COLLABORATIVE 2016 CHNA FOLLOW-UP SURVEY RESULTS – WHAT HAS CHANGED?

Abstract

A survey was conducted in the summer of 2017 as a follow-up to the 2016 Community Health Needs Assessment (CHNA) process. Community partner feedback was gathered in order to understand how the health and social needs of communities facing inequity have changed over the past year.

Updated 12/05/2017
Collaborative Survey Results - What Has Changed? - Summer 2017

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Introduction

A survey was conducted in the summer of 2017 as a follow-up to the 2016 Community Health Needs Assessment (CHNA) process. Community partner feedback was gathered in order to understand how the health and social needs of communities facing inequity have changed over the past year.

Feedback was collected in several key areas, including:

1. How has access to care changed over the past 12 months?
2. What is one way hospitals could work more effectively with community organizations to ensure that patients are treated in the most appropriate setting?
3. How are your patients'/clients' concerns about their immigration status impacting their access to needed health care?
4. Given federal policies and budget cuts that under consideration, what is the greatest challenge you foresee in our community’s ability to address social determinants of health?

An electronic survey was created and a survey link was emailed to community partners. Due to the fact that community partners were able to forward the email to their colleagues the total response rate was unable to be calculated. The survey was open from July 24th through August 16th, approximately three weeks. A total of 66 respondents completed the survey.
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Access to Care Change

**Question 1.** In the past 12 months, how has access to care changed for your patients, clients or community? (n=66)

In Fall 2015, as part of the 2016 Community Health Needs Assessment (CHNA) process, a Health Access and Navigation Survey⁴ was distributed to identify specific barriers residents faced when trying to access healthcare services. The top 5 identified barriers were:

1. Understanding health insurance
2. Getting health insurance
3. Using health insurance
4. Knowing where to go for care
5. Follow-up care and/or appointment

As a follow-up to this navigation survey, participants were asked how access to care has changed for their patients, clients or community within the past 12 months. The majority of respondents indicated that things are about the same.

**Question 2.** Given the barriers identified to accessing care, what is one way hospitals could work more effectively with community organizations to ensure that patients are treated in the most appropriate setting? (n=57)

Education (21%), access to insurance and health care (19%), and data information sharing (16%) were the most common types of recommendations that respondents had to help hospitals ensure that patients are treated in the most appropriate settings.

This question was asked in an open-ended format; the table below represents the major categories that participants referred to.

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¹ Navigation Survey, Roadmap – Where Do You Get Stuck? was created in collaboration with the Community Health Improvement Partners & the Resident Leadership Academy Council.
**Question 3.** How are your patients'/clients' concerns about their immigration status impacting their access to needed health care? (n=59)

Participants were asked about their patients'/clients' concerns on their immigration status and how it impacts their access to needed health care. Thirty-six percent responded that their patients'/clients' are significantly impacted by immigration status. Of those that responded, 70% believe that their patients'/clients' are reluctant to apply for medical coverage.
Question 4. If your patients’/clients’ access to needed health care is being impacted by their concerns regarding immigration status, please let us know how. (Check all that apply) (n=66)

<table>
<thead>
<tr>
<th>How is Access to Health Care Impacted by Concerns Regarding Immigration Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reluctant to apply for medical coverage</td>
</tr>
<tr>
<td>Unable to follow care plan</td>
</tr>
<tr>
<td>Unable to access health care</td>
</tr>
</tbody>
</table>

Question 5. Please provide any additional comments regarding concerns about access to health care for your patients, clients, or community. (n=36)

Challenges Addressing Social Determinants of Health

Question 6. Given federal policies and budget cuts that are under consideration, what is the greatest challenge you foresee in our community’s ability to address social determinants of health? (n=54)

Given federal policies and budget cuts that are under consideration, participants were asked the greatest challenge that they foresee in their community’s ability to address social determinants of health. This question was asked in an open-ended format; the table below represents the major categories that participants referred to. The majority of respondents commented on the financial burden with accessing health care, housing, insurance, food, and overall lack of resources.

Figure 1. Greatest Challenge in the Community’s Ability to Address Social Determinants of Health, Collaborative 2016 CHNA (n=54)

<table>
<thead>
<tr>
<th>Social Determinant of Health Category</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial</td>
<td>26</td>
</tr>
<tr>
<td>Behavioral health</td>
<td>5</td>
</tr>
<tr>
<td>Education</td>
<td>5</td>
</tr>
<tr>
<td>General comments</td>
<td>4</td>
</tr>
<tr>
<td>Access to care/prevention</td>
<td>3</td>
</tr>
<tr>
<td>Insurance</td>
<td>3</td>
</tr>
<tr>
<td>Access to healthy food/Food insecurity</td>
<td>2</td>
</tr>
<tr>
<td>Senior health issues</td>
<td>2</td>
</tr>
<tr>
<td>Communication</td>
<td>1</td>
</tr>
<tr>
<td>Poverty</td>
<td>1</td>
</tr>
<tr>
<td>Prevention</td>
<td>1</td>
</tr>
<tr>
<td>Transportation</td>
<td>1</td>
</tr>
</tbody>
</table>
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Collaboration

Question 7. How well do hospitals in San Diego County collaborate with your organization in meeting community needs? (n=59)

<table>
<thead>
<tr>
<th>How well do Hospitals Collaborate?</th>
<th>0%</th>
<th>10%</th>
<th>20%</th>
<th>30%</th>
<th>40%</th>
<th>50%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaborate Effectively</td>
<td>7%</td>
<td>32%</td>
<td>41%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not Effective Collaborators</td>
<td>12%</td>
<td>8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Question 8. Please provide any recommendations or advice on how hospitals can partner with community organizations in order to address health equity issues, such as social determinants of health listed above. (n=47)

Policy or Program Change Recommendations

Question 9. Improving access to behavioral health care services remains a tremendous challenge in San Diego and across the Country. What policy or program change could make a positive impact in a relatively short amount of time to improve access to behavioral health care services? (n=49)

Data Access and Data Sharing

Question 10. How would you rate your organization’s ability to access and share data from outside your organization in order to manage your patients’ and clients' health and social needs? (n=60)
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**Question 11.** Is there support from your organizational leadership for training and/or technology to improve data sharing and referrals between organizations? (n=63)

![Bar chart showing support from leadership to improve data sharing and referrals.]

- No support: 2%
- Limited support: 27%
- Yes, full support: 46%

**Survey Participant Affiliation**

**Question 12.** Please identify what organization you are affiliated with. (n=65)

![Pie chart showing survey participant affiliation.]

- Hospital/Health System: 43%
- Federally Qualified Health Center: 11%
- Community Organization: 29%
- Public Health Department: 2%
- San Diego County Agency: 5%
- Community Resident: 2%