Center for Health Care Strategies

Data Across Sectors for Health

Bringing Community Voice into Cross-Sector Data Sharing:
Supporting Aging Populations in Rural Utah

Seniors in San Juan County, Utah — a large and sparsely populated county bordering Arizona, Colorado, and New Mexico — often travel hours to access health care services and resources. Compounding the challenge of travel, data are not easily shared between care sites due to the use of paper files and siloed internal data collection systems. This makes the process of connecting patients in a medical care setting to necessary post-care services particularly challenging.

To better connect seniors being treated in an inpatient health care facility to post-discharge services, San Juan County Aging Services partnered with Blue Mountain Hospital, a private hospital in the county. The organizations undertook this work as part of *Learning and Action in Policy and Partnerships* (LAPP), a national initiative that supports community-based data sharing efforts. The Utah LAPP team partnered to implement a data exchange program to increase digitization of patient records and data sharing between social care and health care organizations. This would allow health care records to be easily shared across the hospital, its affiliated clinics and dialysis center, and senior center sites, thus improving efficiencies in care coordination and ultimately health outcomes for San Juan County elders.

AT-A-GLANCE

- **Community Health Goal:** Build a shared data system to increase access to health services and resources for the rural and Native American aging population in San Juan County, Utah.

- **Partners:** San Juan County Aging Services (*project lead*); Blue Mountain Hospital; and Mon Ami Operating System.

- **Highlighted Accomplishment:** Created a successful and culturally appropriate data exchange dialogue with community partners to ensure seamless hospital discharge to social care services for seniors.

- **Policy-Level Impact:** Demonstrates that communities can play a lead role in designing data and technology systems that are culturally appropriate and result in improved health outcomes.

BRINGING COMMUNITY VOICE INTO CROSS-SECTOR DATA SHARING

Sharing data across state agencies and community-based organizations is critical for advancing health equity and addressing complex health challenges that involve multiple sectors. Insights from individuals with lived expertise provide valuable context to inform data-sharing efforts that is critical to improving health equity. This case study is a product of ***Learning and Action in Policy and Partnerships***, a national initiative led by Data Across Sectors for Health in partnership with the Center for Health Care Strategies with support from the Robert Wood Johnson Foundation.

The Utah LAPP team implemented the Mon Ami Operating System, a system designed for Aging and Disability agencies, to enable a more seamless exchange between Blue Mountain Hospital and San Juan County Aging Services. The Utah LAPP team also received support from the Aging teams across the state to expand push notifications beyond San Juan County to 12 aging services within the state and nine rural hospital systems. Within this shared system, seniors in the hospital, clinic, or dialysis center can be referred to San Juan County Aging Services. Aging Services evaluates the seniors' qualifications and exchanges data back to the hospital determining whether they qualify, do not quality, or are already being served by Aging Services, which helps inform discharge planning from these varied care sites.

The two major populations in San Juan County are Navajo (47 percent) and white (47 percent). Within the county, there are senior centers that are operated by the Navajo nation as well as centers operated by the state. Because senior centers coordinate the services and resources provided by Aging Services to individuals following hospital discharge, the Utah LAPP team made sure that all senior centers were involved in the Mon Ami Operating System to ensure seniors had equitable access to needed services, regardless of tribal affiliation.

Key Project Activities

To get started, Aging Services developed a community survey to determine what information community members wanted included in the hospital referral form. This survey aimed to capture information pertinent to what considerations must be made for a rural frontier setting as well as cultural appropriateness for the tribal communities served. The survey was disseminated across four platforms: (1) paper surveys distributed at county senior centers; (2) a geographically defined and targeted Facebook ad; (3) a full-page newspaper ad; and (4) an ad on the Aging Services website. The survey garnered 66 responses, which, in such a rural county, was celebrated as a very high response rate (a 60-fold increase from the previous survey sent out to community members in the county).

While tribal status is not a factor in being eligible for the data exchange program, Aging Services wanted to ensure a culturally appropriate approach due to the large tribal population in the county. To do so, they reached out to various senior centers, especially those in close touch with the Navajo nation, to ensure the questions on the hospital referral form were culturally appropriate. County leadership understood the importance of addressing the needs of Navajo populations and helped ensure that the services were respectful to the Navajo culture and lifestyle. Their role on the team supported the key goal of bringing community voice into the design and implementation of the project.

Using the feedback collected — including from the survey, senior center outreach, and the county commission — the Utah LAPP team, in partnership with representatives from Mon Ami, met bi-weekly over two months to develop a prototype for the data collection form to be used initially by nurses in the hospital, clinics, and dialysis unit. Nurses were trained, given time to ask questions, and had the opportunity to provide feedback on the collection form.

The resulting design was a simple referral system wherein nurses at the hospital collect patient data that is then shared with Aging Services to help patients get the resources they need as seamlessly as possible.

Data-Sharing Accomplishments to Improve Community Health and Advance Equity

The Utah LAPP team successfully implemented a technology system that was built around the data considered most important by the community. This ensured the most effective and user-friendly system.

The biggest challenge faced by the team was Aging Services' capacity to provide resources to seniors quickly in such a rural county, especially in preparing for discharge from the hospital. The data exchange program significantly improved discharge planning for seniors in San Juan County, particularly through better managed expectations among hospital staff related to environmental constraints (as reflected in the community survey). Case managers and discharge planners can now communicate much sooner than prior to system implementation, which allows them to provide resources and services to seniors more efficiently than in the past.

An unexpected positive outcome of this work was that additional critical issues facing elders in the county were lifted through the survey collections and the hospital data collected by the nurses. For example, state-level data show that financial abuse is the biggest form of abuse against seniors in the Utah health care system, but data from the surveys showed that verbal abuse by health care workers is a larger problem in San Juan County. This information informed protective measures that Aging Services will implement to address the problem, including creating flyers and presentations on how to combat verbal abuse of an elder — none of which existed before this project.

Looking Ahead

The Utah team hopes to expand the referral system to all hospitals and clinics across the state as well as to different service providers outside of Aging Services. Utah's State Commission on Aging viewed this work as a potential state solution for the enormous burden data entry has on health care providers.

The project has shown that engaging community members and those with lived expertise early and often in program planning and implementation is critical in ensuring a successful program design, further aiding in long-term sustainability and spread across similar contexts.

ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

The Center for Health Care Strategies (CHCS) is a policy design and implementation partner devoted to improving outcomes for people enrolled in Medicaid. We support partners across sectors and disciplines to make more effective, efficient, and equitable care possible for millions of people across the nation. For more information, visit **www.chcs.org**.

ABOUT DATA ACROSS SECTORS FOR HEALTH

Data Across Sectors for Health (DASH) is a national initiative launched by the Robert Wood Johnson Foundation to improve community health, well-being and equity, by fostering greater alignment among health care, public health, and other community-based social systems to improve multi-sector collaboration and data sharing. For more information, visit **www.dashconnect.org**.