM - CCI

https://www.careinnovations.org/programs/roots/

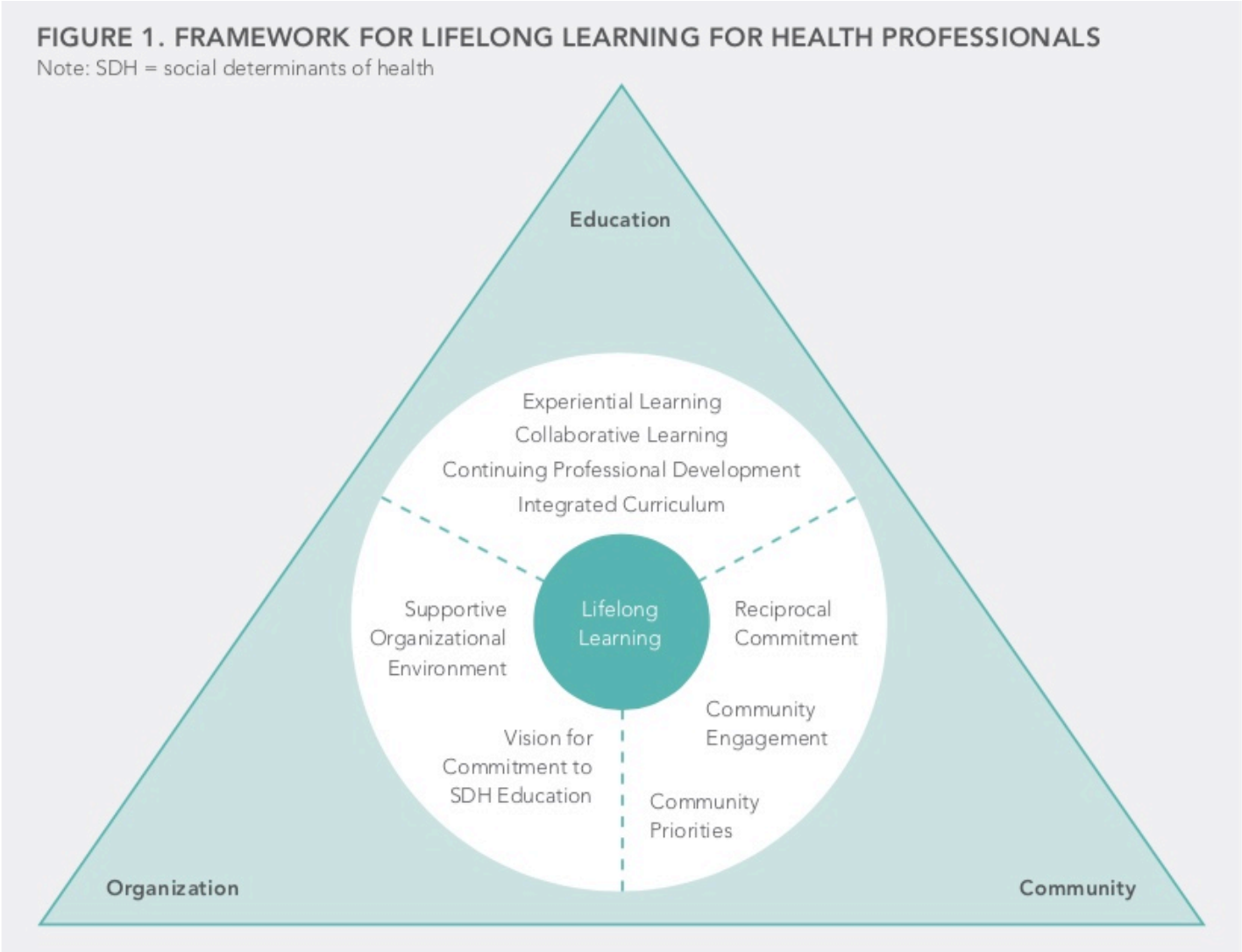
SCREENING FOR POVERTY

"Do you ever have difficulty making ends meet at the end of the month?"

Brcic et al, 2011 Int Jrnl Fam Med

WHERE HEALTH BEGINS

http://wherehealthbegins.org/



TRAINING RESIDENTS IN SDOH - GREATER NYHA

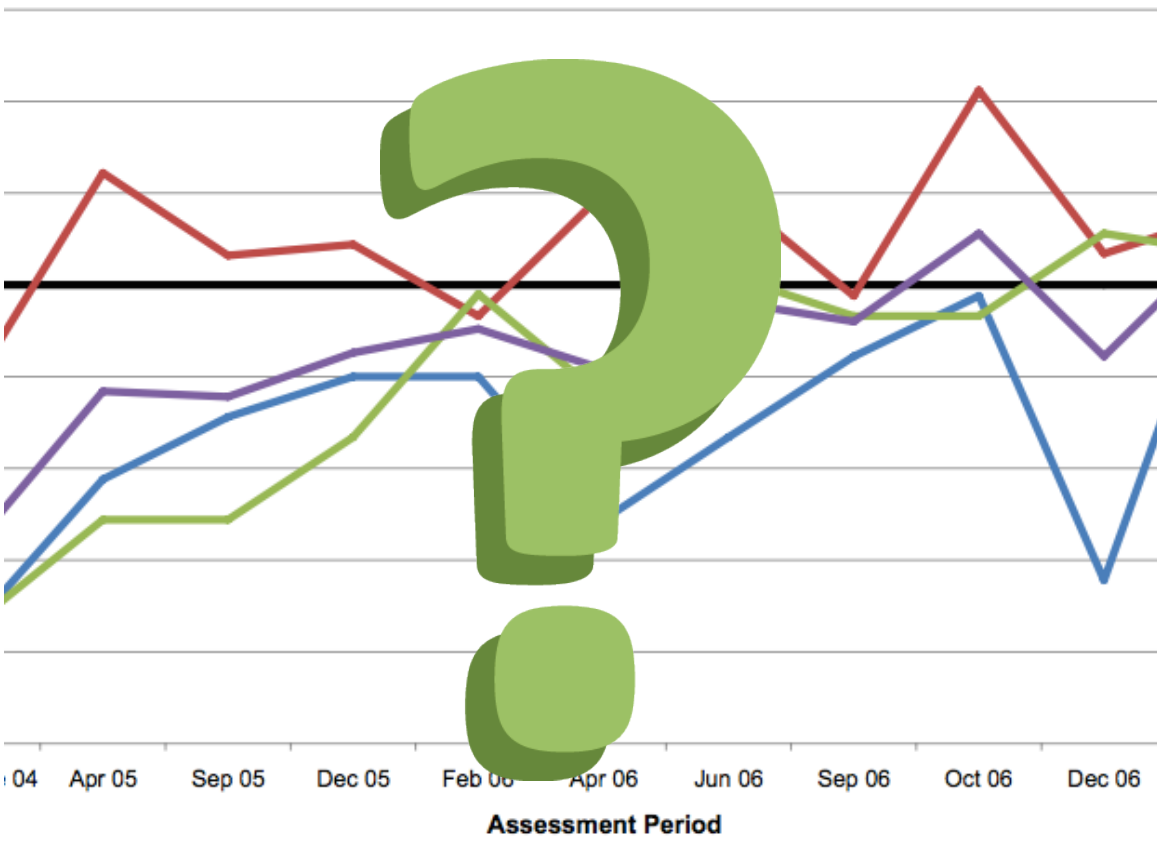
https://www.gnyha.org/wp-content/uploads/2017/09/SocialDeterminants_digital-1.pdf

WHAT MATTERS INDEX AND BETTER CARE PLAYBOOK

- "Do you have enough money to buy the things that you need to live every day such as food, clothing, or housing?" *Yes, always; sometimes; no*

http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0192475

www.bettercareplaybook.org/resources/development-care-guidance-index-based-what-matters-patients



HOW ARE WE DOING RIGHT NOW?

HOW WILL WE KNOW A CHANGE IS AN IMPROVEMENT?

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MEASURES

- Screening for social determinants
- Referrals, navigation, connection
- Provision of care management services
- Eligibility assistance provision
- Health education or supportive counseling
- Outreach
- Transportation provision

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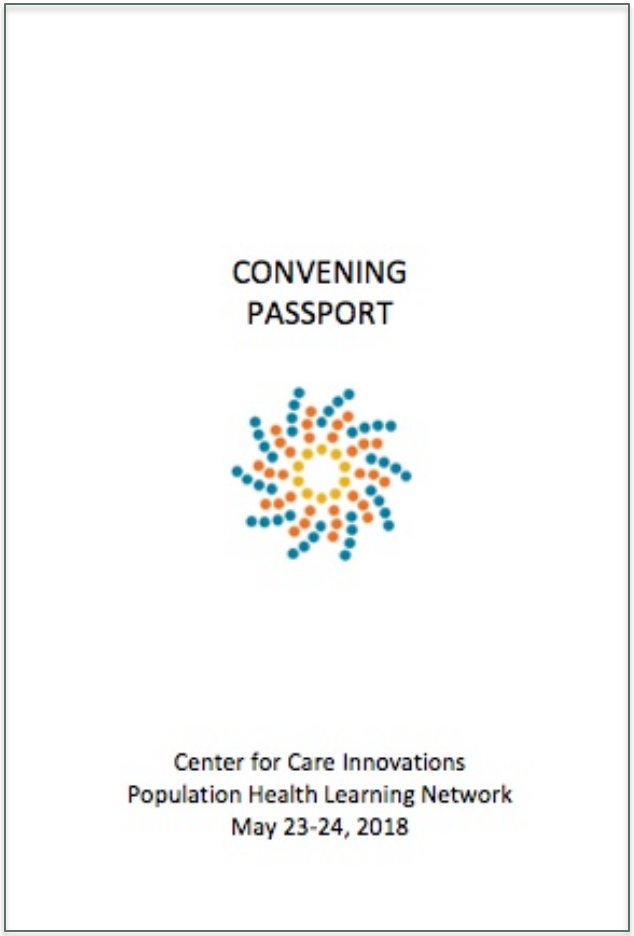

PASSPORT

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GETTING STARTED…

- Aim
  - Scope!!!!
- Measures
- Tests of Ideas!!!!
  - Tools
  - Roles
  - Partnerships

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REFLECTIONS

Abhau Lake, BC. Photo by Denielle Wiebe

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"Ultimately, the secret of quality is love. You have to love your patients, you have to love your profession…. If you have love, you can work backward to monitor and improve the system."

-Donabedian

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Feedback

(One Day Workshops or Final Day of Multiple Day Workshops)

8 Feb 2016

Name: (optional) Organization (optional) Date:

1. What were the highlights of today's session?

2. Were there any topics discussed today that you have additional questions about or would like to have clarified?

3. Indicate whether the balance between presentations, discussion and activities fit your style of learning.

4. Do you have any advice for the facilitator/s?

5. Other comments or suggestions?

6. How confident are you that you can use the skills from this workshop?

Not at all Confident										Very Confident
0	1	2	3	4	5	6	7	8	9	10

7. How likely are you to recommend this workshop to your colleagues?

Not Likely										Very Likely
0	1	2	3	4	5	6	7	8	9	10

8. How much do you agree or disagree with this statement?
I intend to use the skills I learned in this workshop in my practice.

Strongly Disagree							Strongly Agree
0	1	2	3	4	5	6	7

HANDOUT – EVALUATIONS

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CONTACT US

- Connie: connie.davis@centreCMI.ca
- Kelly: kellyrnreilly@gmail.com
- Office hours
- Google doc for sharing plans
- Portal – watch for further development about sharing on the portal

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FOR MORE INFORMATION, CONTACT
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Lean On Me | Playing For Change | Song Around The World

LEAN ON ME

Link: https://youtu.be/LiouJsnYytI