PARTNERme

Assess Social Health with our Complete Social Care Platform

While we know that 80% of health outcomes are related to social, environmental, and behavioral factors, providers struggle to assess their clients' social health given barriers like limited time and a shortage of providers. PARTNERme takes a person-centered approach to assess social health, identify gaps and create a personalized social care plan to address them.

A Modifiable End-to-End Social Health Assessment Tool

PARTNERme assesses three dimensions of social health, including the social determinants of health, our level of social connectedness and support, and various measures of mental and behavioral health. The assessment is entirely modifiable, so you can include specific assessments like the GAD-7 anxiety screener or the PRAPARE SDOH assessment, among others.

What Sets PARTNERme Apart?

- Interactive screening technology promotes user engagement and data validity.
- Customizable email and pop-up alerts notify staff of pressing issues like suicidal ideation or abuse.
- Add any assessment or questions, including validated SDOH and pyscho-social screeners.
- Opt to collaboratively include personalized resource referrals, action steps, and set goals in the Social Care Plan.

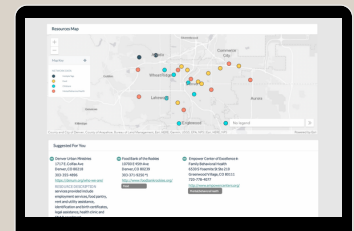## What Does a PARTNERme Social Care Plan Include?

1 Social Needs & Supports

The plan tracks self-reported patient needs and social support, highlights strengths, and finds gaps.
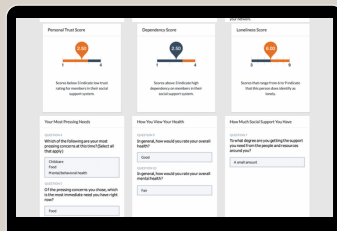
2 Social Health Summary

The plan reports loneliness, depression, dependency, and results from additional screenings.

3 Goal Setting and Referrals

Providers and patients can interact with the plan to make notes, set goals, and personalize referral recommendations.

PARTNERme Supports People, Providers and Population Health

Assessing individual social health benefits people at all scales of health, from the individual and provider to entire populations and communities. Here are some of PARTNERme's top benefits.

PARTNERme can enhance an individual's health by addressing unmet social needs and strengthening social connectedness.

Each Social Care Plan includes a road map to address unmet client social needs and adverse social connectedness. The Plan includes relevant community referrals, along with data and resources to help guide conversations and find solutions.

Strengthening the provider-client relationship can help improve outcomes and reduce costs over time.

PARTNERme assesses a patient's strengths and supports in addition to their needs. By honoring and acknowledging the assets they bring to their care, the platform can help build on our relationship and bolster trust.

Collect population-level data to advance referral systems and plan future community interventions.

PARTNERme provides real-time population and aggregate level insights into group level data, including SDOH needs and levels of social connectedness. Integrating with medical record data creates an evidence-based opportunity for intervention planning.
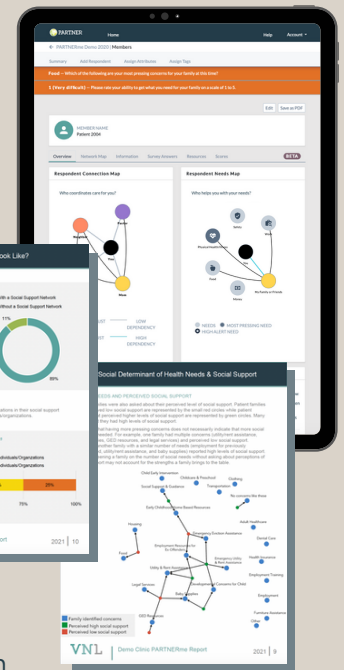
Example Projects

Our partners use the platform in numerous settings and sectors to solve a variety of problems.

Rocky Mountain Prevention Research Center
Working with a multi-partner group, RMPRC is using the platform to screen children and their families for adverse childhood experiences (ACEs).

Peak Pediatrics and Every Child Clinics
Peak and Every Child administered PARTNERme at two integrated pediatric family clinics to screen families for social needs and supports, and refer them to resources.

Westminster Medical Clinic - Denver, Colorado
WMC is using PARTNERme in primary care settings to address the connection between loneliness, social health, and health outcomes.

VisibleNetworkLabs