Social Determinants of Health Screening: Understanding & Choosing Tools for Practice

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Robert Wood Johnson Foundation (RWJF) County Health Rankings Components

Source: http://www.countyhealthrankings.org/app/northcarolina/2016/rankings/
Using a Health Equity Lens. IM
CoIIN Learning Session 5

From Kay Johnson

Social Determinants of Health

WHO defines SDOH as the circumstances in which people are born, live, and work, and the systems in place to deal with illness. Circumstances shaped by larger forces such as economics, public policies, and politics.

Income/Poverty

Racism

Housing/Neighborhood

Social support

Education

Stress, trauma, ACE

Employment

Safety/violence

Exposure to hazards
WHO: Social Determinants of Health

- Social gradients
- Stress
- **Early childhood development**
- Social exclusion
  - Racism, discrimination
- Unemployment
  - Opportunities for education and jobs

- Social support networks
- Availability of healthy food
  - Air, housing & water
- Availability of health transportation
- Addiction
Determinant Areas: Healthy People 2020

- Economic Stability
- Education
- Social & Community Context
- Health & Health Care
- Neighborhood & Built Environment
ACEs Areas

- Abuse
  - Physical, emotional, sexual

- Neglect
  - Physical, emotional

- Household Dysfunction
  - Mental health, substance use, incarceration, separation/divorce
ACEs Dose-Response

Children with 3 or more ACEs
- 3X academic failure
- 6X behavior problems
- 5X attendance problems

Adults with 4 or more ACEs
- 7X alcoholism
- 2X cancer
- 4X emphysema

6 or more ACEs
- 30X suicide
Three Levels of Stress Response

Positive
Brief increases in heart rate, mild elevations in stress hormone levels.

Tolerable
Serious, temporary stress responses, buffered by supportive relationships.

Toxic
Prolonged activation of stress response systems in the absence of protective relationships.

Center on the Developing Child  HArvard University
Effects of Toxic Stress

- The activation of the physiologic stress response system results in increased levels of stress hormones.
- Persistent elevation of cortisol, can disrupt the developing brain’s architecture in the areas of the amygdala, hippocampus, and prefrontal cortex (PFC), and therefore ultimately can impact learning, memory, and behavioral and emotional adaptation.
- Suppresses the immune response, affects other organ systems and makes an infant, child or adult more vulnerable to infections and chronic health problems.
- Different exposures to stressors at critical times can affect how a gene is expressed (epigenetics) or how a pathway develops and subsequently the behaviors and health conditions that are manifested over the life of that person.
CAHMI Technical Working Group on SDoH Screening

Household Material Well-Being
- Food Security
- Housing Affordability
- Housing Quality
- Transportation
- Basic Needs

Family Social Well-Being
- Partner support and conflict/safety
- Social ties and connections
- Inclusion and acceptance/discrimination
- Membership/civic participation

Child Well-Being
- Physical
- Cognitive
- Social
- Emotional-Behavioral

Parent Personal Well-Being
- Mental health, depression
- Substance use/addiction
- Stress
- Mindfulness
- Hope and resiliency

Parent-Child Relationship Well-Being
- Bonding and attachment
- Positive activities/reading/play
- Knowledge of child development
- Relationship security and stability

From Charles Bruner
Examples of Social Determinants That Protect Health

- Parental knowledge and skills about child development and caretaking
- Good parental or caregiver physical and mental health
- Positive father involvement
- Strong emotional bond or attachment between infant/child and parent/caregiver
- Social supports (ie., friends, neighbors, relatives, faith-based groups, and other agencies)
- Safe and good housing
- Stable/secure home life
- High school education level or higher for parents/caregivers
- Opportunities for stable income/employment for household
- Food security for household
- Safe neighborhood with no violence
- Community resources for fresh produce, exercise, social interactions
Strengthening Families’ Five Protective Factors Model

1. Parental resilience
2. Social connections
3. Knowledge of parenting and child development
4. Concrete support in times of need
5. Social and emotional competence of children

Source: http://www.cssp.org/reform/strengtheningfamilies
Protective Factors: CSSP & AAP Guidance for PCCs

Promotion of Protective Factors

Examples:
- Reach Out and Read
- Learn the Signs, Act Early
The Conversation

- Screening is an opportunity to engage the family and to build trust
- Screening always involves a conversation
- Inquire about social determinants that are protective as well as those that confer risk
- The purpose is not to “solve” every issue immediately
- The question is “where should we start together?”
National & State Landscape

- AAP Project: Screening in Practices
- HRSA: Healthy and Ready to Learn Initiative
- NCTSN: National Child Traumatic Stress Network
- Pathways – 3rd grade reading
- DHHS NC Early Childhood Action Plan
- DHHS SDoH 4 domains: food insecurity, housing insecurity, transportation, IPV
Recommendations

- Bright Futures
  - Screenings
  - *Ask about parental strengths and Social Determinants of Health (SDoH) 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
Screening Resources

- The AAP Resilience Project Tools

- The AAP Screening Website (STAR Center) SDoH Tools

- The STAR (Screening Technical Assistance & Resource) Center
  www.aap.org/screening
Tools with Multiple SDoH Areas

- 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)
Tools for Specific SDoH

- Hunger Vital Sign
  - Addressing Food Insecurity: A Toolkit for Pediatricians
  - [http://ww.frac.org/aaptoolkit](http://ww.frac.org/aaptoolkit)

- Housing Stability Vital Sign
Tools for ACEs

- Center for Youth Wellness (Nadine Burke, MD)
  - Child
  - Teen
  - 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*

Optional
- Child care*
- Education*
- Employment
- Health behaviors
- Social isolation and supports
- Behavioral/mental health

*Recommended tool has 10 questions
Additional validated questions by category to expand or customize
PRAPARE

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

- 4 domains
  - Food insecurity
  - Housing insecurity
  - Transportation
  - Interpersonal Violence

- New health plans will be expected to screen for these and to link to and support community resources

- NC Resource Platform
CYW: 3 Forms

- Section 1 – 10 questions (original ACEs)
- Section 2 - 7-9 questions (additional early life stressors)

- Scoring: Section 1 plus Section 2
- If 0-3 without symptomatology – anticipatory guidance
- If 1-3 with symptomatology OR > 4 – refer for treatment
The Children’s Clinic

- ACE Score
- Resilience Score
- Comments, Questions and Concerns
- Interest in Resources
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
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 (ACE’s) 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
Coding Considerations

Health Risk Screen

- **96161** - of the caregiver for the benefit of the patient; e.g. maternal depression screening with the Edinburgh

- **96160** – health risk screen for the patient; According to AAP coding guidance, if the screen has a mix of questions, the code would be **96160**

Tracking and population management

- Assistance with resource planning
- Use of **Z-codes** that align with SDoH or ACEs (see handout)