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QIN–QIO
Quality Innovation Network -
Quality Improvement Organizations
CENTERS FOR MEDICARE & MEDICAID SERVICES
iQUALITY IMPROVEMENT & INNOVATION GROUP

Health Equity

A Guide to Screening for Social Isolation and Loneliness

Loneliness and social isolation can have significant health consequences, and most individuals are not aware of the risks. In the U.S., about 24% of individuals aged 65 and older are socially isolated. A considerable number of Americans aged 45 and older report feeling lonely. Individuals who identify as LGBTQIA+, racial/ethnic minorities, immigrants and older adults are at increased risk of feeling lonely and being social isolated. These vulnerable populations tend to have fewer social connections due to language barriers, cultural differences, stigma, discrimination, and loss of family members and friends.

Loneliness is a subjective measure of an individual's perception of isolation that can be distressing because there is a discrepancy between their preferred and actual level of connectedness. Social isolation is an objective measure of deficits in social relationships, roles, and contact with others. Loneliness and social isolation are distinct conditions that should be identified independently to better understand the root cause of each, and determine the appropriate care plan and support services.

There are significant health risks associated with loneliness and social isolation:

- Increased risk of mortality from all causes, similar to smoking, obesity, and physical inactivity.
- Associated with a 29% and 32% increased risk of heart disease and stroke, respectively.
- Associated with higher rates of depression, anxiety, and suicide.
- Increase in doctor visits, hospitalization and readmissions among older adults.
- Increased risk of dementia by 50%.

Patients experiencing loneliness or social isolation may not want to share their feelings due to stigma or discomfort and may not know where to go for help or understand the seriousness of the problem. Healthcare providers can play an important role in identifying these social risk factors and explaining the potential consequences when they see patients during routine medical visits..

Screen patients for loneliness

Use the *UCLA 3-Question Loneliness Scale* to measure self-perceived connectedness:

1. *"How often do you feel you lack companionship?"*
   Hardly ever
   Some of the time
   Often

2. *"How often do you feel left out?"*
   Hardly ever
   Some of the time
   Often

3. *"How often do you feel isolated from others?"*
   Hardly ever
   Some of the time
   Often

Patients screen positive for loneliness if they respond "some of the time" or "often" to any of the questions.

If a patient screens positive:

- First, ask the patient if they would like help.
- If they say yes, refer them to support services. Please see the Resources section of this flyer.
- Document and code* the results in the patient's electronic medical record:
  - ICD-10-CM Diagnosis Code Z60.2 (Problems related to living alone)
  - Z63.8 (Other specified problems related to primary support group)
  - Z63.9 (Problems related to primary support group, unspecified)

*Please consult with a coding specialist to ensure proper coding.

Follow these steps to address social isolation and loneliness with your patients:

1. Plan first and then start screening. Let patients know that your facility plans to screen for health related social needs so they understand why and can expect it. It's important to have a plan for referring patients to supportive services if a need is identified. Giving patients a resource list is not likely to result in their following up with support organizations. The best approach is a warm handoff; Build relationships with a network of community resources.

> Contact the IPRO QIN-QIO for help getting started and connecting with local community-based organizations that provide support services to address social isolation and loneliness.
> https://qi.ipro.org/contact-us/

2. Approach the topic in an empathetic manner to help alleviate the stigma associated with these conditions. Like any social need, social isolation and loneliness are sensitive topics. Patients may feel embarrassed or uncomfortable admitting there is a problem.

3. Incorporate culturally and linguistically appropriate services to be respectful and responsive to the needs of diverse patient populations. Provide interpretation services for patients with limited English proficiency. Be mindful of cultural and religious beliefs that may require a different approach to screening for social isolation and loneliness.

Here are some ways to introduce the topic of loneliness/social isolation to your patients:

- "It's important to talk about loneliness/isolation because it can affect your health. It's not something to be embarrassed about and I'd like to help if I can. May I ask you some questions about this?"
- "In addition to me, do you have someone you can reach out to when you need support?"
- "How are your relationships with family and friends? Do you feel like you have enough contact with them?"

Screen patients for social isolation

Use the *Steptoe Social Isolation Index* to assess for social isolation:

1. *Unmarried/not cohabiting*

   Yes

2. *Less than monthly contact (including face-to-face, by telephone, or in writing/email) with children*

   Yes

3. *Less than monthly contact (including face-to-face, by telephone, or in writing/email) with other family members*

   Yes

4. *Less than monthly contact (including face-to-face, by telephone, or in writing/email) with friends*

   Yes

5. *No participation in social clubs, resident groups, religious groups, or committees*.

   Yes

Patients with two or more "yes" responses are considered socially isolated.

If a patient screens positive:

- First, ask the patient if they would like help.
- If they say yes, refer them to support services. Please see the Resources section of this flyer.
- Document and code* the results in the patient's electronic medical record:
  - ICD-10-CM Diagnosis Code Z60.4 (Problems related to living alone)
  - Z63.8 (Other specified problems related to primary support group)
  - Z63.9 (Problems related to primary support group, unspecified)

*Please consult with a coding specialist to ensure proper coding.

Resources to address social isolation and loneliness:

- **AARP Connect2Affect**
An online resource featuring tools and information to help evaluate isolation risk, help other isolated individuals, and find practical ways to reconnect to community.
www.connect2affect.org

- **Area Agencies on Aging Eldercare Locator**
Helps older patients and their caregivers find trustworthy, local support resources for various social health concerns, including loneliness and social isolation.
800-677-1116 (TTY: 711)
Monday – Friday 9:00 AM – 8:00 PM ET
www.eldercare.acl.gov

- **EveryoneOn**
Identifies sources by zip code for low-cost internet and affordable computers to stay connected.
www.everyoneon.org

- **Far From Alone**
Provides resources to address loneliness and foster social connectedness, as well as help with financial assistance, food, medical care, and more
www.farfromalone.com

- **Foundation for Social Connection**
Engages in education, increases public awareness, promotes innovative research, and spurs the development and implementation of evidence-based models that address social isolation/loneliness and social connection. Offers a weekly research report to raise awareness of social isolation and loneliness and share the latest information through a research and scholarly lens.
https://www.social-connection.org/

- **Institute on Aging's Friendship Line**
This toll-free number is the only accredited crisis line in the country for people 60 and older and for adults living with disabilities. It offers friendly conversation and the caring ear of a trained volunteer at no cost. Available 24 hours a day, 7 days a week.
800-971-0016 (TTY: 711)

- **Mental Health America**
This community-based non-profit organization provides local and online support groups, community events, volunteer opportunities, and more.
www.mhanational.org

- **National Institute on Aging (NIA)**
The NIA website on loneliness and social isolation offers resources that providers can share with patients. There is a Social Isolation and Loneliness Outreach Toolkit with social media images, animated graphics, educational materials, and more.
www.nia.nih.gov/health/loneliness-and-social-isolation-tips-staying-connected

- **National Suicide Prevention Lifeline**
Provides 24/7, free, and confidential support for people in distress. Offers prevention and crisis resources.
Dial 988 from any phone.
www.988lifeline.org

- **SAGE LGBT Elder Hotline**
Offers the option to talk with an LGBT senior or get local resources and information.
888-234-7243 (TTY: 711)
Monday – Friday, 4:00 PM – midnight ET
Saturday, 12:00 PM – 5:00 PM ET
www.sageUSA.org

References

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