Kaiser Permanente's Thrive Local: Connecting Patients to Critical Community Resources

July 12, 2022



# Welcome

Liz Mekjavich Vice President, Education & Publishing California Hospital Association

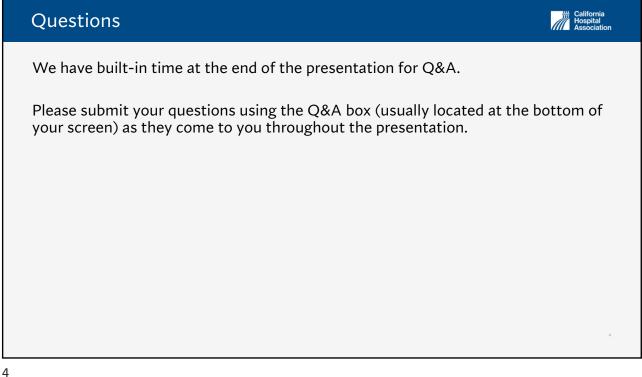




## **Continuing Education**

Continuing education hours are offered for this program for health care executives and nursing.

Full attendance and completion of the online evaluation and attestation of attendance are required to receive CEs for this webinar.



California Hospital Association

### Presenter



#### Anand Shah, MD, MS Vice President, Social Health Kaiser Permanente

At Kaiser Permanente, Dr. Shah is responsible for developing and implementing national social health strategy. He collaborates with leaders across KP to establish enterprise systems, programs, and standards to screen for and address myriad social factors influencing health outcomes and health equity. His areas of focus include driving the adoption of standardized screening tools, scaling evidence-based interventions, and integrating a platform into the organization's electronic health record system to connect members with social services and other community-based programs that alleviate food insecurity, homelessness, and other social needs.

Prior to joining Kaiser Permanente in 2019, Dr. Shah was the chief product and clinical officer at Pieces Technologies, where he helped develop a new platform to connect health systems and community organizations together to address social needs. He also oversaw the development and implementation of a population health analytics platform that was used to stratify and segment populations based on clinical and social risk.



### CHA Education Webinar Series

July 12, 2022 Anand Shah, MD, MS, Vice President of Social Health

KAISER PERMANENTE



	Agenda
	Social Health & Health Equity
	Our Social Health Practice
	Thrive Local
	Community Networks
7	
7	

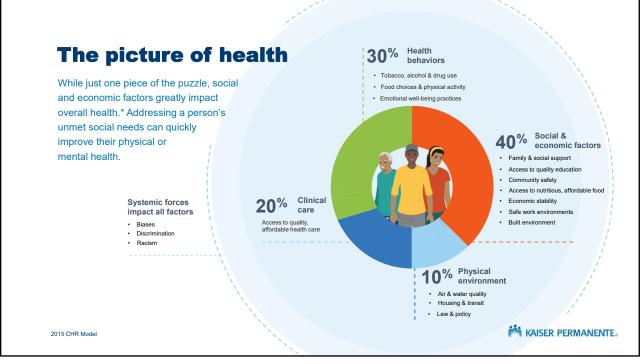


# Addressing health equity is a critical component of a robust, sustainable society

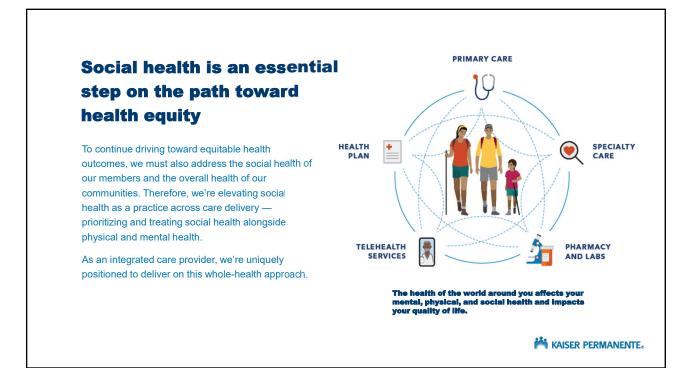
A person's health is determined by much more than their behavior or access to health care. Health is inextricably tied to where people are born, live, work, and age. The ability to access a quality education, find a secure job, and pay for healthy food and safe housing impacts the physical and mental health of individuals and families. Any inequities are compounded by biases and systemic barriers.

Health equity — when all people have the opportunity to reach their best health — can only be achieved by identifying and meeting these social health needs.

KAISER PERMANENTE.









report having a severe social need than white members.

# buy food and pay bills, and 35% experienced social isolation.

UNMET SOCIAL NEEDS ARE A BARRIER TO HEALTH



### 3 in 5 members

(roughly 8 million members) have at least 1 social factor they need help with.

2020 Kaiser Permanente National Social Needs Survey 13

13

#### Social needs among members by line of business Commercial Individual Medicare Medicaid At least 1 social need 64% 67% 49% 89% > 3 social needs 27% 31% 21% 52% By factor 44% **49%** 32% **79%** Financial strain Social isolation 36% 40% 26% 51% 32% 29% 19% 59% ×A Food Housing 17% 20% 8% 36% 6% 6% 7% 14% Transportation Kaiser Permanente 2020 Social Health Survey 14

### Social health practice key programs and initiatives

Our social health practice aims to address drivers of health at scale by systematically integrating screening for and addressing social factors into the care and services we provide members. Our social health practice includes 3 key pillars: Identify, connect, and support & follow up.

### **KEY PROGRAMS & INITIATIVES**

- Standard screening questions in electronic health record system
- Universal screening
- Predictive modeling \*
- Thrive Local
- Social health member initiatives
- · Social health data integrated into electronic health record system\*
- · Data-informed adjustments to care \*

\* Indicates in design /planning stages

15

Ø

Å L Identify

Connect

Identify and predict social factors that impact health and

Connect members to community

evidence-based programs to meet urgent social health needs.

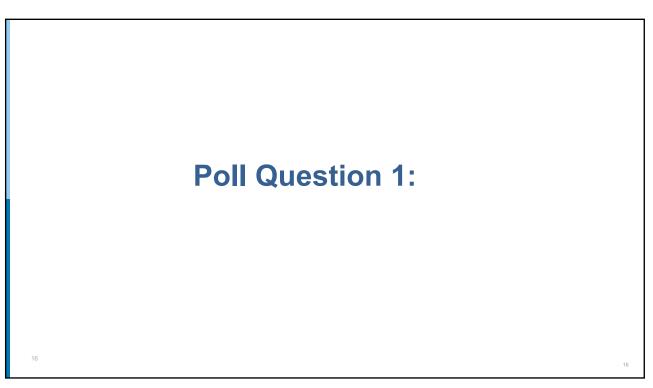
circumstances to create holistic care plans that support

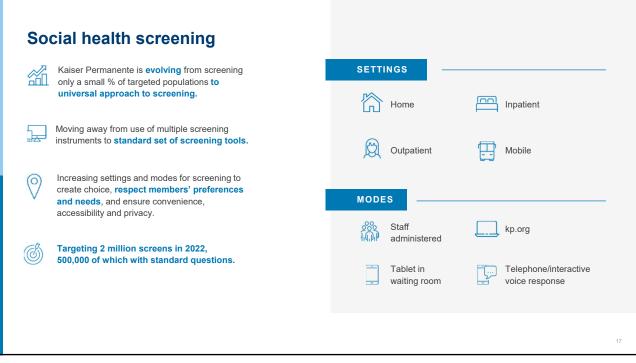
members' physical, mental and social health.

contribute to inequities.

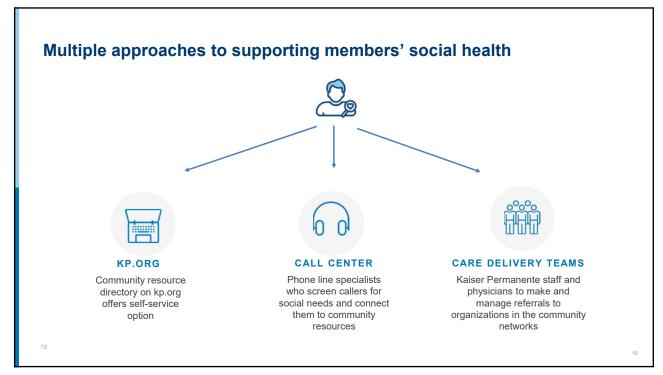
resources and develop

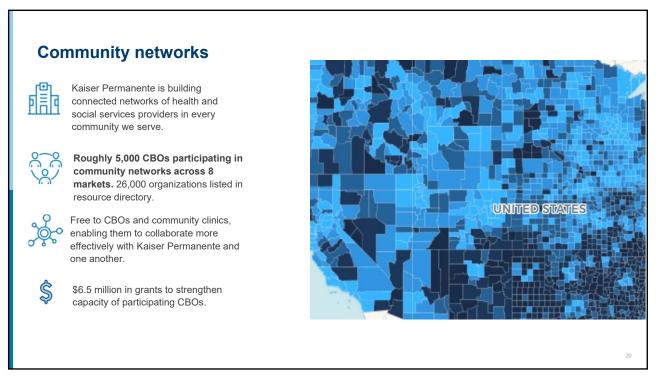
Support & Follow Up Consider members' personal











### Social health member initiatives portfolio

尙

HOUSING

INSECURITY

To address the housing

(\*and patients\*) through

integrating medical-legal

providing greater access

to community resources

needs of our members

implementing an innovative rapid re-

housing model,

partnerships, and

through strategic

community-based

Initiatives: Project

Med Legal Partnership

partnerships.

HOME.

### X

### FOOD SECURITY

To address the food needs of our members through increasing purchasing power, providing enhanced nutrition to vulnerable and sick members, and providing greater access to community resources.

Initiatives: SNAP Enrollment, Medically Tailored Meals, Produce Prescriptions, \* WIC Enrollment

### ð

SOCIAL ISOLATION

To reduce self-reported feelings of social isolation and loneliness in three target populations (Older Adults, Perinatal Women, Youth) through member facing resources, health promotion campaigns, and high touch interventions.

Initiatives: PGP/Life Experienced Campaign \*High Touch Intervention

### 

FINANCIAL WELLBEING

To leverage our position as a trusted messenger to support financial strain within our membership. Focuses on improving financial resiliency, changing behaviors, and addressing an individual's financial circumstances such as savings, debt, and credit.

Initiatives: \*Get Your Refund

# DIGITAL EQUITY

To ensure our members have access to necessary technologies, while also addressing digital literacy, capacity, and online content necessary to encourage full participation in an increasingly digital world.

Initiatives: SafeLink

\*Under exploration / In Development

# social health member initiatives Launched / currently underway

### SNAP Enrollment

Food Security A multi-modal outreach campaign to get eligible members enrolled in SNAP. To date, over 4 million members reached and 93K assisted with application submissions across the enterprise.

#### Project HOME

Housing Insecurity Provide navigation, assistance and tenancy sustaining services to a segment of our unhoused patient population through strategic community-based partnerships.

#### Medically Tailored Meals Food Security

Meals that support healthy eating postdischarge from the hospital for chronic conditions. To date, 2K have enrolled providing over 116K meals to patients and their households.

#### Medical Legal Partnerships

Partnerships Housing Insecurity Integrates medical-legal partnership (MLP) programs into Kaiser Permanente care delivery, build capacity of the legal services sector, and increase access to legal services to prevent individuals and families from losing their homes.

#### Produce Prescriptions Food Security

Partnership with Tufts University to test Produce Rx by providing healthy food access and nutrition education to people with diabetes who are food insecure.

#### Social Isolation Campaign

Social Isolation Executing and evaluating a multifaceted health communications campaign to decrease social isolation and loneliness among older adults. To date, the campaign has generated 1K followers and over 10K website visits.

### Get Your Refund

Financial Wellbeing Texting campaign to inform potentially eligible, low-income members about free tax preparation services to increase access to flexible dollars through tax credits and stimulus payments.

#### SafeLink Digital Equity

Digital Equity Connecting members to SafeLink (part of the Federal Lifeline program) which provides a free smartphone, 4.5 GB of data, unlimited text messages, 350 minutes of voice calls, and unlimited calls to designated Kaiser Permanente number and newly expanded access to broadband.

# SOCIAL HEALTH MEMBER INITIATIVES Pre-launch and design

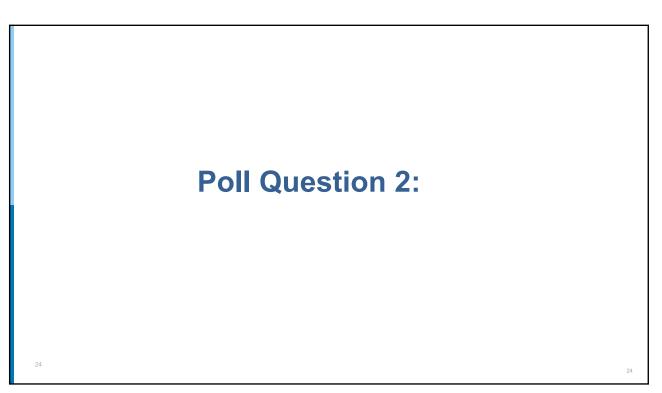




Developing a WIC strategy that includes: 1) intentional outreach connecting our members to WIC to facilitate child enrollment and recertification; 2) gathering member insights; 3) aligned advocacy and partnership; 4) evidence building and research; and 5) coordination and integration within KP.

High Touch Intervention Social Isolation

Exploring what's possible with a high touch, human centered intervention to target a specific population at higher risk for social isolation.



### Social Health Playbook

The Kaiser Permanente Social Health Playbook provides guidance to:

•Care for patients with social needs.

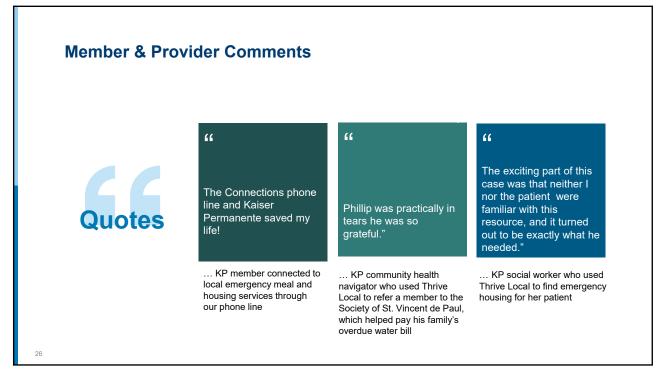
•Assess patients' social needs.

•Connect patients to resources to address those needs.

•Follow up to ensure needs were met and to coordinate care as appropriate.



coronavirus disease 2019 (covid-19) Social Health Playbook



# Questions

Submit your questions through the Q&A box. (Usually located at the bottom of your screen.)

# Contact Information

**Anand Shah, MD, MS** Vice President, Social Health Kaiser Permanente <u>Anand.r.shah@kp.org</u>

28

California Hospital Association

California Hospital Association

# Thank You

Thank you for participating in today's webinar.

An online evaluation and an attestation of attendance will be sent to you shortly.

California Hospital Association

For education questions, contact: <u>education@calhospital.org</u>