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The following presenters have relevant financial disclosures to make: Mike Cowan, MD – Royalties: Southern Spine LLC
NCCARE360
Introduction & Overview

Kelly Calabria
President & CEO
Foundation for Health Leadership & Innovation

Vaughn Crawford, MSW
NCCARE360 Sr. Account Manager
Unite Us
ACCESS TO CARE

- 38% of rural residents, and 32% of urban residents do not have health insurance
- 11 NC rural hospitals have closed
- As of Nov. 2020, USHRSA has either partially or fully designated all 100 counties as dHPSAs
OVERALL HEALTH & WELLNESS

• Black infant mortality is nearly twice the rate of White, non-Hispanic mortality
• 2.4 million North Carolinians struggled to get adequate oral health care since 2019
• 51st of all states for untreated youth with depression
A Focus on Unmet Social Needs

- Housing
- Interpersonal Violence
- Food
- Transportation

North Carolina’s Priority Domains for Unmet Social Needs
What’s happening in North Carolina?

UNMET SOCIAL NEEDS

• 7% are living in a food desert
• 14.4% are food insecure
• 1 in 4 North Carolina households experience severe housing problems
• 23% of our children have experienced two or more adverse childhood events
Many North Carolina families with children were struggling even before the pandemic.

In 2019, an estimated 190,000 families with children (16%) lived below the poverty line.

Poverty rates were even higher (21%) among North Carolina families with at least one child under age five.
Unmet Needs Exacerbated by the Pandemic

• 230,000 (10%) of NC adults living with children reported that their family did not have enough food to eat in the past week, higher than the share of adults facing food insecurity living in households without children (6%).

• 23% of NC adult renters living with children reported being behind on rent payments versus only 7% among renters not living with children.

• 825,000 NC adults living with children (30%) reported having trouble paying usual household expenses.
The Problem:
Connecting people to community resources was not consistent, not coordinated, not secure, and not trackable.
The Solution:
A uniform system for providers, insurers, and community organizations to coordinate care, collaborate, and track progress and outcomes. A tool to make it easier to connect people with the community resources they need to be healthy.
The first statewide network that unites health care and human services organizations, assesses for and identifies unmet social needs, and enables a coordinated, community-oriented, person-centered approach for delivering care in North Carolina.
A coordinated network connects providers (such as health care providers, insurers, or community-based organizations) through a shared technology platform to:

- Communicate in real-time
- Assess for and identify unmet social needs
- Make electronic referrals
- Securely share client information
- Track outcomes together
Why a Public-Private Partnership?

NCCARE360 Administrator:

NCCARE360 Implementation Partners:
NCCARE360 is live in 100 counties

- Implementation team formed: January 2019
- Launched in three counties: March 2019
- 2,000 electronic referrals: January 2020
- 1,000 network partners: May 2020
- Live statewide: June 2020

Learn more: NCCARE360.org
NCCARE360 functions, it’s more than a technology platform

- A **robust statewide resource directory**
- A **team of dedicated navigators**
- A **shared technology platform** that enables providers to assess for and identify unmet social needs, and then send and receive secure electronic referrals and track outcomes
- A **community engagement team** working with community-based organizations, social service agencies, health systems, independent providers, and more to create a statewide, coordinated care network
Assessing and Identifying Unmet Social Needs in NCCARE360

<table>
<thead>
<tr>
<th><strong>Health Screening</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>We believe everyone should have the opportunity for health. Some things like not having enough food or reliable transportation or a safe place to live can make it hard to be healthy. Please answer the following questions to help us better understand you and your current situation. We may not be able to find resources for all of your needs, but we will try and help as much as we can.</td>
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<table>
<thead>
<tr>
<th><strong>Food</strong></th>
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<tbody>
<tr>
<td>1. Within the past 12 months, did you worry that your food would run out before you got money to buy more?</td>
</tr>
<tr>
<td>2. Within the past 12 months, did the food you bought just not last and you didn’t have money to get more?</td>
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<thead>
<tr>
<th><strong>Housing/Utilities</strong></th>
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<tbody>
<tr>
<td>3. Within the past 12 months, have you ever stayed: outside, in a car, in a tent, in an overnight shelter, or temporarily in someone else’s home (i.e. couch-surfing)?</td>
</tr>
<tr>
<td>4. Are you worried about losing your housing?</td>
</tr>
<tr>
<td>5. Within the past 12 months, have you been unable to get utilities (heat, electricity) when it was really needed?</td>
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<tr>
<th><strong>Transportation</strong></th>
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<tbody>
<tr>
<td>6. Within the past 12 months, has a lack of transportation kept you from medical appointments or from doing things needed for daily living?</td>
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<tr>
<th><strong>Interpersonal Safety</strong></th>
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<tbody>
<tr>
<td>7. Do you feel physically or emotionally unsafe where you currently live?</td>
</tr>
<tr>
<td>8. Within the past 12 months, have you been hit, slapped, kicked or otherwise physically hurt by anyone?</td>
</tr>
<tr>
<td>9. Within the past 12 months, have you been humiliated or emotionally abused by anyone?</td>
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<tr>
<th><strong>Optional: Immediate Need</strong></th>
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</thead>
<tbody>
<tr>
<td>10. Are any of your needs urgent? For example, you don’t have food for tonight, you don’t have a place to sleep tonight, you are afraid you will get hurt if you go home today.</td>
</tr>
<tr>
<td>11. Would you like help with any of the needs that you have identified?</td>
</tr>
</tbody>
</table>
NCCARE360 Stats

67,717 clients served
136,139 electronic referrals
2,425 organizations
67,717 users

August 1, 2021
Top Five NCCARE360 Service Requests

- Housing and Shelter
- Food Assistance
- Utilities

- Income Support
- Individual and Family Support
Hospitals and other care providers can integrate their electronic health record systems into NCCARE360 to address unmet nonmedical social needs.
Advantages to SDoH Screening and Referral Coordination in Health Care

- Bridge gaps between medical conditions and resource needs.

- Connect patients to appropriate resources and services that address identified needs.

- Proactively and intentionally raises and addresses health-related resource needs that do not organically arise in patient conversations due to barriers in communication and/or fear.

- Improves health and reduces longstanding health disparities
WHAT’S NEXT?

- Establishing an NCCARE360 Advisory Council
- Soliciting feedback from CBOs with a survey to improve community engagement
- Working with health systems to integrate NCCARE360 with their EHRs
NCCARE360 - Part II

Vaughn Crawford, MSW
NCCARE360 Sr. Account Manager
Unite Us