Worcester Community Collaboration Project: Connecting Patients to Resources

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Problem Statement
- Patients in the city of Worcester lack comprehensive coordination of clinical health care and community-based services, resulting in fragmented care and poor health outcomes.

Background
- Worcester’s Community Health Improvement Plan (CHIP) lists ‘Access to Care’ as a priority improvement area. According to the plan, access to care should be improved by strengthening connections between clinical and community providers for residents with poor health outcomes (CHIP Section 3.2.5).
- UMassMemorial Medical Center performed worse than the national average in 30-day hospital readmissions from July 2014-June 2015 (CMS).
- Presently, social workers, case managers, and community health workers are responsible for connecting patients with resources outside of the clinical setting.
- The city of Worcester has a plethora of underutilized community-based health and human service organizations.

Root Causes
- Information about community-based organizations is sporadically listed on different websites and in pamphlets and hard copy resource guides. No central database exists.
- There is no reliable mechanism for health care workers to refer patients to community agencies and assess the quality and efficacy of the services provided.
- Some clinical settings in Worcester lack the social workers and community health workers who would be responsible for identifying the gaps between the clinic and the community.

Countermeasures
- Utilize the Aunt Bertha platform to develop a comprehensive online database of Worcester’s health and human service organizations.
- Devise a system for referrals and follow-ups.
- Work toward the long-term vision of developing a single comprehensive resource database for all of central MA.

SMART Goals
- Primary: Increase the number of provider-initiated patient referrals to community-based services in Worcester utilizing the Aunt Bertha platform. Measure this via internal Aunt Bertha metrics and a pre- and post- survey model.
- Secondary: Decrease 30-day hospital readmission rates at UMMMC during the 2018-2019 period.

Summer Assistantship Work
- Identify team goals and individual roles and responsibilities of the summer assistantship group.
- Research health and human service organizations in Worcester and collect pertinent information for inclusion in the Aunt Bertha online database.
- Perform community ‘site visits’ and teach organizations about the utility of Aunt Bertha.
- Attend A3 meetings at the UMMHC Office of Clinical Integration.

Future Steps
- Continue site visits within the community.
- Assist clinics and community organizations in developing referral workflows using the Aunt Bertha platform.

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