

POLICYLAB

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UNDERSTANDING BARRIERS TO RESOURCE CONNECTION FOR HOSPITALIZED FAMILIES WITH UNMET SOCIAL NEEDS

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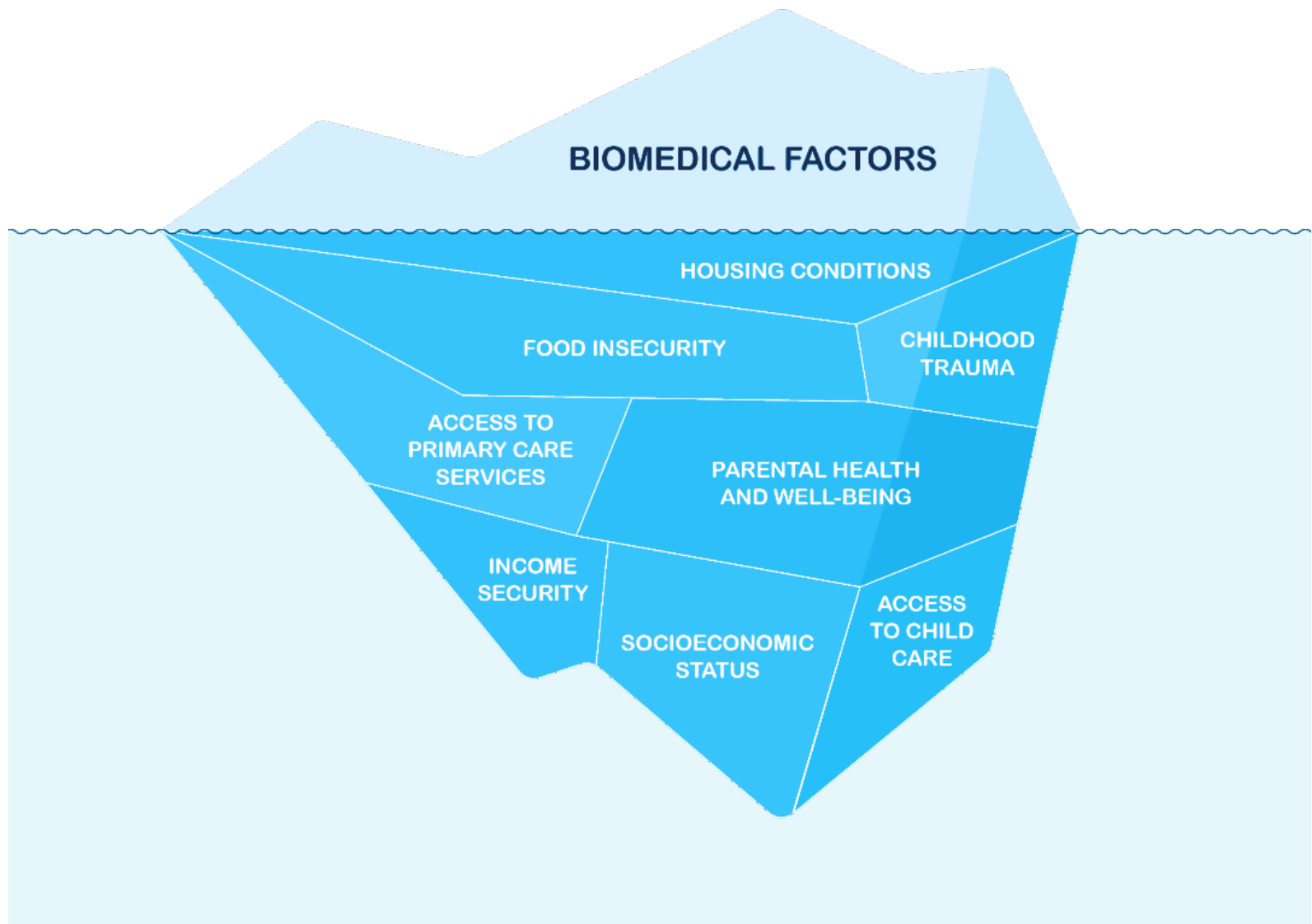


DISCLOSURES

I have no relevant financial relationships with the manufacturer(s) of any commercial product(s) and/or provider(s) of commercial services discussed in this CME activity.

OVERVIEW

- **Background**
- Objectives
- Methods
- Results
- Discussion



SOCIAL NEEDS SCREENING IS INCREASINGLY BEING INCENTIVIZED AND IMPLEMENTED

- The AAP recommends that pediatricians screen for social needs
- Medicaid is exploring reimbursement for social needs screening and referral

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Poverty and Child Health in the United States

COUNCIL ON COMMUNITY PEDIATRICS

POLICY STATEMENT

Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of all Children



How much do social needs screening and referral programs really help patients and families?

Clinicians' Perceptions of Screening for Food Insecurity in Suburban Pediatric Practice

Deepak Palakshappa, MD, MSHP^{a,b,c,d}, Aditi Vasan, MD,^a Saba Khan, MD,^c Leah Seifu, MPH,^d Chris Feudtner, MD, PhD, MPH,^{a,b,d} Alexander G. Fiks, MD, MSCE^{a,b,d}

- 4371 caregivers screened for food insecurity, 122 (3%) screened positive, only 1 family was connected with new SNAP benefits

Impact of Social Needs Navigation on Utilization Among High Utilizers in a Large Integrated Health System: a Quasi-experimental Study

Adam Schickedanz, MD, PhD¹, Adam Sharp, MD, MS^{2,3}, Yi R. Hu, MS², Nirav R. Shah, MD, MPH⁴, John L. Adams, PhD², Damon Francis, MD⁵, and Artair Rogers, MS^{5,6}

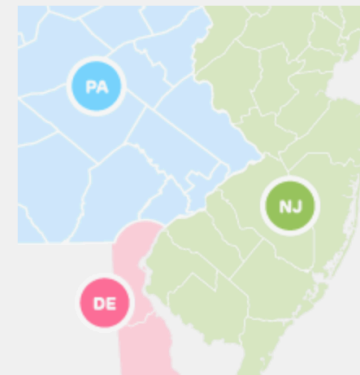
- 34,225 adults screened, 53% screened positive for one or more social needs, only 10% were connected with resources

HOW DO WE ENSURE THAT THESE PROGRAMS CAN MEET PATIENTS' IDENTIFIED NEEDS?

- **At CHOP, we've partnered with Aunt Bertha, an organization that compiles info about social service and community organizations into a searchable electronic resource map**

Search for community services that can support your family.

Zip



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This study aims to use semi-structured interviews with caregivers of pediatric patients admitted to CHOP:

Specific Aim 1: To understand the feasibility and acceptability of social needs screening and referral in the inpatient setting

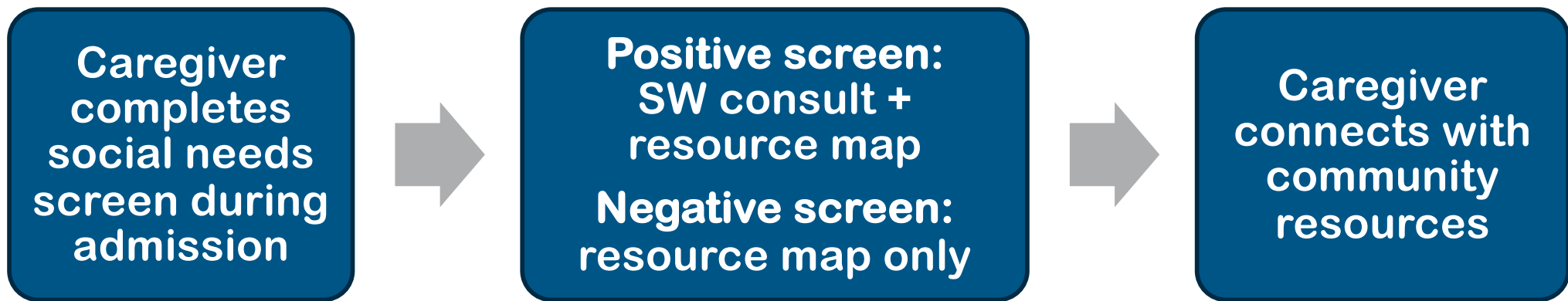
Specific Aim 2: To explore the acceptability and utility of a resource map as a tool to connect with programs & services

Specific Aim 3: To identify barriers and facilitators of successful linkage to government and community programs

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Methods: Social Needs Screening Process



Methods: Participants and Recruitment

Convenience sample of caregivers who complete a tablet-based social needs screen during their child's admission and:

- Screen positive for ≥ 1 social needs
- ≥ 18 years of age
- English as primary language

All caregivers who meet inclusion criteria invited to participate; \$25 gift card on completion.



Data Collection

25 minute semi-structured interviews:

- Experience with tablet-based screening
- Experience using resource map (+/-walk-through)
- How caregivers connect with resources & barriers/facilitators in this process

Caregivers complete demographics questionnaire on iPad



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Participant Demographics (n = 28)

We interviewed a total of 28 (of 31) caregivers:

- 25 mothers, 2 fathers, 1 grandmother**
- 43% White, 43% Black, 11% Hispanic**
- 71% Medicaid insured, 11% Private with Secondary Medicaid**
- 68% had children with ≥ 1 complex chronic condition**

Participant Demographics (n = 28)

Number of Unmet Social Needs	
1	12 (43%)
2	14 (50%)
3	2 (14%)
Unmet Social Needs	
Depressed mood	19 (68%)
Food insecurity	15 (54%)
Assistance with utilities	9 (32%)
Assistance with transportation	4 (14%)
Intimate partner violence	1 (4%)

Caregiver Perspectives on Screening

Theme	Representative Quotations
Appreciation for hospitals asking about social needs	<p><i>“Asking about if you can pay your bills on time...this is the first time anyone has ever asked me anything like that. It just felt nice to know that you guys care about that, and gave me the website to look up things. It was nice to know that you guys care.”– Participant N</i></p> <p><i>“What’s going on at home could be a defining reason why [a family] is even in the hospital in the first place. But that’s not usually a question that’s asked by the healthcare providers. Typically, it’s not.” – Participant F</i></p>
Preference for tablet-based screening	<p><i>“It’s easier to just do it on an iPad because you don’t have anyone sitting in, and just talking to you. Sometimes, face to face stuff is a little more uncomfortable than just clicking things off on the computer.” - Participant L</i></p> <p><i>“You can’t look somebody in the eye and ask for help sometimes. It’s a lot more difficult to say out loud, “I need help,” and not feel like you’re failing at everything...so I think [the tablet] is a nice way to do it.” – Participant E</i></p>

Barriers to Resource Connection

Theme	Representative Quotations
Competing priorities related to caring for a medically complex child	<p><i>"It's just as a parent, while you're dealing with a sick kid, you don't want to do this. Even if you know you need it... you don't want to do the applications, you don't want to sit on the phone with someone for 45 minutes running down, 'How many people live in your household? How much income do you have?' when your brain is thinking, 'Is my kid going to be okay?'" – Participant A</i></p> <p><i>"I went through a really rough postpartum experience, also with having a baby that had issues. But for me, personally, I'm going to make sure my baby has everything they need before I take care of myself.... Therapy for me, that's not really what comes first." – Participant B</i></p>
Difficulty applying for and utilizing government benefit programs	<p><i>"Right now, I'm applying for LIHEAP. The only thing that made that hard for me was because it was asking for all these things. I have to get these letters saying that my other son doesn't have any income, stupid things like that. That makes it hard, little things that prolong the process that shouldn't. My son's three. They should know he doesn't work." -- Participant C</i></p> <p><i>"With WIC, it's just hard to use, cause you got to really kind of do a scavenger hunt in the grocery store... You can only buy certain foods, and in some grocery stores they don't even have the label, so you have to ask someone, 'What can I buy with WIC?' And that's really difficult." – Participant D</i></p>

Facilitators of Resource Connection

Theme	Representative Quotations
Appreciation for electronic resources with information about locally available programs	<p><i>"I feel like paper is a lot more disposable. When people pass out brochures, you're like "Okay, this is cool, I'll take it," to be polite, and then it goes in the trash. At least with a website, you can't do anything to lose it. The information is right there." – Participant F</i></p> <p><i>"I like that it's easy. It has everything right there at your fingertips. It shows you on the map, which [resource] is the closest...I would tell other people I know with children with complications like mine, 'Hey, go to this website if you need some help.'" – Participant G</i></p> <p><i>"It's nice putting in our zip code and having just our services. Because we're from New Jersey, and a lot of stuff here near [the hospital] is Pennsylvania stuff. So it's nice to be able to go into our state, our area, and see what's out there." – Participant J</i></p> <p><i>"The [screening] questionnaire made me interested as to, once the questions are answered and the results are checked, then what? What will be the solution? You can tell someone something, but that doesn't mean that something will be done about it. And it's almost pointless to ask if you don't have information to give... at the end of it, it was good, because you got to the website and you actually got to see what was available in your area. So I liked that." – Participant I</i></p>

Facilitators of Resource Connection

Theme	Representative Quotations
Application assistance from social workers / other support staff	<p><i>“The NICU social worker... she started applications to the point where she couldn't do any more and then you had to jump in. And that is, starting at 50% is a lot better than starting at 0, because 0 feels like a lot of responsibility.” –Participant E</i></p> <p><i>“When [my child] was in the NICU, the social worker made sure that we applied for social security [disability insurance], and she actually helped with the application...I needed his medical chart to go to social security and she made sure it happened. That was big...Just make sure there's a follow through, that's the big thing.” – Participant J</i></p> <p><i>“I appreciate that it comes off very genuine and not so much like...I just want to be in your business. I don't mind speaking about it and finding resources, because I need help, and I don't have anyone outside of here that can really help me. So I feel like it's good having someone to help who is caring, not just doing their job.” – Participant I</i></p> <p><i>“When I got hooked up with WIC, it was at my OB/GYN...and they did the applications for me, they were like here, take this paper with you. I know you're going to need it, you qualify. And that was taken care of right away... That was the best thing I could have asked for.” –Participant M</i></p>

Facilitators of Resource Connection

Theme	Representative Quotations
Longitudinal support in establishing & maintaining connections	<p><i>"I think you should help [families] follow through...connect them with someone in their local area that they may be able to follow-up with [them] and just say, "Hey, we're still here if you're still needing or still wanting any more information." – Participant K</i></p> <p><i>"Just follow up, maybe, like after [families] go home, with a phone call or things like that. I think that'll help because that'll help remind the person, especially, it'll sound and feel to the person like oh, they really care. They want to make sure I get these things done." – Participant L</i></p> <p><i>"It would be good to have someone pick up where somebody else leaves off, where you don't have to keep rehashing your own situation over and over again, having someone who is willing to help. So that once you leave here you know that people are willing to help you, it's not like oh, we just threw you into the deep end and said swim on your own." – Participant E</i></p>

Barriers to Resources During COVID-19

Theme	Representative Quotations
Increased cost of food and increased stress associated with grocery shopping	<i>“There was so much stress all the way around. Every time we’d go grocery shopping, it wasn’t only how much more it was costing us to grocery shop, because the prices on everything went up for quite a bit there, but it was also the fear of going to the store and not knowing, you know, people weren’t following all the recommendations for the longest time. People didn’t want to wear masks...So we worried a lot.”</i> – Participant K
Challenges associated with accessing government programs	<i>“I’m a cook, so my restaurant got shut down and then my job got shut down. I wasn’t working, so I wasn’t getting paid...I would borrow food constantly, just to make sure I have food. Because even though the coronavirus was happening, and I wasn’t working, when I went to go file for food stamps, the government still said I made too much money.”</i> – Participant M
Loss of in-home and school-based services for children with medical complexity	<i>“My son has special needs, and before, I used to drop [him] at school, and then at least I’d have time to go shopping, or time to just breathe, or go back to sleep if I had worked the same day. And now that he’s not in school, it’s constant. Constantly waking up at 6 in the morning and not going to sleep until 11 o’clock at night. And even when you do get a break then it’s like oh, it’s already time to do this for him. There’s always something going on.”</i> – Participant N

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KEY FINDINGS

- Caregivers appreciate tablet-based social needs screening in the inpatient setting
- *Barriers:* Competing priorities, burdensome application processes
- *Facilitators:* Electronic resources, SW support
- Desire for longitudinal support after discharge
- Importance of social needs screening and referral during & after the COVID-19 pandemic

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QUESTIONS AND COMMENTS?



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