IMPACTING THE SOCIAL DETERMINANTS OF HEALTH AT OREGON'S COMMUNITY HEALTH CENTERS

Social determinants of health work at the Oregon Primary Care Association

November, 2015

Alicia Atalla-Mei, Social Determinants of Health Manager at OPCA

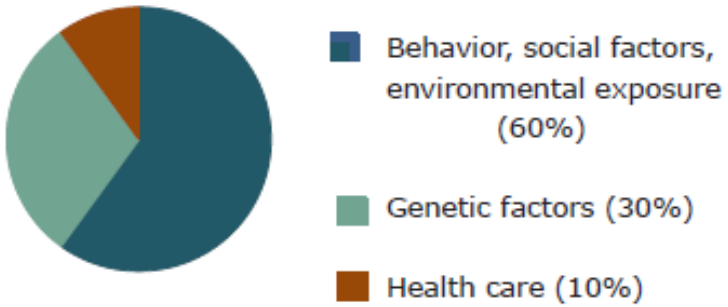
Video

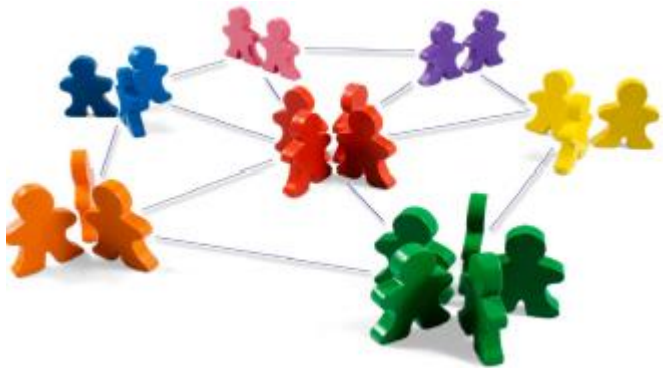
It Takes a Neighborhood

- 3 year pilot project testing out a new role, called the Health Instigator
- Funded by Kaiser, administered by the OPCA at two Oregon Community Health Centers
- **Goal of the role:** The Health Instigator convenes community organizations and providers to elevate issues and barriers impacting the health of a specific population, and then facilitates collective efforts to address those issues with the goal of improving health outcomes and care, and lowering costs

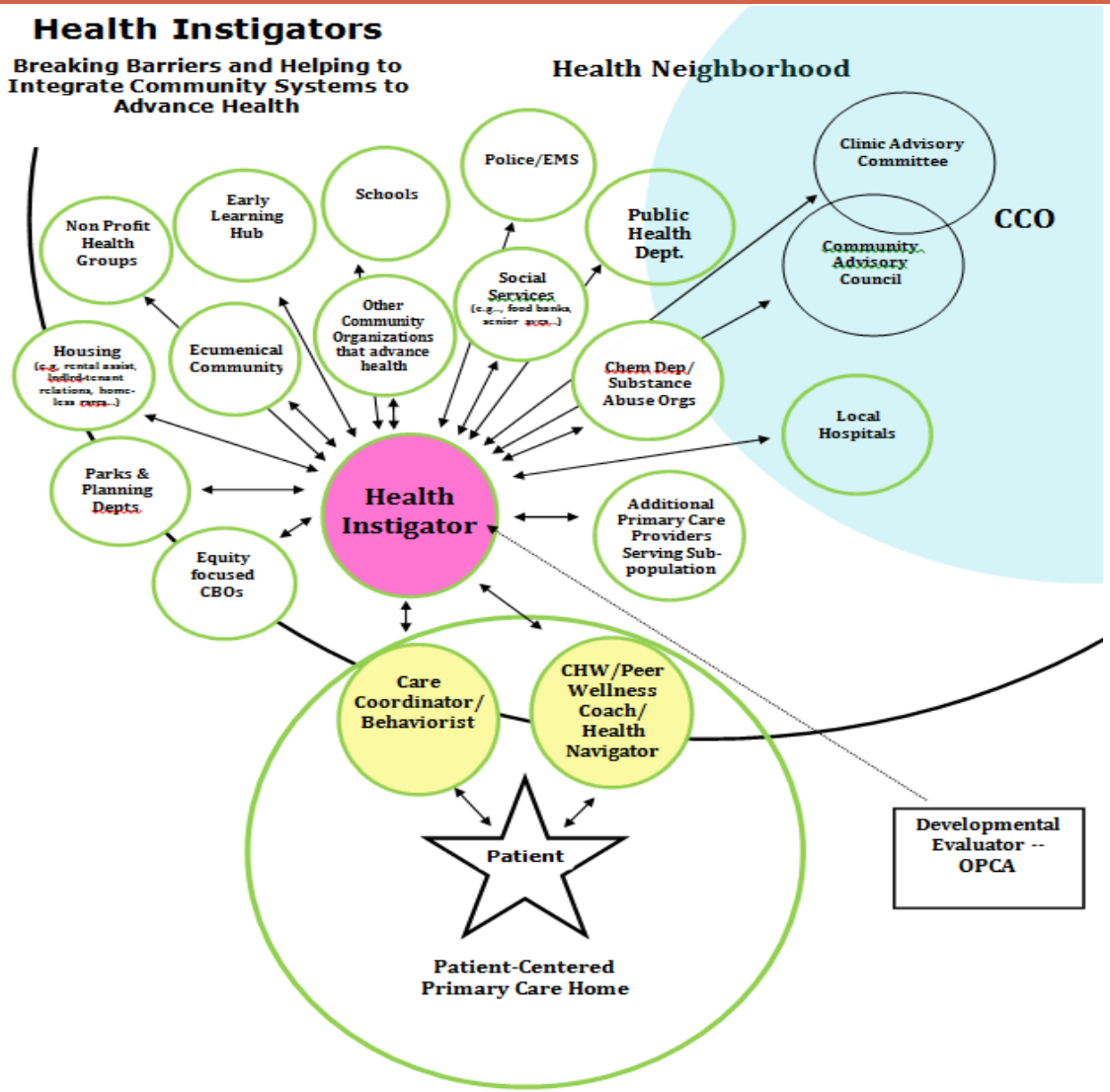
Why a Health Instigator?

- Non-medical factors are impacting the health of our patients
- We work in silos
- Lack of human resource dedicated to solving "systems" issues





Placement of the Role



What Did We Learn?

- Some success stories
- Factors to consider
- What comes next

PRAPARE Project

- **Project Goal:** To create, implement/pilot test, and promote a ***national standardized patient risk assessment protocol*** to assess and address patients' social determinants of health (SDH).
- **Position health centers to:**
  - Document the extent to which each patient—and whole patient populations) are complex
  - Use that data to;
    - Improve patient health
    - Affect change at the community/population level
    - Sustain resources
    - Create community partnerships necessary to improve health

NATIONAL ASSOCIATION OF Community Health Centers

AAPCHO

OPCA Oregon Primary Care Association

Institute for Alternative Futures

THE KRESGE FOUNDATION

KAISER PERMANENTE®

blue of california foundation

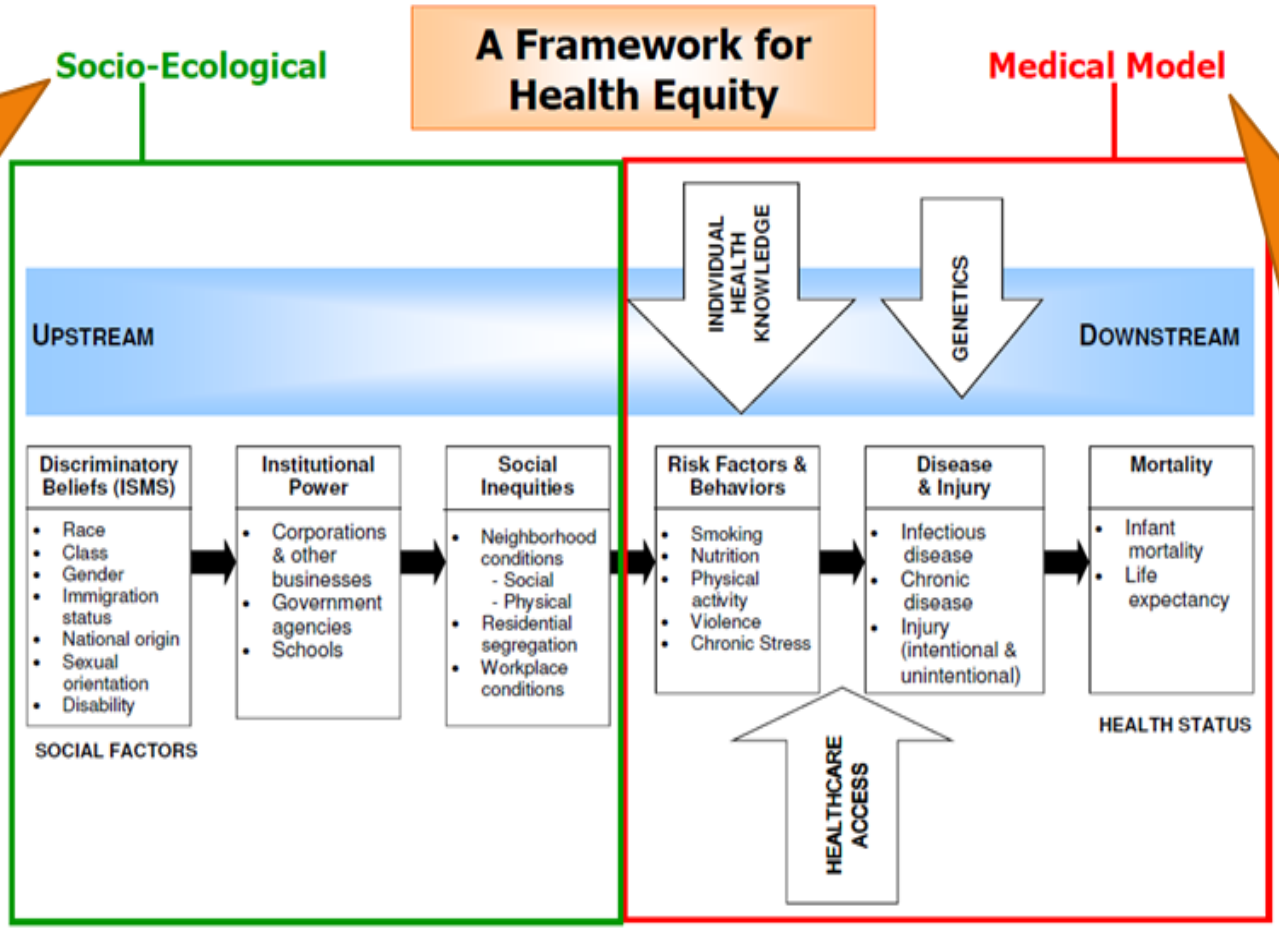
WHAT IS DRIVING THE NEED FOR THIS PROJECT?

How well do we know our patients?

Are services addressing SDH incentivized and sustainable?

Are community partnerships adequate and integrated?

Figure 1



Bay Area regional Health Inequities Initiative (BARHII). 2008. "Health Inequities in the Bay Area", accessed November 28, 2012 from http://barhii.org/resources/index.html.

NATIONAL ASSOCIATION OF Community Health Centers

IDENTIFYING CORE DOMAINS

Literature reviews of SDH associations with cost and health outcomes

Monitored and/or aligned with national initiatives

- *HP2020*
- *RWJF County Health Rankings*
- *IOM on SDH in MU Stage 3*
- *NQF on SDH Risk Adjustment*
- *SBM & NIH*

Collected existing protocols from the field

- *Collected 50 protocols*
- *Interviewed 20 protocols*
- *Identified top 5 protocols*

Engaged stakeholders for feedback

- *Braintrust (advisory board) discussion*
- *Surveyed stakeholders*
- *Distributed worksheet to potential users for feedback*

Used evidence to apply domain criteria

→

Identified 15 Core Domains

NATIONAL ASSOCIATION OF Community Health Centers

PRAPARE Domains

Core	
UDS SDH Domains	**Non-UDS SDH Domains**
1. Race	9. Education
2. Ethnicity	10. Employment
3. Veteran Status	11. Material Security
4. Farmworker Status	12. Social Integration
5. English Proficiency	13. Stress
6. Income	
7. Insurance	
8. Neighborhood	
9. Housing	

Optional	
Non-UDS SDH Domains	
1. Incarceration History	5. Safety
2. Transportation	6. Domestic Violence
3. Refugee Status	
4. Country of Origin	

PRAPARE asks 15 questions to assess 14 core SDH domains.

- 9 questions already asked for UDS reporting
- 5 non-UDS questions informed by MU3

PRAPARE has 6 optional domains.

NATIONAL ASSOCIATION OF Community Health Centers

Understand Patient Complexity

Core	
UDS SDH Domains	Non-UDS SDH Domains
1. Race	9. Education
2. Ethnicity	10. Employment
3. Veteran Status	11. Material Security
4. Farmworker Status	12. Social Integration
5. English Proficiency	13. Stress
6. Income	
7. Insurance	
8. Neighborhood	
9. Housing	

Patient complexity is the sum of patient characteristics that affect:

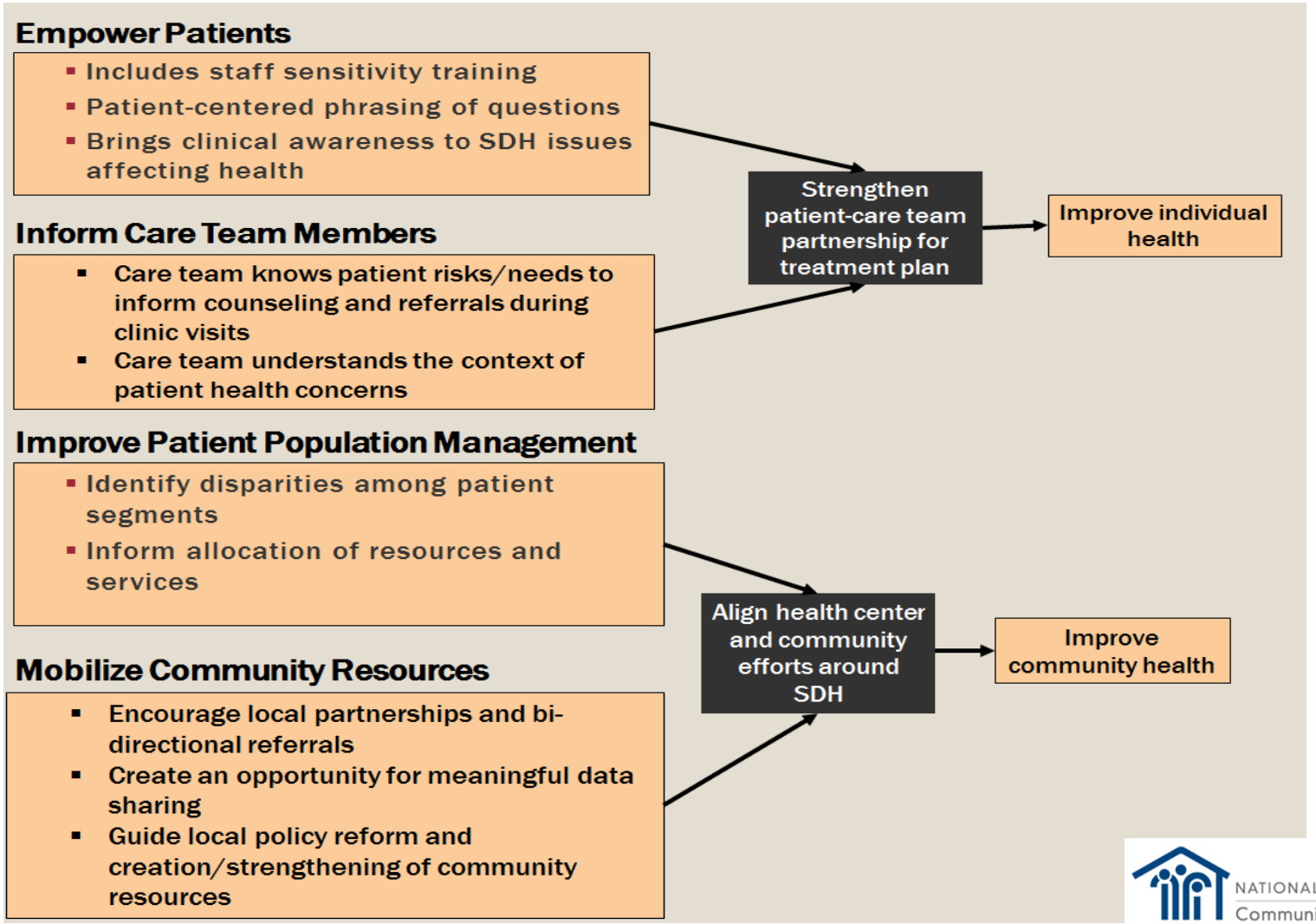
1. health care seeking and utilization behaviors
2. health outcomes

Patient characteristics include clinical and non-clinical risk factors (like SDH).

Care teams must have an understanding of their patients' complexity in order to make appropriate and informed care decisions.

NATIONAL ASSOCIATION OF Community Health Centers

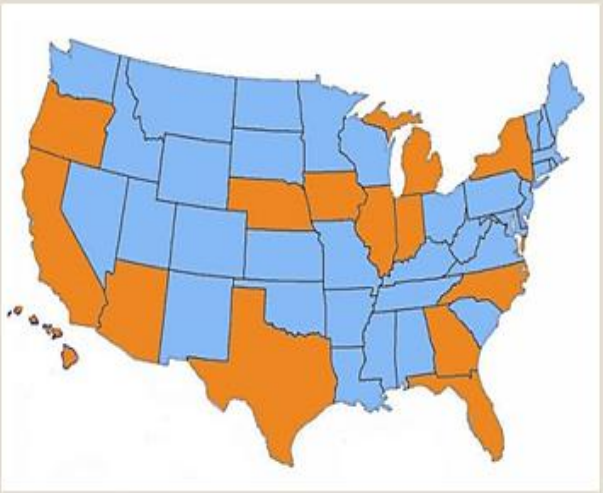
And….



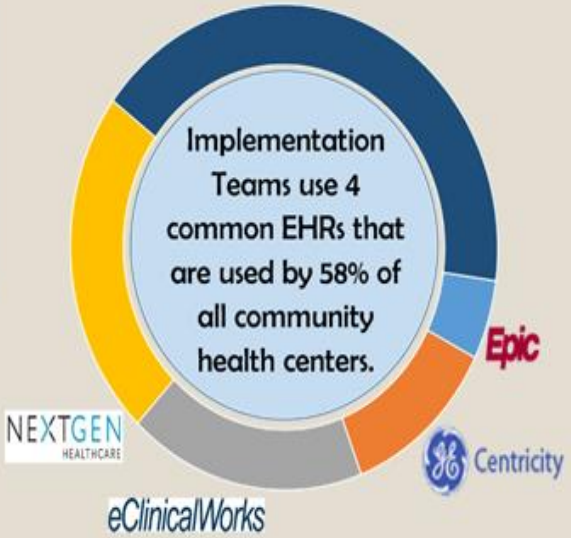
NATIONAL ASSOCIATION OF Community Health Centers

Pilot Testing PRAPARE

Team 1	Team 2	Team 3	Team 4
• OCHIN, Inc. • La Clinica del Valle Family Health Center (OR)	• Waianae Coast Comprehensive Health Center (HI) • AlohaCare • Altruista Health	• Health Center Network of New York • Open Door Family Medical Centers (NY) • Hudson River Healthcare (NY)	• Alliance of Chicago • InConcertCare • Iowa Primary Care Association • Waikiki Health (HI) • Peoples Community Health (IA) • Siouxland Community Health Center (IA)



Teams reach states across the country, aiding with the national dissemination of PRAPARE.

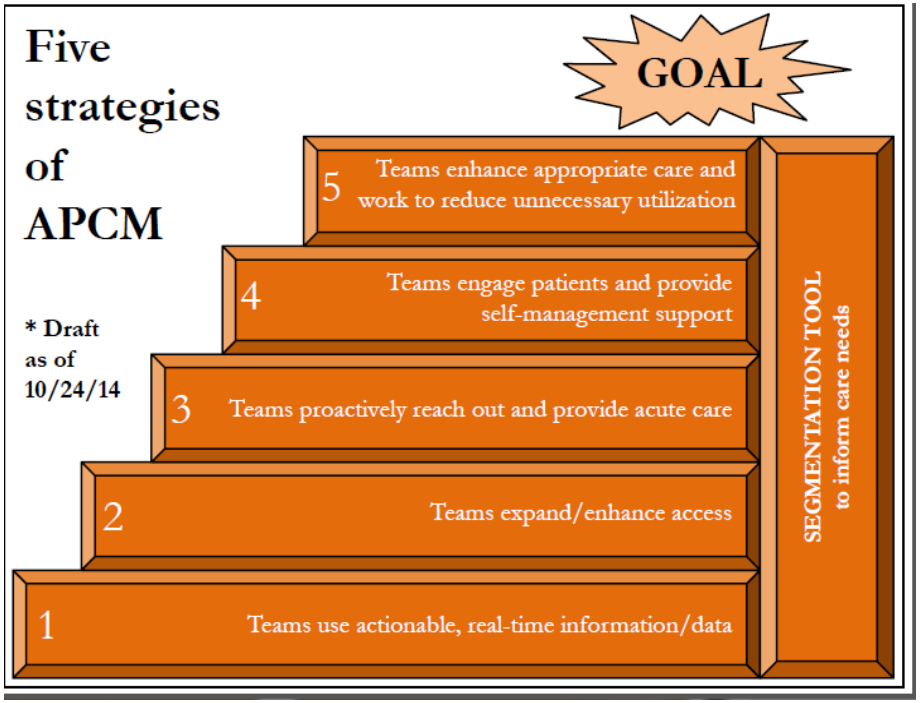


NATIONAL ASSOCIATION OF Community Health Centers

How Can You Use PRAPARE?

- APCM & Population Segmentation

- We invited clinics to pick a patient population and interview 10 consumers using 3 questions from PRAPARE



Next Steps

- 2015: Complete pilot test/implementation process
- 2015: Complete Implementation/Action Toolkit, including
  - Free EHR templates
  - Best data collection practices
  - Best SDH intervention practices
- 2016: Validation
- 2016: Translate PRAPARE into other languages
- Ongoing: Dissemination

NATIONAL ASSOCIATION OF Community Health Centers