CLICKS DON'T TELL THE WHOLE STORY: REIMAGINING EHRS TO INCLUDE THE SOCIAL SIDE OF HEALTH

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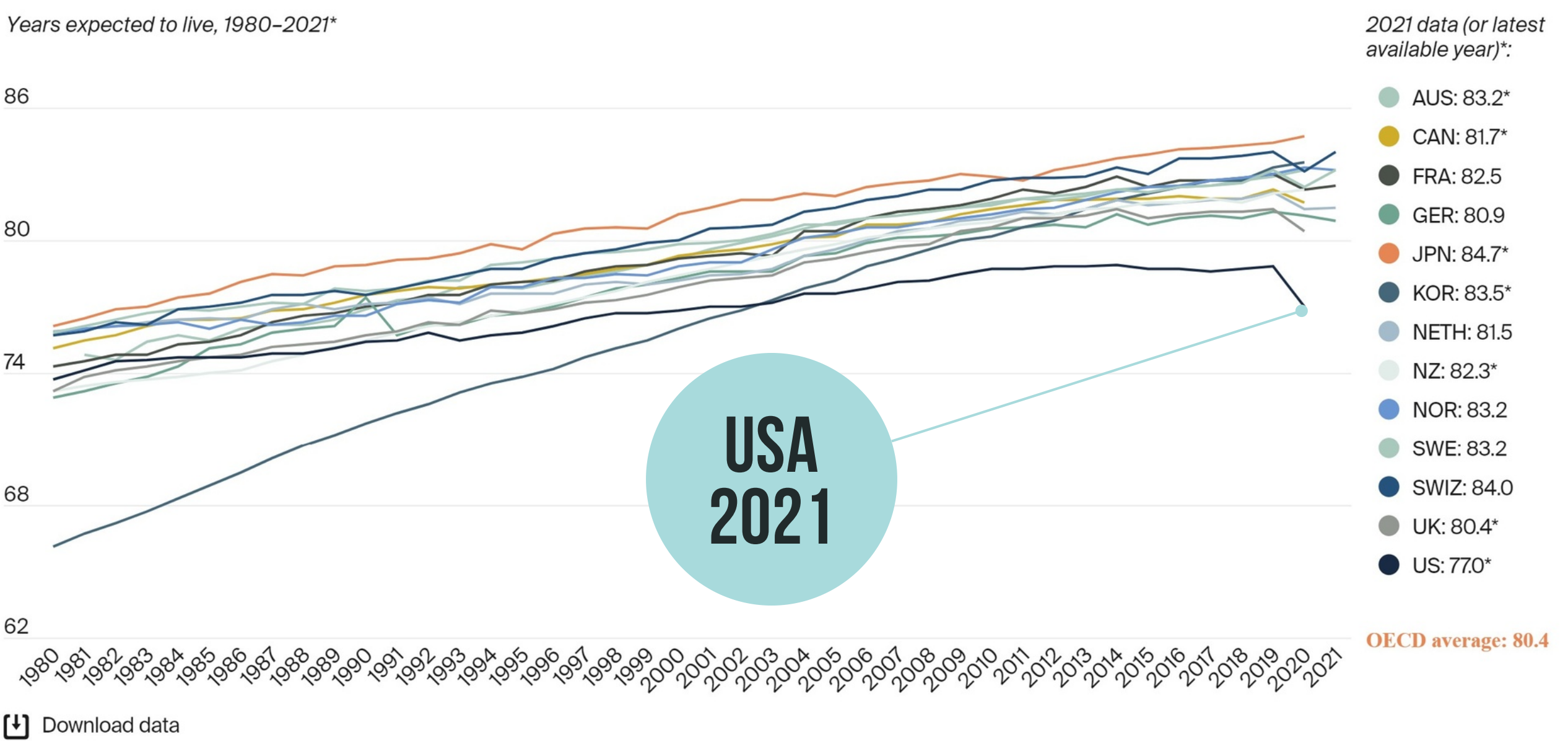


Download data

Note: * 2020 data. Total population at birth. OECD average reflects the average of 38 OECD member countries, including ones not shown here. Because of methodological differences, JPN and UK data points are estimates.

Data: OECD Health Statistics 2022.

THE VITAL CONDITIONS

WELL BEING TRUST

WIN NETWORK

As a group, the seven vital conditions for intergenerational well-being strongly shape the exposures, choices, adversities, & opportunities that each of us encounter on day one and throughout our lives. This effort is focused on support and investment where it is needed most, allowing those who've been left behind to participate fully, and building accessible pathways to well-being for everyone.

Belonging & Civic Muscle

Fulfilling relationships, the social support people need to thrive, encouraging people to be part of a community and contribute to its vibrancy, and living free from stigma, discrimination and oppression.

Thriving Natural World

Creating a clean, healthy environment, free of environmental hazards & resilient to future changes & threats–one that fulfills our needs to connect with nature.

Meaningful Work & Wealth

Personal, family, and community wealth that provides the means for healthy, secure lives across the lifespan via good-paying, fulfilling jobs and careers.

Reliable Transportation

Compact, walkable, accessible communities, in which mobility is ensured no matter a person's means, mode or ability, streets are safe, and transportation systems are sustainable.

Lifelong Learning

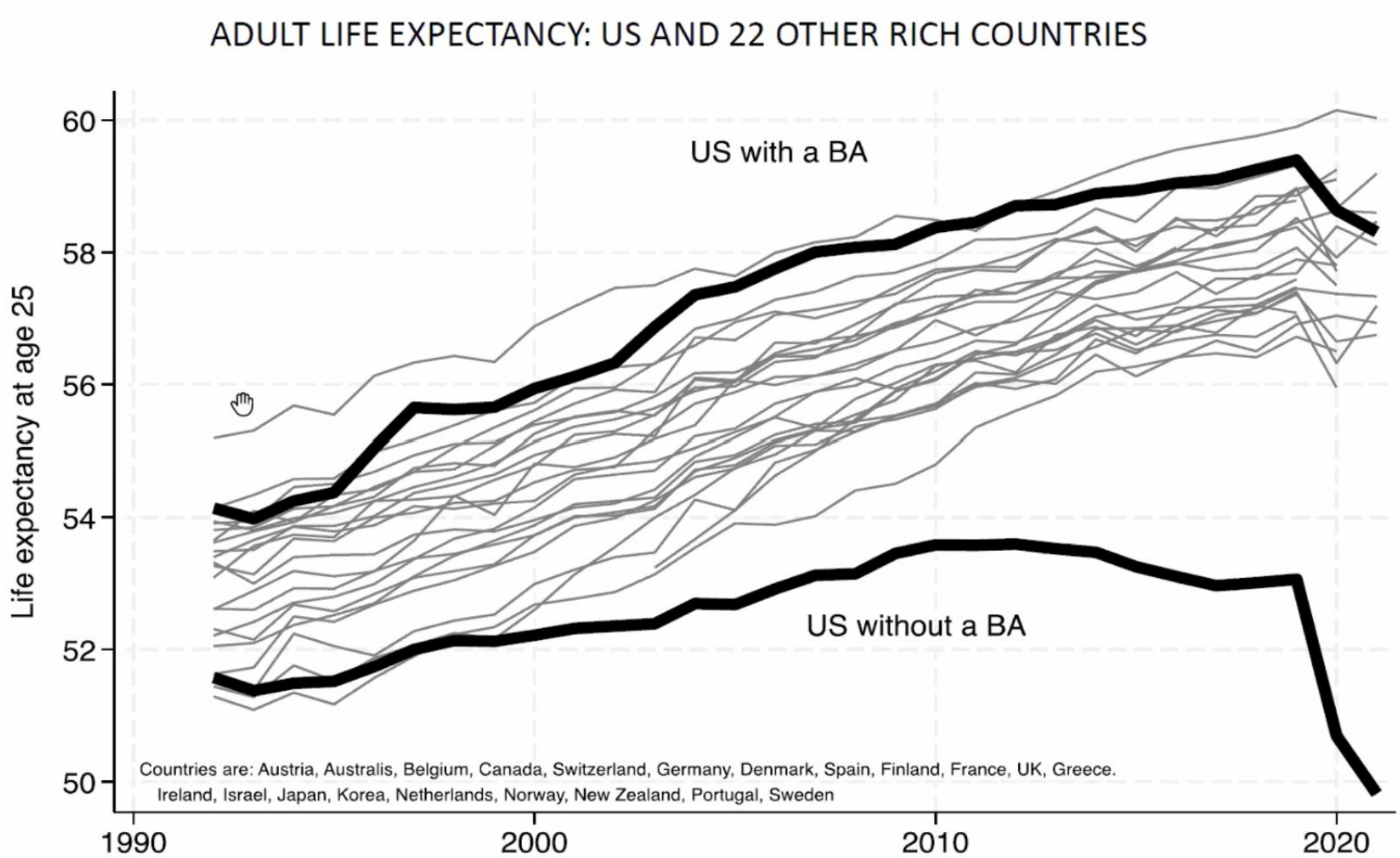
Good education, which ensures all young people, regardless of background or ability, are set up for success, and have the opportunities to reach their full potential. Education should prepare people for meaningful careers in which they continue learning, growing, and thriving.

Humane Housing

Stable, safe places to live, including diverse, vibrant communities capable of providing what we need to live full, productive lives.

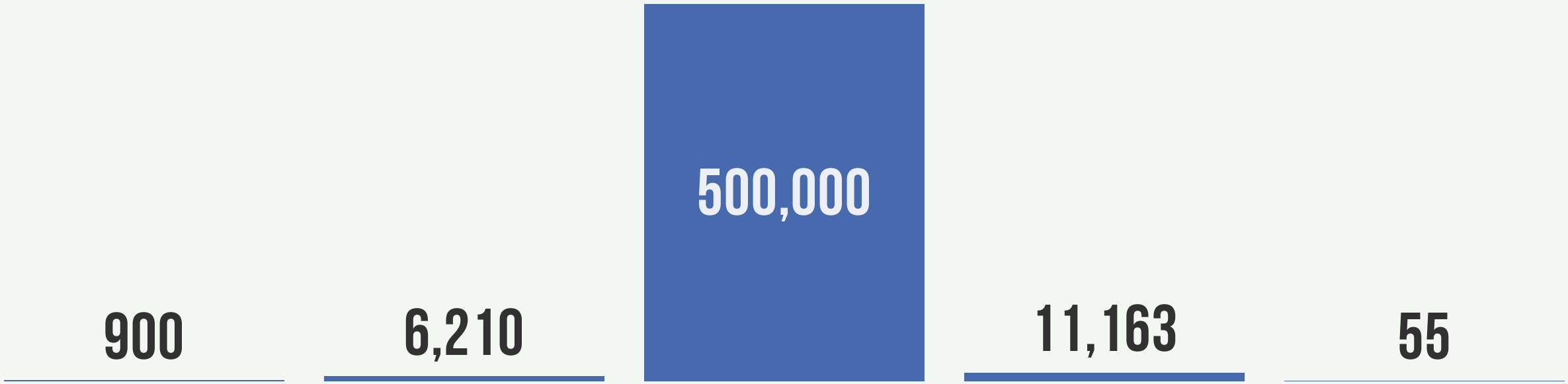
Basic Needs For Health & Safety

What we need to live healthy lives, what makes a community safe and free from violence, crime, and hazards, and how to build and support communities in which people can be active and access the nutrients and care they need.


ADULT LIFE EXPECTANCY: US AND 22 OTHER RICH COUNTRIES
Life expectancy at age 25
60
58
56
54
52
50
1990
2000
2010
2020
US with a BA
US without a BA
Countries are: Austria, Australis, Belgium, Canada, Switzerland, Germany, Denmark, Spain, Finland, France, UK, Greece.
Ireland, Israel, Japan, Korea, Netherlands, Norway, New Zealand, Portugal, Sweden

COMPLEXITY OF US HEALTH CARE SYSTEM

Comparison of various metrics



BARRIERS, BARRIERS, AND MORE BARRIERS

Workflow Challenges

Clinicians already navigate busy schedules. Collecting SDOH data can feel like an extra burden if EHR interfaces aren't optimized for it, leading to resistance.

Technical Hurdles

There's a lack of universally accepted codes for capturing SDOH data. This inconsistency makes it difficult to analyze and share information across healthcare systems.

Financial Disincentives

The current healthcare payment system often rewards volume over value. Clinicians get paid for procedures performed, not time spent collecting SDOH data.

Privacy Concerns

Some patients might be hesitant to share personal details about social determinants due to privacy concerns. EHR systems need to ensure robust data security measures.

There are several key challenges around workflow, technology, incentives, and privacy that need to be addressed to successfully collect and utilize SDOH data in clinical settings.

WORKFLOW

BBQ

DATA

PAYMENT

TECHNOLOGY

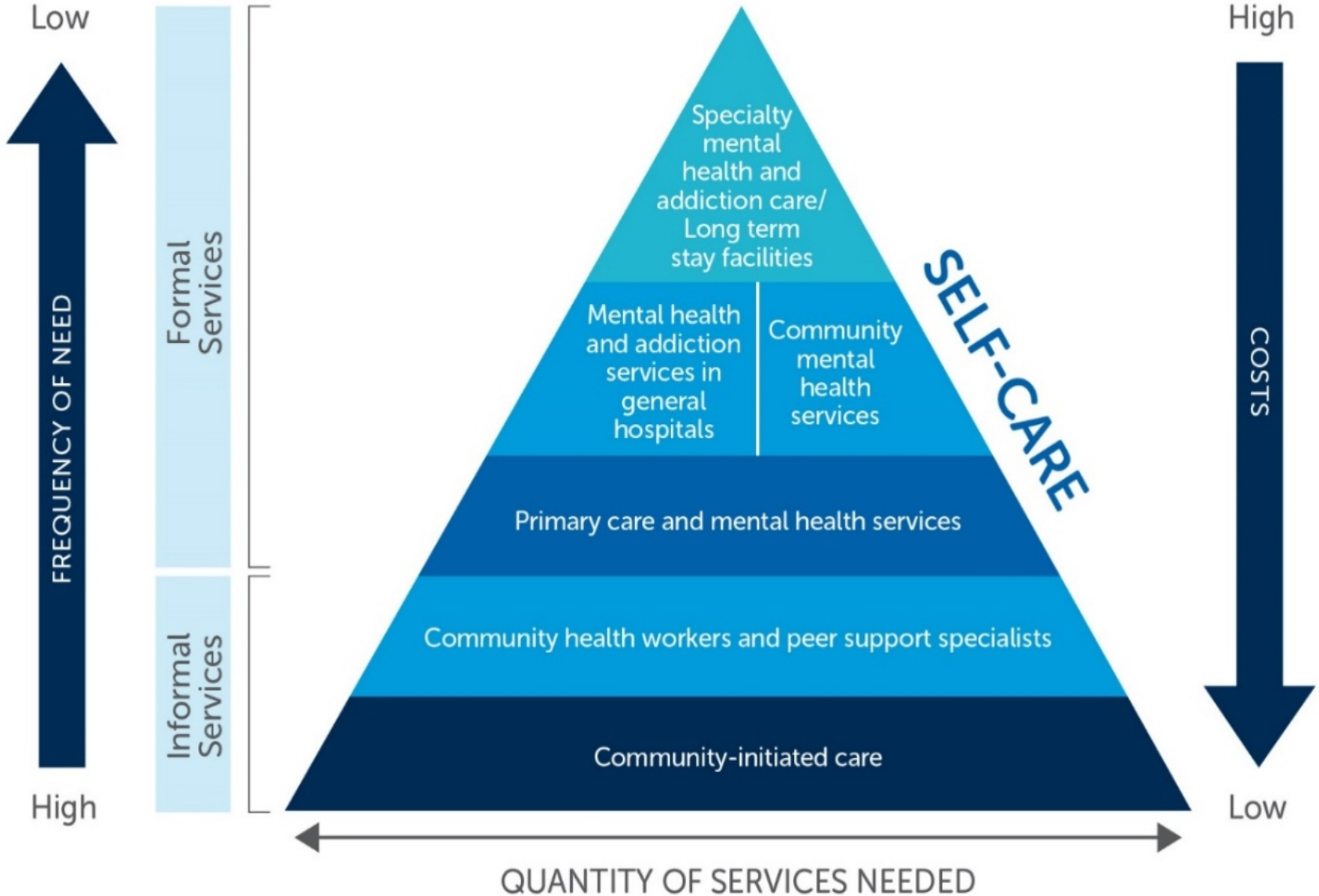


Figure 1: Framework for Mental Health and Addiction Workforce (Revised from WHO) World Health Organization. (2009). Improving health systems and services for mental health (978 92 4 159877 4). WHO Press. https://www.who.int/mental_health/policy/services/mhsystems/en/

SOME GENERAL RECOMMENDATIONS

- ## Standardization is Key

  Develop and implement standardized fields within EHRs for collecting SDOH data. This ensures consistency and allows for easier data analysis and sharing across healthcare systems.

- ## Embrace Technology

  Explore and implement Natural Language Processing (NLP) tools to automatically extract SDOH data from clinical notes. This can reduce clinician burden and improve data capture.

- ## Patient Empowerment

  Integrate patient-reported SDOH data collection into EHR workflows. This empowers patients to share their social circumstances and creates a more comprehensive picture of their health.

- ## Accountability

  Hold payers and plans accountable for paying for social determinants. Without appropriate carrot and sticks, much of this fails.

A CAUTIONARY TALE

The case study of mental health and health care.

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