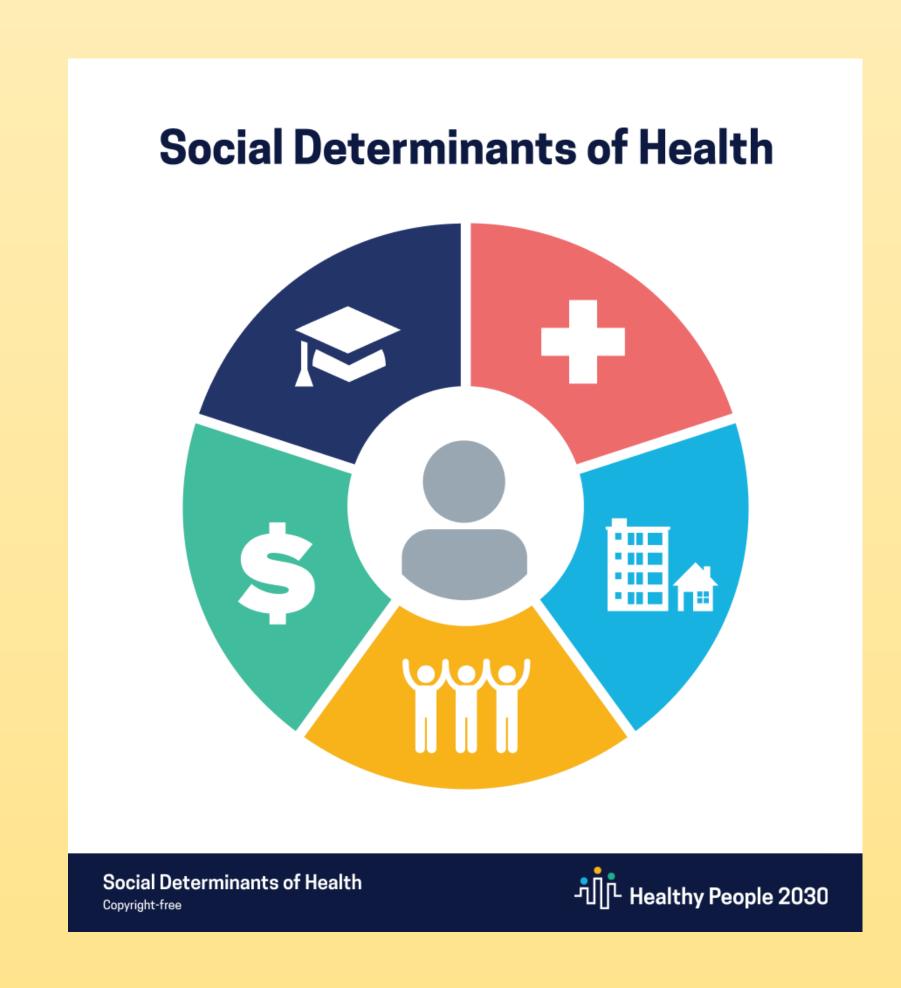
Using Podcasts as an Educational and Patient Care Resource for Family Medicine Residents on Social Determinants of Health

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Introduction

How well equipped are family medicine residents to tackle the social determinants of health (SDOH)? One 2020 Study showed that most FM residents had previous SDOH training, yet only a small proportion of residents reported being highly competent at identifying or addressing SDOH. A 2022 study showed that 41.2% of program directors reported significant formal SDOH training in their residency program, though a majority (93.9%) agree screening for social needs should be a standard part of care. Most do not currently utilize standardized screening tools such as the AAFP Social Needs Screening Tool, PREPARE, or Health Leads. The most cited barriers to addressing SDOH were lack of clinical resources), lack of community resources, and inadequate screening instruments or integration into the EMR. Availability of referral resources was associated with increased learner competency in addressing SDOH.



Defined Project Aim

To improve resident **reported screening rate** for SDOH during a clinical office visit, as measured by a self-assessment survey, by at least 50% over 2 months.

Secondary aims: To improve resident **knowledge** about SDOH and available resources as measured by a self-assessment tool. To improve resident comfort level providing patients with resources with a positive SDOH screen.

Methods

Population: Resident physicians of the NL EMMC Family Medicine Residency

Intervention: An educational podcast provided to residents interviewing grass roots community outreach program leaders about their services and approaches to vulnerable populations.

Comparison: Pre-post survey assessments

Clinicians and grass roots organizers who work with the unhoused population participated in voluntary interviews to describe barriers to healthcare. Recorded audio was securely edited using Audacity to produce a 20-minute audio documentary shared on Sound Cloud. Prior to sharing this podcast, a baseline survey was distributed to residents to assess baseline understanding of social determinants of health and estimated rate of screening patients. The podcast was then shared with residents via a private link and a follow up survey was issued to assess any improvement in understanding and likelihood of screening of SDOH.

This project was undertaken as quality initiative; as such it was not formally submitted to or supervised, reviewed, or approved by the Northern Light Eastern Maine Medical Center Institutional Review Board

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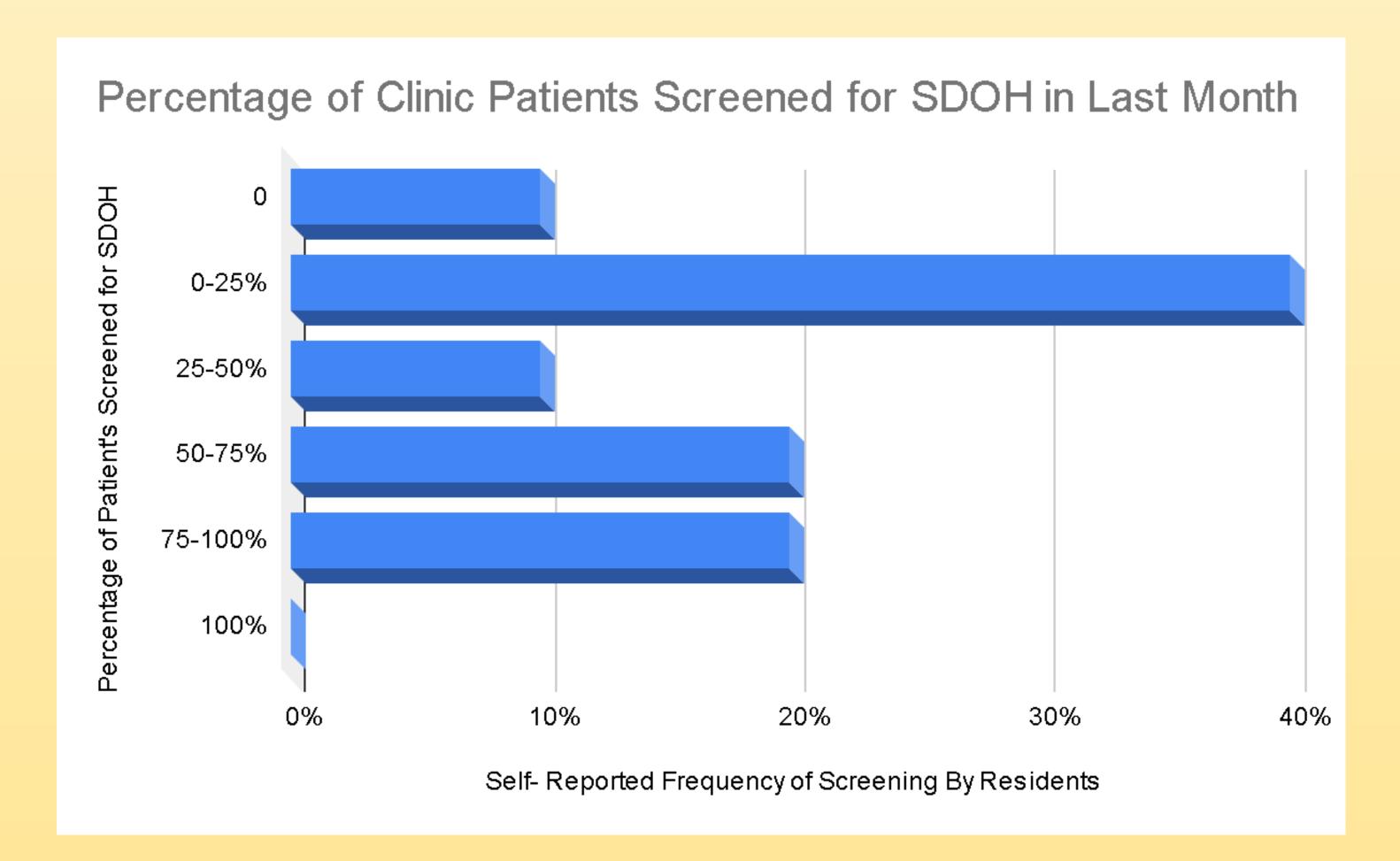
Outcomes

Outcome: Primary outcome is the resident's self reported frequency of screening in the previous month.

Secondary Outcomes: Other survey questions will evaluate change in residents' self-reported knowledge about SDOH, comfort level with addressing positive screens for SDOH, and free text opportunities to comment on educational needs around SDOH screening and resources.

Results

Baseline data revealed that about 60% of residents were able to answer knowledge questions about SDOH correctly. Half of all residents only screened 0-25% of patients for SDOH. The average self-rated knowledge score of SDOH was 4.8/10, and self-rated score for feeling comfortable providing resources for SDOH was 4.7/10.



Resident Self-Reported Screening rates of SDOH (n= 21)

Disclosures

• None of the authors for this presentation have relevant financial relationship(s) to disclose with ineligible companies.

References

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