



IMAGINE: A Trial of Messaging Strategies for Social Needs Screening and Referral



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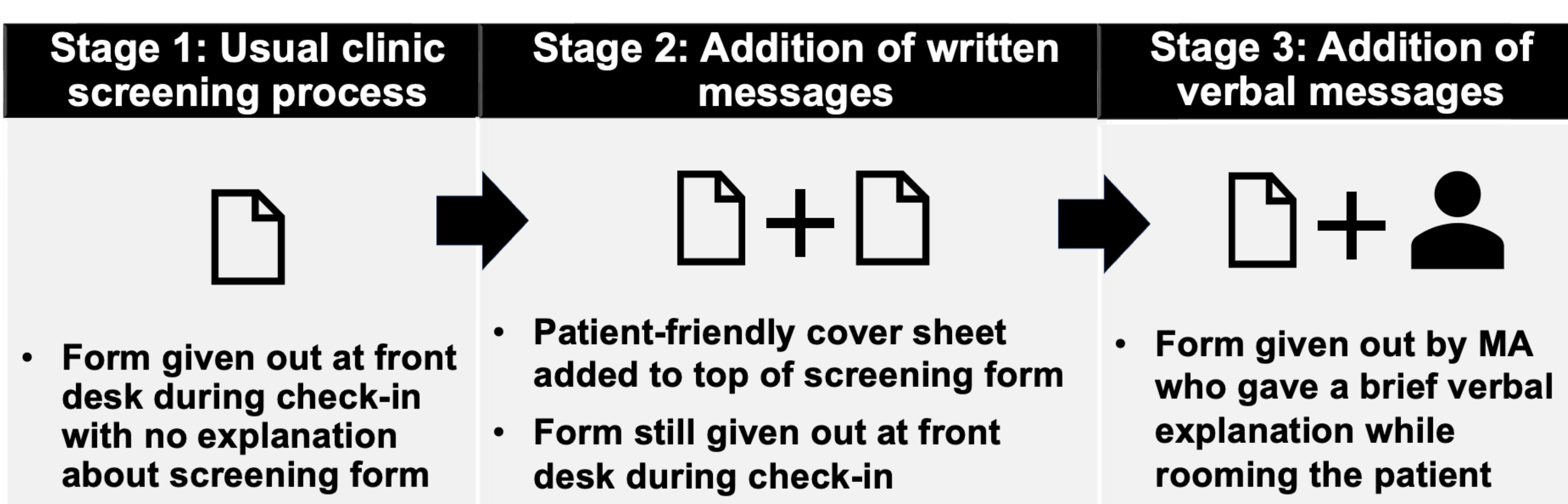
Background

- Health-related social needs (HRSN) negatively impact health outcomes
- Many primary care practices now screen patients for HRSN and refer them to resources
- Little evidence exists on how best to implement or communicate with patients about HRSN screening
- We conducted a trial to examine impacts of different communication strategies on the following outcomes:

Primary outcomes	Secondary outcomes
Screening response rate	Comfort with screening
Assistance acceptance rate	Perceived helpfulness of screening
	Receipt of explanation about screening

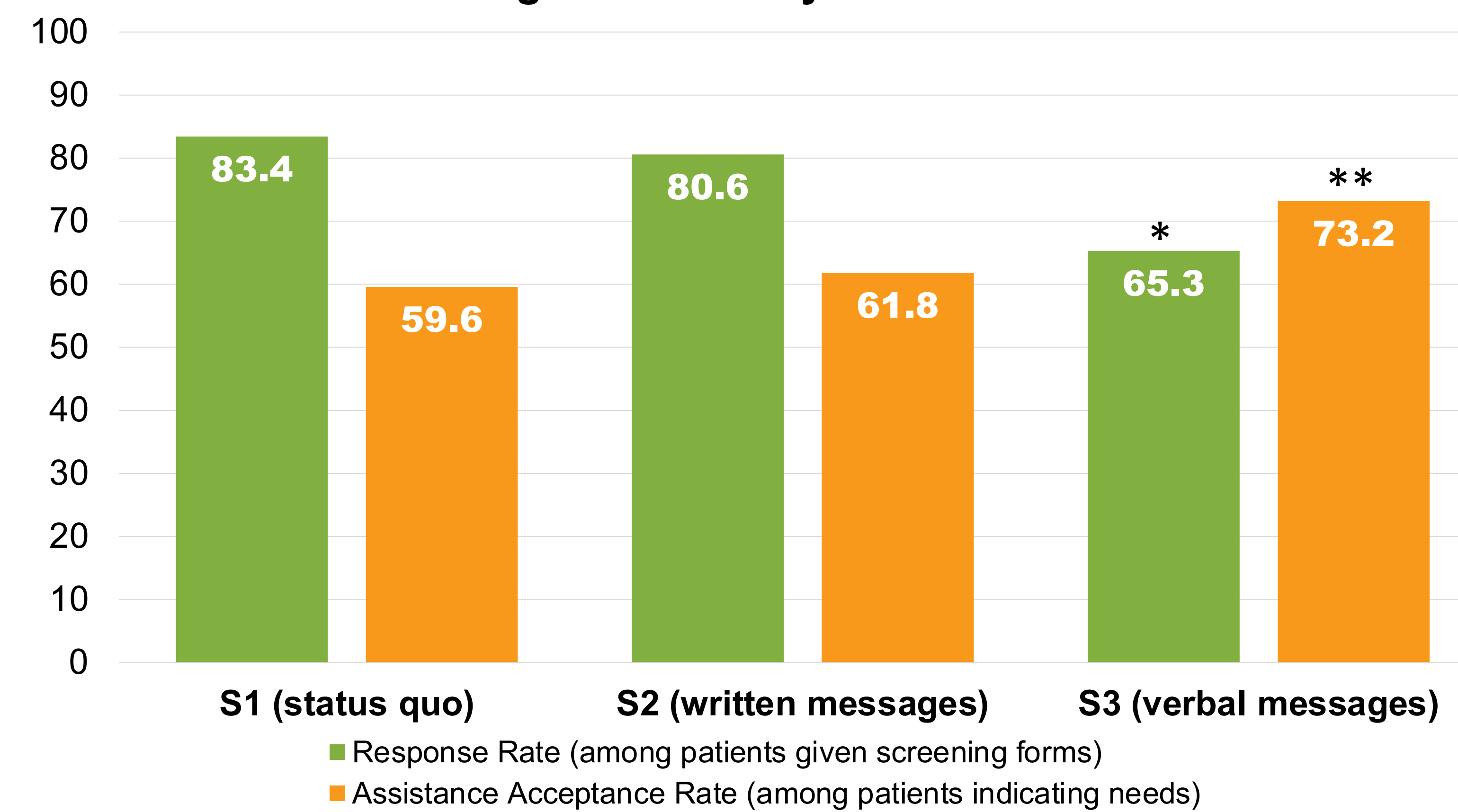
Methods

- Population: patients at 3 safety-net primary care clinics in western Colorado
- Design: Quasi-experimental three-stage trial of communication strategies developed through a patient-engaged process
- Each stage implemented for 3 weeks simultaneously across all clinics (9 weeks total)
- Primary outcomes assessed via screening form data; secondary outcomes assessed via one-item measures on follow-up survey



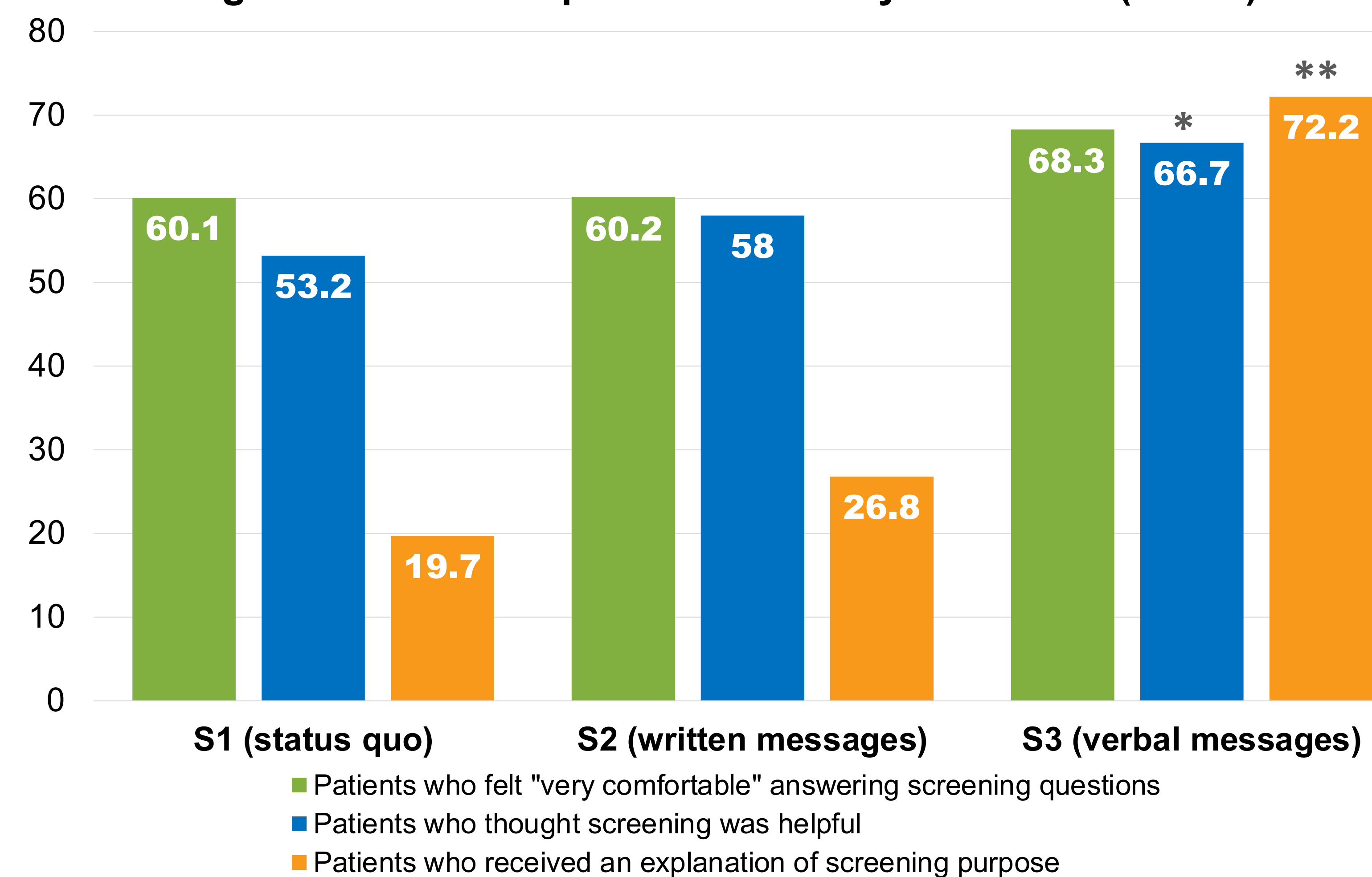
Results

Figure 1. Primary Outcomes



*Significant decrease in response rate within two clinics (OR 0.1 [CI: 0.1-0.3]; OR 0.4 [CI: 0.2-0.7]), but not the third (OR 1.2 [CI: 0.6-0.3]) for Stage 3 vs. Stage 1
 **Significant increase in assistance acceptance rate (no clinic-specific differences) (OR 2.1 [CI: 1.1-4.0]) for Stage 3 vs. Stage 1

Figure 2. Patient-Reported Secondary Outcomes (n=547)



*Significant increase in perceived helpfulness (OR 1.5 [CI: 1.2-3.0]) for Stage 3 vs. Stage 1
 **Significant increase in receipt of explanation (OR 12.0 [7.0-20.6]) for Stage 3 vs. Stage 1

Conclusions

Primary care patients provided with a **verbal explanation** about social needs screening were more likely to **accept assistance** with resource navigation and **perceive screening as helpful**. However, providing verbal explanations required **changing clinic workflows** and was also associated with a **decreased screening response rate** in 2 of 3 clinics.

Implications

- Stage 2 written explanation alone had little impact
- Impacts of Stage 3 verbal explanation were somewhat contradictory to ↓ response but ↑ assistance acceptance
- ↓ response in Stage 3 may relate to workflow challenges and more patients declining to be screened
- This work highlights the value of verbal, patient-friendly messages about HRSN screening and referral to ↑ assistance acceptance
- Challenges remain regarding who at the practice should provide these explanations and when

Full Paper + References here:



Disclosures

Research reported in this poster was funded by the **Social Intervention Research and Evaluation Network (SIREN)** with support from the **Robert Wood Johnson Foundation**. Additional support for Dr. Broaddus provided by the ACCORDS Primary Care Research fellowship supported by the **Health Resources and Services Administration (HRSA)** of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$424,170 with 0% financed with non-governmental sources. The contents are those of the authors and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government.