



Social Determinants of Health & Patient Care

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BACKGROUND:

Health Disparities, Cultural Competency, and Structural Racism

Health Disparities are defined as systematic differences in the health status of population groups that result from social, economic, and environmental disadvantages.

Cultural Competency is the ability of health professionals to provide care to patients with diverse values, beliefs, and behaviors, including tailoring of health care delivery to meet the patients' social, cultural, and linguistic needs.⁵

Structural Racism is a system in which public policies, institutional practices, cultural representations, and other norms work to perpetuate racial group inequity.⁶ This system negatively impacts health outcomes by serving as the foundation to the quality of housing, education, income, and wealth accumulation.

Racial Disparities in Cardiovascular Disease

There is strong evidence that racial disparities in health care exist in the United States, particularly in the treatment of cardiovascular disease.

- Asian and Hispanic patients comprised less than 20% of patients in the atrial fibrillation clinical trials comparing DOACs to warfarin, and Black
 patients comprised less than 2% of the study populations in these trials.¹
- People of color have more difficulty gaining access to healthcare than people who are white.2
- Studies show that most health care providers appear to have implicit bias with positive attitudes toward patients who are white and negative attitudes toward people of color. This implicit bias has been shown to correlate with poorer patient-provider interactions and health care outcomes.^{2,3,4}
- People of color tend to have worse AF symptom scores, a lower utilization of both pharmacologic and procedural rhythm control strategies, and are less frequently referred to electrophysiology subspecialists.¹

Understanding Social Determinants of Health

Social Determinants of Health are conditions in the environments where people are born, live, learn, work, play, worship, and age that affect health functioning and quality of life outcomes and risks.

HEALTHCARE Access to healthcare, the quality of care provided, provider linguistic & cultural competency, and a patient's understanding of health services and their own health **SOCIALIZATION & COMMUNITY** Community engagement, support systems, and social integration **ECONOMIC STABILITY** Financial resources and limitations, including income, cost of living, and lack of generational wealth **NEIGHBORHOOD & PHYSICAL ENVIRONMENT** Housing quality, access to transportation, air and water quality, crime/safety, and recreational activities **EDUCATION** Language and literacy, early childhood education, vocational training, and educational level **FOOD & NUTRITION** Food insecurity and access to healthy options



References: 1. Ugowe FE, Jackson LR, Thomas KL. Heart Rhythm. 2018 Sep;15(9):1337-1345. PMID: 29803022. 2. Hall WJ, Chapman MV, Lee KM, et al. Am J Public Health. 2015 Dec;105(12):e60-76. PMID: 28649668 3. FitsGerald C, Hurst S. BMC Med Ethics. 2017 Mar 1;18(1):19. PMID: 2852892. 5. Health Research & Educational Trust. (2013, June). Becoming a culturally competent health care organization. Chicago, IL: Illinois. 6. Glossary for Understanding the Dismantling Structural Racism/Promoting Racial Equity Analysis. The Aspen Institute, Community Roundtable for Change.

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Faculty: Naomi Yates, PharmD, BCACP | Stacy Ellsworth, RN, MSN, CCRC | Julia Mulheman, PharmD | Terri Schnurr, RN, CCRC | Sara Vazquez, PharmD, BCPS, CACP

Social Determinants of Health - Practical Considerations

These considerations aim to reduce health disparities by providing the best care to patients of all identities and backgrounds. The recommended actions are not definitive. Providers are encouraged to customize their responses based on resources available at their organization/institution.

SOCIAL DETERMINANT

HEALTHCARE ACCESS & QUALITY

Can patient access care when needed?

· Does patient have challenges getting to appointments (transportation, hours, etc.)?

Does patient have access to pharmacy services?

· Location, hours of operation, etc.

Does patient have access to care in their preferred language?

RECOMMENDED ACTIONS



- Discuss best hours with patient and recommend available treatment at those times
- · When possible, schedule all patient's appointments on the same day
- Determine if patient would benefit from telehealth or home INR meter program
- · Recommend mail-order or delivery of prescriptions
- · Identify providers who suit patient's cultural or linguistic needs
- Connect patient with case manager, global patient services, interpreter services, etc.

ECONOMIC STABILITY

Is patient able to pay for costs of medical visits and durable medical equipment on an enduring basis?

- Does patient have coverage for both acute and chronic medical care?
- Is patient able to afford monthly co-pays or deductibles?

Does patient have prescription drug coverage?

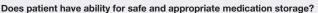


- Work with financial counselor to determine if patient qualifies for Medicaid
- Refer patient to financial counselor to discuss extended payment options
- Determine if patient can receive care at free local clinic
- · If patient only has partial insurance coverage, refer them to hospital social worker to discuss options
- Determine if drug company has patient assistance programs
- Refer the patient to coupon or discount sites
- · Refer to institution-specific medication assistance programs
- · Ask about drug adherence and address if cost is an issue

NEIGHBORHOOD & PHYSICAL ENVIRONMENT

Are there physical elements in patient's home or community that are negatively affecting their health?

- · Is patient in safe housing?
- · Does patient have no fixed address?
- Is there abuse in the home?



- · Is patient able to refrigerate medications if needed?
- Does patient have secure location to store medication away from children or pets?
- Does patient have safe and accessible transportation to/from medical provider?
- Does patient require a cane, walker, wheelchair, or have physical limitations?
- Are there family members, friends, neighbors, etc. available to help?

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- · Have home health care visit patient to assess safety of home
- · Work with case manager or social services to identify possible housing alternatives for patient
- · Report any instances of abuse or neglect to relevant authorities
- · Provide pillbox(es), blister packs, etc.
- When able, provide patient with medication that does not require refrigeration or special storage
- Identify local organizations that provide free transportation for medical appointments
- Determine if your institution has a shuttle program
- Determine if patient's insurance plan covers local transportation costs
- · Determine if patient is a candidate for telehealth

SOCIALIZATION AND COMMUNITY

Does patient have social support systems engaged in their health care? (family, neighbors, religious community)

• Do they have Advanced Directives or Power of Attorney and, if so, who is listed?

Is patient experiencing discrimination that is negatively impacting their health or healthcare? (race, gender, sexual orientation, ability, economic)

· Are the actions the result of microaggressions or racial bias?

Is mental health or stress impairing the patient's overall health or access to health care?



- · Ask patient to bring family support to health care visits when appropriate · Scan Directives or Power of Attorney into patient's chart
- · Report to your organization as appropriate
- Encourage providers to participate in cultural competency and anti-bias training
- · Connect patient with mental health resources
- Determine if patient is eligible for free counseling through insurance plan

EDUCATION

What is patient's preferred learning style? (written, verbal, video, demonstration)



- Encourage members of patient care team to use patient's learning style
- In initial visit with patient, consider giving patient VARK questionnaire to assess preferred learning style

- Have you assessed the patient's understanding of the topic? (teach-back method, knowledge quiz, etc.)
- Is there a language/literacy barrier?
- Have sensory limitations been accounted for (hearing/vision impairment, etc.)?
- · When providing education or instruction, pause to ask questions to ensure patient understanding
- Encourage patient to repeat back medical instructions to ensure patient understanding

FOOD & NUTRITION

Is patient experiencing food insecurity?

- · Can patient afford healthy food on a regular basis?
- · Does patient know how to cook and have access to a functioning kitchen?
- · Is patient on a special or limiting diet?



- Determine if patient is eligible for meal assistance programs, such as Meals on Wheels
- Connect patient with local food bank or shelters
- · Refer patient to case manager who can share additional resources