



MICHIGAN 2-1-1 SERVICES IN THE JACKSON CARE HUB



THE 2-1-1 SYSTEM AND HOW IT WORKS

2-1-1 is a comprehensive community services ‘catalog,’ which provides a quick and easy way to access information on a wide variety of health, human and community services. Since 1997, United Ways and the Alliance of Information and Referral Systems (AIRS) have promoted the development of a national network of locally-based 2-1-1 programs to help individuals and families find help during times of personal or community crisis. Collectively, the 250 local 2-1-1 providers across the US maintain local and/or statewide databases of information on over 800,000 community service providers. The majority of listed providers address social determinants of health (SDoH) issues such as housing, food, utility assistance, and other basic needs. Individuals seeking assistance can reach 2-1-1 by phone, text, web, online chat or email to connect directly to service providers — or by utilizing a 2-1-1 ‘navigator’ for assistance. In 2017, 2-1-1s in the U.S. handled over 13 million requests for assistance at no cost to those seeking assistance. Funding to support the 2-1-1 system comes from a combination of grants, local charities, and local and state governments.

ADVANTAGES OF 2-1-1 AS THE REFERENCE ‘CATALOG’ FOR A COMMUNITY INFORMATION EXCHANGE

Current practice, in which individual community service agencies create and maintain their own ad hoc resource ‘catalogs,’ reduces agency efficiency and results in incomplete informal referral ‘networks’ with outdated or incorrect resource listings. Simply pooling these ad hoc lists, then sorting, correcting, and regularly updating them in a shared community ‘catalog’ would require significant and ongoing community effort and funding support. Regional

The Jackson Care Hub is a technical centerpiece of a broad community initiative to integrate care for physical and behavioral health, substance abuse, and social issues that directly impact personal health and self-sufficiency. It provides screenings, referrals, communication tools and data exchange functionality between community and EHR platforms.

2-1-1 organizations provide this critical service on a local level. In addition, resource listings (the ‘catalog entries’) are organized and regularly updated in a comprehensive database linked to a standard taxonomy; this enables users to search for and easily retrieve lists of local and regional resources that can provide services unique to specific zip codes.

KEY FEATURES OF 2-1-1 SYSTEMS

- 2-1-1s are community-based and maintain direct contact with service providers and their community’s networks of care. The majority of 2-1-1 organizations have deep roots in their communities and are known and trusted partners in the community services space.
- 2-1-1 standards dictate that the local database must be as comprehensive and up-to-date as possible. Every resource listing must be reviewed and updated on at least an annual basis, and organizations are never charged for their listings.
- The 2-1-1 Resource Specialists who maintain each community’s database are trained and certified to national standards.
- All resources listed in a 2-1-1 database are coded using the AIRS taxonomy, a ‘Dewey Decimal System’ for health and human services that allows precise linkage between SDoH domains and subdomains and specific services available from each listed social services provider. AIRS Taxonomy codes have been mapped to ICD-10 diagnostic codes (Z-codes) to facilitate identification of appropriate services to meet specific ICD diagnoses.
- Use of the AIRS taxonomy also enables linkage between local 2-1-1 databases to accommodate regional and statewide approaches to resource allocation (finding and referring to resources unavailable locally).

- The three most commonly used software platforms for maintaining resource information in 2-1-1 all offer APIs that provide quick and easy access to formatted data for SDOH screening and referral: this enables the creation of a single stable connection between 2-1-1 and a community information exchange ‘hub’.

In the Jackson Care Hub, an SDoH screening module identifies an individual’s specific need(s) at the subdomain level. These needs are automatically matched via AIRS taxonomy to resources listed in the local 2-1-1 resource database, and a list of available resources indexed by location is returned immediately. The client (assisted by a local service provider or 2-1-1 navigator) can choose from the available options and send an electronic referral to the selected resource. This process is both efficient and effective. It reduces the likelihood of local service providers inadvertently failing to identify local resources when working from their own ad hoc lists, and it reduces the likelihood of ‘failed’ connections through direct posting of referrals to the destination agency. And the burden of maintaining multiple connecting points, updating multiple lists, and matching needs to services, is minimized through partnership with 2-1-1.

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Learn more about Jackson County’s health initiatives at:
<https://www.co.jackson.mi.us/369/Services>

