



WSHA SDOH Health Equity Workgroup Charter

Last updated: July 14, 2023

<p>Purpose</p>	<p>Improve efforts within WA hospitals to universally screen for core health-related social needs (housing, transportation, food, utilities and interpersonal violence) and develop workflows to address or connect patients to needed community services.</p>
<p>Problem Statement</p>	<p>Community partners and health care need to work together predictably and reliably to bring social determinant resource to families. Specifically, this workgroup will begin by addressing food insecurity needs of our patients. This is one of the most frequent social needs identified through screening and has an immediate impact on health. By focusing on food insecurity initially, this workgroup will test and refine approaches to inform addressing other drivers of health.</p>
<p>Goal</p>	<ul style="list-style-type: none"> • By June 30th 2024: All workgroup hospitals will screen for food insecurity • By December 31st 2024: At least 80% of patients (or households) who screen positive for food insecurity and have interest/accept assistance will receive (medically and culturally appropriate) services or have a plan initiated to access to food <p>In scope: Providing education, recommending tools and workflows, sharing data between hospitals (CQIP), engaging state and community partners, informing measure design Out of scope: Mandates, fees, competing based on quality performance, sanctions, purchasing technology</p>
<p>Aim/Milestones*</p> <p>*Strategic planning will take place through 2023 to refine the milestones and develop workplans</p>	<ul style="list-style-type: none"> • Identify programs nationally and in WA addressing food insecurity (SNAP, WIC, Food Rx, Meals on Wheels) • Identify potential partners (DOH, 211, UniteUs, food banks) • Explore what is happening within hospitals on separate teams to address food insecurity and how to work together instead of duplicating efforts • Understand how to share information (assemble lists for referrals, create a communication space to see what is available, centralized repository or other solutions) • Promote equitable hospital screening for food insecurity, including use of validated questions, coding, reporting and staff training.



	<ul style="list-style-type: none"> • Promote screening for food insecurity in languages other than English. • Share data on screen positive rates for food insecurity, equity issues, ZIP codes and communities/populations with highest need. • Co-design with partners short-term solutions to address immediate needs of food insecure patients. • Identify contributors of food insecurity (economic instability, access to groceries, transportation) • Co-design with partners long-term solutions to address main contributors to food insecurity with special focus on populations/communities impacted the most. • Design evaluation plan for short- and long-term solutions including measures. • Produce recommendations for adapting this approach to address other key social drivers of health (transportation, housing, utilities)
Measures/Outcomes	<ol style="list-style-type: none"> 1. Screening for food insecurity, stratified by race, ethnicity, language 2. Screen positive rate for food insecurity, stratified by race, ethnicity, language 3. Percent of patients screened positive for food insecurity receiving same-day access to food 4. Patient experience measures 5. Community measures of food insecurity (household food insecurity and hunger; food insecurity in children/older adults; consumption of fruits and vegetables)
Logistics	<p>This workgroup will meet monthly for one hour Decisions will be made through majority consensus during live meetings WSHA will be the primary convener, will take notes, set agenda and track progress</p>
Workgroup Composition* *As of July, 2023	<p>Hospital participants: Confluence Health, Fred Hutch Cancer Center, Jefferson Healthcare, Klickitat Valley Health, Skagit Regional Health, Kadlec, MultiCare Yakima Memorial, MultiCare Tacoma General Hospital, MultiCare Mary Bridge Children’s Hospital and Health Network, MultiCare System, Skyline Health, North Valley Hospital, Overlake Medical Center & Clinics, Providence St. Joseph’s Hospital, Providence Health System, PeaceHealth, Swedish First Hill, Swedish Health Services, UW Medicine (Harborview Medical Center, Montlake, Northwest), UW Valley Medical Center</p>

Questions or for more information contact: Abigailb@wsha.org