

Social needs:

Building the capacity to help patients beyond medicine



There is a growing awareness in the health care community that treating a patient's medical symptoms may not be enough. Their social situation may be the true impediment to a cure.

But how does a doctor house the homeless veteran, feed the hungry child, or end loneliness for the aging widower?

Now, investigators at Kaiser Permanente Southern California are building the capacity to address these needs through research and partnerships.

"We can help many people decrease their need for health care if we address their social needs," said Adam Sharp, MD, MS, a researcher with the Department of Research & Evaluation.

Over the last few years, the role that social needs play in health care has slowly become more recognized in research and health care circles. Kaiser Permanente has been a leader in those efforts.

In 2019, Kaiser Permanente launched Thrive Local, a social health network to connect health care and social services providers to address social needs including housing, food, safety, and utilities for Kaiser Permanente members across the United States.

It is expected to be available to all Kaiser Permanente members by 2022.

The work was fueled by research, some of which was done at KPSC.

[Inquiry leads to predictive model](#)

Other efforts include using predictive modeling approaches to identify patients who might be at risk of having social needs and partnering with community organizations to address these needs, said Claudia Nau, PhD, a researcher with R&E.

"One of the very important things we can do to address the root cause of some social needs is to work with community-based agencies that are already providing services," Dr. Nau said.

[Investigating partnerships to improve patients' lives](#)

One project involves working to improve care for elderly patients with depression. KPSC researchers have partnered with 4 depression care managers and a community partner, Healthy African American Families (HAAF), to recruit 100 elderly Kaiser Permanente patients into the program.

"A lot of elderly patients struggle with loneliness and depression," Dr. Nau said. "We're finding that they also struggle with a lot of other things that hinder them from going out or living healthy."

Implementation may be as simple as checking batteries

Among the issues that HAAF community specialists addressed include:

- A woman with diabetes had trouble going grocery shopping and ordered salads from a fast food pizza delivery service to eat ‘something healthy.’ Specialists helped her sign up for a free meal delivery service for seniors.
- Another patient was worried about leaving her home because she wasn’t sure the batteries on her portable oxygen tank were good. Specialists made sure her oxygen tank was working well.

Dr. Nau meets regularly with Kaiser Permanente depression care managers and the community specialists from HAAF to discuss cases.

“If we are to guide patients to optimal health, it’s important to identify what their barriers are, and what’s possible for them in their situation,” she said. “Then we can be most effective in helping them live their best lives.”

Early inquiry aimed to understand who would benefit

Dr. Sharp, who is also an emergency physician at the Kaiser Permanente Los Angeles Medical Center, looked at the issue of social needs beginning in 2015.

First, he collaborated on a pilot project with a nonprofit organization to assess patients’ social needs and guide them to community resources. The project aimed to understand who would benefit from social needs assessments and assistance, and how that would affect their utilization of health care services.

Results were presented at the Kaiser Permanente 2018 National Quality Conference and are expected to be published in 2019.

“It didn’t affect health care utilization among patients overall. But in subgroups of patients that were disadvantaged, there was significant benefit,” Dr. Sharp said.

Front page: Dr. Claudia Nau (second from left) meets regularly with Healthy African American Families staff to help improve care for elderly patients with depression. Outside their office in Los Angeles, she discusses the program and research with HAAF’s Andrea Jones, finance; Felica Jones, CEO; and home visit specialists Anthony Brown and Ericka Wright.



Anthony Brown counsels client Loretta Darden on exercise options near her Los Angeles home.

Investigation reveals physicians want to support patients’ social needs

Next, Dr. Sharp assessed the level of support from Permanente physicians and nurses, pharmacists, and administrators in KPSC to address social needs.

That research, expected to be published in 2019, showed that:

- the overwhelming majority of health care professionals support social needs screening, but
- only a minority are confident in their ability to address social needs.

The findings were key to fueling and informing the Thrive Local work, Dr. Sharp said.

“This work has changed the question from ‘Should we screen and address social needs?’ to ‘How should we be screening and addressing these needs?,’” Dr. Sharp said. “And now we are taking steps toward tangible changes.”

Implementation includes a standardized assessment

The changes include adding a standardized assessment of social needs on electronic health records that physicians can use to screen patients.

Dr. Sharp also is a member of the SONNET (Social Needs Network for Evaluation and Translation) steering committee. This Kaiser Permanente national group is working to find ways to address the social, economic, and behavioral needs of members, and is assisting with the evaluation of Thrive Local.

Dr. Nau said this is an exciting time for researchers in her field. “There’s a shift now in the thinking of the medical community that not only does care matter—environment matters,” she said. “Through research we now have the evidence base to back that up.”