|  |  |  |
| --- | --- | --- |
| **Stack Level** | **As-Is** | **Comments** |
| World | Increasing focus on population health and social determinants of health. | National and global healthcare trends emphasize addressing social factors influencing health. |
| Organization | ImprovingHealth, a non-profit healthcare organization. | Leadership is committed to addressing social determinants of health despite not being chosen for the CMS Accountable Health Communities Model. |
| Role | Clinical staff (physicians, administrative assistants) and senior director of informatics. | Physicians are currently responsible for screening, which is not an optimal use of their time and skills. |
| Function | Systematic screening for health-related social needs (HRSNs) of Medicare beneficiaries. | The process involves identifying HRSNs and connecting beneficiaries with appropriate resources. |
| Workflow | Screening is done on paper by physicians, data is manually entered into Excel by administrative staff. Results are emailed bi-monthly to central offices. | The workflow is inefficient, resulting in low screening completion rates. There is frustration among staff due to unclear roles and the perceived burden of the process. |
| Information System | Excel spreadsheets for data aggregation and reporting. | Lack of an integrated electronic system leads to inefficiencies and potential data errors. |
| Module | HRSN screening tool used in clinical settings. | The tool is currently a paper-based form, not integrated into electronic health records (EHRs). |
| DIKW | Data: Screening results; Information: Aggregated Excel reports; Knowledge: Identifying needs trends; Wisdom: Strategic decision-making. | The current system captures data but fails to efficiently transform it into actionable knowledge and wisdom. |
| Technology | Paper forms, Excel for data entry and reporting. | The technology is outdated and not suited for the scale and importance of the task. |