

# STRENGTHENING COMMUNITY-CLINICAL LINKAGES THROUGH THE RHODE TO EQUITY



## BACKGROUND

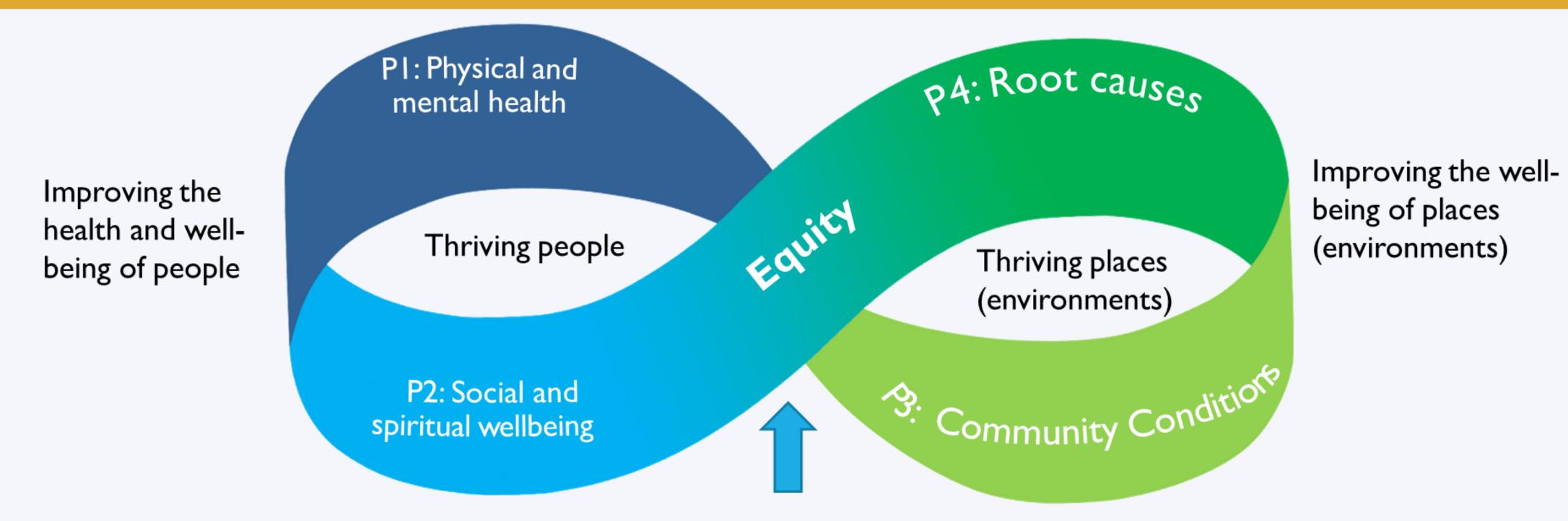
To advance health equity, the Rhode Island Department of Health and Executive Office of Health and **Human Services** designed the Rhode to Equity, a coalitionbuilding project utilizing the Pathways to Population Health framework to engage Health Equity Zones, health care entities, and other community-based partners in advancing place-based approaches to reduce health disparities.

**TEAMS** 

## OBJECTIVES

- I. Enhance place-based teams with local partners and community residents funded to improve population health with an equity lens
- 2. Apply evidence-based Pathways to Population Health tools to more effectively build responsive community-clinical linkages that improve health (physical and behavioral) and societal outcomes
- 3. Use clinical and community data to identify population health needs, test strategic actions, and build sustainable community solutions

### FRAMEWORK: PATHWAYS TO POPULATION HEALTH



Transforming inequitable structures and systems together with those who experience inequities

Team

Learn,

Sustain

and

#### TOOLS AND STEPS: SPIRAL OF TRANSFORMATION

 Score and review the Compass Assessment

 Complete/reassess Stakeholder **Engagement Map** 

Reflect, sustain,

Identify next area



Community Risk stratify population

Evaluate, Develop an Action Change, Plan Take Action To

Equity

Implement Action Plan

Set measurement plans

Advance

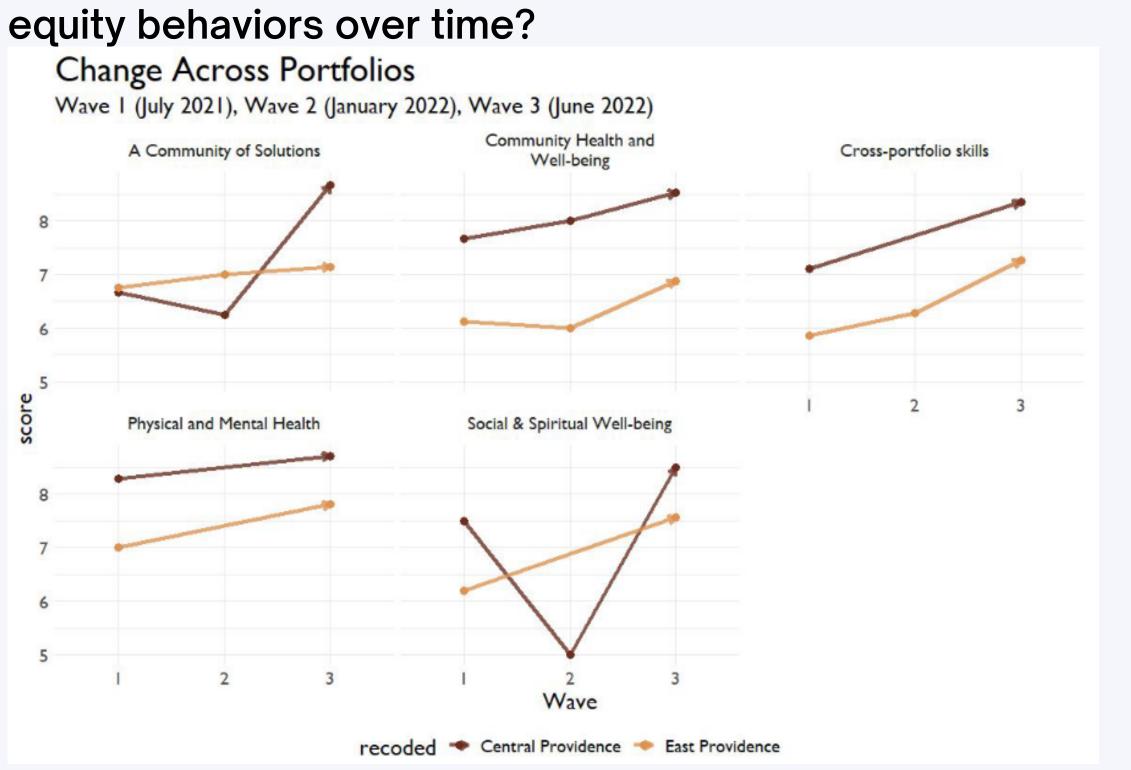
 Include strategies to address all four portfolios of work

## scale, or change

of focus

#### YEAR 1 OUTCOMES

How were capacities related to population health and health equity built over time? Did teams demonstrate improvement in



Although this figure only depicts two teams, across all teams and across all portfolio, we saw changes in equity behavior going in the positive direction from three different time points (Wave 1 to Wave 2 to Wave 3).

## TEAM HIGHLIGHTS

1. Pawtucket / Central Falls

3. West Elmwood / 02907

4. Washington County

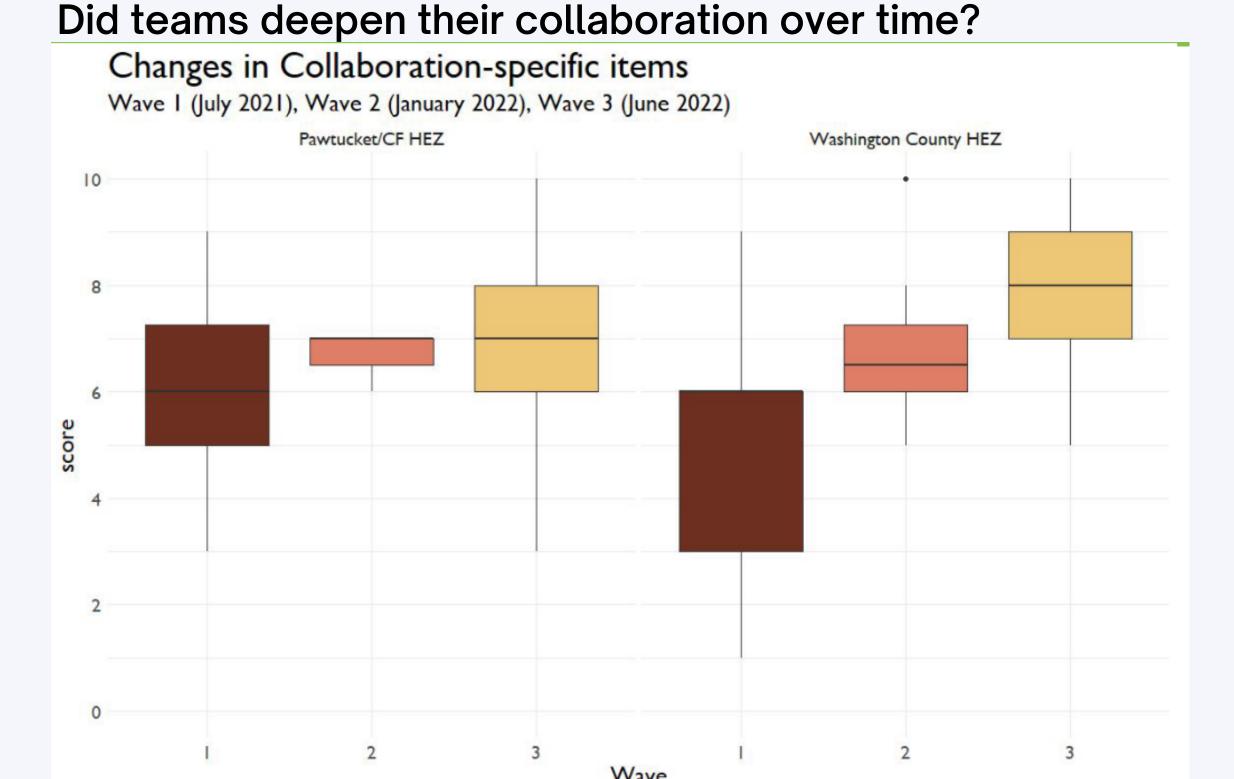
6. Central Providence

2. East Providence

5. Woonsocket

- Incorporating social determinants screening at food pantry
- Partnering with Progresso Latino to launch a healthy cooking class targeted at Latinos with culturally relevant recipes geared towards the Lantix population
- Incorporation of Community Health Workers into hospital EDs





For the two teams depicted, the figure shows how scores improve positively over time from Wave 1 to Wave 3 – there's less of a range or variation in scores, which indicates improved collaboration across waves/over time. Taking a closer look at Washington County, the figure indicates closer agreement in closer collaboration scores - the range shrinks, indicating closer collaboration among the team.

## RESULTS

- We were able to see growth in skills across all portfolios
  - We saw that skills in both equity and collaboration also increased
- People built strong relationships within and between teams
- Balance between the portfolios is mixed at this time
  - While our findings were not statistically significant, we can see trends in both the Year 1 goals and the distribution of the use of data that highlights that teams are moving the right direction