# Social Needs and Resources in the Evaluation and Enhancement of Discharge Support: The NEEDS Pilot Study

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### Background

- Preventing hospital readmissions could save \$17 billion annually
- Social needs and supportive resources (SocNSuppR) play a vital role in health outcomes, but are not systematically or universally assessed
- Identifying SocNSuppR prior to discharge can allow clinical teams to address needs affecting preparation for hospital discharge

#### **Specific Aims:**

#### Figure 2. D-CEGRM Supportive Resource Assessment



- 1. The aim of our pilot study is to map and test a process for systematically identifying and communicating SocNSuppR to discharge planning teams.
- 2. The aim of this report is to describe SocNSuppR communication protocol and utility of SocNSuppR assessment reported from our discharge team.

## Intervention

#### Figure 1. SocNSuppR 9-Step Protocol



possible."	DAUGHTER (41YRS)	SISTER (73YRS)	needed."
	ŀ	HEALTHCARE TEAM	
Inpatient Team		Outpatient Team	
Infections Disease, Cardio	logy	PCP, Cardiolog	ist, Diabetes Specialist
	21 IBB 2 370		
	SUPPORTIV	/E RESOURCES QUESTIONNAIRE Family	Friends/Neighbors/Coworkers
Who is available to help take you to appointments or fo			Friends/Neighbors/Coworkers Friends
	or errands?	Family	
Who is available to help take you to appointments or fo /ho is available to help if you have questions or concerns about your me Who is available to help you cook food and/or any other care	edications?	Family Daughter	Friends



- Four assessments completed
- Each uncovered information unknown to all members of the discharge team
- Physical and occupational therapy functional assessments were identified as complementary to the SocNSuppR assessment, and as a potential vehicle for integrating SocNSuppR into discharge plans

### Study of Intervention

### Table 1. Pilot Study Participants

CriteriaDescriptionDischarge<br/>Team<br/>Participants• Hospitalists<br/>• Case managers<br/>• Nurses<br/>• Therapists\*<br/>• Social workers \*\*Who participated in general<br/>medicine discharge planning

rounds

Patients admitted to a general medicine team from May 2018 to June 2018 who were:

Age 18-90English-speaking

- Enrolled patients completed a 10item Social Needs Survey,
  Interactive Support Resources
  Assessment (Adapted Colored
  Eco-Genetic Relationship Map, D CEGRM), and 8-item Patient
  Readiness for Hospital Discharge
  Scale
- Discharge team members completed Provider-Readiness for Hospital Discharge Scale
- Assessment tools disseminated among healthcare teams by research assistant

- Research assistant had to be familiar with work environment and the multidisciplinary team in order to disseminate assessment tools
- Discharge plans are initiated early in admissions process, suggesting that timeliness of SocNSuppR information will be key for multidisciplinary teams

### Discussion

- Data from this pilot support the utility of SocNSuppR in discharge planning: All information collected was identified as new to all disciplines participating in discharge planning
- Preliminary data suggest SocNSuppR assessment may be a patient-centered care model with potential for improving interdisciplinary communication
- Incorporation of SocNSuppR assessment and discharge readiness measures into electronic health record will be integral to implementation of future interventions



Patient

 Planned discharge back to community-based settings (vs supervised health settings)

• In charge of their own self-care

Discharge teams were asked if

information collected was new

and/or contributed to decisionmaking during discharge planning Future research will seek to understand how knowledge of SocNSuppR

impacts decision-making around discharge, discharge processes, patient outcomes and, ultimately, hospital readmission

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### Division of General Internal Medicine & College of Nursing