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Screening and Monitoring Social Determinants of Health for Migrant Workers in Vermont

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Authors	Brach, Richard
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Screening and Monitoring Social Determinants of Health for Migrant Workers in Vermont

Student: **Richard Brach**

Project Mentors: **Julia Doucet RN, Paola Meza**



Vermont Farm (Palermo, J. 2017)

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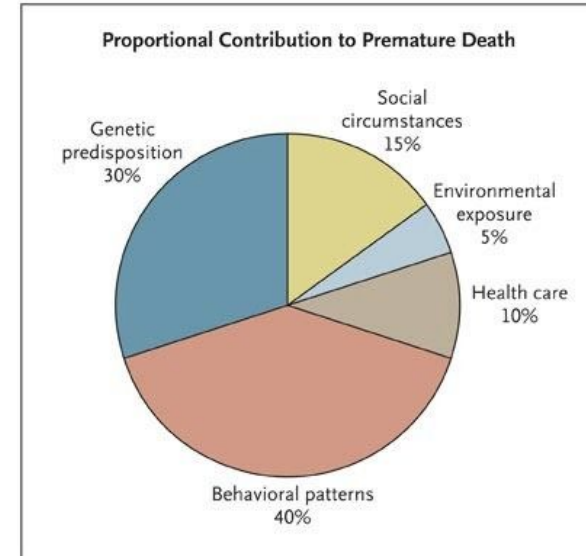


Increasing Access to Healthcare

November 2020

Problem Identification and Description of Need










- The United States ranks near the bottom on most standard measures of health status when compared to countries of similar wealth and resource.¹
- Worldwide, the United States ranks 35th in life expectancy from birth at 78.9 years and 33rd in infant mortality rate.^{2,3}
- As known for decades, social determinants of health (SDOH) account for the majority of health outcomes, but the social investment needed to improve these outcomes is lacking.^{1,4}
- Migrant workers in Vermont, predominantly ineligible for health insurance, have little access to services that promote health and well-being



Schroeder et al. (2007)¹

Public Health Cost and Unique Cost Considerations in Host Community

In addition to providing free health and dental services to uninsured and underinsured patients, the Open Door Clinic assists patients with social needs such as connecting patients with English classes, driver's education, food services, and smoking cessation resources.

BARRERAS a la SALUD de los TRABAJADORES MIGRANTES:		BARRIERS to HEALTH CARE for MIGRANT WORKERS:	
<p><i>ESTATUS ADMINISTRATIVO y miedo de la deportación</i></p>  <p>DOCUMENTATION STATUS and fear of deportation</p>	<p><i>La PROXIMIDAD a la FRONTERA CANADIENSE</i></p>  <p>PROXIMITY to the CANADIAN BORDER</p>	<p><i>FALTA de TRANSPORTE</i></p>  <p>LACK of TRANSPORTATION</p>	
<p><i>ACCESO INCONSISTENTE a la interpretación y a la atención con sensibilidad cultural</i></p>  <p>INCONSISTENT ACCESS to language interpretation & culturally sensitive care</p>	<p><i>DESAFÍOS de NAVEGACIÓN de un sistema de salud complejo</i></p>  <p>CHALLENGES NAVIGATING a complicated health care system</p>	<p><i> AISLAMIENTO más trauma, ansiedad y depresión</i></p>  <p>ISOLATION plus trauma, anxiety, & depression</p>	
<p><i>RELUCTANCIA faltar al trabajo, o largas horas de trabajo</i></p>  <p>RELUCTANCE to miss work, or long working hours</p>	<p><i>COSTOS de la medicina e INELIGIBILIDAD para SEGUROS</i></p>  <p>COST of medical care and INELIGIBILITY for INSURANCE</p>	<p><i>FALTA de EDUCACIÓN FORMAL y bajo nivel de alfabetización</i></p>  <p>LACK of FORMAL EDUCATION and low literacy rates</p>	

The Most Costly Journey (Bennett, M. 2016)
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Community Perspective on Issue and Support for Project

- **Comprehensive screening can identify more patient needs earlier**
 - Without a formalized screening tool, patients seeking health and social services have to advocate for themselves or risk falling through the cracks
- **A formalized tracking system can monitor patient progress and strengthen ongoing efforts to connect patients with community resources**
 - Tracking will identify “successful” follow-up and patterns of barriers
 - Tracking will capture the extra, unrecognized hours that staff currently spend connecting patients with resources

This project will be implemented for Spanish-speaking migrant farmworkers as part of a care coordination grant from the Health Resources and Services Administration (HRSA)

Intervention and Methodology

1. Screening questions regarding medical and social services needs will be developed and integrated into patient intake forms
2. A positive screen will start the patient on a “pathway” towards realizing the medical or social services need⁵
3. The patient will be connected to requested service, and the progress of the pathway will be tracked on the VCCU (Vermont Coalition of Clinics for the Uninsured) patient database

Pathways

- Establishing medical home
- Transferring medical home
- Medical referral
- Dental referral
- Smoking cessation
- Pregnancy
- Post-partum care
- Family planning
- Behavioral health
- Education
- Food insecurity
- Other community-based organization (legal, housing, transportation)

Results

ODC staff will be able to:

- Identify patient needs earlier and more comprehensively
- Enumerate the number of patients connected to each service
- Identify patterns of barriers in accessing certain resources
- Better depict the time and energy staff spend on this work
- Improve the overall coordination of health and social services

VCCU Patient Management

Home Patients Needy Meds Clinic ▾ Reports ▾ How To ▾ | Logout

Medical Referral Pathway ODC

- Medical Referral ODC Initiated
- Appointment made with ODC provider
- Patient attended appointment

clear

Social Services Pathway

- Community-based Organization Referral Completed
- Community-based Organization Referral Initiated
- Education Referral Completed
- Education Referral Initiated
- Mental Health Referral Initiated
- Mental Health Visit Completed

clear

Medical Referral Pathway-External

- Medical Referral External Initiated
- Registration paperwork assistance
- Financial assistance
- Appointment made
- Appointment attended
- Interpreter arranged
- Appointment not attended
- Note Received

Tobacco Use

- Patient Screened for Tobacco Use
- Current Smoker > 18 y.o.
- Cessation counseling or other intervention provided

Evaluation of Effectiveness and Limitations

- Per HRSA grant guidelines, this intervention is currently only for Latinx migrant workers
- ODC staff must undergo additional training to learn how to use the new tracking system
- The criteria of what makes a pathway “successful” is subjective
- Quality measures of how this intervention is affecting patients’ well-being are not being collected
- The screening tool may open a pathway even though a patient may not want to follow through with it



Colorful Doors In
French Region
(Maica)
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Recommendations for Future Interventions

- Expand intervention to all patients
- Monitor the added workload on staff and assess the staff's capacity to take on an increased number of screenings and potential interventions
- Analyze data and revisit what qualifies as “successfully” completing a pathway
- Identify the patterns of what leads to successful vs unsuccessful pathways
- Assess how addressing SDOH needs translates to changes in well-being



Curved path in natural landscape
(Shutterstock)

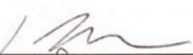
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Interview Consent Form

Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

Consented
Name: JYNS DOUCET / 
Name: Paola Mera / 