

## **Overview and Executive Summary**

### **Part I – Patient Perspectives: Findings and Recommendations from Qualitative Interviews in Years 1-3 of the Alliance Evaluation July 2022**

#### **Overview**

##### **ADULT PATIENT EXPERIENCES**

###### **Section A. SDOH Screening Experiences**

A.1 Setting and format

- *Camden Coalition Recommendation A.1 – Strategies and tools to promote consistency*

A.2 Response to and perceptions of screening

- *Camden Coalition Recommendation A.2 – High quality staff training*

A.3 Outcomes and follow up

- *Camden Coalition Recommendation A.3 – Patient-facing materials*

###### **Section B. Patient Needs and Referrals**

B.1 Sources of referrals

B.2 Patient needs and referrals received

B.3 Barriers to completing referrals

- *Camden Coalition Recommendation B.3 – CHW strategy, supports, and encouragement*

###### **Section C. Community Health Worker Program**

C.1 Genuine connection

C.2 Concrete support

C.3 Communication

###### **Section D. CHW Program Intersection with Other Programs and Services**

D.1 Case management and care coordination programs

- *Camden Coalition Recommendation D.1 – Triage processes for patients needs and services*

D.2 Role of and experiences with The Church of Jesus Christ of Latter-day Saints

##### **PARENT EXPERIENCES (PEDIATRIC SETTING)**

###### **Section E. SDOH Screening Experiences**

E.1 Screening format and parent response

- *Camden Coalition Recommendation E.1 – Clear explanations*

E.2 Screening outcomes and follow up

## Executive Summary – Key Themes from PolicyLab Findings

Key Themes	SDOH Screening	CHW Program
<p><b>1. The value of relationships</b></p>	<ul style="list-style-type: none"> <li>➤ The approach from staff as well as the format of the screening impacted how patients felt about the screening. Patients appreciated when the discussion and concern from providers or staff felt genuine. Others expressed some negative emotions associated with screening, particularly if they felt staff did not care about their answers to the questions.</li> </ul>	<ul style="list-style-type: none"> <li>➤ CHW-patient relationships were highly valued by most patients and were key facilitators in making meaningful connections to resources. Most patients felt their CHW truly cared about them.</li> </ul>
<p><b>2. Complexity and diversity of patient needs</b></p>	<ul style="list-style-type: none"> <li>➤ Patients reported a wide range of needs, with respect to content areas and the complexity of needs. Patients reported a similarly wide range of referrals they received and connections they made, often with CHW support, to meet those needs.</li> <li>➤ Patients reported varying readiness to engage in screening, referrals, or resources, often depending on their current or past circumstances or experiences.</li> </ul>	
<p><b>3. Lack of standardization and/or consistency</b></p>	<ul style="list-style-type: none"> <li>➤ Screening experiences and follow up differed for almost every adult patient.</li> <li>➤ Parents reported consistent screening experiences, but variation in follow up.</li> </ul>	<ul style="list-style-type: none"> <li>➤ Collaboration with other care management and care coordination programs was highly varied. In some instances, patients had a hard time distinguishing between programs.</li> </ul>
<p><b>4. Missed opportunities</b></p>	<ul style="list-style-type: none"> <li>➤ Many adult patients and parents recalled receiving little to no explanation about SDOH screening and why the questions were being asked.</li> <li>➤ Some patients reported SDOH needs but received little or no appropriate follow up. In some instances, these patients indicated that they would have said “yes” to a CHW referral.</li> </ul>	<ul style="list-style-type: none"> <li>➤ A few patients experienced a mismatch between their needs and resource availability or eligibility when working with a CHW.</li> </ul>

*Camden Coalition provides recommendations and strategies for several key themes in this summary and PolicyLab findings throughout the report.*