## Title

Adoption and impact of clinical decision support tools targeting social risk-informed healthcare provision: Trial results

## **Abstract**

Background: Though numerous initiatives are driving healthcare providers' efforts to document social determinants of health (social risk) screening results in EHRs, little is known about leveraging this information to improve health outcomes.

Objective: To test the adoption and impact of EHR-embedded tools designed to help primary care teams document patients' social risks and apply this information in care planning for patients with uncontrolled hypertension / diabetes.

Methods: Clinic-randomized pragmatic trial; six community clinics received the intervention tools, and 44 were controls. Three intervention sites were randomly selected to receive modest implementation support. Clinic-level outcomes were assessed in the year post-tool activation. Primary outcomes were blood pressure and HbA1c control. Secondary measures included social risk screening and documentation in the problem list / visit diagnosis, and medication adherence documentation. Qualitative analyses identified barriers to / facilitators for tool adoption.

Results: Preliminary descriptive results follow; final trial results, including comparison to controls, will be presented. Clinic tool use / response rates ranged from 9-45% for a screening reminder alert, from 16-74% for a social risk documentation alert, and from 0-23% for social risk care plan adaptation documentation; in all cases, clinics receiving even minimal implementation support had higher use rates. Medication adherence documentation, a standard practice, was almost 100%, but reasons for non-adherence were almost never documented. Tools that were intended for use by clinic support staff and addressed social risk-related communication and workflow needs tended to have higher uptake; tools aimed at providers, who generally did not perceive a need for EHR support in integrating social risk information into care decisions, had lower uptake.

Conclusion: Results of this trial on EHR-based tools targeting social risk-informed care in community clinics indicate substantial implementation barriers. We need to better understand whether such tools can support care planning for patients with social risks.