

# The Intersection of Social Justice and Clinical Healthcare: A CST-Informed Care Coordination Model

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CST Minor Capstone  
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# TRHS Experience

- Community health center serving rural and urban populations in Southern Idaho
- Clinic + Outreach

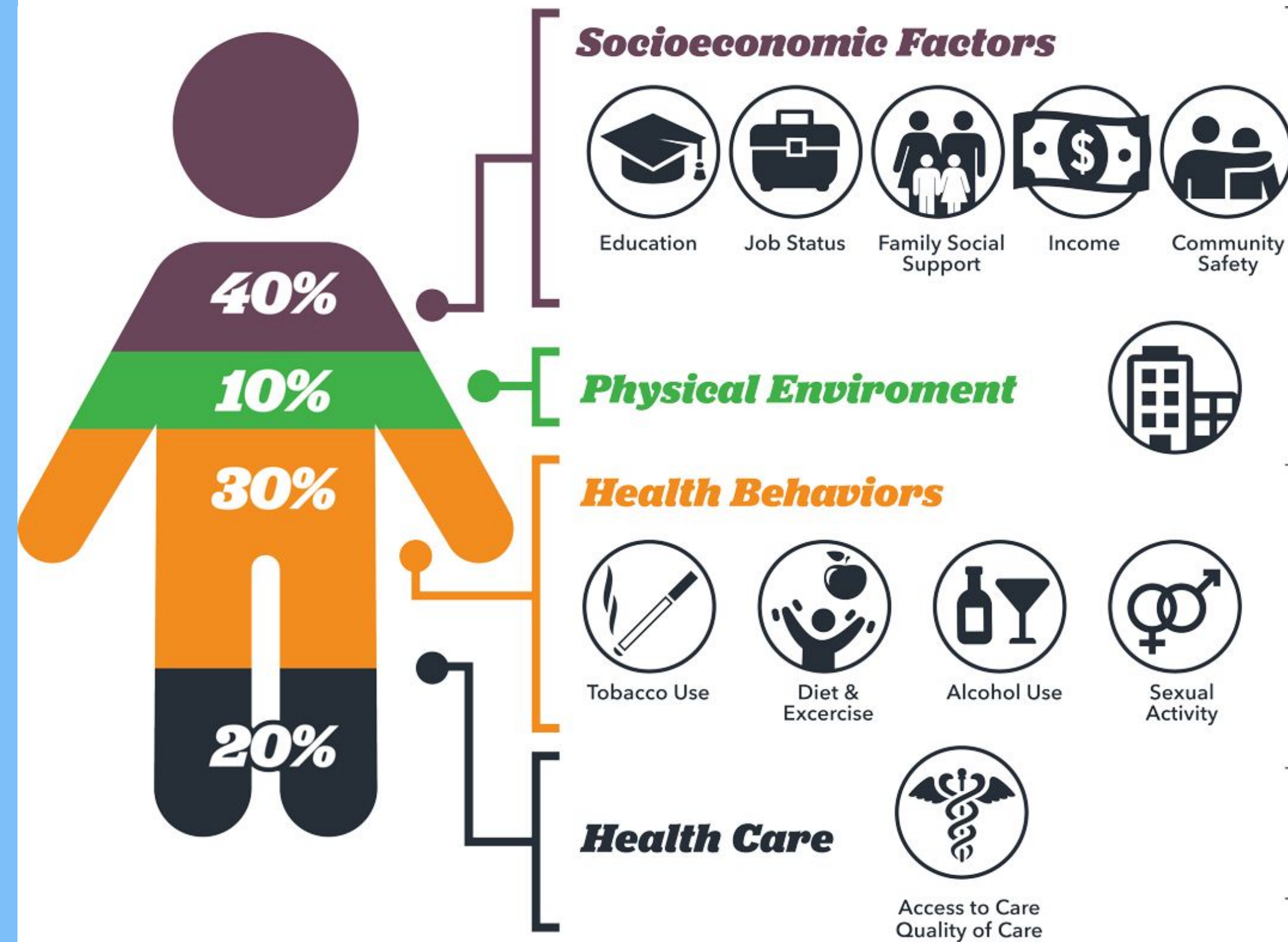




# Social Determinants of Health

Access to healthcare is a small piece of health

Disproportionately affect the poor and vulnerable



Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

To be effective, healthcare must be holistic, prioritizing both physical and social health

# Solution: Patient Navigators

Help patients apply for state programs like Medicaid and SNAP

Provide Medicare education and enrollment services

Connect patients to housing resources

Arrange transportation

Make referrals to community partners for legal assistance, employment, internet access, safety, etc

Provide other case management services

# Community Health Workers

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Community members

Culturally competent

Visits patients outside of clinic

- Not always assigned to specific patients
- Role focuses on health education and accompaniment

# Patient Navigators

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- Social workers, nurses, or other clinically trained professional

Located in clinic

Member of primary care team

- Role focuses on increasing access to care (navigating payment, clinical space, or social welfare programs)

# CHWs should be...

Housed inside  
the clinic

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To provide continuity of  
care concerning primary  
healthcare

Hired from the  
community

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To promote cultural  
competence,  
subsidiarity, and  
lasting accompaniment

Trained for  
clinical and social  
work

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To provide professionals  
with validity and the  
ability to best help their  
patients

# CST

## ■ Accompaniment

- True solidarity
- Prioritizing personal relationships and walking beside the poor and vulnerable

## ■ Option for the Poor

- Recognizing the structural sins that lead to poverty and unhealth
- Connects to Social Determinants of Health

## ■ Subsidiarity

- Placing power in the hands of community members



# Proposal Benefits

01

Prioritizes  
accompaniment

02

Social health part of  
primary care

03

Care is available both in  
and out of clinic

04

Fosters professional  
respect

05

Both generalizable and  
community-specific



# Questions?

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Thanks for listening!



# Quick Facts

- CHW programs have been observed to have ROI's of upwards of 300%
  - London, K., Love, K., & Tikkanen, R. (2017). Sustainable Financing Models for Community Health Worker Services in Connecticut: Translating Science into Practice. *Connecticut Health Foundation*.
- Use of CHWs reduces emergency medical visits, rates of chronic disease, and hospital readmission
  - Brownstein JN, Bone LR, Dennison CR, Hill MN, Kim MT, Levine DM. Community health workers as interventionists in the prevention and control of heart disease and stroke. *Am J Prev Med*. 2005 Dec;29(5 Suppl 1):128-33.
- Patients with access to CHWs are more likely to adhere to treatment plans
  - U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Professions. (2007).