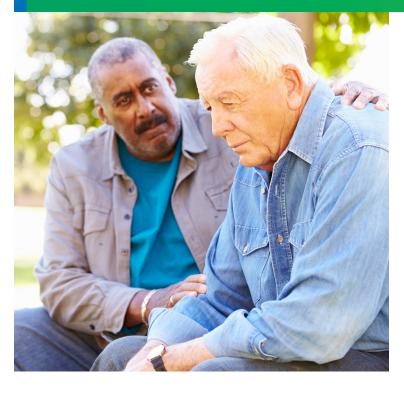
# **Community Health Improvement**

**Reduce SILOS** 

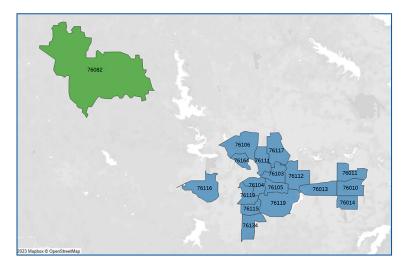
**Final** | 2023



#### Targeted ZIP Codes

**TARRANT COUNTY:** 76010, 76011, 76013, 76014, 76103, 76104, 76105, 76106, 76110, 76111, 76112, 76115, 76116, 76117, 76119, 76134, 76164

**PARKER COUNTY: 76082** 



### Partnering Entities

- Texas Health Arlington Memorial
- Texas Health Fort Worth
- Texas Health Physicians Group

#### **Program Objective**

Reduce SILOS (Social Isolation and Lift Outcomes for Seniors) is a free program for adults age 50+ designed to serve low-income individuals that report feeling lonely or socially isolated. Each participant is paired with a Community Health Worker (CHW) to create their own connectivity plan specific to their interests and community. The CHW remains available to each participant for a period of 12 months and screens the participant at 3, 6, and 12 months. The goal is to connect the individual to available resources and community activities, making an overall impact in the participant's depression, disconnectedness, and loneliness.

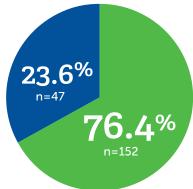
#### Statement of Need

Those impacted by social isolation or loneliness are more likely to have a health condition or physical challenge. Not being connected to friends and family can lead to a higher chance of having heart disease (29%), a stroke (32%), and dementia or loss of memory (50%). Texas Health is moving upstream to address social isolation and loneliness to improve health outcomes through the Reduce SILOS program.

#### **Looking Forward**

In December of 2023, grant funding through the American Association of Retired Persons (AARP) for the Reduce SILOS program ended. Because of Texas Health's commitment to caring for people experiencing isolation and loneliness, Reduce SILOS was integrated into its Continuum of Care (CoC) program. CoC is a free program designed to assist patients with chronic health conditions who are at high risk for readmission and poor health due to risks associated with social determinants of health (SDoH). The CHW works with patients to identify SDoH barriers that negatively impact their health and help connect them to needed resources within their community. As a result, more people will be screened and navigated to resources.

# 2020-2023 Program Data Demographic of People Served



BREAK DOWN OF PARTICIPANTS BY GENDER

MALE

■ FEMALE

67 years

Average age of Reduce SILOS participants

76119 76011 76116 76010

Most frequently represented ZIP codes

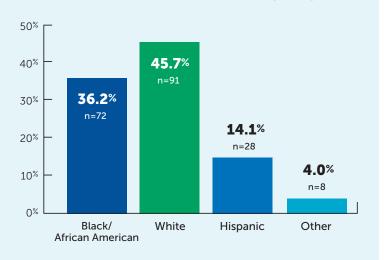
### Reduce SILOS - Demographics

#### TOTAL NUMBER OF INDIVIDUALS SERVED (n=199)



■ Percentage of individuals served in non-high-need ZIP codes

#### DEMOGRAPHIC OF PEOPLE SERVED (n=199)



## Activities/Output



Total number of patients initiating the screening tool



Of the 4,282 screened, 722 patients requested to be contacted about social services interventions



Number of participants enrolled in Reduce SILOS



Average number of referral types for social engagement and services

"It is rewarding to serve our clients, reconnecting them back to their communities and interests and seeing the positive outcomes as they improve their quality of life and overcome barriers. It is truly a blessing to witness."

SHERRY KINCADE
REDUCE SILOS COMMUNITY
HEALTH WORKER

### **Outcomes**



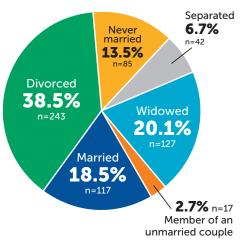
**56.3**%

Participants reduced their social disconnectedness

50.9%

Participants improved their social support

# MARITAL STATUS OF PARTICIPANTS (n=631)



70%

Participants reduced their depression scores

22.4%

Participants reduced their healthcare costs

"The program was helpful to me. It gave me options to connect to others in nontraditional ways, like Zoom group meetings and classes. It helped me stay connected more and linked me with resources that I really needed."

SHARON GEORGE | REDUCE SILOS PROGRAM PARTICIPANT

