

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 bridging the gap between the clinic and the community.

Summer Assistantship Work

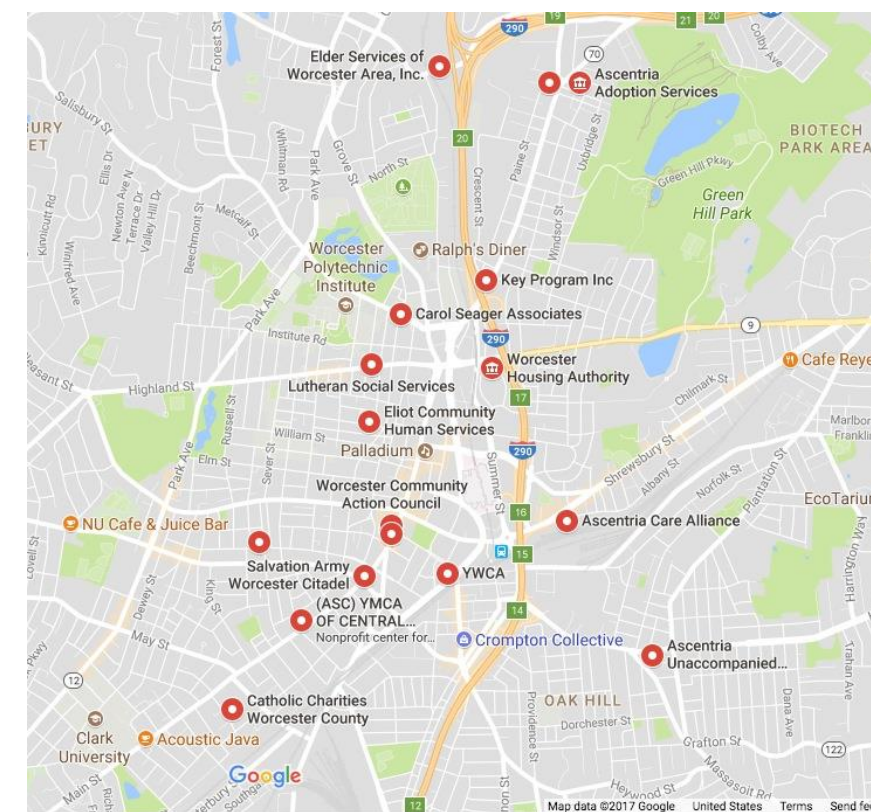


Figure 1. Map depicting site visits

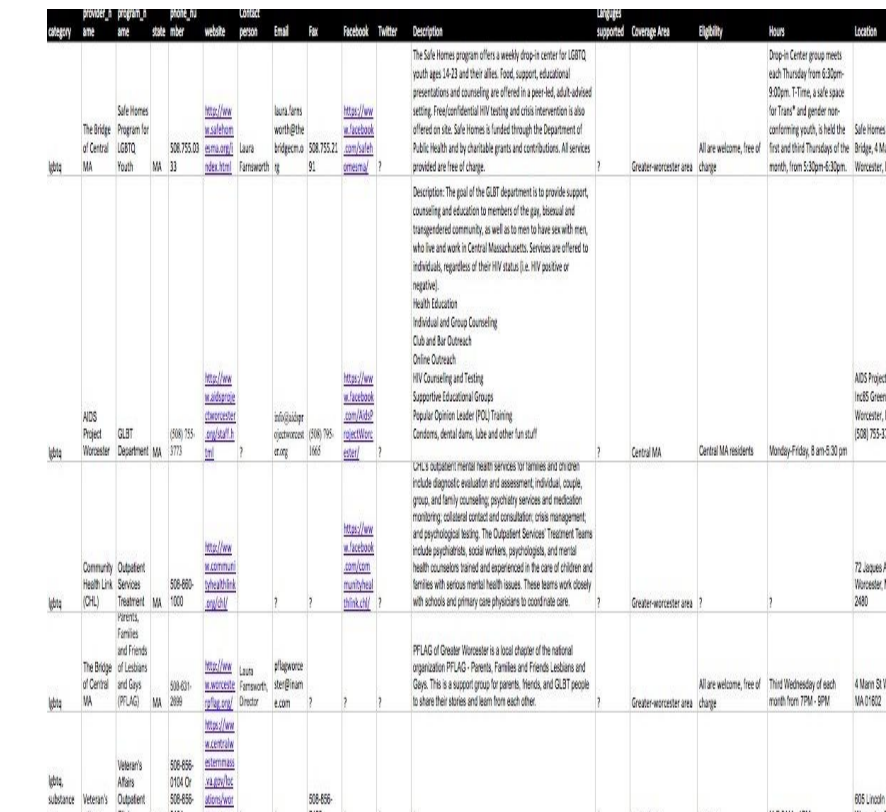
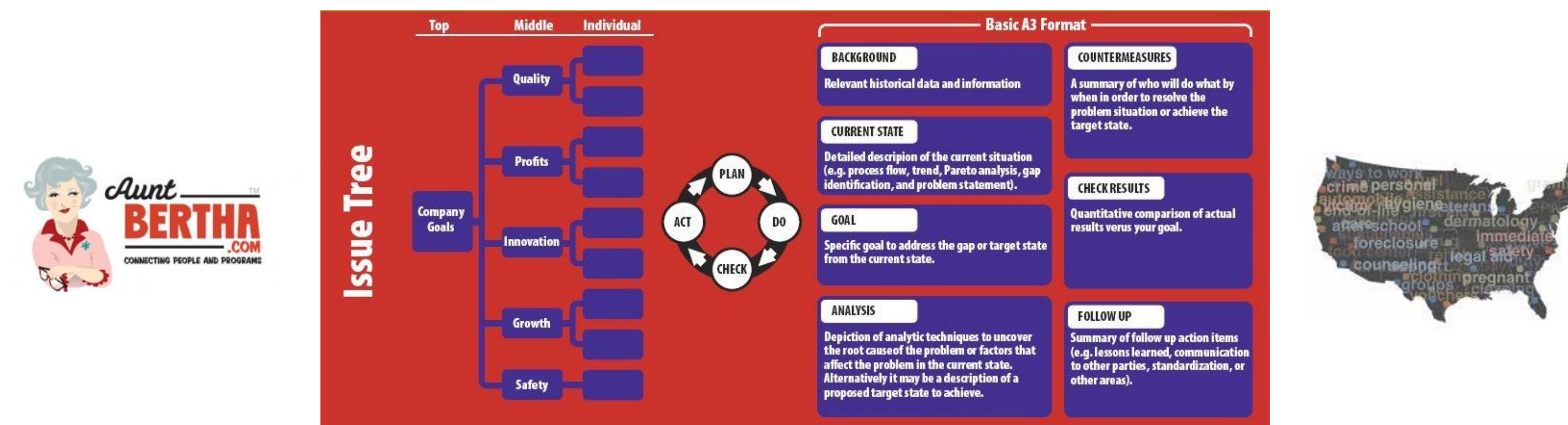



Figure 2. Resource database building



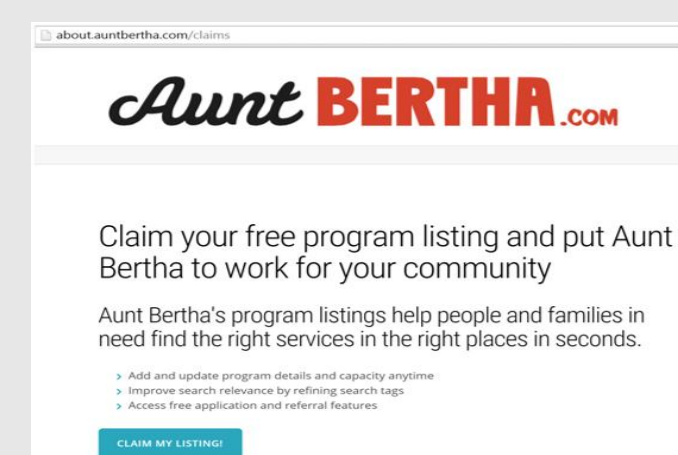
Aunt Bertha for the Community



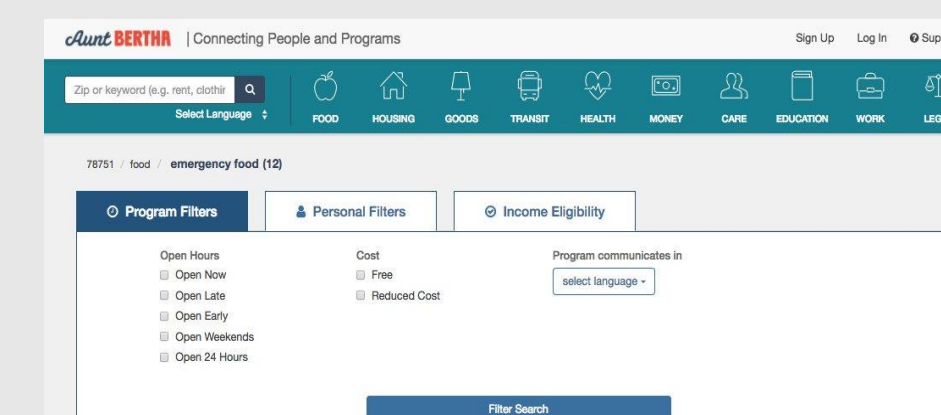
- Free-to-use online platform.
- Find and apply for social services; refine search results using advanced filtering options.
- Database includes national, state, county, city, and neighborhood programs.

Aunt Bertha for Social Service Organizations

- Community organization listings are added free-of-charge.
- Resource listings undergo twice yearly review by Aunt Bertha staff to keep information up-to-date.
- Engaged organizations can 'claim' their listing on Aunt Bertha and directly provide edits and updates.



Aunt Bertha for Health Care Teams



- Referral capabilities are built into the platform, allowing health care team to seamlessly execute and track community referrals.
- Online searchable database aids health care team in identifying appropriate resources for patients.

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 UMMC 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 UMMC 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.

Acknowledgements

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