

## Improving Evaluation to Address Social Needs

### OVERVIEW

**The Leveraging Integrated Networks in Communities (LINC) to Address Social Needs Act**, currently before Congress, addresses the lack of coordination between social service and health organizations. Through public-private partnerships, it offers states and regions incentives to use technology to equalize access to essential services.

Section 3 of the proposed legislation focuses on evaluation, requiring the U.S. Comptroller General to assess service provider networks based on seven criteria. Research by networks expert **Michelle Shumate** and her colleagues suggests that the LINC Act should include three additional evaluative measures to encourage the effective and equitable provision of services through these networks.

The proposed networks in the LINC Act offer a chance to establish crucial connections between healthcare and social service providers. Well-designed and well-evaluated networks can fulfill essential needs, especially in underserved communities.

### FINDINGS

**Funded networks must collect and report activity metrics.** Activity metrics describe how network activity results in social impact. We find integrated networks make a social impact when they effectively

### POLICY TAKEAWAYS

- The LINC Act’s current generic measures may encourage “cream-skimming,” where providers measure the easiest-to-provide services for the least-challenging cases.
- To properly evaluate networks, Congress should require tracking for three service categories (low, mid, & high complexity).
- Separating metrics by race, ethnicity, and gender will lead to fairer service provision.



**Michelle Shumate**, an expert in interorganizational networks, examines their dynamics and impact on large social issues.

match help-seekers with the social service and healthcare organizations that meet their needs. For these networks to demonstrate their efficiency and effectiveness, our research indicates a need to collect four types of evaluation metrics:

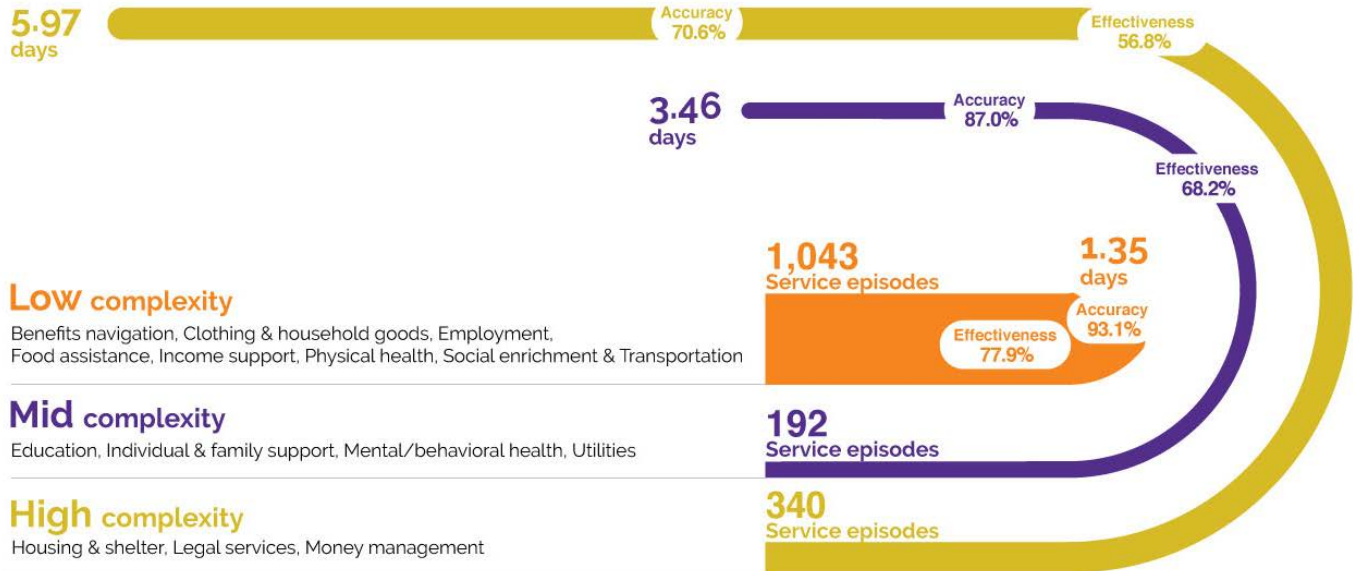
- **Quality control metrics** capture interactions between navigators and those seeking help.
- **Demand metrics** record the number and type of requests by whom to assess community needs.
- **Supply metrics** track available service and the capacity of providers to supply them.
- **Process metrics** trace the quality of referrals made, including their efficiency and outcomes.

**Community Resource Referral Technologies can collect each of these metrics** when the technologies support closed-loop referrals. Closed-loop platforms track where a help-seeker is referred and the outcomes of that referral.

**Funded networks must separately evaluate outcomes and activities by service type.** If the LINC Act promotes generic measures, it can lead to misrepresentation of network outcomes. This happens when agencies are “cream-skimming”—or promoting the easiest services to provide, such as food assistance, over more complex ones, such as navigating benefits.

**To combat “cream-skimming,” we recommend that the LINC Act track three service categories (low-, mid-, high-complexity).** We identified them by

# Cluster Analysis of Services in AmericaServes Networks



Note. Complexity refers to the complexity in service delivery, rather than the services themselves. Efficiency is measured as the median time in days to accept a referral. Accuracy is the percentage of referrals accepted by the first provider they are sent to, and effectiveness is the percentage of cases that receive the requested care. Service episodes for entrepreneurship, spiritual enrichment, sports and recreation, substance use, and wellness were excluded from the analysis.

studying the activity metrics of the AmericaServes networks—11 integrated social service networks serving veterans and military families. They use a closed-loop community referral platform that tracks **accuracy**, or if each service episode was routed to the right provider; **efficiency**, or the time to care; and **effectiveness**, or if the service was provided. The more complex the service, the lower its accuracy, efficiency, and effectiveness.

**Require funded networks to separate outcome and activity metrics by race, ethnicity, and gender.**

Studies show that coordination among health and social service organizations can lower barriers to access and improve community outcomes. Requiring separation of outcome and activity metrics will show for whom integrated networks provide the best, and worst, outcomes, allowing resource reallocation to meet the needs of underserved groups.

## METHODOLOGY

The researchers used cluster analysis to identify three categories of services, based on service complexity. They further explore the identified clusters' influence on network functioning and effectiveness through linear mixed models.

Valerie Gruest, Julia Carboni, and Amanda Bankston co-authored this research brief. The Army Research Office provided funding for the study.

## FACTS AND FIGURES

- The AmericaServes study used 30 days of 2020 service data (N = 1,575) to compare 11 networks' performance.
- This is one of the first studies to use real-time data to show how the work of care systems affects total performance.

## REFERENCES

- Carboni, J.L., C. Annis, M. Escallon-Barrios, Z. Gibson, J. Miles, N. Armstrong, G. Cantor, K. Smilowitz, and M. Shumate. 2022. *Data-driven management in networks*. IBM Center for the Business of Government Report.
- Gibson, Z. M., M. Escallon-Barrios, J.-P. Miles, C. Annis, J. Carboni, K. Smilowitz, G. Cantor, N. Armstrong, and M. Shumate. 2022. *Beyond network effectiveness: The case for network efficiency and accuracy*. IPR Working Paper (WP-22-17).
- Shumate, M. 2021. *Mapping the navigation systems of Pennsylvania: Opportunities for the future*. Pittsburgh, PA: Heinz Endowments.



Follow us: IPRatNU

www.ipr.northwestern.edu • ipr@northwestern.edu