EpxBasicNeeds: Developing an Accessible Platform to Evaluate and Manage Basic Needs

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Introduction

Social determinants of health, including difficulty meeting basic needs, are being increasingly recognized as a significant but addressable factor of poor health outcomes. In an attempt to identify and address these upstream causes, healthcare systems have begun administering interventions. These interventions frequently include an assessment of a patient's needs, regarding their social determinants of health (SDOH). Because there is no complete consensus on the SDOH or basic needs of a patient, and because populations differ, these screening assessments vary. We adapted a popular basic needs screening tool, originally developed by the Center for Medicare & Medicaid Services (CMS) in hopes of being able to "deploy" this module to at-risk populations. In this presentation, we detail our progress to date.
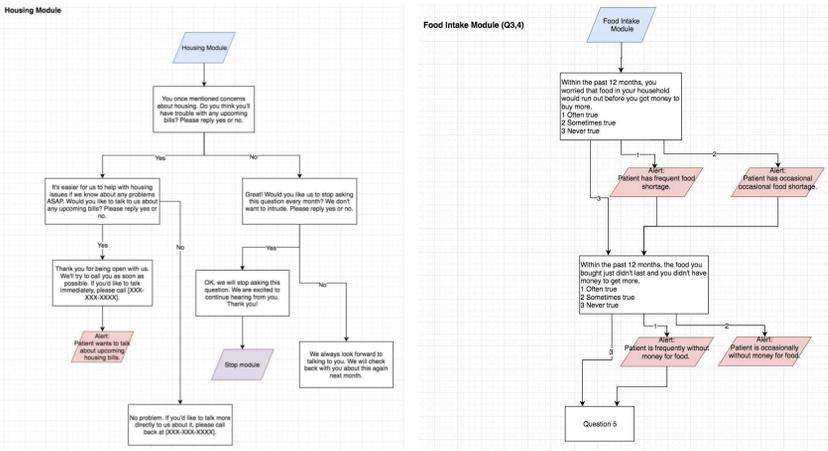
Concept

Figure 1. Selected modules from the first draft of EpxBasicNeeds.
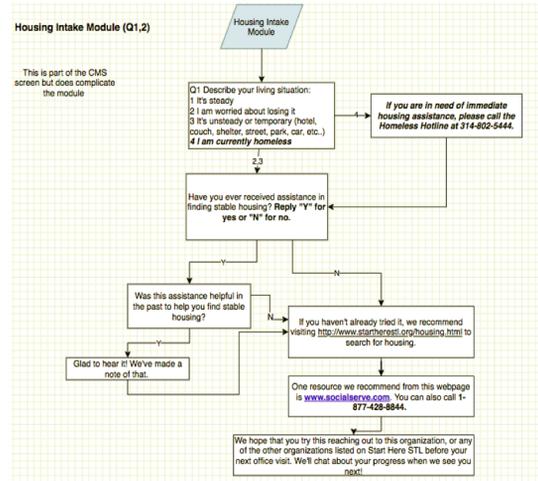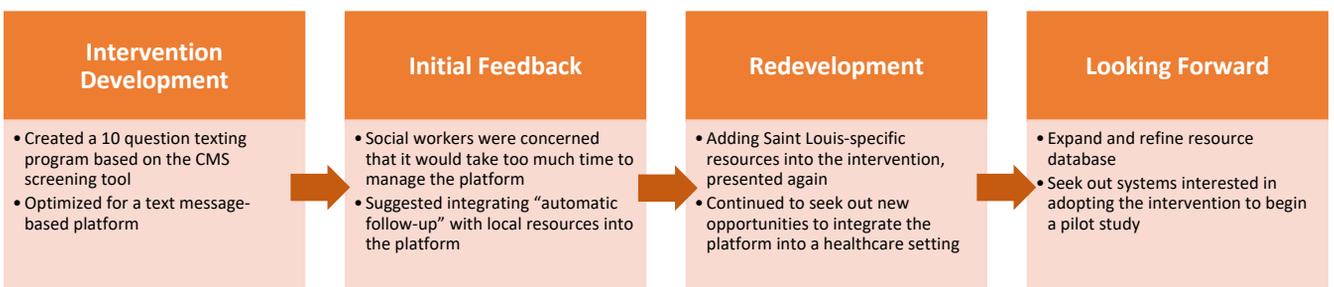

Figure 2. Example of a module from the most recent draft.

Intervention

Our project proposes a novel text-message based intervention, EpxBasicNeeds, to reach out to patients deficient in areas of food supply, housing, employment, health insurance, or basic education. It gives patients the option to contact social workers to help in areas of need without requiring in-person appointments. Basic screening for depression is included by adding patients to EpxDepression should they consistently provide negative responses at check-in. Patients will also be enrolled into EpxReferral if they need non-emergent medical care or follow-up.

Over the past several months, our team has been working with a group of clinical social workers in a major Saint Louis healthcare system to refine the efficacy of this platform. We detail our progress in the flow chart below.

Progress to Date

Intervention Development	Initial Feedback	Redevelopment	Looking Forward
• Created a 10 question texting program based on the CMS screening tool • Optimized for a text message-based platform	• Social workers were concerned that it would take too much time to manage the platform • Suggested integrating "automatic follow-up" with local resources into the platform	• Adding Saint Louis-specific resources into the intervention, presented again • Continued to seek out new opportunities to integrate the platform into a healthcare setting	• Expand and refine resource database • Seek out systems interested in adopting the intervention to begin a pilot study

Conclusion

In working with case managers in clinical practice, we learned that to be practically useful, our intervention must go beyond simply identifying basic needs. The team we collaborated with desired a tool that would proactively support patients, while arming case managers with a tool to manage patient progress that would not add a significant burden to their clinical workload.

In the future, we hope to iterate a version of EpxBasicNeeds that supplies local resources to patients based on their specific needs. Our ultimate goal is to provide support to patients and enhance communication between case managers and patients during the gap between their clinical encounters. We hope that this will not only enhance the patient's quality of life, but also benefit providers by helping them accomplish more in a single clinical encounter.

References

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