

Improve Health Care Outcomes by Integrating Social Care

Findings from *Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health*

Decades of research demonstrate that improving social conditions — such as access to stable income and housing, nutritious and sufficient food, appropriate health care, and reliable transportation — is critical to reducing health disparities and improving overall health across the United States. Integrating social care into health care delivery can help achieve this goal.

The current health care delivery system is primarily focused on providing medical interventions to treat or prevent disease, and is not equipped to systematically address health-related social risk factors and social needs that contribute to disease and exacerbate health inequities. To change that, health care leaders can implement strategies to integrate social care into clinical, community, advocacy, and research work.

The 5As of Social Care Integration

Health care systems can adopt strategies to prevent and address social risks and social needs for patients, families, caregivers, and communities:



1. AWARENESS

Increase the Health Care Sector's Awareness of Social Risk Factors Their Patients Face (e.g., ask people about their access to transportation)

public transit, or in contract with a community-based organization that provides transportation services, so patients can travel to and from health care appointments)



2. ADJUSTMENT

Use Information on Social Risk Factors to Inform Clinical Care Decision-Making (e.g., offer alternatives to in-person care, such as telehealth appointments)



4. ALIGNMENT

Align Health Care Assets with Existing Social Care Assets (e.g., invest in community ridesharing)



3. ASSISTANCE

Link Patients with Social Needs to Community and Government Resources (e.g., provide transportation vouchers for ridesharing,



5. ADVOCACY

Advocate for More Social Resources to Improve Community Health and Well-Being (e.g., promote policies that fundamentally change the community's transportation infrastructure)

Examples of Innovative Solutions

Health care professionals within hospitals, clinics, insurance plans, and other health care settings have innovated in various ways to integrate social care with health care.

For example:

- Minnesota's Hennepin Health, a Medicaid delivery program, coordinated assets at the county level, including across social care agencies, county-based health departments, multiple health systems, and a nonprofit health plan. Emergency department use declined, and primary and preventative care use for Medicaid beneficiaries increased.
- When the Massachusetts Department of Public Utilities held a hearing on revising regulations concerning utility shutoffs, attorneys and health care team members from Boston Medical Center's medical-legal partnership were able to successfully advocate to protect high-risk patients during the winter season. They cited screening data on high-risk patients (such as those with sickle cell disease and asthma) whose health would suffer from utility power cuts.
- In 2019, more than 40 health care delivery organizations across the nation participated in an anchor institution collaboration to influence health at the community level. Anchor strategies include activities such as hiring individuals from underserved communities to provide them with economic opportunity, establishing local and minority-owned business preferences for vendor and supply chain contracts, and investing in local housing development initiatives.

Strategies to Reduce Inequities

The existing and ongoing trend toward value-based care has highlighted the need for health care organizations to integrate social care to improve outcomes and reduce inequities through strategies such as:

- Design and implement integrated care systems that incorporate the preferences and needs of patients and affected communities and ideally are co-designed with community partners.
- Develop and finance referral relationships with social care providers when feasible, supported by operational integration such as co-location or patient information systems.
- Use collective financing mechanisms to spread risk and create shared returns on investments in social care.
- Build linkages and communication pathways between health care and social service providers, such as personal care aides who provide in-home care and support for individuals with serious illnesses and disabilities. Working in the home, aides can observe a wide variety of their clients' social needs and provide this information to other members of the care team.
- Partner with community organizations to respond to identified community gaps in social care and to comply with community benefit regulations.
- Fund, conduct, and translate research and evaluation on the effectiveness and implementation of social care practices in health care settings.