## Project Description / Purpose

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| **Project Name:** | *Health Related Social Needs (HRSN) Screening* |
| **Clinic:** | *District Medical Group Children’s Rehabilitative Services* |
| **Process:** | Implement a standard patient/provider communication protocol |
| **TIP 2.0 Process Milestone:** | *TI 2.0 Year 2 Measure 3 PEDs Primary Care*  *TI 2.0 Year 2 Measure 3 PEDs Behavioral Health* |
| **Project Description / Purpose** | |
| The purpose of the HRSN screening is to implement a standard patient-provider communication protocol for those in need of community resources. The HRNS screening tool helps healthcare providers identify and discuss the non-medical needs of the patients and families that received medical and/or behavioral health care. Healthcare providers understand that connecting patients to community-based resources can impact and improve a patient's overall health outcome. | |

## Project Overview

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| **Problem Summary:** | *Some communities have less resources than others. The impact negatively affects people’s lifestyles which can impact the entire family. Providers understand that people who don’t have access to housing, nutrition, or other economic stability can increase their risk of health conditions like health disease, obesity, diabetes, and other physical and mental health conditions. The desired outcome is to create a safe and trusted patient-provider relationship when addressing inequities with whole person/ whole care.* |
| **Desired Outcome(s):** | *Key deliverables*   1. *Screen patients for Health-Related Social Needs (initial visit, annually, and as needs are identified)* 2. *The provider engages with the patient to discuss needs and resources. Building a trusted environment for the patient* 3. *Document HRSN results in the patient's chart (Z codes/G codes)* 4. *Create referral(s) with patient’s consent* 5. *Create a close loop referral to monitor the status (UniteUs)*   *Project Goal:*  *The provider and patient will have a trusted environment to discuss nonmedical needs. The patient will have the resources to promote stability and well-being, which leads to positive health outcomes.* |
| **Benefits:** | Implementing a standard patient/provider communication protocol for addressing HRSNs increases the trust and safety of the relationship.  The provider and support staff will feel empowered to ask non-medical questions. When needs are identified the provider can explain the effects of HRSNs on healthcare outcomes. The patient can feel empowered to connect with community-based resources for safety, nutrition, housing, and other resources needed.  Implementing the HRSN communication protocol will enhance healthcare outcomes by providing community-based resources to patients and families. It improves patient engagement by fostering trust and safety with providers and support staff. |

## Timeline

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|  | **Description of Task and Completion Dates** |
| **Task 1** | *Update Health-Related Social Needs (HRSN) Screening protocol by July 5th* |
| **Task 2** | Train providers and support staff on communication introduction of HRSN screening by July 12th |
| **Task 3** | *Measure HRSN screening rates by the department by September 30th* |
| **Task 4** | *Create a report to ensure billing codes are documented by September 30th* |
| **Task 5** | *Track closed-loop referral for status by September 30th* |

\* Add new rows as needed.

## Project Scope

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| **In Scope Project Objectives** |
| The primary objective of this project is to implement a standard patient/provider communication protocol for addressing HRSN screening tools by addressing the inequities with whole person/ whole care. The goal is to improve health outcomes and reduce disparities related to prevention, and treatment of diseases. |
| **Out of Scope Project Objectives or Activities** |
| District Medical Group Children’s Rehabilitative Services is a pediatric clinic that cares for medically complex / medically fragile patients. Medicaid is 95% and 5% of private commercial payors. |

## Project Team

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| **Team Lead:** | Veronica Ojeda | **Project Champion:** | Shannon Songne |
| **Process Owner:** | Veronica Ojeda | **Process Manager:** | Marisel Fuentes |

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| **Stakeholders** | | | |
| **Stakeholder** | **Title** | **Department** | **Organization** |
| *Troy Nelson* | *Medical Director* | *Primary Care* | *District Medical Group, Children’s Rehabilitative Services* |
| *Megan Aros-O’Malley* | *PhD* | *Behavioral Health* | *District Medical Group, Children’s Rehabilitative Services* |
| Natasha Flores | Care Coordinator | Social Worker | District Medical Group, Children’s Rehabilitative Services |
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| **Project Team Members** | |
| **Name** | **Team Role** |
| *Veronica Ojeda* | *Physician Practice Transformation Manager* |
| *Natasha Flores* | *Care Coordinator/ Social Worker* |
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## Signatures

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| **Process Owner** |  |
| **Project Champion** |  |
| **Team Leader** |  |