IMPLICATIONS OF SOCIAL DETERMINANTS OF HEALTH AND THE IMPORTANCE OF COLLECTING DATA ON PATIENT RISK

National Health Care for the Homeless Council, Social Determinants of Health Institute
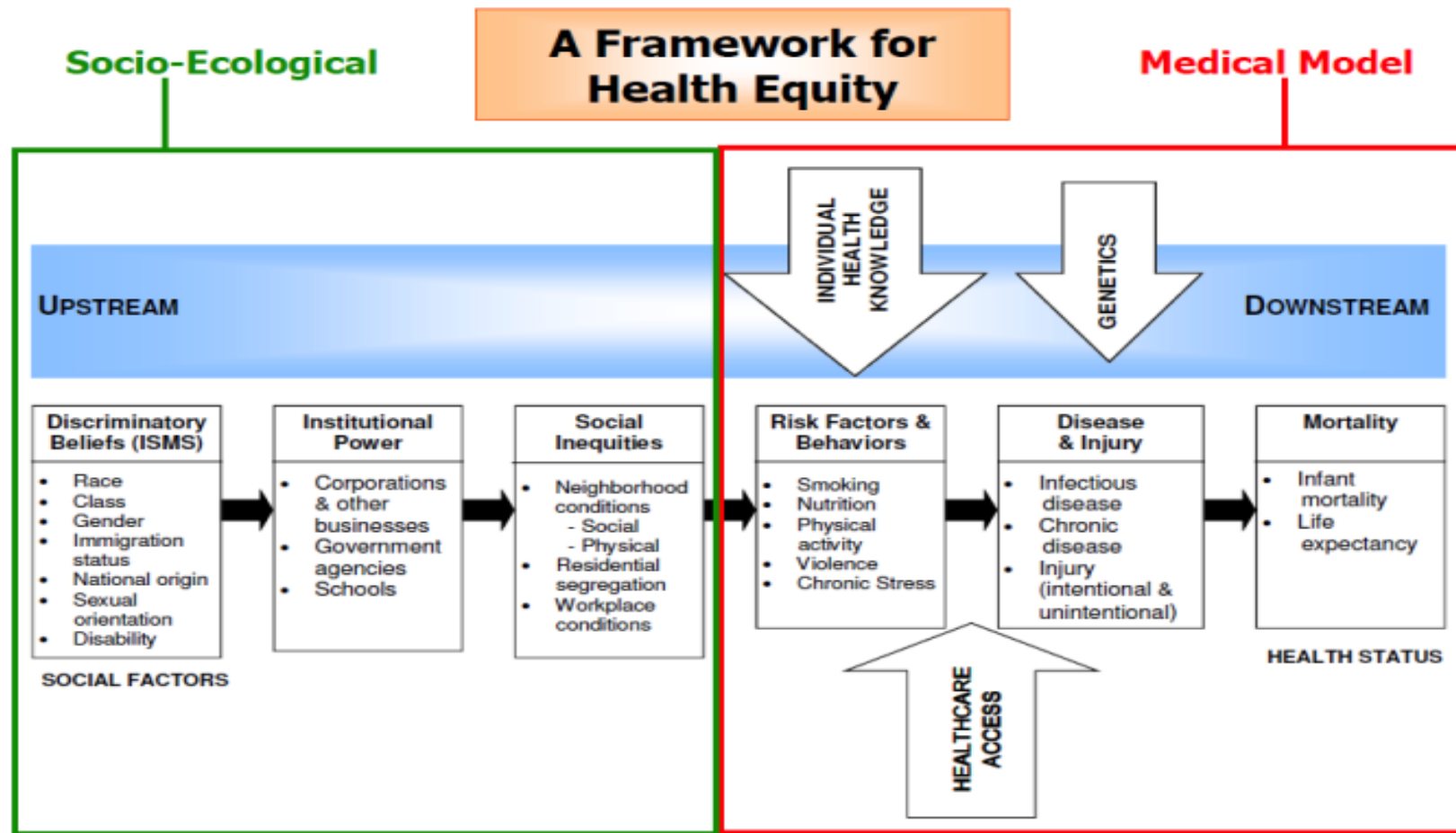May 27, 2014

Michelle Jester
National Association of Community Health Centers

NATIONAL ASSOCIATION OF
Community Health Centers

HOW DO SOCIAL DETERMINANTS OF HEALTH AFFECT HEALTH?

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.

WHY DO SOCIAL DETERMINANTS OF HEALTH MATTER?

- Contribute to poorer health outcomes

- Lead to health disparities

- Make it more difficult to improve quality and health outcomes

- Places providers and organizations that serve complex patients at a disadvantage when it comes to:
  - Value-based pay, such as incentive payments and pay for performance
  - Public Reporting

WHY IS IT IMPORTANT TO COLLECT DATA ON THE SOCIAL DETERMINANTS OF HEALTH?

- Better understand and manage patient population

- Provide needed clinical and non-clinical services

- Improve operations and quality performance

- Force policy changes to make investments in programs that improve health

- Negotiate payment
  - Ensure provider payment fairly compensates for true cost of care

- Risk adjustment
  - Ensure equitable provider comparisons

EXAMPLE: HOMELESSNESS

- **Associated with higher healthcare expenditures, higher emergency department use, and lower health outcomes**
  - Doran, Raven, & Rosenheck (2013) and Mandelberg, Kuhn, & Kohn (2000)

- **Interventions that address housing needs reduce healthcare expenditures**
  - Kushel et al (2002) and Sandowski, Kee, VanderWeele, & Buchanan (2009)

- **Need data to:**
  - **Provide appropriate services**
  - **Show services are successful**
  - **Influence payment systems to sustainably provide non-clinical services**
  - **Demonstrate patient complexity under value-based pay**

NATIONAL INITIATIVES ARE FOCUSING ATTENTION ON ADDRESSING SOCIAL DETERMINANTS OF HEALTH

Healthy People 2020

Robert Wood Johnson Foundation: County Health Rankings

Society of Behavioral Medicine and National Institute of Health

ICD-10

Institute of Medicine: Committee on the Recommended Social and Behavioral Domains and Measures for Electronic Health Records

National Quality Forum: Expert Panel on Whether to Include Socioeconomic Status in Risk Adjustment for Performance Measures

HEALTH CENTERS AND THE SOCIAL DETERMINANTS OF HEALTH: ACCELERATING CHANGE BY IMPROVING HOW PROVIDERS ASSESS AND ADDRESS PATIENT RISK

OVERVIEW OF THE PROJECT: IMPLICATIONS

- Build a Culture of Data

- Standardized data can lay the foundation to:

  - Better understand the impact of patient complexity on outcomes and cost

  - Understand which non-clinical services and clinical adjustments are needed to meet the needs of their patients

  - Advocate for policy changes that positively shape the SDH

  - Design and test the impact of population-based interventions

  - Ensure adequate and sustainable payment

  - Create partnerships that more fully support the integration of clinical and non-clinical care

TIMELINE OF THE PROJECT

Year 1
- **Develop paper based tool and EHR template**

Year 2
- **Test tool in health center workflow with CHCs and HCCNs**

Year 3
- **Disseminate tool widely and release final report**

PROGRESS TO DATE

- Environmental Scan
  - Literature Review
  - Interviews of existing patient risk assessment tools

- Monitor related activities that can inform our process
  - NQF, IOM

- Draft list of candidate SDH categories

- Receive feedback from stakeholders to prioritize SDH categories

- Identify key components from existing tools to inform the development of our own tool

LIST OF DOMAINS

Social Determinant of Health Factor

Education	**Insurance Status**
Employment Status and Occupation: *(includes unemployed, underemployed)*	**Certain Health Behaviors:** *(includes only diet and physical activity)*
Income	**Transportation**
Housing Circumstances: *(includes homelessness, unstable housing, foreclosure, quality of home environment and living conditions, number of people living in household)*	**Material Security:** *(includes difficulty paying for resources required for daily living, such as food, clothing, prescriptions, and utilities such as heating, lighting, and water)*
Workplace Environment and Conditions: *(includes occupational safety, stressful working conditions, and exposure to toxins/pesticides/hazards)*	**Self Efficacy and Confidence:** *(includes an individual's beliefs regarding his/her power to affect situations, complete tasks, and reach goals)*
Legal Risk: *(includes imprisonment and other incarceration, conviction in civil and/or criminal proceedings without imprisonment, problems related to release from prison, discord with counsellors)*	**Stress and Resilience:** *(Stress includes chronic and acute stress; former and ongoing adverse life events such as incarceration, exposure to abuse or violence. Resilience includes an individual's ability, willingness, and resources to counter adverse effects of stress.)*
Health Literacy	**Limited English Proficiency**
Neighborhood and Built Environment: *(includes exposure to toxins/hazards; safety; violence; walkability; and community resources such as grocery stores, parks, pubic transportation, educational and job opportunities, social services)*	**Social Support and Stability:** *(includes social cohesion and sense of belonging, civic participation, social support in familial and friend relationships, social isolation, and social disruption in major life events, such as acculturation, loss of loved ones)*

NEXT STEPS

QUESTIONS?

Michelle Jester

National Association of Community Health Centers

202-331-4609

mjester@nachc.org