

# Population Health Pathway

Focus in Social Emergency Medicine

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## Overview

As EM physicians, we see the most vulnerable, underserved populations, and we observe firsthand challenges and opportunities as they relate to the development and implementation of effective and efficient health systems. We seek to deliver excellent, value-based care to the emergency patient population, while viewing their entire needs through the lens of their social and environmental contexts.

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Our goal to improve health equity across all populations, can start by understanding transitions of care from the ED, determinants of health - social, economic, and environmental - and their intersection with emergency care delivery, especially among vulnerable populations, such as those with mental illness, substance abuse, and traumatic injury.

Similar to other areas of focus within the Population Health pathway, a focus in Social Emergency Medicine (SEM) will encourage a resident on this pathway to explore SEM topics through learning opportunities, potential coursework, selected readings and video lecture series, as well as a longitudinal elective allowing either a clinical experience or research in an SEM area of interest.

## Application Process

As selection for this pathway occurs in the R2 year, interested residents are encouraged to send their CV and a paragraph of interest to [Dr. Sachita Shah](#) for dissemination to our [Population Health faculty](#) and the [residency leadership](#) for consideration for this area of focus within the Population Health pathway.

## Curriculum /Learning Opportunities:

### Lecture Series

Residents will work with their mentor to identify recorded lectures from the following series:

- Soon to be released Social EM Modules (13) from [ACEP/SAEM Partnership](#) through [SEM Interest Group](#). This is a nationalized curriculum set to launch in 2023.
- UW Population Health Lecture Series Recordings, part of the GEMRH Fellowship Curriculum, is a rich resource of nationally renowned guest speakers sharing their expertise on global health, rural health, and SEM topics. *Lecture recordings are available upon request by emailing [uwglobalem@gmail.com](mailto:uwglobalem@gmail.com).*

A few examples of past speakers and topics include the following:

- HMC Medical Legal Partnership Brian Johnston, Addressing Health-Harming Legal Needs in Clinical Settings

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- Dr. Regan Marsh, Joint DEM/DGH Grand Rounds How Emergency Care Can Transform Global Health Delivery
- Dr. Bram Wispelway, A Healing ARC in Heart Failure Admissions: From Institutional Racism to Reparative Justice
- Dr's Emily Bartlett, Paul Charlton, David Cheever, C.Hayes Wong, Alumni voices from Navajo Nation
- Dr. Anne Zink (Chief Medical Officer, State of Alaska), Covid Response in Alaska/Running a Statewide Medical System
- Dr. Kelly Doran, Homelessness for the Emergency Physician
- Dr. Emmy Betz, Patient-centered Injury Prevention: How to Talk About Firearms and Suicide
- Dr. Margaret Greenwood Ericksen, Access to Rural Care

#### Meetings/Groups

- Western Regional SEM: A group of SEM fellows and faculty meet monthly, through zoom, as part of the Western Regional SEM monthly group (WIPS, Journal Articles). We review works in progress from our different institutions for SEM related research and best practice implementation, as well as hold journal clubs. The discussion is always robust, and the group continues to grow. Current attendees include faculty, fellows, and residents from UW, Highland, Stanford, UCLA, Umass, UChicago, and other institutions.
- [SEM Interest Group](#): SAEM launched a SEM Interest Group which has an email listserve and meets at the annual SAEM conference in person.
- [Social Medicine Course](#): This is an annual course led by the Social Medicine Consortium. Currently, this course has been paused since 2020 due to covid.
- Emergency Medicine Residents' Association ([EMRA](#)): The Social Emergency Medicine Committee is focused on integrating social determinants of health, social justice, and advocacy for the underserved into the specialty of emergency medicine. Their goal is to provide a funnel into the activities of the talented attendings developing this field within ACEP and promote a new generation of social EM experts and advocates.

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Clinical Opportunities for Longitudinal electives:

- **DESC/The Estelle**: As a member of the Harborview Medical Center's Healthcare in Housing Program, residents will gain experience during a longitudinal elective in permanent supportive housing, serving patients previously experiencing chronic homelessness as a complex care manager and harm reduction physician. They will have the opportunity to outreach patients previously experiencing homelessness, often complicated by severe mental health and substance use disorders, in their homes, providing care coordination, palliative care, wound care, and access to other public health interventions.

SEM Research Opportunities

- **Social Determinants of Health**: Past residents have engaged in research and program implementation to examine screening and referral processes for social needs in the ED. We have explored the use of novel technology to identify social needs, and partnered with the County to create an electronic referral system. Further, one of our prior residents worked with Pop Health faculty to lead a portion of the SAEM Consensus Conference focused on Social EM and Population Health.
- **HIV/HCV screening**: the Department of Emergency Medicine currently supports expanded screening for HIV and HCV, in addition to other disease screening when appropriate (e.g. syphilis). Furthermore, our faculty and residents lead a County-wide collaborative to support expanded ED screening. This program provides residents with the opportunity to interact with EM leaders across the county.
- **ED-based Vaccination Programs**: The Department of Emergency Medicine advocates for patients to receive influenza, COVID and Hepatitis A vaccinations when appropriate. There is particular emphasis on providing these services to individuals with reduced access to care. Past residents have published papers on this topic and led the effort to implement these programs.
- **Management of patients with overdose and Opioid Use Disorder**: Identifying and addressing the needs for patients with OUD is a special area of focus for our Department. Faculty are

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recognized for their expertise in this field, and have worked to expand availability of lifesaving overdose treatment (i.e. naloxone) and medications for OUD (e.g. suboxone). Our faculty and residents work closely with multidisciplinary outpatient teams to support the treatment of patients with OUD using evidence based practices, and developing innovative new approaches to improve the care for patients with OUD and other substance use disorders. Previous residents have evaluated naloxone prescribing (<https://doi.org/10.1016/j.ajem.2020.09.027>) successfully obtained funding for evaluating implementation of MOUD in King County (<https://doi-org.offcampus.lib.washington.edu/10.1002/emp2.12408>) and worked on local quality improvement processes in these areas. Future work includes improving care of patients with alcohol use disorder, methamphetamine use and improving transitions of care for these patients to outpatient settings.

## POST Elective Reflection and Debrief

Population Health Pathway residents will prepare a post-elective reflection piece and debrief with their faculty mentor to integrate their experiences. Upon completion of your program, we will contact you to schedule some time to learn from you about your experiences, and encourage you to consider the below opportunities for sharing your knowledge.

### Opportunities to share pathway reflections:

- Presentation to the program : 15-30 min during Thursday conference will be dedicated to you sharing your learnings, or can be integrated into your Grand Rounds presentation as an R4
- Case report: If you see a visually interesting case or a standard case made more challenging for diagnosis or treatment, please plan to write up/present this to our department upon your return. Consider Images in Emerg Med type publication and obtain needed permissions from patient and local supervisory community.
- Example post elective reflection summaries with focus in Social EM: [Callan Fockele](#), MD, MS, Class of 2020

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## Other Opportunities/Resources

### Advocacy Resources

- WA ACEP Resident Representative: One resident per year gets chosen from those who apply to be the resident representative to [WA ACEP](#). For those interested in health policy, how advocacy can shape policy, and our statewide medical system this is a fantastic opportunity to join with WA ACEP leadership.
- Advocacy Training: Trainings in ways to engage in written and spoken advocacy through presenting to the legislature are available as a recorded trainings (taken by GEMRH Fellows), through the Rural Equity, Leadership, and Advocacy Exchange (RELAX)- [“Op-Eds Letters to the Editor”, Dr. Amanda Stewart](#).
- [Physicians for Social Responsibility](#) (WA PSR) is a local resource of a national organization focused on advancing advocacy opportunities for physicians to improve the health of our community.

### Readings

[Top 10 SEM 2020, 2021 Journal Articles](#)

### Current SEM Initiatives at UW/HMC

- Focus (QA Initiative): This Gilead funded project aims to enhance risk-based screening of HIV and HCV in UW Ed's and link positive patients to treatment and care.  
Lead faculty: Dr. Chris Buresh, originally initiated by Dr. herbie Duber
- Project title: University of Washington's School of Medicine Service Learning Program - Uninsured Care Expansion Grant  
Principal Investigator: Herbie Duber  
Proposed project dates: 11/16/2022 – 6/30/2024  
Sponsor: US Department of the Treasury/ Washington State Health Care Authority  
Primary objective: The University of Washington School of Medicine Service Learning Program serves more than twenty clinical service learning outreach locations. Student and faculty preceptor volunteers work in collaboration with community partners to provide basic health

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services to marginalized communities who are uninsured/underinsured below 200 percent of federal poverty level and individuals experiencing homelessness, regardless of immigration status. Our ultimate goal is to create a truly interprofessional student and faculty response to the rapidly expanding healthcare needs of marginalized communities in the central Puget Sound region by utilizing the skills and expertise of the health sciences schools at the University of Washington. This funding will help us to continue to improve the health and lives of individuals who lack access to healthcare in King County. Financial support allows us to expand and improve delivery of health services provided to our clients. This support also allows us to provide referrals to our clients to promote longer-term planning and solutions for their barriers to accessing healthcare.

- Project title: Cardiac and Stroke System Evaluation  
Principal Investigators: Amber Sabbatini, Herbie Duber  
Proposed project dates: 10/1/2022 – 11/30/2023  
Sponsor: Washington State Department of Health (DOH)  
Primary objective: The goal of this project is to evaluate Washington’s acute cardiac and stroke system, and propose recommendations to improve the coordination and care of patients suffering from acute cardiovascular events.
- Project title: Patient-centered team-based primary care to treat opioid use disorder, depression, and other conditions  
Principal Investigator: Lauren Whiteside  
Project dates: 9/12/2019 – 5/31/2024  
Sponsor: National Institute of Health  
Primary objective: The major goals for this project are to implement a team-based primary care treatment model for treating patients with opioid use disorder, depression, and other conditions and test its efficacy via a pragmatic clinical trial.  
[\\*Related articles](#)
- Project title: Emergency Department Utilization and Unplanned Hospitalizations Associated with Floods in the USA  
Principal Investigator: Jeremy Hess  
Project dates: 6/24/2021– 6/30/2023

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Sponsor: Emergency Medicine Foundation

Primary objective: Our project has three specific aims (SAs). SA1 is to quantify the change in healthcare utilization, including all cause and cause-specific ED visits and HAs, including those related to mental health, from 2016 to 2018 in the TMS database, associated with flood exposure, stratified by flood intensity, from the SHELDS database. SA2 is to evaluate the degree to which social vulnerability factors identified in the literature and the Social Vulnerability Index (SoVi) index predict flood-related morbidity and mortality, using morbidity endpoints from SA1. SA3 is to measure the healthcare costs associated with healthcare utilization associated with flood exposure captured in SA1.

- Project title: Observation Stays and Readmissions for Older Adults: Implications for Medicare Policies  
Principal Investigator: Amber Sabbatini  
Project dates: 5/15/2020 – 2/29/2024  
Sponsor: National Institute of Health  
Primary objective: This study examines the contemporary national landscape of readmissions, post-discharge ED use, mortality, and acute care costs for patients with observation stays, how current Medicare payment reforms impact the use of observation stays, and how observation stays are accounted for in national quality programs.
- Project title: Human mobility and HIV care engagement among African refugees in Uganda  
Scientific Area  
Principal Investigator: Kelli O'Laughlin  
Project dates: 8/1/2020 – 12/31/2022  
Sponsor: National Institute of Health  
Primary objective: The objective of this study is to understand what aspects of refugees' movement are associated with HIV care engagement, defined as linkage to HIV care, retention in care, ART adherence and viral suppression.
- Project title: INNOVATIVE SUPPORT FOR PATIENTS WITH SARS-COV-2 INFECTIONS (INSPIRE) REGISTRY  
Principal Investigators: Kelli O'Laughlin, Graham Nichol (Dept. of Medicine – Div. of General Internal Medicine)  
Project dates: 9/1/2020 – 8/31/2023

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Sponsor: Centers for Disease Control and Prevention

Primary objective: This is a longitudinal multi-site cohort study to prospectively monitor and evaluate the physical and mental impact of COVID-19.

- Project title: PROMotion of COVid-19 VA(X)ccination in the Emergency Department – PROCOVAXED  
Principal Investigators: Kelli O'Laughlin, Graham Nichol (Dept. of Medicine – Div. of General Internal Medicine)  
Project dates: 5/24/2021 – 4/30/2024  
Sponsor: National Institute of Health  
Primary objective: The objective of this study is to partner with African American and Latino community members accessing health services through the emergency department, to understand barriers to vaccination among this population and to inform development of an intervention to share information about the risks and benefits of the vaccine. We will design and implement the intervention, evaluate its impact, and then disseminate our results to decrease the burden of COVID-19 among vulnerable individuals.
- Project title: Assisted partner notification for HIV in refugee settlements in West Nile Uganda: assessing the reach, effectiveness, adoption, implementation, and maintenance using the RE-AIM framework  
Principal Investigator: Kelli O'Laughlin  
Project dates: 5/1/2021 – 4/30/2023  
Sponsor: National Institute of Health  
Primary objective: The objective of this study is to assess assisted partner notification (APN) implementation in refugee settlements in West Nile Uganda.

## Evaluation and Mentorship

Residents will be evaluated based on meeting their self-identified Population Health and career milestones and goals, meeting quarterly with the Director of Education for the Population Health Section and with their mentors as their projects and educational pathway takes shape.

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## Milestones and Timeline

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### PGY 1-2

Establish interest in areas of Population Health and meet with potential mentors

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### PGY 2 Mid Year

Meet with the Director of Education for Population Health, and residency leadership, as well as potential other faculty mentors in the residents area of focus and apply for the pathway. Establish individualized curriculum and long term goals for away or longitudinal elective. Choose when away electives will be by mid-year.

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### PGY 3/4

Complete elective in population health, initiate longitudinal elective if chosen.

Join curriculum for Population Health Fellows and Residents, Regional Social EM and ACEP Social EM curriculum or other national organizations of interest.

Attend focused journal clubs on social EM topics, engage in local advocacy opportunities.

Initiate Research or Educational Project related to area of Interest

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