

Reducing Disparities in Readmissions:

The Role of Social Determinants of Health in Promoting Health & Health Equity

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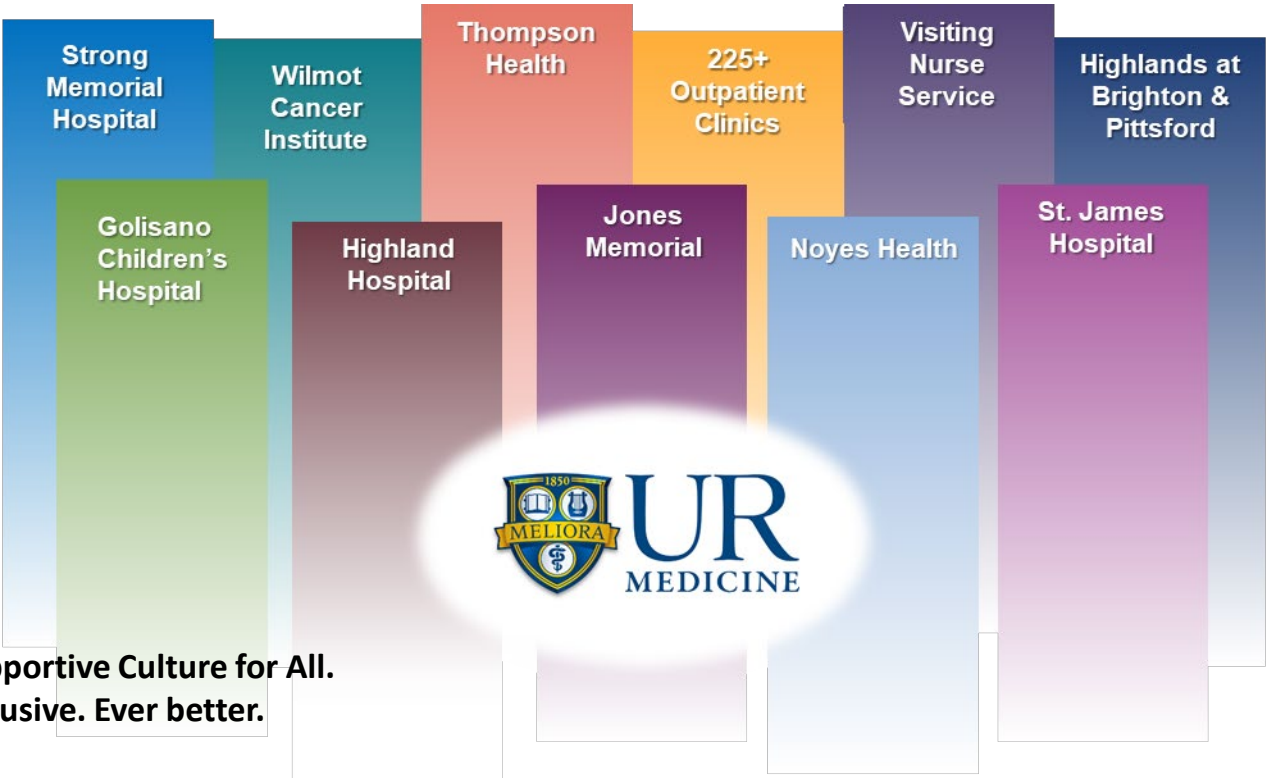
MEDICINE *of*
THE HIGHEST ORDER



UNIVERSITY *of*
ROCHESTER
MEDICAL CENTER

UR Medicine Clinical Enterprise

- 1,391 licensed beds
- 68,410 inpatient discharges
- 222,077 ED visits
- 144,045 urgent care visits
- 44,356 ambulatory surgeries



**Provide a Safe, Welcoming, and Supportive Culture for All.
Ever more equitable. Ever more inclusive. Ever better.**

URMC 2020-25 Equity and Anti-Racism Action Plan

- <https://www.urmc.rochester.edu/equity-antiracism-action-plan.aspx>

The screenshot shows the top of the URMC website. The header is dark blue with the University of Rochester Medical Center logo on the left, a search bar in the center, and a 'Explore URM' dropdown on the right. Below the header is a navigation bar with links: Patients & Families, Education, Research, Community, About URM, Referring Physicians, and MyChart. The main content area has a white background with the title 'Equity & Anti-Racism Action Plan'. Below the title is a light blue section with the text 'Ever more equitable. Ever more inclusive. Ever better.' and a paragraph about the center's aspirations. A blue button labeled 'Download the Executive Summary' is at the bottom left. On the right side of this section is a graphic of three stylized figures holding hands in a circle.

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Explore URM

Patients & Families Education Research Community About URM Referring Physicians MyChart

Equity & Anti-Racism Action Plan

Ever more equitable. Ever more inclusive. Ever better.

The University of Rochester Medical Center aspires to make every person feel safe, welcome, and supported at all times; to be a place where everyone, regardless of identity or challenges they face, is lifted up to become their best and healthiest selves; to serve as a powerful force for eliminating racism, division, and exclusion in and beyond.

Download the Executive Summary

5 GOALS

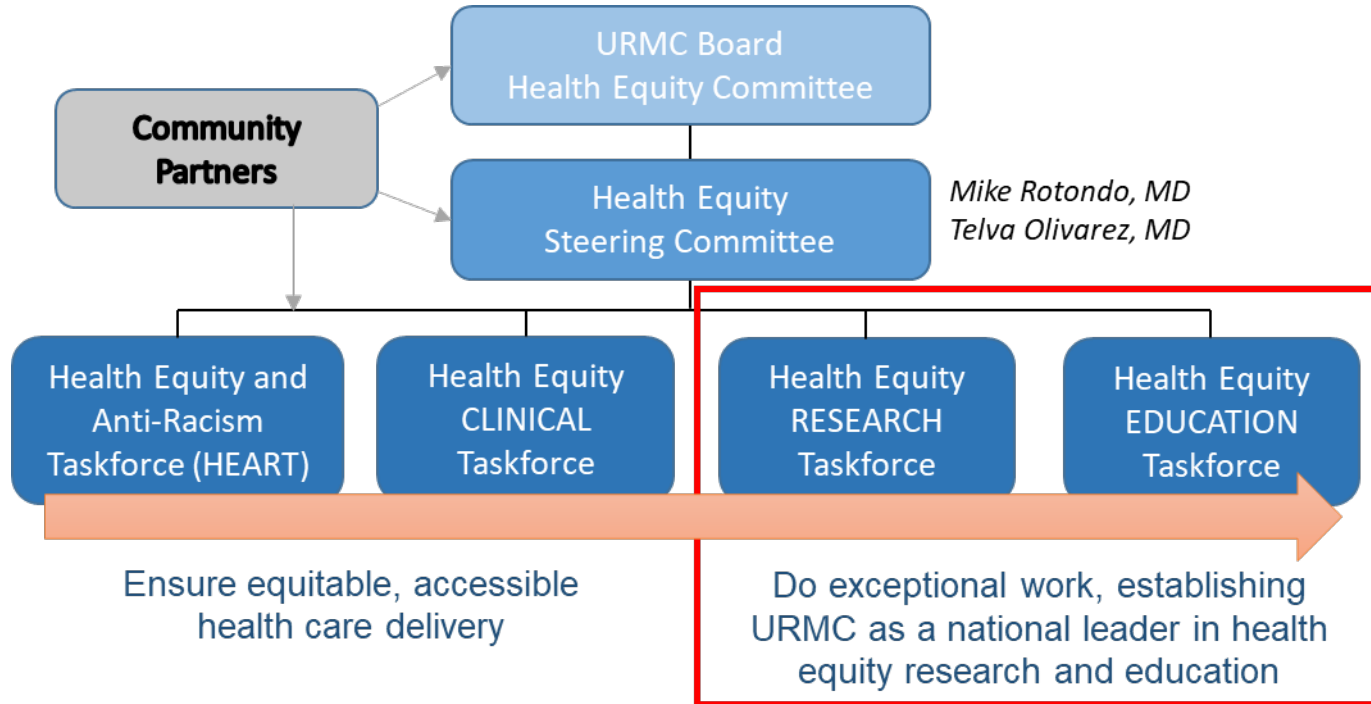
1. Build
2. Recruit
3. Nurture
4. Exemplify
5. Engage

ENGAGE in equitable
health care

Engage in equity as a health system by making care more accessible and reducing disparities through research, active listening, and collaboration with community partners.

[Learn More About Engaging in Equitable Health Care](#)

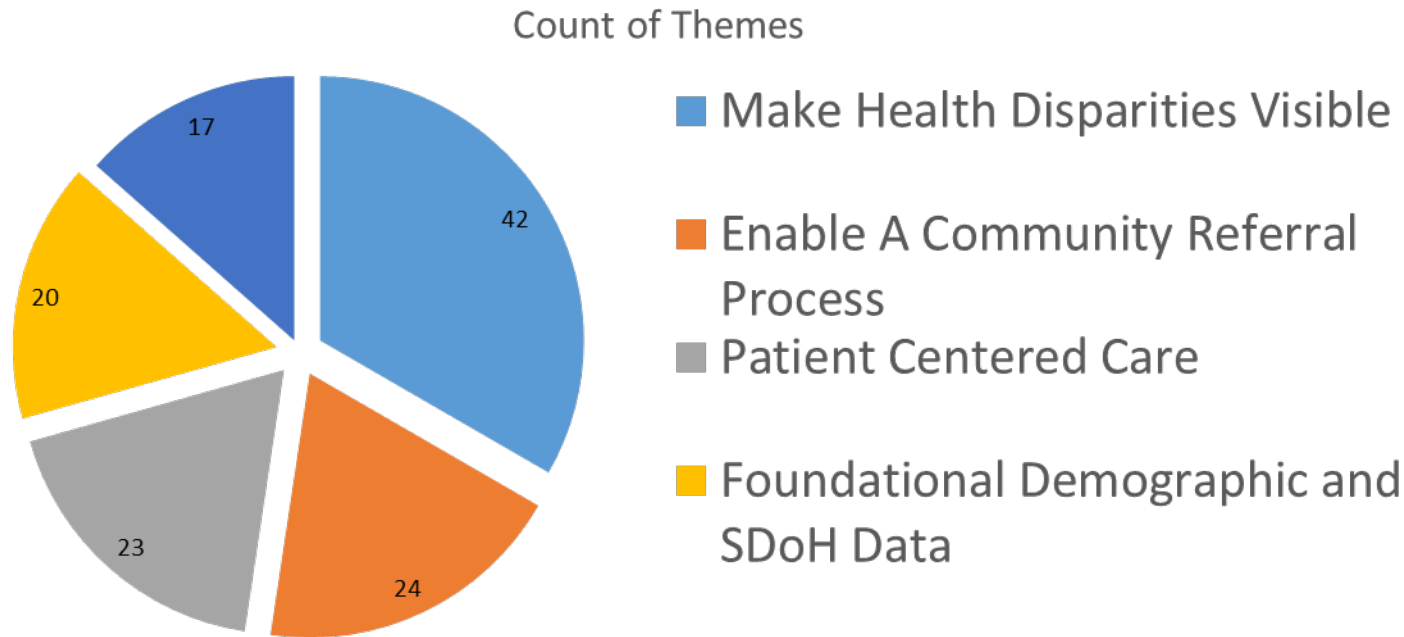
EARAP Goal 5: Leadership Structure



Health Equity and Anti-Racism Technology Program

- **Goal:** Collect accurate demographics and social determinants data for UR patients
- **Impact:** WHY is this important?
 - Clinical staff can better treat patients knowing about their social circumstances
 - Care managers and social work can help patients connect to support programs in URMIC and/or in community
 - Researchers, Faculty, Learners can analyze data for inequities and better direct quality improvement

Stakeholder Survey Use Stories - High Level Themes



Operational Leaders from SMH, HH and FF Thompson- 26 meetings from August – September 2020

Collecting accurate demographic information

- Demographics collected by SELF-REPORT
- Patients are able to select multiple races, or “race not listed here” and then add their race, or “decline”
- Ethnicity selection before race - so that individuals who identify as Hispanic are prompted to include their race
- Questions about language and need for interpreter, ASL is spoken by a significant proportion of our region, Spanish by ~5%
- Gender/Gender identity/Pronouns/Sexual orientation are collected in select individuals (currently) in select clinical settings



ETHNICITY & RACE FORM

Date: _____

PATIENT'S NAME:

FIRST

MIDDLE INITIAL

LAST

BIRTH DATE: _____

MRN: _____

We are asking our patients to share their ethnicity and race. This will help us to know our patients better and improve health care for everyone. Personal information will remain private and confidential.

Ethnicity: Your ethnicity refers to your background heritage, culture, religion, ancestry or sometimes the country where you were born. For New York State reporting, we are **specifically** collecting whether or not your ethnicity is Hispanic, Latino or of Spanish Origin.

Race: Your race is the group(s) that you relate to as having similar features, traits or birthplace.

What is your ETHNICITY?

☐ HISPANIC or LATINO or SPANISH ORIGIN (If checked, please select up to 4 choices below):

- | | | |
|--|--|--|
| <input type="checkbox"/> ANDALUSIAN | <input type="checkbox"/> COSTA RICAN | <input type="checkbox"/> NICARAGUAN |
| <input type="checkbox"/> ARGENTINIAN | <input type="checkbox"/> CRIOLLO | <input type="checkbox"/> PANAMANIAN |
| <input type="checkbox"/> ASTURIAN | <input type="checkbox"/> CUBAN | <input type="checkbox"/> PARAGUAYAN |
| <input type="checkbox"/> BALEARIC ISLANDER | <input type="checkbox"/> DOMINICAN | <input type="checkbox"/> PERUVIAN |
| <input type="checkbox"/> BOLIVIAN | <input type="checkbox"/> ECUADORIAN | <input type="checkbox"/> PUERTO RICAN |
| <input type="checkbox"/> CANAL ZONE | <input type="checkbox"/> GALLEGO | <input type="checkbox"/> SALVADORAN |
| <input type="checkbox"/> CANARIAN | <input type="checkbox"/> GUATEMALAN | <input type="checkbox"/> SOUTH AMERICAN |
| <input type="checkbox"/> CASTILLIAN | <input type="checkbox"/> HONDURAN | <input type="checkbox"/> SOUTH AMERICAN INDIAN |
| <input type="checkbox"/> CATALONIAN | <input type="checkbox"/> LA RAZA | <input type="checkbox"/> SPANIARD |
| <input type="checkbox"/> CENTRAL AMERICAN | <input type="checkbox"/> LATIN AMERICAN | <input type="checkbox"/> SPANISH BASQUE |
| <input type="checkbox"/> CENTRAL AMERICAN INDIAN | <input type="checkbox"/> MEXICAN | <input type="checkbox"/> URUGUAYAN |
| <input type="checkbox"/> CHICANO | <input type="checkbox"/> MEXICAN AMERICAN | <input type="checkbox"/> VALENCIAN |
| <input type="checkbox"/> CHILEAN | <input type="checkbox"/> MEXICAN AMERICAN INDIAN | <input type="checkbox"/> VENEZUELAN |
| <input type="checkbox"/> COLOMBIAN | <input type="checkbox"/> MEXICANO | |

☐ NOT HISPANIC or LATINO or SPANISH ORIGIN

☐ PATIENT REFUSED

What is your RACE? (You may select up to 4 Races)

☐ AMERICAN INDIAN or ALASKA NATIVE

☐ ASIAN (If checked, please specify from the choices below):

- | | | |
|---------------------------------------|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> ASIAN INDIAN | <input type="checkbox"/> INDONESIAN | <input type="checkbox"/> NEPALESE |
| <input type="checkbox"/> BANGLADESHI | <input type="checkbox"/> IWO JIMAN | <input type="checkbox"/> OKINAWAN |
| <input type="checkbox"/> BHUTANESE | <input type="checkbox"/> JAPANESE | <input type="checkbox"/> PAKISTANI |
| <input type="checkbox"/> BURMESE | <input type="checkbox"/> KOREAN | <input type="checkbox"/> SINGAPOREAN |
| <input type="checkbox"/> CAMBODIAN | <input type="checkbox"/> LAOTIAN | <input type="checkbox"/> SRI LANKAN |
| <input type="checkbox"/> CHINESE | <input type="checkbox"/> MADAGASCAR | <input type="checkbox"/> THAI |
| <input type="checkbox"/> FILIPINO | <input type="checkbox"/> MALAYAN | <input type="checkbox"/> TAIWANESE |
| <input type="checkbox"/> HMONG | <input type="checkbox"/> MALDIVIAN | <input type="checkbox"/> VIETNAMESE |

☐ BLACK OR AFRICAN-AMERICAN

☐ NATIVE HAWAIIAN or PACIFIC ISLANDER (If checked, please specify from the choices below):

- | | | |
|--|---|---|
| <input type="checkbox"/> CAROLINIAN | <input type="checkbox"/> MARSHALLESE | <input type="checkbox"/> POLYNESIAN |
| <input type="checkbox"/> CHAMORRO | <input type="checkbox"/> MELANESIAN | <input type="checkbox"/> SAIPANESE |
| <input type="checkbox"/> CHUUKESSE | <input type="checkbox"/> MICRONESIAN | <input type="checkbox"/> SAMOAN |
| <input type="checkbox"/> FIJIAN | <input type="checkbox"/> NATIVE HAWAIIAN | <input type="checkbox"/> SOLOMON ISLANDER |
| <input type="checkbox"/> GUAMANIAN | <input type="checkbox"/> NEW HERBIDES | <input type="checkbox"/> TAHITIAN |
| <input type="checkbox"/> GUAMANIAN OR CHAMORRO | <input type="checkbox"/> OTHER PACIFIC ISLANDER | <input type="checkbox"/> TOKELAUAN |
| <input type="checkbox"/> KIRIBATI | <input type="checkbox"/> PALAUAN | <input type="checkbox"/> TONGAN |
| <input type="checkbox"/> KOSRAEAN | <input type="checkbox"/> PAPUA NEW GUINEAN | <input type="checkbox"/> YAPSE |
| <input type="checkbox"/> MARIANA ISLANDER | <input type="checkbox"/> PONNPEIAN | |

☐ WHITE

☐ OTHER

☐ PATIENT REFUSED

I see that you have not shared your ethnicity and race information with URM. Please complete this form and I can enter the information into our system. This will help us to know our patients better and improve health care for everyone. Personal information will remain private and confidential.

What is your Ethnicity?

Your ethnicity refers to your background heritage, culture, religion, ancestry or sometimes the country where you were born. For New York State reporting, we are collecting whether or not your ethnicity is Hispanic, Latino or of Spanish Origin. If your Ethnicity IS Hispanic, Latino or of Spanish Origin, you may then select up to 3 Hispanic, Latino or of Spanish Origin choices.

What is your Race?

Your race is the group(s) that you relate to as having similar features, traits or birthplace.

By knowing you better, we can provide better care to our patients. Our goal is to meet the needs of all of our patients and understand our patients better. We can better meet our patient's needs if we know more about them.

Patient Turning 18:

We are updating your records, can you please take a moment to complete this document?



Your Menu



Appointments and Visits



Messages



Test Results



Medications

My Gender Identity Information

Use this form to let us know which pronouns are correct for you, and how you wish your gender to be identified. These changes may not be updated until you have an in-person visit with your UR Medicine physician.

My pronouns are:

ey/em/eirs

he/him/his

she/her/hers

the patient

they/them/theirs

ze/hir/hirs

My gender identity is:

Choose not to disclose

Female

Genderqueer/Gender diverse

Male

Non-binary

Something else

Transfeminine

Transgender Female

Transgender Male

Transmasculine

Continue

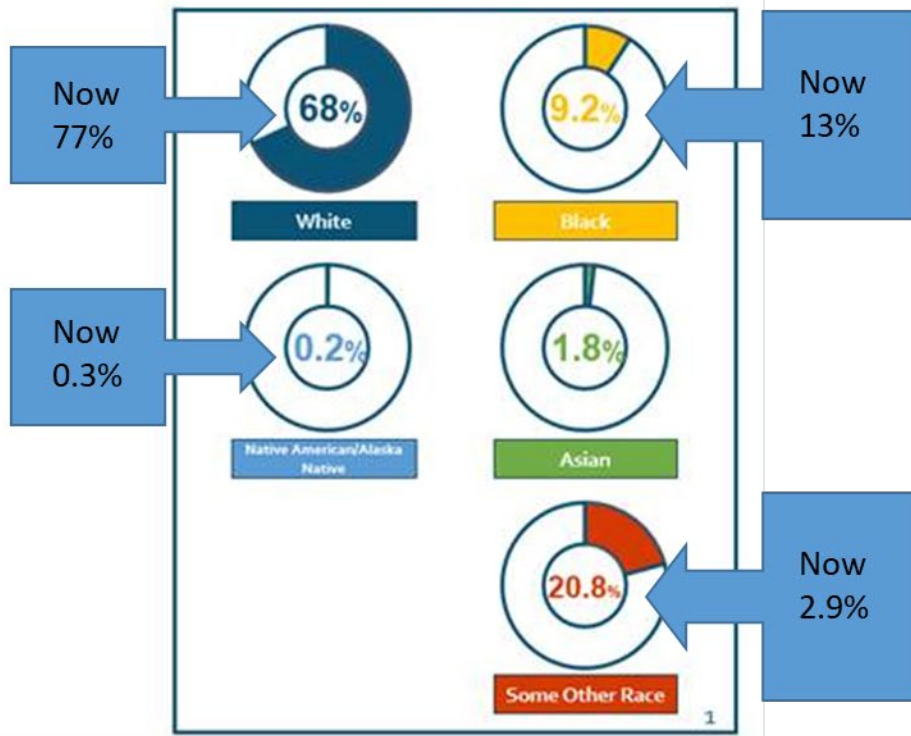
Finish later

Cancel

Census

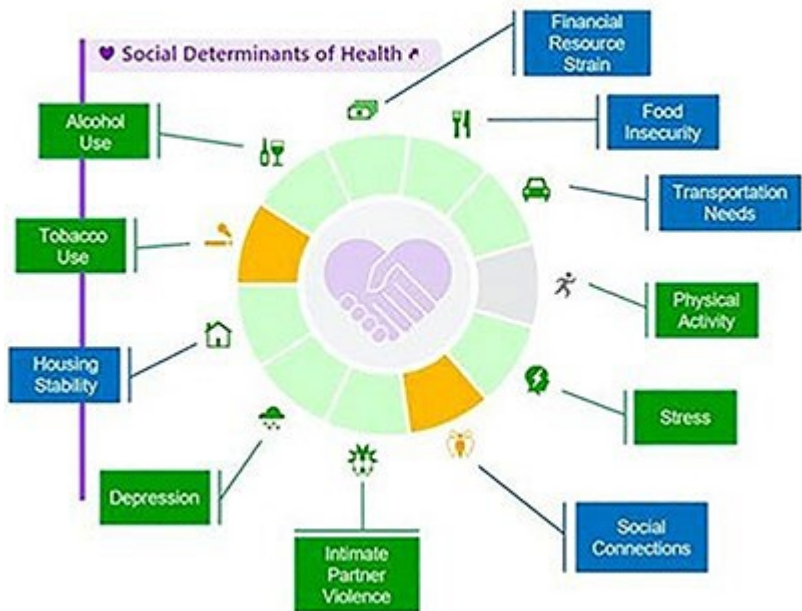


OLD COLLECTION = INACCURATE



Collecting social determinant of health information

EPIC SDOH Wheel



Use existing tools in the EMR. For URM that means EPIC

EPICs Social Determinants of Health Wheel

1. Financial resource strain
2. Food insecurity
3. transportation needs
4. Physical activity
5. Stress
6. Social connections
7. Intimate partner violence
8. Depression
9. Housing Stability
10. Tobacco use
11. Alcohol use

URMC focused on three areas that we weren't collecting information for already: finance, food, transportation

Questionnaires

Urmc Sdoh Mychart Screening

Question

Within the past 12 months, you worried that your food would run out before you got the money to buy more.	Never true
Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.	Never true
In the past 12 months, has lack of transportation kept you from medical appointments or from getting medications?	No
In the past 12 months, has lack of transportation kept you from meetings, work, or from getting things needed for daily living?	No
In the last 12 months, was there a time when you were not able to pay the mortgage or rent on time?	No
In the last 12 months, how many places have you lived? (range: at least 0)	1
In the last 12 months, was there a time when you did not have a steady place to sleep or slept in a shelter (including now)?	No

7/18/2022 2:05 PM
EDT - Filed by Pat

Let's Talk About Social Determinants of Health!

Why ask?

Social determinants of health (SDoH) are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live and age.

These factors have an enormous impact on our health and can contribute to health inequities.

Some patients may not be used to sharing this information with us. Asking these questions will open up the conversation and help us build deeper relationships with our patients.



What to ask?

Below are the questions for the food, housing and transportation domains in eRecord:

FOOD INSECURITY

- Within the past 12 months, you worried that your food would run out before you got the money to buy more.
- Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.

HOUSING STABILITY

- In the last 12 months, was there a time when you were not able to pay the mortgage or rent on time?
- In the last 12 months, how many places have you lived?
- In the last 12 months, was there a time when you did not have a steady place to sleep or slept in a shelter (including now)?

TRANSPORTATION NEEDS

- In the past 12 months, has lack of transportation kept you from medical appointments or from getting medications?
- In the past 12 months, has lack of transportation kept you from meetings, work, or from getting things needed for daily living?

How to approach?

Make it a natural part of the conversation; this should become second nature like all other questions.

If patients don't want help... respect their decision and document accordingly. Mention that you'll note that they'd like to decline answering, but they are welcome to bring up any concerns during a later visit.

If patients become upset... be honest. Tell them that we ask because we care and are on the same team when it comes to their health.



Stats from across our region and beyond that are worth noting:

20% (or higher) reflects the highest rates of food insecurity in the Finger Lakes region found in Rochester and Elmira (Common Ground Health)

38% of individuals who experience homelessness or have temporary housing in our region have reported barriers to getting needed medical care (Common Ground Health)

3.6 million people in the United States do not get medical care due to transportation issues (American Hospital Association)



If you need additional conversation tips and resources, visit the Health Equity & Anti-Racism Technology (HEART) Program's intranet site at <https://bit.ly/URMCHEARTProgram>. Or, send the team an email at HealthEquityTechnology@urmc.rochester.edu.



Cystic Fibrosis With Pulmonary Manifestation

Cystic fibrosis exacerbation

Chronic Pansinusitis

✓ Arthritis

SOCIAL DETERMINANTS

CURRENT PROGRAMS

Complex Care Center

Start Review

♥ Social Determinants of Health

Tobacco Use

May 5 2022: Low Risk

Financial Resource Strain

Oct 4 2021: High Risk

Transportation Needs

Oct 4 2021: No Transportation Needs

Stress

Oct 4 2021: No Stress

Intimate Partner Violence

May 6 2022: Not At Risk

Housing Stability

Oct 4 2021: Low Risk

Alcohol Use

Jan 6 2022: Not At Risk

Food Insecurity

Oct 4 2021: Food Insecurity Present

Physical Activity

Oct 4 2021: Insufficiently Active

Filter by

Favorite

My favorites

Provided Service

Elder Community Supp...

Exercise and Fitness

Financial Assistance

Food Insecurity Services

Mental Health Services

Substance Use Services

Transportation

Visiting and Companio...

Youth Community Supp...

+ Add

Language

+ Add

Showing results for "foodlink" near
by: **Provided Service**

Filtered Most relevant matches on top

FC	Foodlink - Curbside Market	1999 Mount Read Boulevard Rochester NY 14615
FE	Foodlink - Emergency Food Distribution	Food Pantry, Emergency Food, Health Services, Health Education, Free Meals 1999 Mount Read Boulevard Rochester NY 14615
FF	Foodlink - Foodlink	Food Pantry, Discrimination and Civil Rights Services, Nutrition Education, Health Education, Legal Assistance, Legal Representation, Job Placement, Job Insecurity Services, Food Insecurity Services, Free Meals, Emergency Food, Help Hotlines, Social Care, Alternative Education, Skills and Training, Specialized Training, Assistive Technology 1999 Mount Read Boulevard Rochester NY 14615
FK	Foodlink - Kids Cafe and Summer Meals	Child Nutrition Programs, After School Programs, Free Meals 1999 Mount Read Boulevard Rochester NY 14615
FM	Foodlink - Mobile Food Pantry	Food Pantry, Emergency Food 1999 Mount Read Boulevard Rochester NY 14615

Moving towards fully integrated resource closed-loop referrals.

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System Change: Housing



DePaul Hopelink at Shelter Cove a Short-Stay (10 bed) Residence, is a partnership between DePaul Community Services and Strong Memorial Hospital. This provides a unique residential alternative upon discharge from the hospital.



Sanctuary House



Francis Center

Catholic Family Center (CFC) and Strong and Highland Hospitals have partnered to provide homeless individuals with temporary transitional supportive housing (20 beds) after being discharged from the hospital.

System Change: Food

We had the ability to screen for food insecurity, but we were missing a community partnership and workflow to help us **immediately** connect patients in **urgent need** to nutritious and affordable food options **on-site**.



The Department of Social Work and Patient & Family Services, the Health Equity Program Support Office (HEPSO), and Food and Nutrition have forged a partnership with FoodLink to operationalize food pantry pilots. The partnership includes piloting a referral-based, emergency food pantry for patients identified as food insecure at an appointment or during their hospital stay.



System Change: Food



Patients here for a
Primary Care Visit



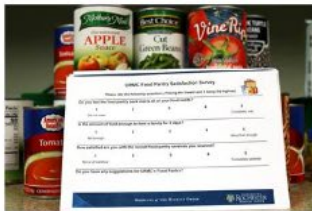
Provider Screens for Food
Insecurity during visit and
creates a referral order in
the Electronic Medical
Record



Patient receives a printed
voucher



Patient
survey
included in
bags

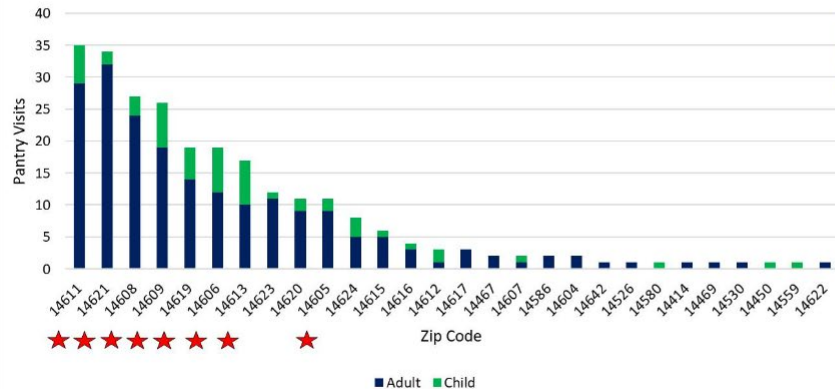


Patient goes to patient
discharge to pick up their
bag(s)



URMC Food Pantry Recipient Demographics

Where do URM Food Pantry Recipients Reside?

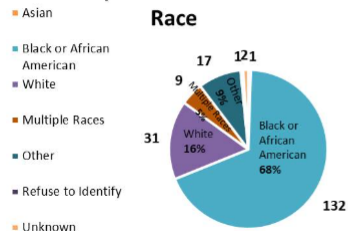


★ 75% of visits were by individuals from Rochester focus area

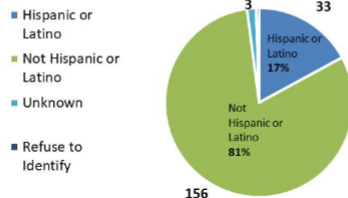


In the first 8 months, including the pilot phase, there were 252 visits to the pantry, by 193 unique patrons

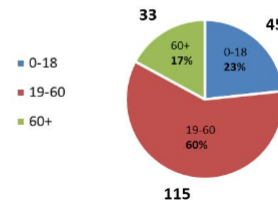
Unique Patient Served
Race



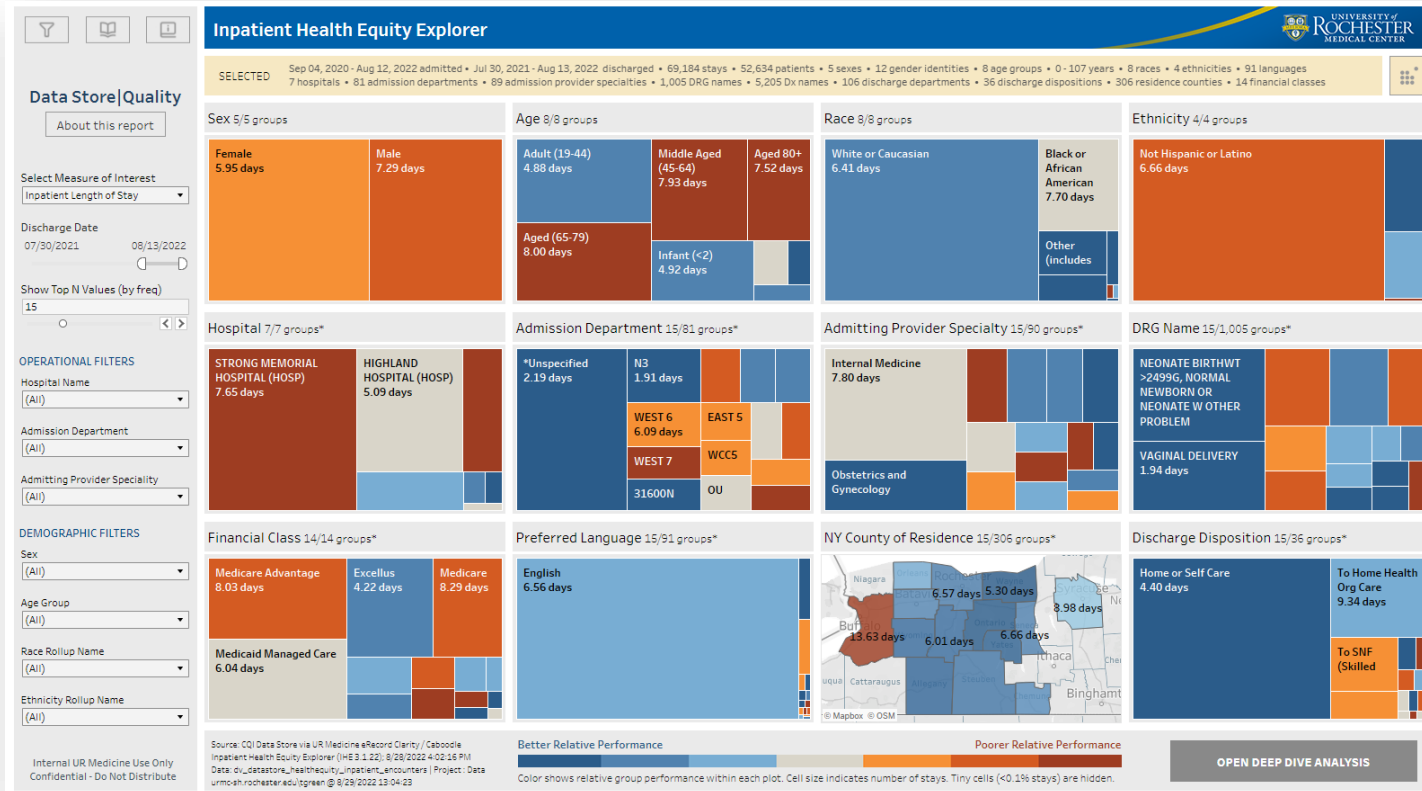
Unique Patient Served
Ethnicity



Unique Patient Served
Age



Using the data: Clinical Quality Improvement Data Store*



Currently based on INPATIENT already collecting quality metrics. Soon adding

- Outpatient
- Social Determinants

*using test data



ENGAGE in equitable health care

EDUCATION: Establish URM as a national leader in health equity education, specifically focusing on the impact of racism on health and development, and ensure the transition of knowledge into policy and action

- **Provide support to schools and clinical departments to implement health equity education**
 - Strategy: With centralized support, ensure that each clinical department implements health equity education for all trainees

Key Result	Progress
Key Result (KR 1a): By July 2025, 80% of all URM clinical departments that house residency programs will have successfully implemented health equity education	<ul style="list-style-type: none">• Curricula framework developed with competencies• Self-assessment tool created• (8) of the 28 residency programs (29%) engaged for phase 1 pilot
Key Result (KR 1b): By July 2025, 75% of all URM residents and fellows will have engaged in discipline-specific HE education	<ul style="list-style-type: none">• Pilot programs (8) will engage 241/647 (37%) residents• HE education video planned for all residents in fall 2022
Key Result (KR 1c): By July 2025, at least ten resident driven quality improvement projects, from at least 5 different residency programs, will be completed that demonstrate a clear understanding of social determinants of health and address a significant health equity concern.	<ul style="list-style-type: none">• Resident driven quality improvement projects have been recorded (Quality Institute) and those with a specific quality improvement focus have been identified

Resident Health Equity QI Projects, sample

- Creation of a formal Health Care Disparities Curriculum
- Reducing Barriers to Postpartum Discharge
- Integrating Predictive Analytic Risk Tools for Improvement in Utilization of Care Management Resources in the Primary Care Setting
- Maternal Screening for Opioid Use Disorder
- Development of a bilingual (English-Spanish) IPPOC
- Improving Information Sharing with Child Protective Services
- Case cancellations in the ambulatory pediatric dental population at URM
- Implementation of a puberty blocking protocol for transgender/gender diverse youth in Adolescent Medicine Clinic
- Care of Transgender Population Pre and Post Intervention Survey



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