



POPULATION HEALTH RESEARCH BRIEF

An evaluation of the Community Health Worker Program at Main Line Health

Background: Community health workers (CHWs) build trusting relationships between patients, community members, and health systems. They can operate outside the walls of the health system and may coordinate with community-based organizations to improve access to care. They act as an access point for community members who need to connect with and navigate complex systems.

Main Line Health CHWs are part of the Health Equity Department and conduct Social Determinants of Health (SDoH) screenings, resource navigation, and case management. Their main tasks include screening for and connecting patients with needed resources such as food, transportation, utility payment assistance, health insurance, housing, primary care physician appointments, and financial aid.

SDoH are the nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.¹

Program Evaluation: The Main Line Health Center for Population Health Research at Lankenau Institute for Medical Research conducted a CHW program evaluation. Data was collected on all CHW visits (phone calls or in-person contacts). Patient demographics, SDoH screenings, and emergency room visits were analyzed.

Results: Between March 2023 and March 2024, 875 unique patients had a CHW encounter. The population was 46 years old on average. Patients were 56% female, 55% Black, and 63% single. The most common health conditions were depression (14.3%), asthma (13.6%), diabetes (12.5%), and anxiety (11.2%).

• Among those with a positive screen reflecting a need to address SDoH and were referred, **64% received help for that social need**. For the remainder, resources were either pending or help was no longer needed. Availability and eligibility for community programs is an important factor.

 Median emergency room visits decreased significantly 90 days after a CHW encounter (p<.0001) (see Figure 1).

Patient Experience: Upon receiving a patient referral, CHWs contacted them and referred them to food resources, utility assistance programs, and Main Line Health financial assistance. The patient stated the CHW team gave them hope.

Conclusion: The evaluation highlights the CHW program's importance in reducing costly emergency room visits, developing trust among patients, and supporting patients in their communities.

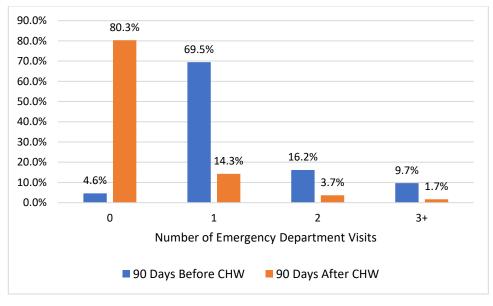


Figure 1. Number of emergency department visits 90 days before and after CHW encounter

Note: p<.0001

SDoH	Number Screened	% of CHW Population (n = 875)	% Positive
Food insecurity	843	96%	25%
Housing	193	22%	21%
Utilities	130	15%	4%
Financial strain	280	32%	24%
Transportation	331	38%	16%

 Table 1. Number and proportion of SDoH screenings with positive screen

References

1. Centers for Disease Control and Prevention (2024, January 17). Social determinants of health. <u>https://www.cdc.gov/about/priorities/why-is-addressing-sdoh-important.html</u>