## Initial Outcomes of a Social Determinants of Health Curriculum for Primary Care Fellows





Rebekah Moore, MPAS, PA-C<sup>1</sup>, Megan Rich, MD<sup>2</sup>, Daniel Hargraves, MSW<sup>2</sup>

<sup>1</sup>Mount St. Joseph University, Physician Assistant Program; <sup>2</sup>University of Cincinnati, Department of Family & Community Medicine

#### **INTRODUCTION**

Primary care providers have the privilege of caring for medically, socially and psychiatrically complex patients, who are often the most vulnerable in our society. The Primary Care Fellowship curriculum was created to include:

- addressing the needs of area providers
- teaching healthcare transformation,
- stepping closer to the quadruple aim (better health outcomes and care experiences, a lower price, with less provider burnout<sup>1</sup>),

The faculty development fellowship focused on 6 key content areas, including the social determinants of health (SDH). The SDH were deemed relevant to healthcare transformation because of their contribution to the health status of individuals and communities.

In our curriculum we have focused on three aspects of SDH:

- identifying and connecting with local resources
- advocating for changes in local public policy
- partnering with communities and across disciplines for innovative solutions.

#### **METHODS**

Fellows completed a self-assessment regarding each of the six content areas

The SDH component includes six activities:

- Four learning forum discussions on the topics of food insecurity, race and incarceration, housing and access to care
- Two assignments with workshops on public policy and advocacy.

Evaluation of the activities include:

- Post-discussion session surveys
- Quarterly lecture evaluations
- Focus groups at 6 and 12 month time points

# RESULTS N=3 fellows (2 physicians, 1 physician assistant) Substance Use Disorder CONTENT AREAS Frovid Wellne Results Social Determinants of

#### CONTENT DELIVERY

Health

Learning Forums, Guest ( Speaker Discussions

% of fellows who Agree or Strongly Agree

Provided me with tools and resources that

can help me improve my performance

Race and Incarceration

% of fellows who Strongly Agree

Quality of the discussion was valuable

Provided me with tools and resources that

can help me improve my performance

50%

Quality of the discussion was valuable

Provided me with tools and resources that

can help me improve my performance

Access to Care (June 2019, Results Pending)

Housing and Homelessness

% of fellows who Strongly Agree

Quality of the discussion was valuable

Food Insecurity

and practice

and practice

and practice



100%

100%





### ures 🔑

FELLOW-RATED MATERIALS

#### Public Policy

FELLOW-RATED LECTURE CONTENT

& RESOURCES SHARED

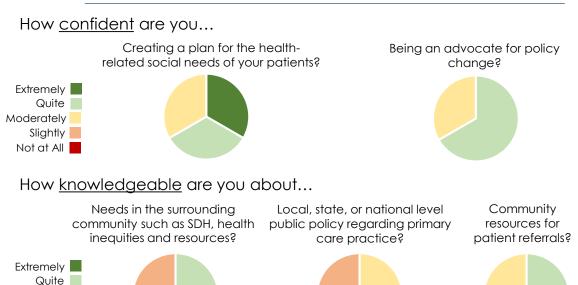
Out

8 Out of 10

Even just knowing who's around locally, I really appreciate having [guest speakers]

I didn't even know that service existed and the [guest speaker] serves the patient population...just knowing that I could refer somebody to him who really needs to have some advocacy.

#### FELLOWSHIP PRE-ASSESSMENT RESULTS



#### **DISCUSSION**

Moderately

Slightly

Not at All

- There has been a **strongly positive learner reaction** to each of the SDH-related learning sessions.
- Fellows would like to see more incorporation of community resources into the curriculum.
- After fellowship participation, we anticipate improvement in fellows' knowledge and confidence addressing SDH.

#### **Next Steps**

- Compare post-fellowship assessment results
- Follow-up with fellows post-graduation to track any participation in advocacy and/or policy activities
- Adjust and revise SDH curriculum based on learner feedback and changes in knowledge and confidence assessment results

#### **ACKNOWLEDGEMENTS**

This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number, 1T13HP31904, Primary Care Training Enhancement: Training Primary Care Champions, \$1,998,585. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.