



# Enabling & Supporting SDoH Screening & Referral Processes Using Aunt Bertha

Kiera Kenney, MSW Program Manager Kkenney@healthfederation.org Ethan Gutmann-Goldstein, MSW, MBA Community Engagement Coordinator Egutmann-goldstein@healthfederation.org

# Background

#### **Funded By:**



#### **Our white label version of Aunt Bertha:**

**Connect4Health** 



## **Platform Overview**

focus areas

A patient profile is created

Couch referrals within associated goals

Run reports to quantify SDoH work

Assessment	Goal Creation	Resource Search	Referral	Closing the Loop	
Assess patient needs to determine SDoH areas of focus	Based on assessment results, goals can be added or generated around	Use the Aunt Bertha resource database to find local, suitable	Using the program's preferred referral method, submit a referral and/or "log"	Update the status of the referral or see updates from the patient/	
Customization:	identified domains of need.	programs	the referral action	recipient org.	
Use the standard PRAPARE or HRSN	Customization:	Customization:	Customization:	Customization:	
tools	oustornization.	Create favorites	N/A	N/A	
OR	Create custom goal	folders to highlight			
Create a custom	categories to align	trusted resources			_
screener	with your SDoH	within each domain			

of need

#### **Current Partners**

- 1. New Kensington Community Development Corporation (NKCDC)
- 2. Delaware Valley Community Health (DVCH)
- 3. Philadelphia Department of Public Health (PDPH) various departments
- 4. Family Practice and Counseling Network (FPCN)
- 5. Mental Health Partnerships
- 6. Education Plus Health
- 7. Esperanza Health Center
- 8. St. Christopher's Hospital for Children
- 9. Spectrum Health Services

# **Our Setup Process**



Demo



Workflow



Training



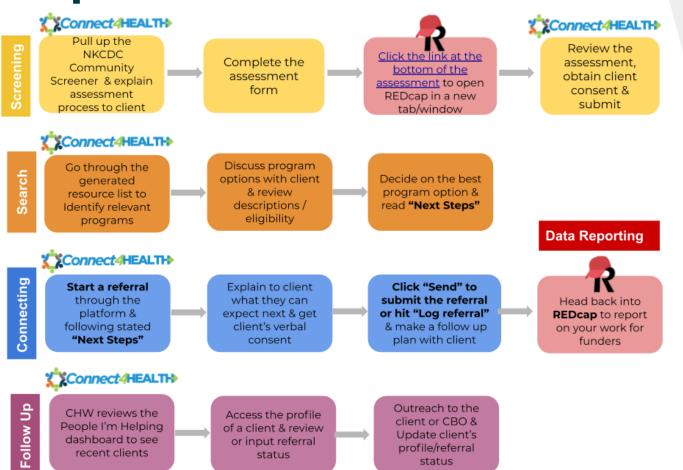
Adjust



Ongoing Support

- Discuss what is possible through the platform
- Involves key players within the team
- Understanding the existing workflow
- How will C4H complement/replace existing process
- Test before committing (optional)
- Assess training needs
- Provide training to users
- Schedule periodic refreshers
- Refining processes
- Addressing unmet needs
- Integrating new platform capabilities
- Check-ins
- User Groups
- Product Updates & Feedback Opportunities

## **Example Final Workflow**



In the past year...

10x

Increase in <u>claimed</u> <u>programs</u>

11,000+

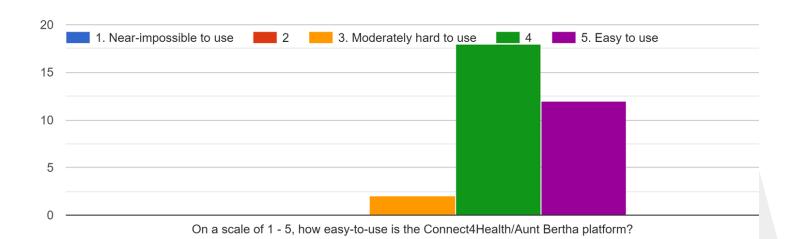
Searches

**4,986** distinct users

3,800 anonymous users

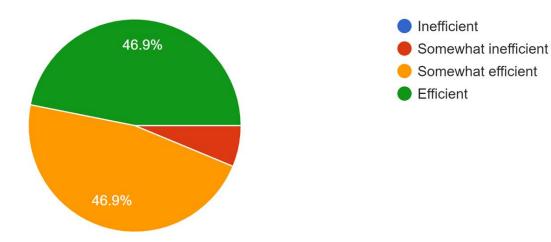
#### **End-User Survey Results**

On a scale of 1 - 5, how easy-to-use is the Connect4Health platform?



#### **End-User Survey Results**

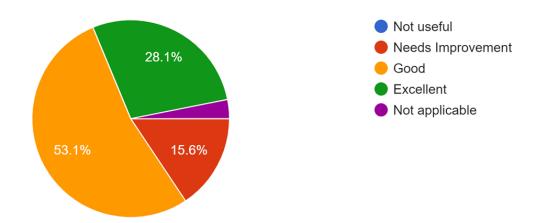
How efficient do you find the Connect4Health Platform? 32 responses



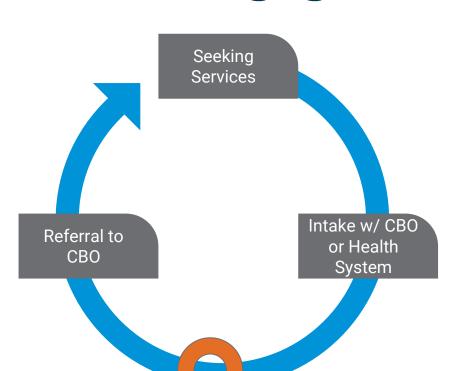
#### **End-User Survey Results**

Overall, how successful is the Connect4Health platform in helping you connect your seekers to social services?

32 responses



# **CBO Engagement**



Increasing CBO engagement on platform ensures robust and accurate resources and the completion of "closed loop" referrals

Since CBO outreach began...

- ID and outreach to 124 CBOs
- ❖ 37% response rate
- Approx. 30 "workflow ID" conversations

# **CBO** Engagement

#### Prioritize Outreach

#### Organization Workflow ID

#### **Technical Assistance**

- ❖ 3-Tiered structure
  - Tier 1 partner organizations
  - Tier 2 partner organization networks
  - ➤ Tier 3 support other's outreach

Introductory conversations with CBOs helped to identify specific needs and how the platform fits within their existing model

Support the ongoing needs, workflow development, addition of new programs, and staffing changes across time

### **Lessons Learned**

- Aunt Bertha-based SDoH workflows can be customized for each program/health center & benefit from some lead time & planning
- Workflows that require platform use & build it into supervision & reporting structures have greatest potential for success
- Staff/users may benefit from practical step-by-step training opportunities, which explicitly place Aunt Bertha within the larger workflow
- ► CBO engagement is *critical* to the success of the platform and requires targeted, multi-pronged outreach & often individualized CBO support

## **Lessons Learned - 2**

- Targeted conversations with CBOs can improve platform-based closed loop referral processes, but communication external to the platform is still necessary
- Search optimization efforts are crucial for achieving sustained staff use
- The existing analytics suite may not be flexible enough to address the full range of reporting/data needs
- Our model is still somewhat uncommon Advocating for our needs takes time
- Platform is in "early adopter" phase of usage positive feedback is promising as idealized outcomes requires engagement and time