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Social Interventions Research & Evaluation Network

Cross-sectional assessment of racial, ethnic, and language equity in social risk screening and results in community health center patients

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My background

- Puerto Rican & German, bilingual/bicultural
- Social epidemiologist, mixed methodologist, ethnographer
- Since 2007, translating research into culturally responsive practice and policy improvements
- Leading development of FQHC-led research and practice collaboratory
- Interprofessional, team-based collaborations with academic, community and other partners

CHC's Research Teams: 2022, 2014

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Caring Health Center

- Established in 1995
- Section 330 federally-qualified health center (FQHC) in Springfield, MA
- Largest refugee health assessment site in MA
- Serves about 20,000 patients annually
- Serve patients in over 35 languages
- Hires from the community
- Partner on NIH-funded research for 2 decades

Objectives

Describe	Report	Reflect on
Rates of social risk screening by race, ethnicity and language	Patterns in screening and reported risks	Implications of these patterns as they relate to racial health equity and social care

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ASCEND - Background

- 5-year, mixed-methods, stepped-wedge trial
  - **Aim:** To test the impact of providing 30 community health centers (CHCs) with step-by-step guidance on implementing electronic health record-based social determinants of health documentation

- Little is known about social risk screening implementation across racial/ethnic/ language (REL) groups

- Examined the associations between REL, social risk screening, and patient-reported social risks among adult patients at community health centers (CHC)

Methods

- Patient- and encounter-level data from 2016-2020
- 651 CHCs in 21 U.S. states
- Electronic health record (EHR) data were extracted from a shared **Epic**© record
- Adjusted logistic regression analyses were conducted stratified by language

Social Risk Screening

Dependent Variable

Financial resource strain (FRS) data

- Childcare needs, financial strain, food insecurity, health insurance costs, medical costs, transportation access, or utilities insecurity
- PRAPARE tool and other frequently used screens are embedded into the electronic health record (EHR)

Documented in the EHR

- Workflows for collecting and documenting social risk screenings vary by health center

Among adult community health center patients

- Many health centers are mandated to collect social risk screening among all eligible patients annually

Document SDH in Flowsheets

Social Determinants o...

Hide All Show All
Health Li...
Education
Financial...
Living Sit...
Food- So...
Transpor...
Utilities
Physical ...
Stress -...
Social...
Relations...
Help Des...

Expanded View All

Reset | Now

9/12/18
1244 2000

Health Literacy
How do you learn best? Reading

Education
What is the highest grade or year of school you completed? College 1 yea

Financial Resource Strain
How hard is it for you to pay for the very basics like food, housing, heating, medical care, and
Hard to pay for: Food
Hard to pay for: Utilities
Hard to pay for: Transportation
Hard to pay for: Medicine or medical care
Hard to pay for: Health insurance
Hard to pay for: Clothing
Hard to pay for: Rent/Mortgage payment
Hard to pay for: Child care
Hard to pay for: Phone
Hard to pay for: Other ! Yes

Living Situation
What is your living situation today? ! 1
Think about the place you live. Do you have problems with any of the following? ! 2;4
Number of positive responses to housing questions ! 2

Food- Some people have made the following statements about their food situation. Please answer whether the statements were OFTEN, SOMETIMES, or NEVER true for you and your household in the last 12 months.
Within the past 12 months, you worried that your food would run out before you got money to buy more. ! 1
Within the past 12 months, the food you bought just didn't last and you didn't have money to get more. ! 1
Number of positive responses to food security questions ! 2

Transportation
In the past 12 months, has lack of transportation kept you from medical appointments, meetings, work or from getting things needed ! Yes

Selection Form
Never attended school or only attended kindergarten
Grades 1 through 8 (Elementary)
Grades 9 through 11 (Some high school)
Grade 12 or GED (High school graduate, diploma, or alternative credential)
College 1 year to 3 years (Some college, Associate's degree, trade, vocational, or technical school)
College 4 years or more (College Graduate)
Declined
Accept Cancel

Social Determinants of
09/12/18 1244
What is the highest grade or year of sch...
College 1 year to 3 years (Some college, Associate's
Select Single Option: (F5)
Never attended school or only attended kindergarte
Grades 1 through 8 (Elementary)
Grades 9 through 11 (Some high school)
Grade 12 or GED (High school graduate, diploma, or
College 1 year to 3 years (Some college, Associate's
College 4 years or more (College Graduate)
Declined
Comment (F6)

College 1 year to 3 years (Some college, Associate's degree, trade, vocational, or technical school) (mechanics trade school)
by Alex Concerthall, MD at 09/12/18 1244

First Filed Value
College 1 year to 3 years (Some college, Associate's degree, trade, vocational, or technical school) (mechanics trade school)
by Alex Concerthall, MD at 09/12/18 1244

Synopsis Views
Trend this row over time
SDH
All Flowsheets

Tips and Tricks
Include the latest value in your progress note:
This row: .flow[2251
This group: .flow[5691
This flowsheet (table format): .docflow[174
Make a SmartPhrase:
This row: @FLOW[2251]@
This group: @FLOW[5691]@
This flowsheet (table format): @DOCFLOW[174]@

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Race / Ethnicity

Independent Variable

Ethnicity:

- Non-Hispanic
- Hispanic

Race:

- Black
- White
- Other race: a grouping of racial categories with smaller samples

As documented in the EHR (though not always self-reported)

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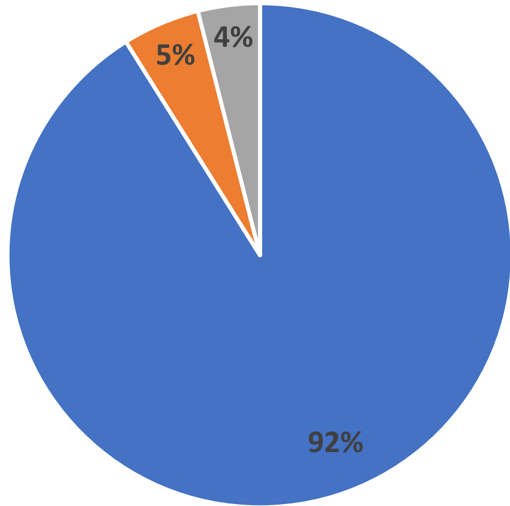
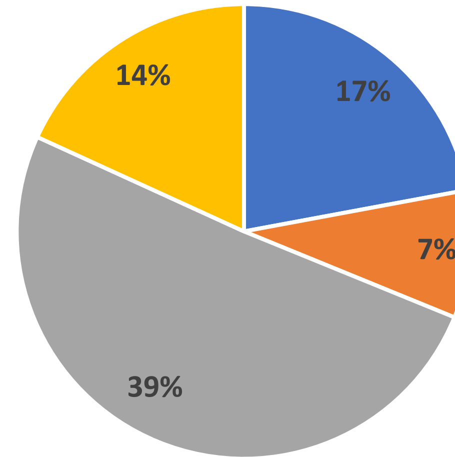
Results: Race / Ethnicity (N=1,551,102)





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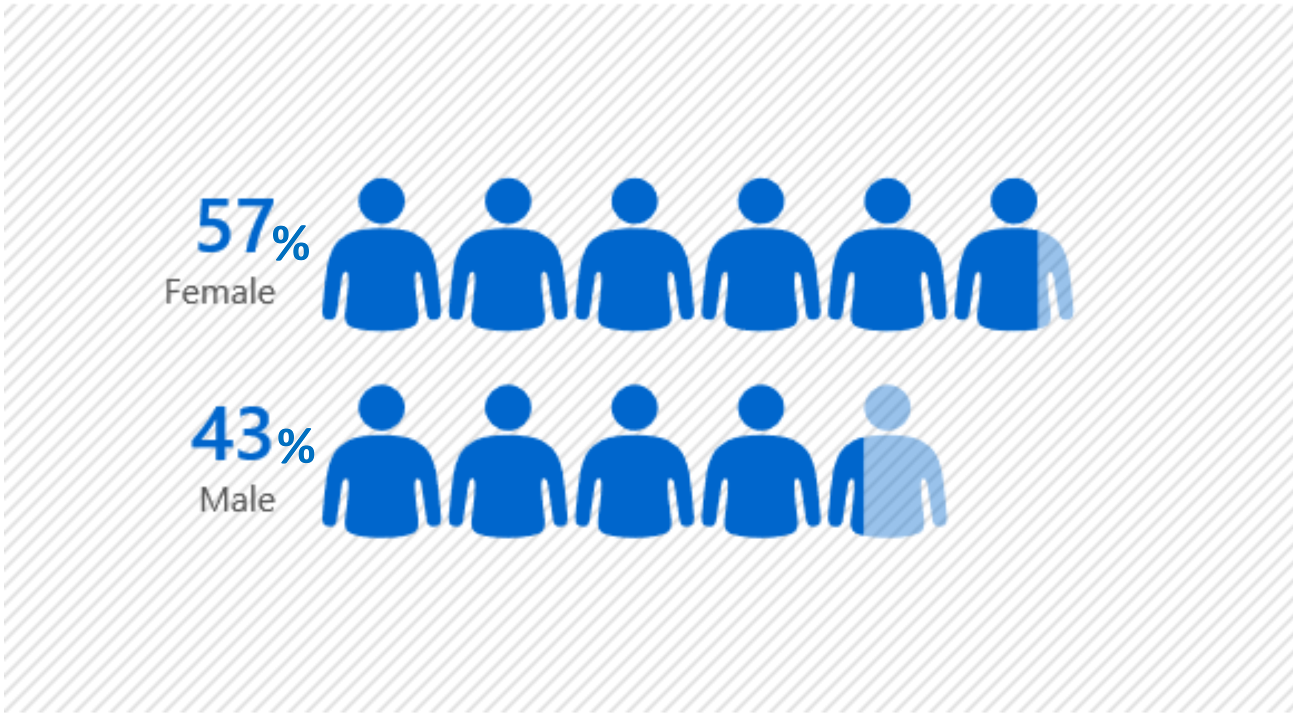
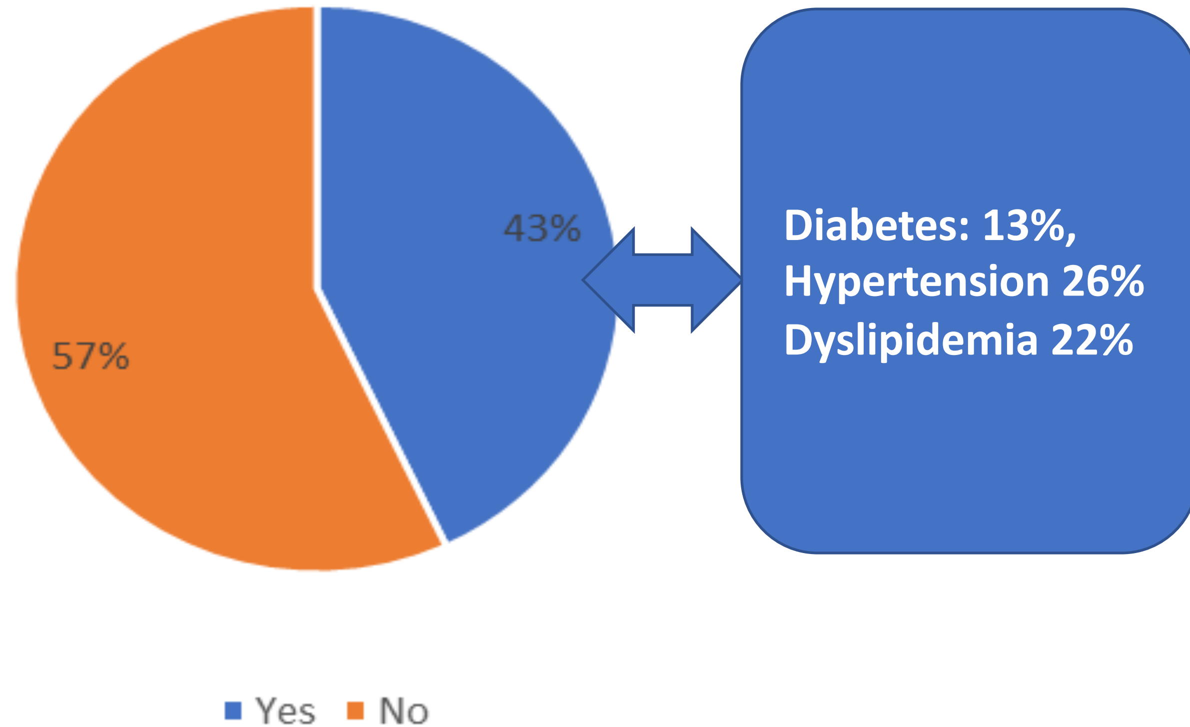
Additional Patient Characteristics





Diabetes: 13%,
Hypertension 26%
Dyslipidemia 22%

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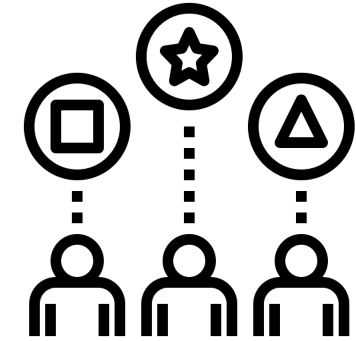
Key Findings

Social risk screening occurred at 30% of health centers

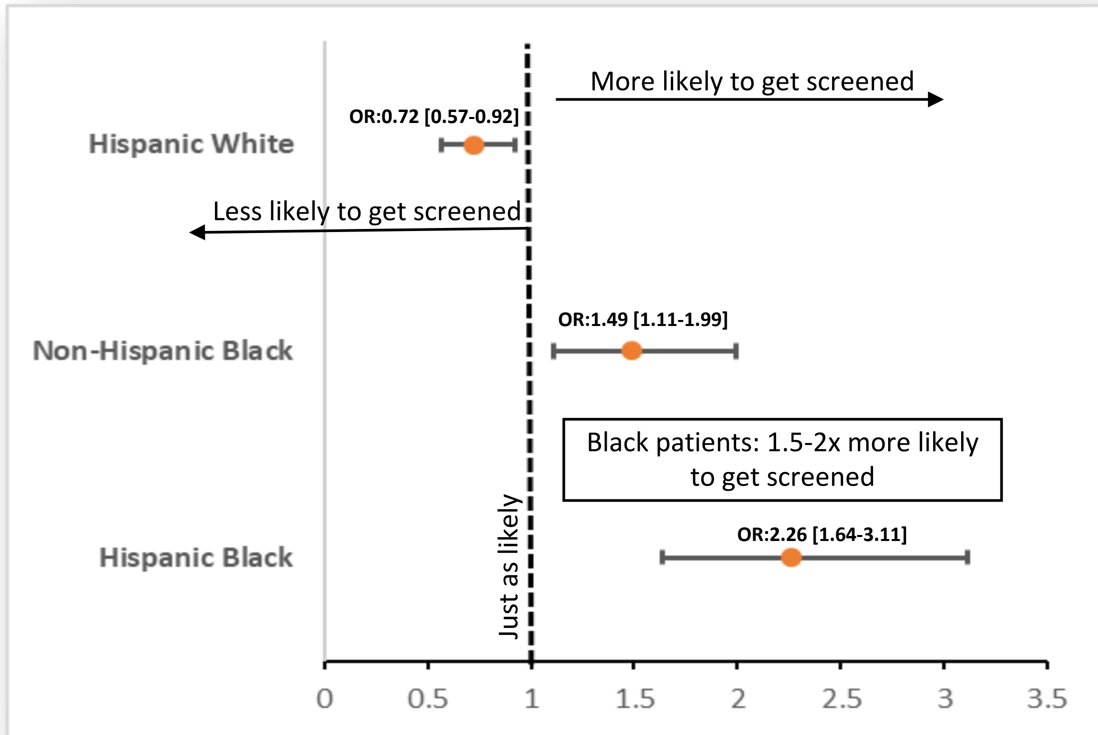
11% (n=164,586) of eligible adult patients were screened



Screening and reported needs varied significantly by REL

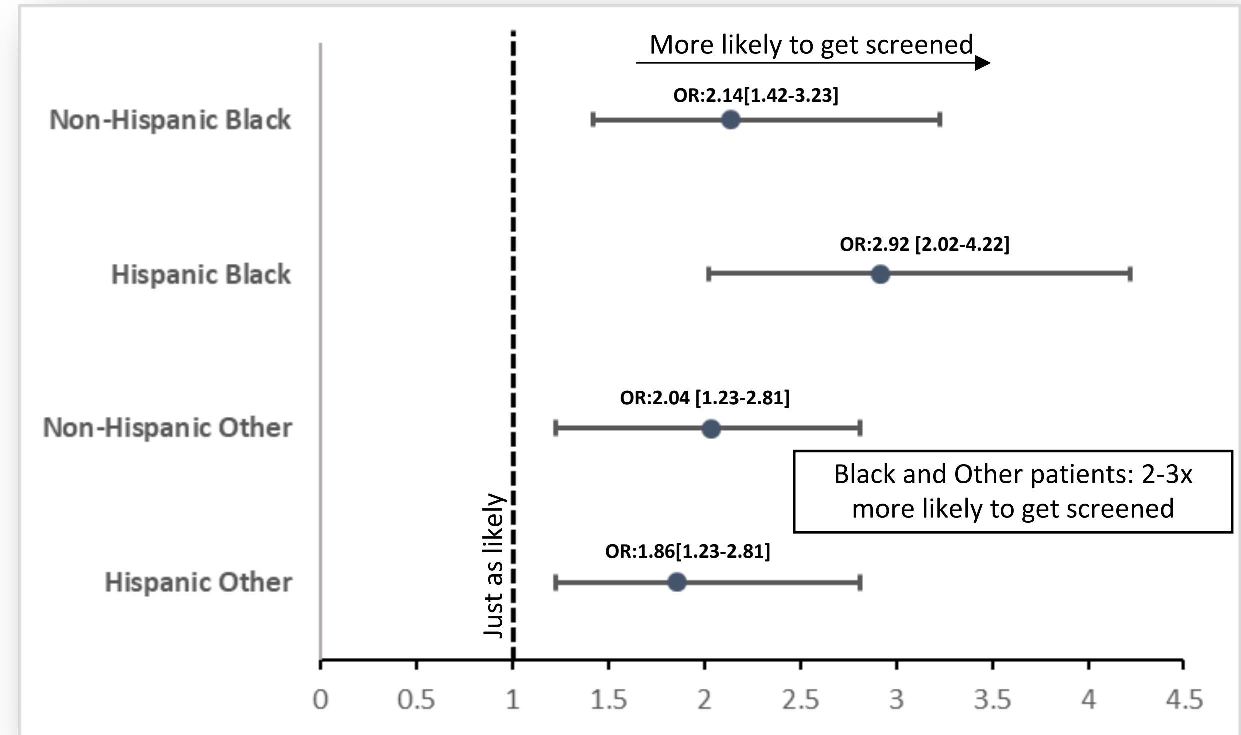
Key Findings: Social Risk Screening

Race & Ethnicity



Comparison group: Non-Hispanic White

Among Patients who preferred Spanish



Comparison group: Non-Hispanic White

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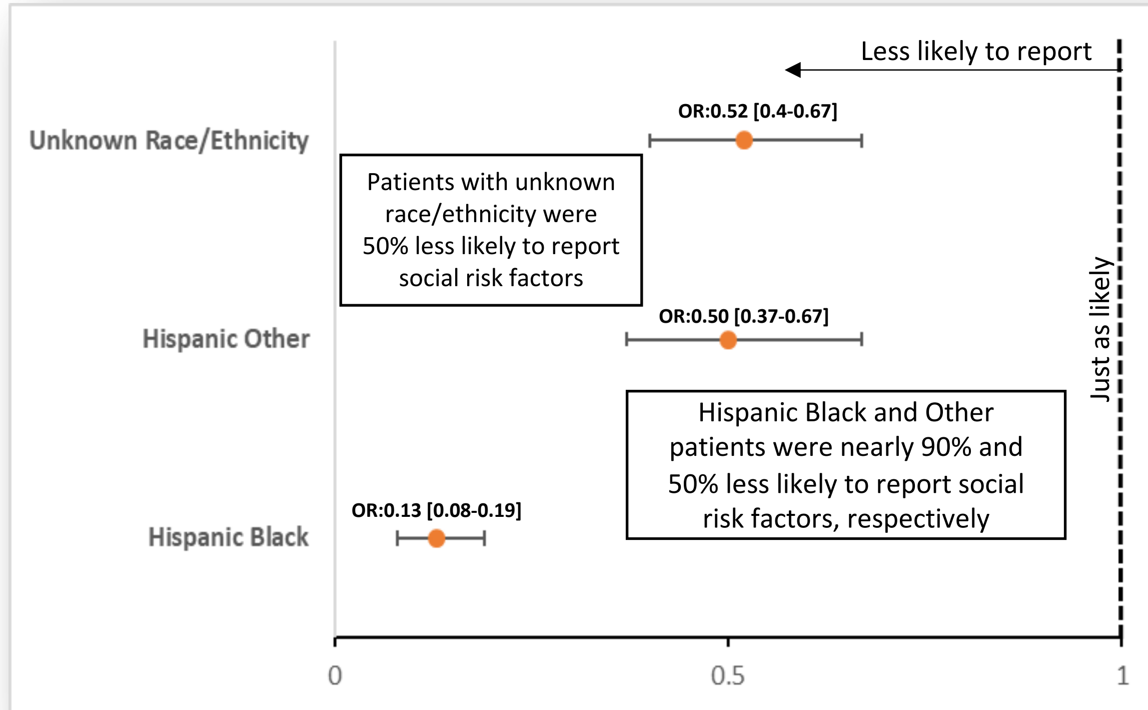
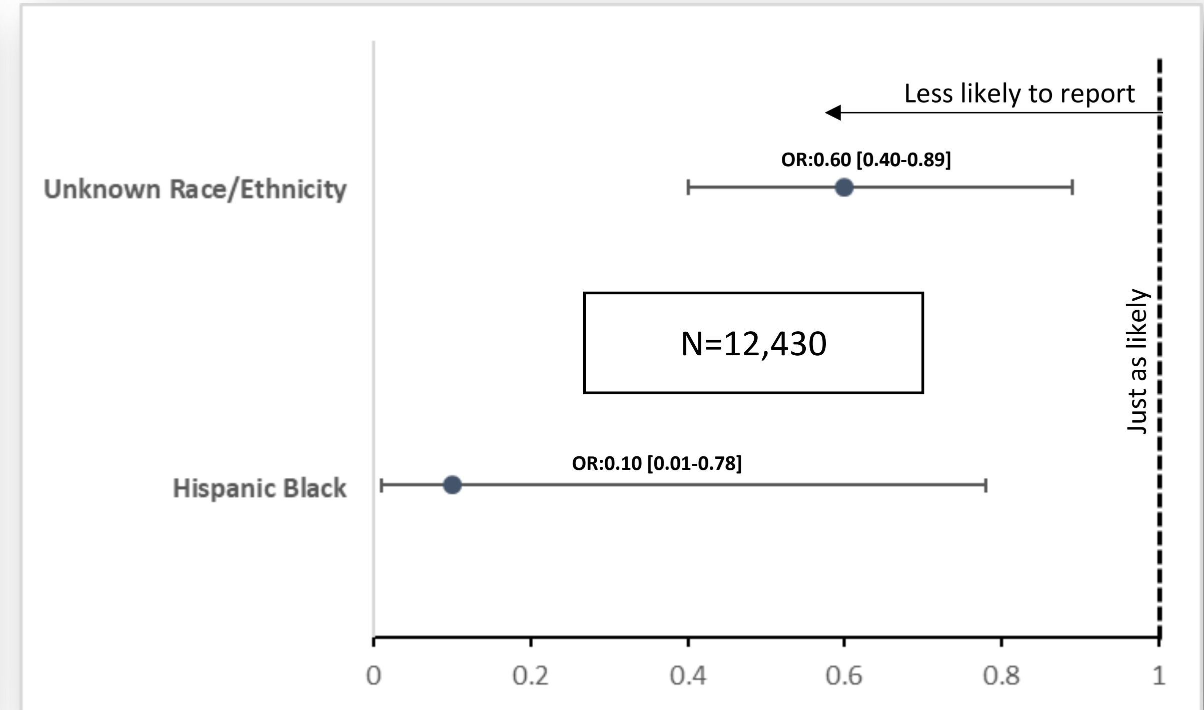
Key Findings: Social Risk Factor Reporting

Race & Ethnicity



Comparison group: Non-Hispanic White

Among patients who preferred a language other than English or Spanish



Comparison group: Non-Hispanic White

Conclusion

- Few published studies have **assessed the denominator of total patients eligible for social risk screening** or the characteristics of patients completing screening.
- Our research provides critical new insights about **equity in social risk screening** by incorporating both overall patient denominators and REL information
- Results indicate **low rates of social risk screening overall** and differences in screening and report of risk factors by REL factors.

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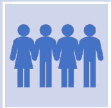
A Call to Action

Collection and documentation of REL data



Need for culturally and linguistically responsive social risk screening implementation strategies

Need **to engage community health centers, patients and** community members

Explore **strategies for equitable screening and related interventions**

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Thank you!

Community Health Centers and patients whose data contributed to these analyses.

SIREN for the opportunity to collaborate in a critical assessment of racial health equity in social care.

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(PCORI- RI-OCHIN-01-MC)

Thank you!

Questions? Dialogue...