NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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Title

Developing a patient-reported outcome measure for patient experiences of social needs care

Priority 1 (Research Category)

Social determinants and vulnerable populations

Presenters

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Abstract

CONTEXT: With the goal of advancing health equity, the US healthcare sector has expanded activities to identify and intervene in patients' experiences of social adversity, sometimes referred to as "social care". As social care activities are scaled, there is mounting pressure to assess the quality of these activities, compared to the quantity. Yet, no measure of patients' experiences with social care has been developed to date.

OBJECTIVE: In this project, we conducted foundational qualitative research to understand key aspects of patients' experiences of social care that could be incorporated into a patient-reported quality measure.

STUDY DESIGN/SETTING/POPULATION: We recruited patients from across the U.S who 1) were aged 18 or older, 2) spoke either English or Spanish as their primary language, and 3) had an experience with social care in a clinical setting within the last 12 months. Using a semi-structured interview guide, we invited participants to describe their experiences and expectations related to social risk screening and social interventions. Interviews were recorded, transcribed, and translated. Guided by the Health Equity Implementation Framework, we conducted a thematic qualitative analysis of interview transcripts using a mixed inductive-deductive coding approach.

RESULTS: 30 people participated in interviews (16 English-speaking; 14 Spanish-speaking). Participants emphasized the importance of their relationship with their social care provider (SCP); their experiences of social care were influenced by their SCP's verbal and non-verbal demonstrations of empathy, linguistic and cultural alignment, and length of the patient-SCP relationship. Participants also valued the extent to which the screening, follow up, or resource attainment they received aligned with their expectations and priorities. Some individuals had low expectations for social care and were thus satisfied with screening alone, while others had urgent social needs and were disappointed to not receive resources. Overall, these two aspects of social care were interconnected, and patients placed varying levels of value upon each.

CONCLUSIONS: Our interviews suggest that the relational component is just as important – if not more to some patients – than the functional aspects of social care. These factors can directly inform both the delivery of social care, as well the measurement and interpretation of future patient-reported social care experience measures.