Tailoring a Social Needs Assessment Tool for an Urban Latino Population

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Tailoring a Social Needs Assessment Tool for an Urban Latino Population

Stephanie Fosbenner
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Intro/Background

There is substantial evidence that social, economic and behavioral factors, termed the “social determinants of health” play an important role in shaping population health outcomes. Traditionally, there has been little effort to link the social determinants of health to clinical practice or healthcare delivery systems. Doing so has the potential to improve patient-physician communication, patient engagement, and adherence to a treatment plan, ultimately enhancing patient satisfaction and improving health outcomes.

Problem Statement

 Individuals who seek care within the Lehigh Valley Health Network have complex social needs, but to date, few efforts have been made to systematically measure these needs and develop infrastructure to help address them within the clinical setting.

Methods

Eighteen focus groups were conducted with 115 participants recruited from one of multiple clinic sites at the 17th & Chew Street campus. At the focus groups, participants were queried about social, economic and cultural barriers they confront that make it difficult for them to access healthcare and to maintain their health. A list of priority social needs areas was generated and participants voted on their top three areas of need. Participants were also shown an image of an iPad app for potential use at their primary care physician’s office to enter information about an important social, economic or other type of barrier that was interfering with their health maintenance or access to healthcare. Participants provided qualitative feedback about using the electronic interface than younger participants.

Results

Seven priority social needs areas emerged including: healthcare systems issues, socioeconomic issues, psychosocial/emotional health, physical health, transportation, other obligations, and other. Of these seven areas of need, healthcare systems issues and socioeconomic issues rose to the top as being the most burdensome for participants across all focus groups. The importance of each social need priority area varied based on age and ethnicity. Overall, participants found the iPad app acceptable, however, perceptions differed based primarily on age, with older participants expressing more frustration and uncertainty about using the electronic interface than younger participants.

Table 2. Focus Group Composition

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Preferred Language</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>English</td>
<td>18-35</td>
</tr>
<tr>
<td></td>
<td>Spanish</td>
<td>35-64</td>
</tr>
<tr>
<td></td>
<td></td>
<td>65+</td>
</tr>
<tr>
<td>Non-Hispanic</td>
<td>English</td>
<td>18-35</td>
</tr>
<tr>
<td></td>
<td>Spanish</td>
<td>35-64</td>
</tr>
<tr>
<td></td>
<td></td>
<td>65+</td>
</tr>
</tbody>
</table>

Conclusion

This study confirms that a subset of the population receiving healthcare services at the Lehigh Valley Health Network struggles with social and economic barriers when attempting to access healthcare and participate in health maintenance activities. Next steps include further consideration of how to best incorporate a mechanism for collecting this information into the healthcare system. Healthcare providers must be aware of these barriers and how they impact their patients’ health in order to provide truly patient-centered, values-based care.