

The background of the entire page is a photograph of two men in a conversation. On the left, a younger man with dark hair, wearing a grey t-shirt, is leaning forward and looking towards the older man. On the right, an older man with grey hair, a beard, and glasses, wearing a light blue button-down shirt and khaki pants, is sitting on a stool. He is holding a clipboard on his lap and gesturing with his right hand while speaking. The setting appears to be a bright, indoor space with large windows in the background.

Addressing Social Determinants of Health:

A comprehensive guide for inpatient behavioral health providers

By Carrie O'Connell, Senior Director, Clinical Strategy, WellSky

Social determinants of health (SDoH) are conditions in an individual's environment that affect a wide range of health, functioning, and quality-of-life outcomes and risks. These conditions are proven to impact both the physical and mental health of individuals. As healthcare collectively looks to improve the quality of care provided in the United States, providers must address SDoH and behavioral health.

In this guide we'll address what the social determinants of health are, how they can impact a client's mental health, and how behavioral health providers can address them in a personalized treatment plan.

The five domains of SDoH

SDoH contribute to widespread health disparities and inequities. To help improve population health outcomes, it is important to understand the [five domains of SDoH](#) defined by the U.S. Department of Health and Human Services.



The five domains of SDoH

SDoH can be grouped in five main domains:

- 1 Economic stability
- 2 Education access and quality
- 3 Healthcare access and quality
- 4 Neighborhood and built environment
- 5 Social and community context

1 Economic stability
Economic stability refers to the connection between the financial resources people have and their health. Financial resources include income, the local cost of living, and socioeconomic status. People may have limited access to foods, healthcare, or housing due to their physical disabilities or behavioral health conditions. This domain focuses on issues related to poverty, employment, food security, and housing stability.

2 Education access and quality
This domain focuses on the connection of education to health and wellbeing. Children from low-income families, children with disabilities, or those who attend poor-performing schools are less likely to receive the education they need to find and keep stable jobs. These children are also more likely to have health problems such as heart disease, diabetes, and depression. Key issues include an individual's education level, his or her understanding of language, and access to early childhood education and development.

3 Healthcare access and quality
Healthcare access and quality refers to the connection between an individual's access to health services and an understanding of their own health. Many people can't get the healthcare they need. About one in 10 people in the United States don't have health insurance. Interventions to increase access to healthcare professionals – in person or remotely – can help more people get the care they need. Key issues to focus on are access to healthcare, access to primary care, health insurance coverage, and health literacy.

4 Neighborhood and built environment
In this domain, housing and environment are connected to health and wellbeing. Many people live in neighborhoods where they are more likely to experience violence, have poor living conditions that result to health and safety risks, or are exposed to unsafe air or water. Others face unhealthy work conditions that harm their wellbeing. Key issues that can impact mental and physical health include the quality of housing available in the neighborhood, access to transportation, availability of healthy foods, quality of clean air and fresh water, and levels of crime and violence.

5 Social and community context This domain focuses on how an individual lives, learns, works, and plays. Unsafe neighborhoods, discrimination, or food deserts can negatively impact health and safety throughout life. For example, children whose parents are in jail don't receive the social support they need. Other issues that impact mental and physical health include cohesion within the community, civic participation, discrimination, workplace conditions, and levels of incarceration.

Several SDoH factors can have a positive or negative impact on the mental health of an individual. These factors include race and ethnicity, gender, age, income level, education level, sexual orientation, and geographic location. Behavioral health providers must understand how these factors interact to improve the health of their clients.

Preventing the revolving door in behavioral healthcare

It is important to remember that an individual's social environment can have a major impact on their development. Findings from the [National Comorbidity Survey-Adolescent Supplement \(NCS-A\)](#) indicate that 22% of children and adolescents are affected by mental health disorders during their lifetimes. Understanding SDoH gives behavioral health providers a more comprehensive view of a client's health and can prevent patients from entering the "revolving door" of behavioral healthcare.

The "revolving door" refers to patients who are admitted to inpatient psychiatric care, are stabilized through treatment, discharged to the community, and then return to the emergency room or inpatient care. When behavioral healthcare providers screen clients for SDoH, they can minimize the chances that a patient returns to the hospital.

Screening for SDoH ensures that clients are discharged to the community with referrals and community connections that increase the chance for success. This "social prescribing" involves connecting patients with support resources beyond the healthcare system, including housing advocacy organizations, employment agencies, and more.

Using technology to prevent the revolving door

Technology is critical for helping behavioral health providers screen for SDoH. With purpose-built technology, behavioral health providers can use data captured at admission to inform the creation of treatment plans, community transition plans, and more.



Customer relationship module (CRM)

Used at admission to screen for SDoH



Electronic health record (EHR)

Structured tools to capture additional information about SDoH and align referrals



Calendars

Used to streamline discharge planning and ensure successful community transitions

The admission process

A **customer relationship module (CRM)**, allows providers to capture relevant data at the time of admission. Providers can then use this information to inform care throughout the patient's stay and at discharge.

The Protocol for Responding to & Assessing Patients' Assets, Risks & Experiences (PRAPARE)

The PRAPARE assessment is a nationally standardized and stakeholder-driven screening tool used by healthcare providers and their community partners. PRAPARE is designed to help providers better understand and act on individuals' SDoH. The tool focuses on four core question domains, including personal characteristics, family and home, money and resources, and social and emotional health. The tool has been increasingly used by health networks, health systems, Medicaid managed care organizations, behavioral health providers, and more.

During the client's stay

Once a patient is admitted, providers can pull patient data from the CRM into documentation found in their **electronic health record (EHR)**. An EHR can house formal structured tools to capture information about SDoH, like [the PRAPARE assessment](#). In addition, an EHR can collect data which can be shared with various departments. Information captured in clinical documentation can trigger alerts in the treatment plan, alerting case managers about essential information that can be used to create a successful community transition plan.

At discharge

Case Manager and discharge calendars can be built into a behavioral health EHR. These calendars ensure that case managers know when each client is discharged into the community. They also prompt case managers or others on the interdisciplinary team to follow up with the client after discharge. These follow-up calls help the client adhere to their discharge instructions.



About the author

Carrie O'Connell, RN, is the senior director of clinical services at WellSky. Carrie's wealth of knowledge and expertise in healthcare

informatics spans more than 20 years. Her focus includes the strategic design and direction of clinical solutions, regulatory guidance, educational services, client training, and implementation success. Carrie serves as a board member of the National Association for the Support of Long-Term Care (NASL) and was asked to participate in CMS's LTACH Function Quality Measure Development Technical Expert Panel (TEP). Carrie is a frequent presenter at national conventions, including Behavioral Health Business INVEST.



WellSky Specialty Care for Behavioral Health is an all-in-one healthcare information technology platform that spans EHR, revenue cycle management, and business intelligence. The WellSky Specialty Care platform helps providers deliver better quality and safety of care while increasing efficiencies and financial performance. Our easy-to-use solution promotes a culture of safety with behavioral health specific features, including a built-in accountability record and alerts that power safe and effective care delivery.



Collect and monitor SDoH with WellSky. Connect with an expert to learn how WellSky Specialty Care for Behavioral Health can help you address SDoH in personalized treatment plans.

sales@wellsky.com | 1-855-wellsky | wellsky.com/demo