Title

Identifying and Addressing Health-Related Social Needs Between Primary Care Visits at Denver Health

Abstract

Background

Health-related social needs (HRSNs) reflect an individual's experience of social determinants of health including food insecurity, housing, utilities, transportation, and safety. Many efforts to address HRSNs are confined to the traditional visit-based model of health care delivery.

Objective

Our project increased screening and intervention for HRSNs through a between visit model to reach more people and during times of potential acute needs.

Methods

We leveraged the electronic health record to identify high risk patients for HRSN screening including patients with a COVID-19 infection, patients transitioning from corrections to community and those experiencing chronic medical conditions. The patient portal was used to invite people to complete screening and to present them with community-based resources or offer them care navigation follow-up. Finally, we monitored and evaluated these processes through dashboards and a follow-up survey to assess the patient perspective on how this process addressed their HRSNs.

Results

A total of 9,132 people were invited and 1958 (21%) completed the HRSN screening via the patient portal. HRSNs were identified for 1,347 people (69% of people screened) and care navigation was requested for 541 people (28% of people screened). The most common HRSN identified was food insecurity (56%), followed by transportation (36%), housing instability (27%), housing problems (26%), safety (24%) and utilities (17%). The between-visit screening identified more needs than traditional visit-based practices which identified food insecurity most often (25%) followed by transportation (15%), housing insecurity (11%), housing problems (6%), safety (6%), and utilities (5%).

Conclusion

Addressing HRSNs between visits is effective at screening more people and identifying more needs than traditional visit-based practices. This can also offer people a more private and timely option for identifying and addressing needs. It is important to supplement these more self-directed methods with facilitated support such as care navigation.