Children's Hospital of Philadelphia PolicyLab

Comparing Patient-Centered Approaches to Social Care in the Emergency Department: A Mixed-Method Randomized Controlled Trial

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Study objective
The emergency department (ED) is a key setting for social care, but there is limited guidance for implementation. This study compares ED social care approaches and elucidates caregiver perspectives on social care delivery.

Methods
This was a secondary analysis of a mixed-method randomized controlled trial comparing the effect of social risk screening on resource desire. Caregivers of pediatric (0 to 25 years) patients in a pediatric ED were randomized to receive the following: (1) a social risk screener, (2) a “resource menu” to indicate desired assistance, or (3) no assessment. All arms received electronic resources and optional individualized navigation. Differences in resource desire were assessed with risk differences and univariate logistic regression. We interviewed a purposive sample to explore perceptions of social care until thematic saturation was reached and analyzed transcripts using thematic analysis.

Results
Of 1,996 families recruited (63.6% publicly insured), a higher proportion reported desire for resources in the menu arm compared to the screening arm (39.6% vs 31.7%). Among 441 follow-up survey participants, 45.8% used and 36.7% shared the resources. The likelihood of engaging with navigation increased with the number of desired resource domains (odds ratio 2.6, 95% confidence interval 2.2 to 3.0). The 33 interview participants offered implementation recommendations: (1) maintain situational awareness, (2) concisely communicate procedures, (3) provide resources after acute needs are addressed, and (4) offer longitudinal follow-up.

Conclusion
Our findings support offering resources rather than screening for risk and a tiered social care structure that prioritizes preferences: electronic resources provided to all, tailored resources for those requesting assistance, and resource navigation for those who desire it.

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