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Title

Optimizing Medical Legal Partnerships for sustainable public funding through the tele-legal model

Priority 1 (Research Category)

Mixed methods research

Presenters

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Abstract

Context: Medical legal partnerships (MLP) are an effective intervention for social determinants of health, like housing, education, and employment status. Despite consistent positive impact on health and wellbeing, public funding for MLP exists in less than a handful of states. Coalition building and engagement across stakeholders and policy leaders yield three barriers to sustainable public funding for MLP: high cost of operation, difficulty aggregating data across models, and confusion among policy makers on MLP operational diversity and impact. Objective: 1) Test the virtual model of MLP to achieve more favorable economies of scale 2) Develop a policy-informed lexicon for MLP to inform model development, D&I research, and improve data sharing across models to ultimately advance sustainable state-based funding for MLP. Study Design and Analysis: Tele-legal services were provided by one full time poverty lawyer and paralegal January 2021-June 2023. Participating clinic sites offered convenience sample frame, patients with legal needs were identified through universal and secondary screening approach. Descriptive analysis utilized primary legal record and secondary electronic health record sources. Nine focus groups were conducted and recorded, using semi-structured interviews. Dual coders provided inter-coder reliability with inductive themes. Setting or Dataset: Clinics: AF Williams Family Medicine, Lowry Internal Medicine; EPIC data; legal records. Population Studied: Attributed patients of participating clinics; clinic staff; Colorado state agency staff. Intervention/Instrument: Legal-needs screening tool. Outcomes: Screens delivered (n), Referrals (n); legal outcomes (n); best practices; challenges; MLP-Domains (categorical) Results: In 30 months of operation, 1262 patients were screened, 335 received referral to legal services, for 529 unique legal problems. Qualitative findings yield tele-legal MLP highly successful from the perspective of patients and clinic staff, providing positive economies of scale. Conclusions: Best practices for virtual model require on-site clinical champions. Semi-hybrid approach one day per week optimizes clinical participation. MLP-Domains identified: level of legal

expert; legal scope; comprehensiveness; mechanism of patient identification; funding mechanism. Awareness of MLP-domains lexicon promises to improve alignment across programs, facilitate data sharing in aggregate to leverage policy-based sustainable support.

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