



Patient's Primary Care Utilization After Social Needs Screening



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Background

- Unmet social needs are linked to poorer health outcomes in children and increased prevalence of chronic diseases.¹
- Primary care is a way patients can receive support for unmet social needs. Access to and utilization of primary care improves health outcomes.⁴
- Given the impact of unmet social needs on health status, the role of primary care utilization in patients screened for social needs can be a starting point to explore screening effectiveness, barriers, and facilitators in the primary care setting.

Objective

The purpose of this study is to investigate and characterize the primary care utilization of patients three years after social needs screening.

Methods

- Parents of 289 pediatric patients ages 0-12 completed an eleven-item social needs screeners at an LA County pediatric clinic between October 2017 and May 2019.
- Each patient's number of primary care visits attended, missed, and/or cancelled in three years post-screening was retrospectively collected.
- Of the 289 completed screens, 14 were not analyzed due to lack of identifying information and 137 because they had not yet reached 3-years post screening.

Results

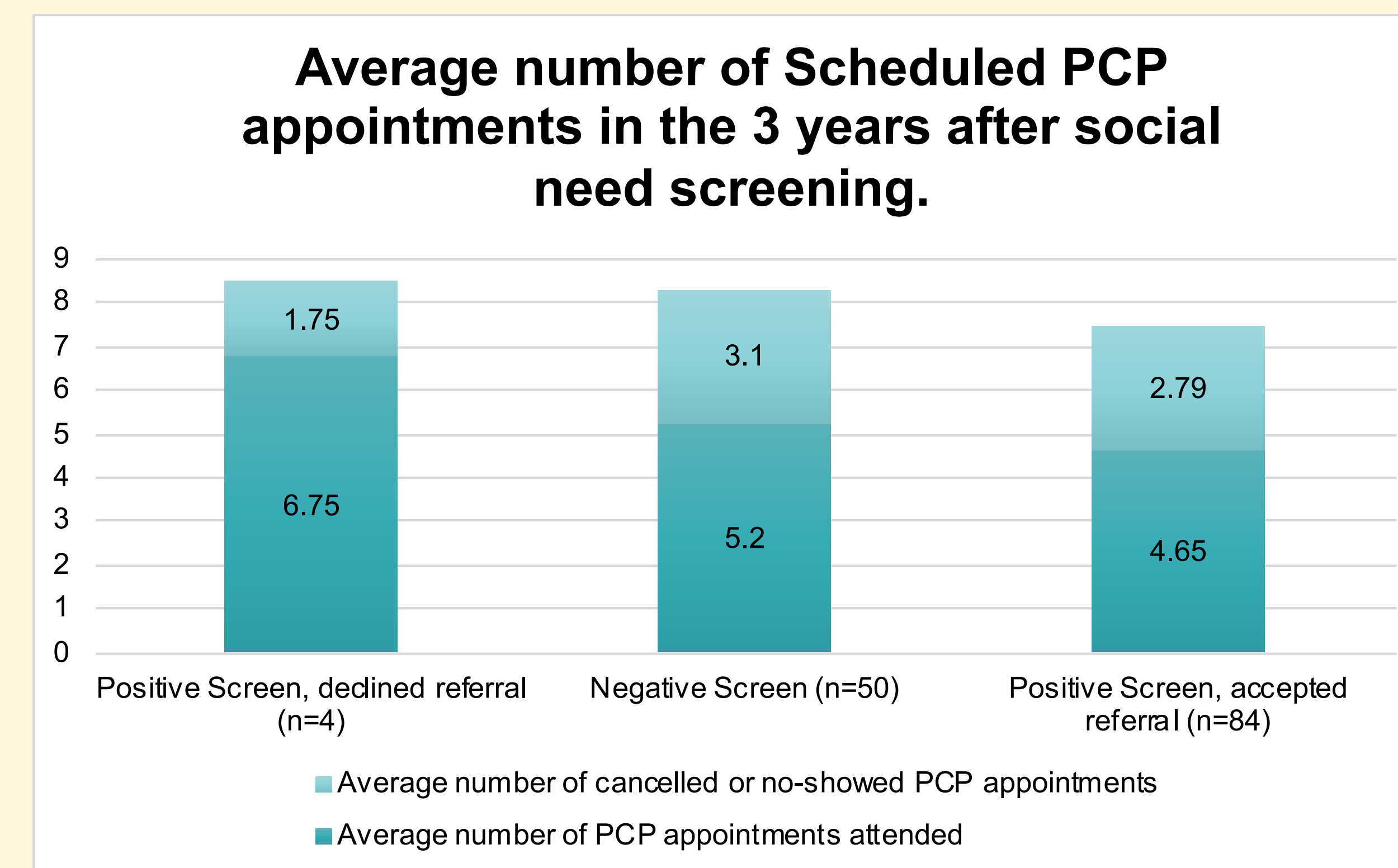


Figure 1. Average number of PCP appointments scheduled in the 3 years after social needs screening, with breakdown of average number of appointments attended versus no showed or cancelled between 3 different social need outcome groups.

Screen	Range in number of PCP appointments scheduled in the 3 years after social needs screening	Range in number of cancelled or no showed PCP appointments
Positive screen, declined referral	3-12	0-5
Positive screen, accepted referral	0-22	0-10
Negative Screen	0-25	0-14

Figure 2. Ranges in number of PCP appointments scheduled in the three years after social needs screening and ranges of cancelled or no showed PCP appointments between 3 different social need outcome groups..

Discussion

- This project is ongoing. We plan to conduct statistical analyses to examine significance of difference in primary care appointment utilization (attended, missed, and/or canceled) between social need outcome groups following the social needs screen.
- Unexpectedly, patients with positive screens who accepted referrals had similar average for missed primary care appointments as those who reported no social needs.
- It's possible that the social needs identified by families who screened positive and accepted referrals-- such as financial limitations, transportation, language barriers, and insurance status-- may be contributing to the number of missed follow up PCP appointments
- Patients with positive social needs screening and declined referrals had higher average number for follow up appointments in primary care, and on average missed fewer of those appointments than the other groups.
- Previous literature suggests that missed primary care appointments may be associated with increased emergency department visits, so we intend on further exploring this association upon completing our statistical analysis.
- Furthermore, we hope to explore specific facilitators and barriers and further explore the role of primary care utilization in social needs referral achievement.
- Not all patients screened previously are yet 3 years post-screening; requiring exclusion of patient data and decreasing the sample size of this study. We plan to analyze the remaining results once 3 years post-screen.

References

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