

The Why and How: Asking Social Determinants of Health Questions

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The WHY and HOW: Asking Social Determinants of Health Questions

Understanding and Choosing Tools for Practice

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Is ASHEW A SCREENING PROJECT?

NO



It's about transforming practice for Early Relational Health, recognizing the essential early relational experiences that contribute greatly to infant/toddler development and overall child and family well-being by providing 2-generational care.

from Center for the Study of Social Policy Building Relationships: Early Relational Health, May 2020





And
YES



We are helping practices integrate screening to identify risks and strengths, to implement three inextricably linked screenings: perinatal depression, social determinants of health (SDOH), and social-emotional development



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TOOLS

- Perinatal Depression – validated tools with scoring criteria
 - Edinburgh, PHQ-2/PHQ-9
- Social-Emotional Development - validated tools with scoring criteria
 - e.g. ASQ:SE-2, BITSEA, BPSC, PPSC
- SDOH – an array of tools, better described as surveillance tools, most with validated questions

How are these tools connected in practice?



THE “BIG PICTURE”- ADDRESSING FACTORS THAT INFLUENCE CHILD & FAMILY HEALTH AND WELL-BEING

- Family/Environment Risks and Protective Factors
 - Social Determinants of Health
 - Caregiver Mental Health
- Healthy Social Emotional Development
 - Promotion
 - Prevention
 - Intervention for the Dyad



CHILDHOOD ADVERSITY

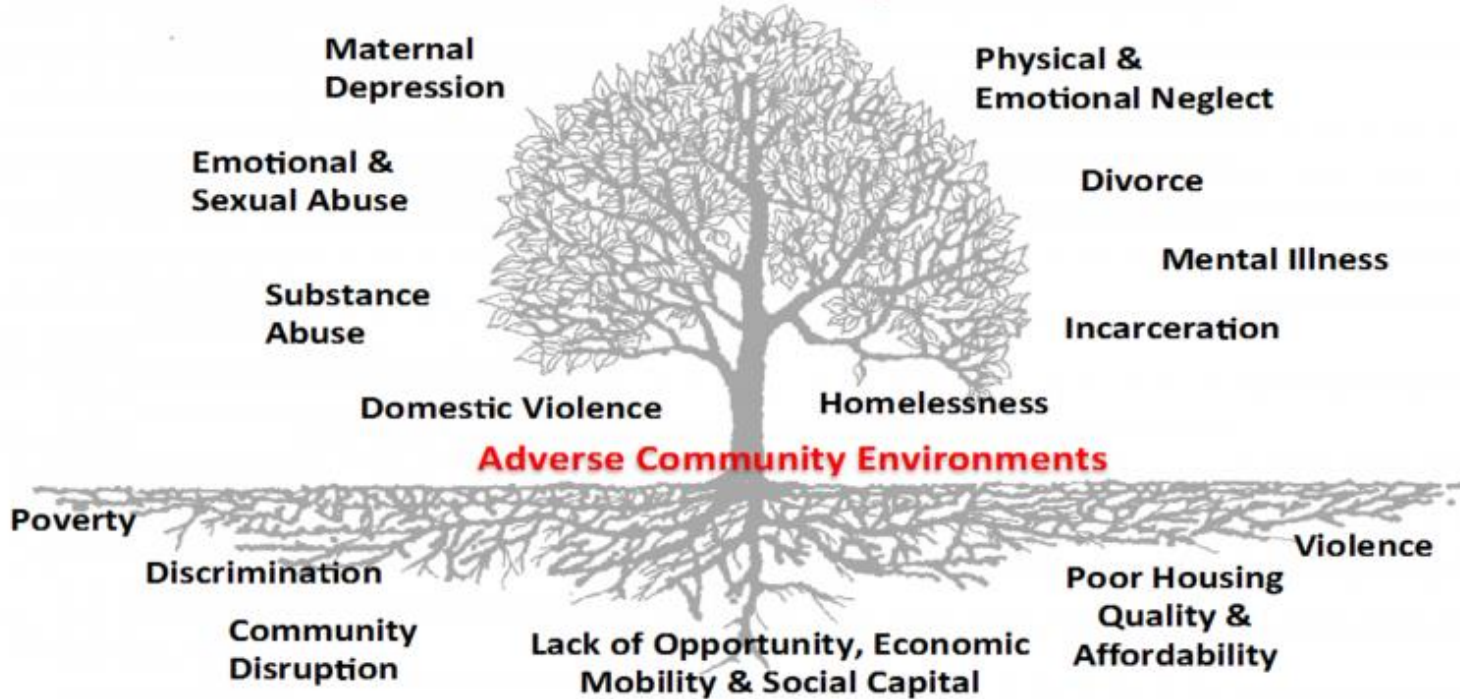
Science reveals that the environment in which children develop – family, community, and culture – impacts brain development, health and genetics

- Childhood Adversity – wide range of circumstances that pose a threat to health and well-being
 - ACEs – a subset of childhood adversities
 - Social disadvantage, including homelessness, discrimination, community violence, historical trauma, structural racism
 - Trauma – one possible outcome of exposure to adversity
- Toxic Stress – occurs when adversity is extreme, long-lasting and severe (such as chronic neglect, domestic violence, severe economic hardship, ACEs) without the buffer of a caring adult.



The Pair of ACEs

Adverse Childhood Experiences



Ellis, W., Dietz, W. (2017) A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Community Resilience (BCR) Model. *Academic Pediatrics*. 17 (2017) pp. S86-S93. DOI information: 10.1016/j.acap.2016.12.011

Social Determinants of Health



From Kay Johnson

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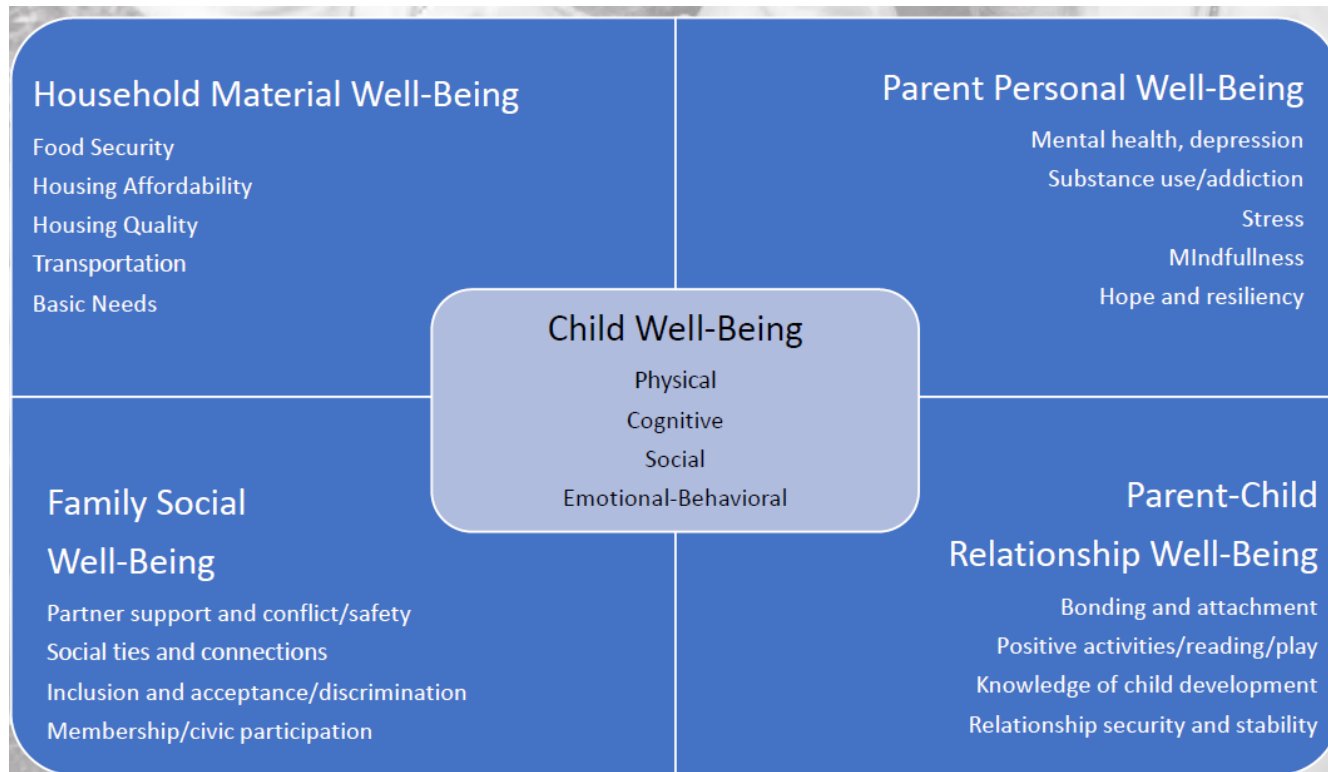
RECOMMENDATIONS FOR PEDIATRICIANS



- Recommendations:
 - Bright Futures
 - Screenings
 - Ask about parental strengths and at every well-visit
 - AAP Screening in Practices Project
 - National Advisory Board and Project I-SCRN
 - Developmental and behavioral (including social emotional), autism, perinatal depression, social determinants of health
 - AAP Mental Health
 - Psychosocial assessment (social-emotional, SDOH, ACEs) at every well visit
 - Brief mental health update at acute visits



CHILD AND ADOLESCENT HEALTH MEASUREMENT INITIATIVE (CAHMI) TECHNICAL WORKING GROUP ON SDOH SCREENING



From Charles Bruner

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SELECTING A TOOL FOR SDOH

Considerations:

- Characteristics of the community/communities served by the practice
- How families will perceive the questions – *family participation on the practice team is essential*
- Elicit protective factors/strengths as well as risks
- Periodicity – well-visits, interim visits, updates



Note that a practice may begin with a simpler/briefer tool as clinicians and staff build trauma and resilience-informed skills, and build their network of community partners



PRACTICE READINESS

Practice-wide:

- Develop and utilize a standardized, respectful, culturally appropriate message about the reason for screening
<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Screening/Pages/Communicating-with-Families.aspx>
- Share effective ways to open the conversation with a family
- Acknowledge completion of the screen and discuss strengths and risks



PRIMARY CARE INTERVENTION

- Transdiagnostic Approaches
 - **Common Factors** communication skills
 - Components of interventions common to diverse therapies; coming from family therapy, cognitive therapy, motivational interviewing
 - See HELP mnemonic
 - **Common Elements**
 - Components of therapies that apply to a group of related conditions (such as anxiety, low mood, ADHD)






Help Us Focus on What Matters Most

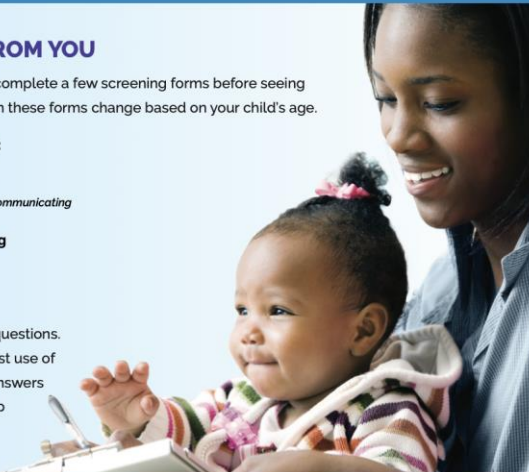
WE WANT TO HEAR FROM YOU

At most check-ups, we'll ask you to complete a few screening forms before seeing the doctor or nurse. The questions on these forms change based on your child's age.

The forms may ask questions about:

-  **Your child's development** –
how they're learning, growing, and communicating
-  **How you're doing and feeling**
-  **Life at home**

You may wonder why we ask these questions. It's simple – we want to make the best use of our time with your family, and your answers will help the doctor focus on your top questions and concerns.



YOU'RE THE EXPERT

While we're experts in children's health, you're the expert on your child. We ask these questions because there are many things outside the doctor's office that affect your child's health. We need your help to understand how your child is developing, changing, and interacting with the world – things we can't always see or measure during a check-up.

WE'RE HERE TO HELP!

Your answers on the forms give your doctor important clues about what's going well, and where you may want more support.

If you and your doctor discover that something isn't as good as it could be, we can share tools and resources to make sure you and your child get the care and support you need.



Thank you for filling out the forms,
and for helping us provide the best
possible care for your child.



In-Office Poster found
on the
STAR Center under
Connecting with
Families

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Screening/Pages/Communicating-with-Families.aspx>



LEARNING FROM COLLEAGUES: THE “NEW MEXICO THREE”

- Has anything major (traumatic, etc. - use your own terms) happened since the last time we've met
- If so, how has it had an impact on you and your family (again, whatever scope is appropriate)
- Despite that, what's been going well for you



DOCUMENTATION AND ASHEW DATA

- Data Elements
 - Screen done
 - Discussion with family (regardless of result)
 - At-risk screen?
 - Plan (primary care intervention, referral, linkage with resources)

***Most effective for data collection and tracking –
practice-wide agreement on how and where to
document in the visit note



CODING AND BILLING - SDOH

CPT

- 96160 – health risk screening

ICD-10

- Z-codes – array of Z-codes that align with social determinants categories and ACEs - useful for population data and practice planning



“CLOSING THE LOOP”

- It is possible to measure rates of screening in practice, BUT
- Continued challenges:
 - Tracking referrals – need for registry functionality in EHRs; navigators as part of practice
 - Obtaining feedback – how to standardize communication with “non-medical” partners
 - Assessing **outcomes** for children and families
- Examples of systems for feedback and follow-up
 - North Carolina NCCare360 and Healthy Opportunities
 - Help Me Grow



TOOLS WITH MULTIPLE SDOH AREAS

[Visit STAR Center](#)

- Health Leads Toolkit
- PRAPARE (Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences) FQHCs
- WE CARE (Well Child Care, Evaluation, Community Resources, Advocacy, Referral, Education Survey Instrument)
- SEEK (Safe Environment for Every Kid)
- SWYC (Survey of Well-being of Young Children)
- Family Psychosocial Screen (Pediatric Intake Form)



VISIT SCREENINGTIME.ORG

SCREENING TOOLS

Tips for using the Screening Tool Finder: Checking any of the Categories will fine-tune the number of Topics Covered displayed. If you want to see all Topics Covered, deselect all check marked Categories, and click the Topics Covered + symbol to expand the list. To view validation information for each tool, click View More.

Please note: The AAP does not approve nor endorse any specific tool for screening purposes. This table is not exhaustive, and other screening tools may be available. The STAR Center resources focus on early childhood screening. Therefore, the target population for the tools listed below is children aged 0 to 5 years. For best results, it is recommended that users review available instruction manuals prior to administering, scoring, and analyzing results of the scoring tools. While times are listed in the table below, the amount of time that it takes to complete screening and scoring will vary. Availability of a tool in multiple languages does not correlate to validation of the tool in such languages. For some tools, especially those that measure social determinants of health, extensive validation studies are not yet available.

If you have any questions or would like further assistance in selecting a tool, developing a screening process, or learning more about the importance of screening, contact the STAR Center at screening@aap.org.

Filter & Sort

Category

- Development
- Autism
- Social-emotional Development
- Maternal Depression
- Social Determinants of Health

Topics Covered

Number of Items

Title/Link	Category	Topics Covered	No. of Items	Parent Completion Time	Cost	More Info
A Safe Environment for Every Kid (SEEK) Questionnaire	Maternal Depression, Social Determinants of Health	Domestic Violence, Food Insecurity, Maternal Depression, Parental Depression, Parental Stress, Parenting, Substance Abuse	15	2 min	Varies	View more
Accountable Health Communities Core Health-Related Social Needs Screening Questions	Social Determinants of Health	Food Insecurity, Housing, Safety, Transportation	10	Less than 5 min	Free	View more
Health Leads Screening Tool	Social Determinants of Health	Exposure to Violence, Financial Security/Stress, Food Insecurity, Housing, Transportation	10	Less than 3 min	Free	View more
Hunger Vital Sign	Social Determinants of Health	Food Insecurity	2	Less than 1 min	Free	View more
Income, Transportation, Housing, Education, Legal Status, Literacy, and Personal Safety (IHHELLP)	Social Determinants of Health	Education, Housing, Income, Legal Status/Immigration, Literacy, Safety, Transportation	11-24	5 min	Free	View more
Patient Health Questionnaire-2 (PHQ-2)	Maternal Depression, Social Determinants of Health	Depression, Maternal Depression	2	3 min or less	Free	View more

Note: AAP does not recommend or endorse any one SDOH assessment tool

TOOLS FOR SPECIFIC SDOH

- Hunger Vital Sign
 - Addressing Food Insecurity: A Toolkit for Pediatricians
 - <http://ww.frac.org/aaptoolkit>
- Housing Stability Vital Sign



ACEs BASED TOOLS

- Pediatric ACEs and Related Life Event Screener (PEARLS) (NPPC ACEs at the Center for Youth Wellness)
 - Child Parent/Caregiver Report
 - Teen Parent/Caregiver Report
 - Teen Self Report
- The Children's Clinic (RJ Gillespie, MD)
 - ACE Score (parent)
 - Resilience Score (parent)



HEALTH LEADS TOOLKIT

- Essential

- Food Insecurity*
- Housing Instability*
- Utility Needs*
- Financial Resource Strain*
- Transportation*
- Exposure to Violence*

Recommended tool* has 10 questions

Additional validated questions by category to expand or customize

- Optional

- Child Care*
- Education*
- Employment
- Health Behaviors
- Social Isolation and Supports
- Behavioral/Mental Health



PRAPARE



- Items: 17-21
- Areas
 - Domestic violence
 - Education
 - Employment
 - Family Member Incarceration
 - Financial security/Stress
 - Housing
 - Safety
 - Stress
 - Transportation



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WE CARE

- Items: 6
- Areas:
 - Childcare
 - Education
 - Employment
 - Food Insecurity
 - Housing



SEEK

- Poison Control
- Smoking
- Food Insecurity
- Discipline/Behavior
- Depression
- Domestic Violence
- Substance Use



SWYC FAMILY QUESTIONS

- Smoking
- Substance Use
- Food Insecurity
- Depression
- Domestic Violence



FAMILY PSYCHOSOCIAL SCREEN

- Items: ~56
- Areas:
 - Caregiver Education
 - Family History
 - Health Habits – safety, domestic violence, guns, smoking
 - Substance Use
 - Parental Childhood Experiences – discipline, abuse, neglect
 - Depression
 - Support System



PEARLS: 3 FORMS

- Child Parent/Caregiver Report – 0-11 years, 17 questions
- Teen Parent/Caregiver Report – 12-19 years, 19 questions
- Teen Self report - 12-19 years, 19 questions
 - Section 1 – Original ACEs
 - Section 2 – Additional Early Life Stressors
 - Hardship (food, housing)
 - Caregiver serious illness/death, community violence, bullying, discrimination, separation due to foster care/immigration
 - Teens 2 additional questions – re incarceration, intimate partner violence



THE CHILDREN'S CLINIC

- ACE Score
- Resilience Score
- Comments, Questions, and Concerns
- Interest in Resources



WHAT WE ARE LEARNING

- Routinely eliciting patient/family strengths is transformative to practice
- Clinicians and patients/families can discuss social determinants - those that increase risk, and those that are protective
- Adverse Childhood Experiences (ACEs) are common, but resiliency can ameliorate their impact
- Trauma-informed care needs to include a focus on promotion and prevention as well as intervention
- Engaging the patient/family as a partner is key
- Promoting resiliency is central to addressing social determinants of health



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SCREENING RESOURCES

The AAP Resilience Project Tools

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/resilience/Pages/Clinical-Assessment-Tools.aspx>

The AAP Screening Website (STAR Center) SDOH Tools

<https://screeningtime.org/star-center/#/screening-tools>



The STAR (Screening Technical Assistance & Resource) Center

www.aap.org/screening

