

Addressing Social Determinants Leads to Better Outcomes

CASE STUDY

Patient Profile

Female patient admitted to the hospital for a urinary tract infection. Patient was known to overutilize the emergency department. ED overutilization was partially due to an unhealthy environment which included challenges with hoarding, home clutter, and physical inactivity.

Touchpoint Timeline



Customized Approach to Care



ICS Initial Assessment

Previous efforts to contact the local fire department, elderly protective services (EPS), and the local health department to assist with hoarding had only resulted in a fire extinguisher being delivered. Condition of the home prevented effective in-home physical activity required for patient rehabilitation.

Action Plan

Address Hoarding / Trash Issue

Patient was interested in improving conditions in the home and required assistance with identifying solutions for trash removal. Brainstormed alternate ideas for decluttering and removing trash with the patient. With assistance from ICS, the patient was able to contact the city and arrange a one-time fee for the delivery of an additional three trash cans and three recycling bins for her weekly pickup.

Arrange Outpatient Therapy

ICS determined that outpatient therapy would provide a more suitable environment for physical therapy and rehabilitative care. Patient was able to drive to appointments, and was provided with an exercise plan that involved taking short walks outside the home.

Key ICS Interventions

- Identified workable solution for removing trash and clutter from patient's home
- Arranged alternate course of rehabilitative therapy that did not require in-home physical activity

Key Takeaway

Where previous efforts to identify community resources and organizations to assist with decluttering the home had failed, ICS was able to coordinate an immediate alternative solution. Off-site therapy was arranged so the patient could receive care and begin exercising in a safe and healthy environment. By connecting the patient with community resources and ongoing education, ICS ensured the patient was not overutilizing emergency care.