

Best Practices in Clinic-Community Linkages
WV Health Connection
West Virginia University Office of Health Services Research

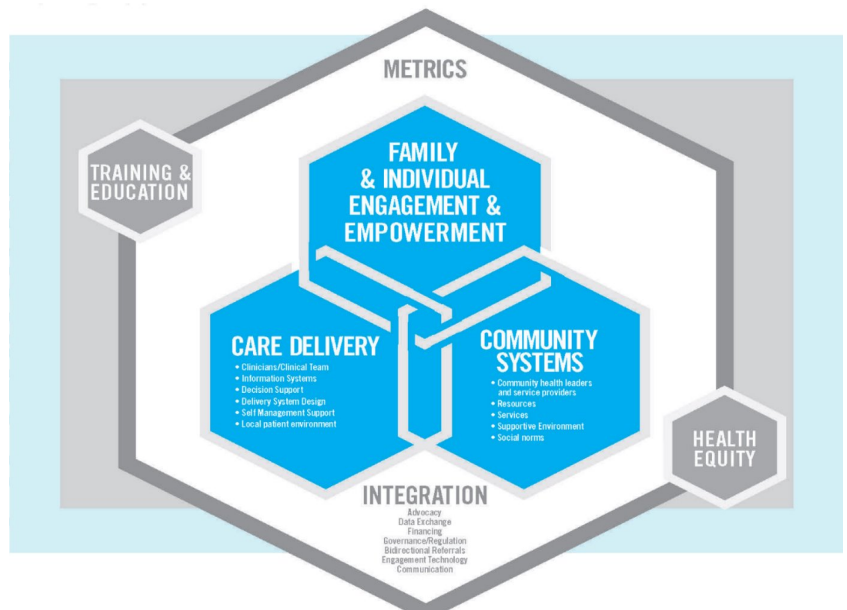
WV Health Connection overview

West Virginia Health Connection is a network of health care and public health partners throughout West Virginia who are devoted to improving the health of people in their community. The spirit of WV Health Connection is to build meaningful relationships between these partners to empower individuals, community organizations, public health professionals, and local health providers to achieve improved patient health.

Clinic and community linkages provide an opportunity for patients to engage in chronic disease prevention and management programs that have the potential for health behavior change and improved health outcomes. Through intentional referral tracking and process planning, WVU OHSR and WV Health Connection partners are demonstrating how coordinated referral systems create sustainable change for patients, communities, and organizations alike.

Clinic and community linkages

The goal of WV Health Connection is to integrate clinic and community systems that work in tandem to engage, empower, and serve the needs of West Virginians. This allows for a multi-faceted approach to patient care that demonstrates improved health outcomes. This approach prioritizes clinic and community strengths and resources for the benefit of families and individuals and asserts that delivery of health care must extend beyond primary care. These linkages occur through partners coming together to plan and share different perspectives, but also through sharing data to understand the impact a program has on patient health.



A Model Framework That Integrates Community and Clinical Systems for the Prevention and Management of Obesity and Other Chronic Diseases (Dietz et al., 2017)

What is essential to implementing clinic-community linkages?

At the end of the 2020 WV Health Connection virtual retreat, partners began discussing what they find essential to starting and sustaining clinic-community linkages. There was a conversation about one partner's experience implementing the FARMacy produce-prescription program on the border of West Virginia and Ohio. This partner shared that to get the clinic-community relationships formed in order to

provide this program, that someone needs to be willing to “be the lead to form the connection.” She referenced that this is challenging since so many of us are busy trying to meet the demands of our current responsibilities. She also commented on how collecting success stories is key to help partners understand why to get involved in clinic-community linkages – these stories show new partners the benefit that this type of partnership can have for organizations and patients alike. A discussion followed about the need to learn from partners across state lines, and continued communication among partners to remain connected, especially as we are all currently unable to see each other in person as often.

Throughout the discussion about best practices, our partners shared their perspectives through poll questions as well. The following tables show our partner’s responses to questions about their experiences and ideas related to clinic-community linkages.

How are you putting clinic-community linkages into action?

| Best Practice | Number of partners who selected this best practice |
|---|---|
| Promoting a community program | 12 |
| Working towards developing this partnership | 10 |
| I have implemented/plan to implement a program in my organization | 9 |
| Currently connecting healthcare providers with community programs | 8 |
| Supporting this approach in other ways | 8 |
| Referring/planning to refer patients to lifestyle change programs | 6 |

What would you consider the most important best practice for clinic-community linkages?

| Best Practice | Number of partners who selected this best practice |
|---|---|
| Working closer with partners who share your mission | 8 |
| Robust referral systems | 7 |
| Widely-available community programs | 4 |
| Long-term program leaders | 3 |
| Provider champions | 3 |
| Local-level leadership | 2 |
| Reliable funding/reimbursement | 2 |

Other comments from partners through a retreat post-survey (pre-liminary results) as essential for clinic-community linkages:

- Policy change (“small P and big P” policy)
- All of these best practices are important for clinic-community linkages - It's hard to choose just one because you really have to have a good mix of at least two or three of those to really make an impact