

A Roadmap for Workforce-Centric SDOH Screening - *AllianceChicago*

In 2020, Erie Family Health Centers recognized the significant burden faced by providers, nurses, and staff members in addressing the SDOH needs of their patient population. After listening to their providers and patients, Erie Family Health Centers developed a two-step process that started with a simple question – “Do you need resources?”

Instead of multiple questions that could only be asked by a few staff, Erie introduced a single prescreening question to gauge patients' interest in being connected to different resources. Patients who expressed interest received a follow-up call from dedicated staff members to conduct a more comprehensive needs assessment and provide appropriate connections to resources.

What sets this approach apart is its focus on both improving patient care outcomes and alleviating the burden on healthcare providers, nurses, and staff. By streamlining the screening process, reducing the length of questionnaires, and introducing a targeted follow-up system, the solution maximizes efficiency and effectiveness.

The innovative nature of this solution lies in its simplicity!

By relying on a simple solution that catered to the needs of staff and patients Erie has been able to see great results. From May 2020 to February 2022, a total of 53,323 patients were screened, illustrating the significant reach of the initiative. In the initial phase (May '20-Jan '21), 30,964 patients were screened, with 9,275 expressing interest in follow-up. Of those, 4,391 patients were successfully contacted, and 3,251 (74%) screened positive for needs and were connected to appropriate resources.

As the program progressed into Phase 2 (Feb '21-Feb '22), an additional 22,359 patients were screened, with 5,650 expressing interest in follow-up. Out of these, an impressive 4,717 patients were successfully contacted, with 2,416 reached via phone and 2,301 through email or text. A total of 1,910 patients (79% of those contacted by phone) screened positive for needs and received necessary connections to resources.

The impact of the program extended beyond addressing social needs. By developing a “no wrong door” policy and training every staff member to ask the pre-screening question, Erie fostered the innate desire that the staff already had to make a difference. This in turn helped increase staff fulfillment, and decrease the burden that a few staff members had to be the sole responsible for SDOH screening questions.

The following roadmap was done in partnership with AllianceChicago, Erie Family Health Centers, Pillars Community Health, and Infant Welfare Society of Chicago.

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The Solution

Audience



Patients

The streamlined screening process allowed for a more efficient identification of their social needs and facilitated timely access to appropriate resources. This allowed the health center to focus on the patients that had highest interest, and then could also have the highest motivation to follow-up with the resources.

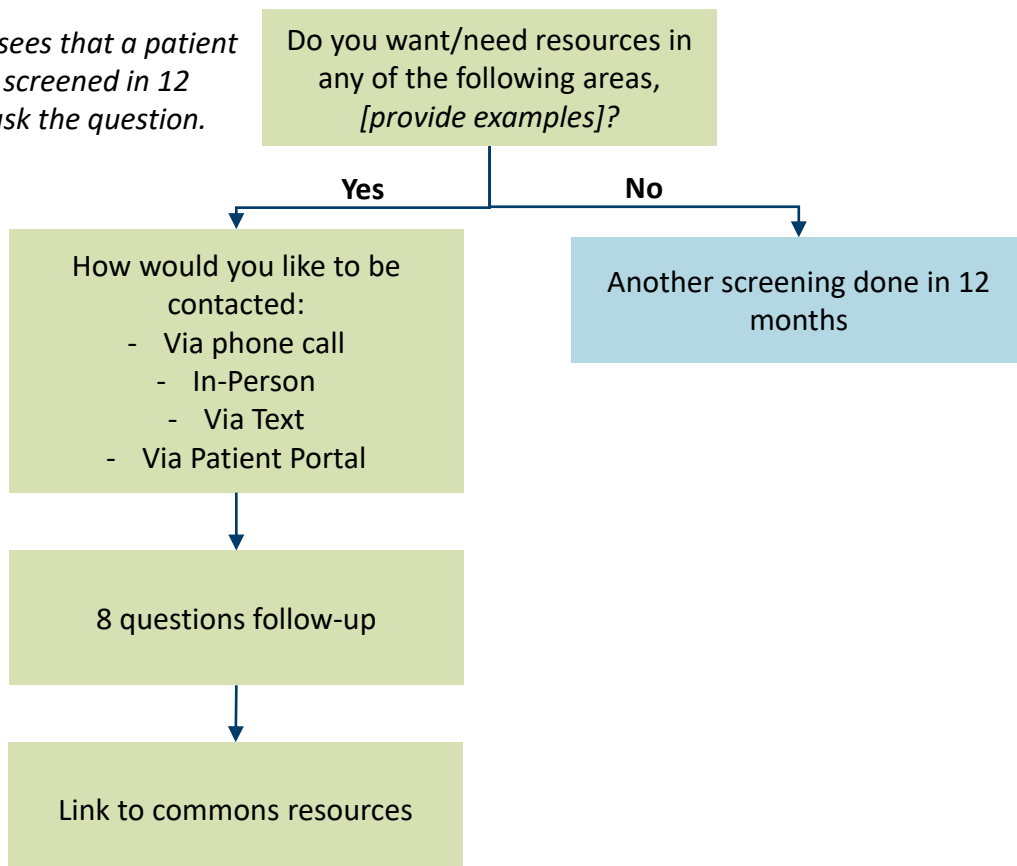


Staff

During the time, Erie's workforce was dealing with COVID and with increased labor shortage. They had to find a way to help Behavioral Health staff, nurses, and providers who were responsible to conduct the previous SDOH screening while still serving their patients' SDOH needs. In doing so, they have led a culture shift in which every employee now feels empowered to start the screening process.

The Patient Experience

Anyone who sees that a patient has not been screened in 12 months can ask the question.



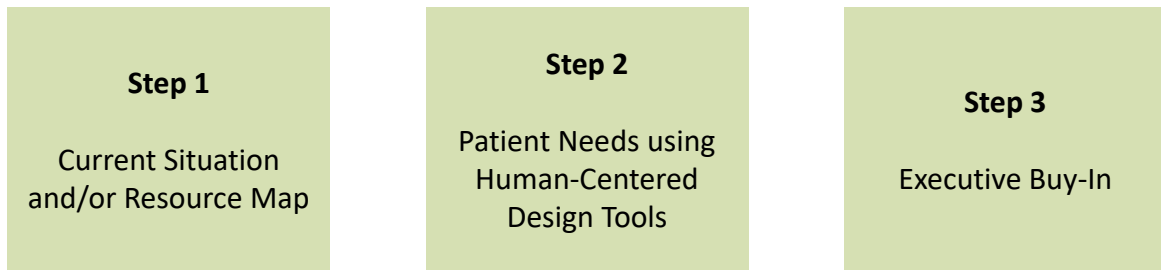
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The Roadmap

Implementing innovative solutions can be a daunting task, the following roadmap is a guideline that your health center can use to implement a two-step process for SDOH screening. Please note that every situation is different, your health center might have different considerations, use this as a starting point for the conversations around implementation.

Bucket 1: Pre-Implementation Preparation

This is the initial stage of the roadmap where health centers conduct assess their current situation and assets related to social needs screening. It involves identifying the different patient needs using human-centered design tools and leveraging the innate desire to address SDOH needs to ensure executive buy-in. Also, it sets the stage for the subsequent steps by providing a solid foundation of understanding and support for implementing the two-tiered social needs screening process.



Step 1: Current Situation and Asset Map

Before implementing any idea, it is vital to understand the environment in which the solution will be implemented. This is where a situation and asset map can help. A situation map is a visual summary of the current state of a specific area or process within an organization. In this context, the situation map should capture the existing practices, workflows, challenges, and strengths of how your health center is currently doing SDOH screenings.

On the other hand, a resource map is a comprehensive inventory of the available resources, strengths, and partnerships within an organization or community. In this step you should, identify and categorize the internal and external resources that can be leveraged as you create an implement this two-step process for SDOH screening. This includes personnel expertise, technology systems, funding sources, community organizations, social service agencies, and other relevant assets. Doing this activity will help to identify current strengths, potential collaborations, and areas where additional resources may be needed

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Need some resources?

[IDEO's Design Kit – Capabilities Quicksheet](#)

A quick guide to help you assess if a solution can be implemented with your current resources.

[Harvard's Common Caring Project – Resource Mapping Strategy](#)

Step by step instructions on how to complete a resource map.

Step 2: Patient Needs using Human-Centered Design

Using human-centered design tools will allow you to obtain a deeper understanding of what your target audience needs. As a reminder, this solution should have two audiences, the patients and the staff. Use tools like interviews or focus groups to gain a deeper understanding of how this solution can help these two target audiences.

Need some resources?

[IDEO's Design Kit – Card Sort](#)

This simple activity can help you dive deeper into what your different audiences really want.

[IDEO's Design Kit – Draw it](#)

Giving the opportunity to the audience to draw out things can help overcome language barriers.

Step 3: Executive Buy-In

Gaining executive buy-in is crucial to securing support and resources for any new effort. By leveraging the innate desire to address SDOH needs, champions for this simpler screening process can secure the necessary support and resources from their organizational leadership. This step is crucial for the implementation and sustainability of this initiative.

Ensuring executive buy-in required a few items: (1) clear articulation of the goals; (2) expected outcomes; (3) implementation plan; (4) how it will impact current processes; and (5) sustainability and scalability.

Need a resource?

[Harvard Business Review - Get the Boss to Buy In](#)

Article sharing some process that can help you get executive buy-in for an idea.

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Bucket 2: Organizational Alignment

In this Organizational Alignment stage, several critical steps contribute to aligning the entire organization towards implementing the innovative solution. By engaging staff, ensuring effective communication, and collaborating with community organizations, the organization creates a cohesive approach that supports successful implementation and sustainability of the program.



Step 4: Formalize Internal Communication

Clear and effective communication is vital to ensure that all staff members understand the rationale, procedures, and expected outcomes of the new screening process. During the step you will create a structured and deliberate approach to sharing information, updates, and messages within an organization. You will need to define clear channels, processes, and strategies to ensure consistent and effective communication among all staff, now and in the future. Formalized internal communication often includes methods such as staff meetings, newsletters, email updates, intranet platforms, or dedicated communication tools to disseminate information and facilitate dialogue.

Step 5: Staff Buy-In

Staff buy-in is essential for the successful implementation of the new screening process. It is crucial to involve staff members early in the process and foster a sense of ownership. Engage staff by providing clear communication about the purpose, benefits, and expected outcomes. Seek their input and address their concerns early in the process. This solution is one that takes many people, involving them early can help with push-backs later.

Need a resources?

[Society for Human Resource Management \(SHRM\) - Managing Organizational Change Toolkit](#)
Implementing new solutions requires change management, this is a toolkit that can help start the conversation.

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Step 6: Establish Community Partners

“If you want to go fast, go alone; if you want to go far, go together.” This African proverb is true in many areas of life, but it is especially true on innovative solutions. By forging collaborative relationships with local community organizations and stakeholders, your health center will be able to better assist and provide resources to patients. Engaging community partners brings several benefits to the table. It broadens the range of available resources, services, and expertise beyond the health center's capabilities alone.

To establish community partners, begin by identifying local organizations and stakeholders that align with your goals. This can include nonprofit organizations, government agencies, community health centers, social service providers, and advocacy groups.

Bucket 3: Refining the Screening Question and Process

Now that you have done work to set the stage, it is time to refine the question and work on the process. This bucket focuses on tweaking the questions to ensure that it accurately captures the needs of your community, as well as ensuring that the process fits your health center. By creating a streamlined and user-friendly approach, piloting the question, and incorporating feedback for continuous improvement, you can make this innovative solution your own.

Step 7

Design Question and
Process

Step 8

Pilot Question and
Process

Step 7: Design Questions and Process

While the original question used by Erie Family Health Centers serves as a foundation, it is important that you personalize the question to suite your specific circumstances and patient population. This is a great time to take into consideration what language your patients are better served on.

In this step you should be designing a few items: (1) the initial screening question; (2) how will that follow-up be made; (3) the additional screening questions after a patient self-selects; and (4) the internal process that staff will go through to ask the question and follow-up.

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To design the question, you can utilize existing resources like [PRAPARE](#) to guide the development of a comprehensive screening question that covers relevant SDOH domains. By adapting and tailoring the question to the local context, health centers can capture the specific social needs prevalent in their community, ensuring a more accurate identification of patient needs. It is crucial to involve stakeholders, including staff and patients, in the design process to gather diverse perspectives and enhance the question's relevance and effectiveness.

Next, you must design the process for follow-up, and this starts with assessing how follow-up can be done at your health center. In the case of Erie, the patients self-select how they would like the follow-up to happen. Before using the same options evaluate what will work best for your health center. Also, you may start with only two options and expand as the staff becomes more familiar with the process. Finally, you will select which questions will be asked during the follow-up.

Now comes the portion that gives staff a great fulfillment, creating a list of existing resources that the health center can connect patients to. This takes the screening process one step further to provide patients with the tools they need to take action. Also be sure to map out the steps for connecting patients with the identified resources, establishing referral pathways, and coordinating with community partners ensures a seamless and efficient process.

Once you have all the parts ready; it is time to design the internal process that staff will go through to ask the question and follow-up. At this stage you are on early stages, so no need to create a detailed workflow, but a draft workflow that you can prototype with a small group of staff and patients.

Need resources?

[Six Sigma Study Guide – Process Mapping](#)

Learn more about what process mapping is, and how you can do it too. At this step, you might use a simpler version of the process map, but these skills can help as the process gets refined.

[IDEO's Design Kit – Build & run Prototypes](#)

Great worksheet to get you started into prototyping, you may find that you will prototype all parts of the process or a single one. This activity can help you get to the next phase a bit more seamlessly.

Step 8: Pilot Question and Process

Now you have your question, follow-up, and draft process, it is time to start piloting the innovative solution. To pilot is to test any new intervention on a small scale before implementing it widely. Piloting allows for an iterative approach, where the intervention is tested, evaluated, and adjusted in a

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controlled setting to ensure its effectiveness and address any potential challenges or gaps before scaling up to a larger implementation.

When starting the pilot phase, it is important to begin small, testing a specific portion of the question or process, and gradually expanding based on the feedback received. Start with a small subset of patients, or a specific department. During piloting you should strive to get as much feedback and insight as possible. It is crucial to collect feedback from both patients and staff involved in administering the screening. Patient feedback can provide valuable insights into the clarity, relevance, and ease of understanding of the question. Staff feedback helps uncover any challenges, training needs, or workflow considerations that may arise during the implementation. By actively soliciting feedback through surveys, interviews, or focus groups, you can gather diverse perspectives and experiences, allowing for informed refinements.

Once feedback is collected, you can iterate and make necessary adjustments to enhance the question and process. The pilot phase should be an ongoing cycle of implementation, feedback collection, reflection, and refinement, enabling continuous improvement and optimization of the screening question and process.

Please note: You probably will end up with a different question and/or process, and that is okay and to be expected!

Need resources?

[IDEO's Design Kit – Pilot](#)

Dive deeper into the steps that you will need to start to start your pilot.

[IDEO's Design Kit – Keep Iterating](#)

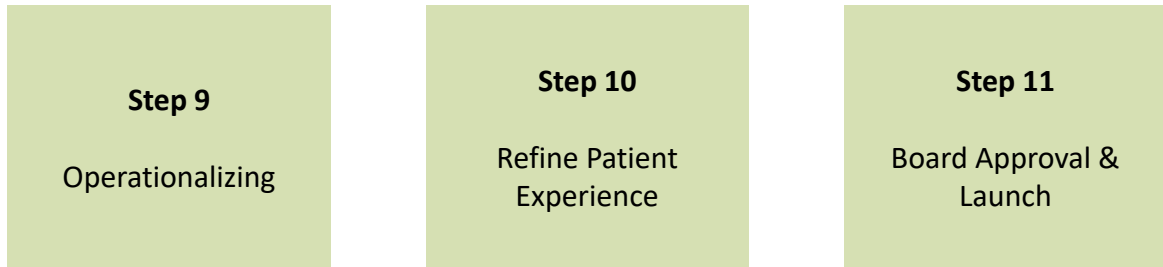
The solution you implement should rarely be the solution you end-up with. To ensure you have the best product at the end, but sure to keep iterating throughout the process.

Bucket 3: Refining the Screening Question and Process

In the final bucket of the implementation roadmap, the focus is on operationalizing the innovation of the two-tiered social needs screening process. This phase involves incorporating the refined screening question and process into the daily operations of the healthcare center. It includes formalizing training for all staff, integrating the screening question into the Electronic Health Record (EHR), creating automations for follow-up, refining the patient experience map, and presenting the idea for board approval.

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Step 9: Operationalizing

You have gone through all the design phases, and now it is time to integrate the innovation into the day to day of your health center. The focus should be on formalizing training for all staff, integrating the screening question into the Electronic Health Record (EHR), and creating automations for follow-up whenever possible.

As Erie saw, formalizing training for all staff is essential to equip them with the necessary knowledge and skills to effectively implement the screening process. This can be done as part of existing processes, or you may choose to devote a whole meeting just for training. One important note, training should never be a once and done activity. Instead, training should be incorporated and reinforced whenever possible. After initial training you may choose to reinforce it during all-staff meeting or bulleting, the important step is reinforcement. Also, be sure to create a training that new staff can take as they get on-boarded, this will ensure the longevity of the implementation.

The other two steps, implementing the question on the EHR and creating automations will depend on the systems your health center has in place. This is a great time to reach to your PCA or HCCN as they might have additional resources that can help you.

Need resources?

[IDEO's Design Kit – Explore Scalability](#)

Now it is time to grow, this quick guide will give you some steps to consider.

[IDEO's Design Kit – Roadmap to Success](#)

Now it is time to create a timeline and plan of action, this tool can help.

Step 10: Refine Patient Experience

The patient experience encompasses all interactions and touchpoints a patient has with the healthcare center, from the initial screening question to the follow-up support received. It involves addressing not

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only the clinical aspects of care but also the emotional and practical aspects to ensure a patient-centered approach.

To begin refining the patient experience, start by mapping out the patient journey and identifying the key touchpoints and interactions involved in the screening process. By visually representing the patient journey, you can gain insights into the various stages, transitions, and potential pain points that patients may experience. The goal is to create a patient experience that is empathetic, efficient, and tailored to the unique needs and circumstances of the individuals being served.

Need resources?

[Coursera – Creating User Journey Maps: A Guide](#)

A great way to map the patient experience will be utilizing the same principles of a journey map, get started here.

[Nielsen Normal Group – Journey Mapping 101](#)

Dive deeper into creating a journey map.

Step 11: Board Approval & Launch

Now you are ready for the final step, Board approval and launch. Following your health center process, you should obtain Board approval prior launching, this will ensure that you have buy-in from everyone at your health center. Once that is done, you will be ready to launch!

As the innovation gets implemented be sure to keep in mind to define your Key Performance Indicators (KPIs) and set a schedule for measurement and evaluation.

By streamlining the SDOH screening process, your health center can see impacts not only from a patient perspective, but very importantly from a staff perspective. This innovation empowers staff members, increases their fulfillment, and decreases burden. This solution fosters a sense of fulfillment and purpose among the workforce, while effectively connecting patients to the resources they need, ultimately improving patient care and outcomes. Through this roadmap, community health centers can create a positive work environment where every staff member feels empowered to contribute to the holistic well-being of their patients.