Strategies for Determining the Frequency of Social Need Screening

When implementing a social need screening program, it can be challenging to identify how frequently to conduct the screening with patients. Health centers may have to explore various strategies to develop a workflow that prevents appointment backups and reduces the burden on staff. Strategies shared in the interviews included:

ASKING A SUBSET OF QUESTIONS AT DIFFERENT POINTS IN THE EXISTING WORKFLOW

EXAMPLE: One health center we spoke with did not have a dedicated staff member to ask patients all the screening questions at once. In response, the health center completed the screening by asking a different set of questions at different points in the patient encounter, and documenting responses in the EHR as they go. Touch points included:

1 Patient completes annual registration form at check in, providing demographic and insurance-related data

2 Rooming staff ask 3 UDS questions (excluding financial insecurity) once patient has been roomed

3 If the patient screens positive for any of the three UDS questions, a social work staff member administers the full screener

ESTABLISHING THE SCREENING FREQUENCY AGAINST THE LENGTH OF VISIT

EXAMPLE: One health center struggled to squeeze social need screenings into shorter appointments. In response, they embedded their social need screener into visit templates for appointments scheduled for longer than 30 minutes, including:

1 New patient visits

2 Annual physicals

3 Hospital follow-ups

LEVERAGING THE EHR TO REQUEST CERTAIN INFORMATION AT PARTICULAR TIME INTERVALS

EXAMPLE: One health center embedded their social need questions into the social history tab in their EHR, and assigned certain social need screening questions to be asked at particular time intervals, including:

1 Every Visit

2 Annually

3 As Needed

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