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CONFERENCE ABSTRACT

Stratification and determination of the social needs: an experience in the Province of Barcelona

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Introduction: One of the big challenges for the social services in Catalonia is the identification of risk groups based on an objective analysis of the severity of the situations. And an extensive literature review on the subject illustrates the current lack of a standard tool that can be correctly applied in Catalonia.

The main objective of the present experience was the development of a population stratification tool to improve the continuum care in order to promote equity, to personalize the social care and to ameliorate the efficiency of the Social Services system at its basic level. This study was the result of a practical research to redesign the primary care of the Social Services at 8 municipalities of the Province of Barcelona (Spain).

The first challenge was overcoming the lack of professional consensus about the evidences used to make the social diagnosis in the Social Services. Improving this practice was necessary, on one hand, to identify the social needs which had to be addressed by the public social system. On the other hand, these needs should be stratified by type, severity of the situation and by the affectation on the citizenry welfare. Thus, stratifying the population by specific variables and identifying their social needs are essential elements to address the challenge to get an integrative care with the health system. The different theoretical and professional practices between both systems –the social and the health systems- have an uneven impact on the selection of the target population and the joint management of the cases.

Description: This experience was developed in the last four years deriving from the professional practice with the aim of continuous improvement. The methodology was based on collaborative knowledge with the participation of more than 250 professionals. It was based on real cases studies to conceptualize the elements needed for the stratification and determination of the most relevant social needs.

Key findings: The results were, firstly the identification of 33 situations based on observable evidences that encompassed the citizen social needs related to three main areas: functional autonomy, material deprivation and social and community interrelationships. The linkage of each evidence and need required a detailed and agreed definition list. A second result was another list of contextual factors of the citizen with relevant influence on determining the severity or risk of the observed evidence. The results were tested in each case study. As a

Manzano; Stratification and determination of the social needs: an experience in the Province of Barcelona.

result of that, 3 levels of severity were identified for each observed evidence, pondering the intrinsic gravity of the situation by its observed frequency.

Finally, all the evidences and contextual factors determined the final result of each case and its stratification into three risk levels (vulnerability, risk and high-risk). In the last analyses, the concept of social prevalence was incorporated to narrow populations with similar needs and to achieve greater segmentation of the population.

Highlights: The main achievement has been to overcome, as a result of the professional consensus, the structural deficit in the Social Services of observable standardized evidences. Furthermore, we propose an initial stratification to improve the professional practice, the appropriate distribution of assistance and resources, as well as the organization efficiency.

Conclusion: The first future challenge is to move on from a pilot project experience to an agreed methodology for professionals in social services. To achieve that it is necessary the involvement of administration, academia and professional colleges.

The second challenge is deepen in the systemic view of the social diagnosis and the stratification with changes in care processes. These changes are based on the operability of the social intervention objectives, the standardization of the actions, the assistance service and the continuous and systematic evaluation.

Those challenges represent a key objective in providing a basis to ensure interoperability between Health and Social Care.

Keywords: stratification; evidence; social needs; social diagnosis; social prevalence