

# Social Determinants of Health

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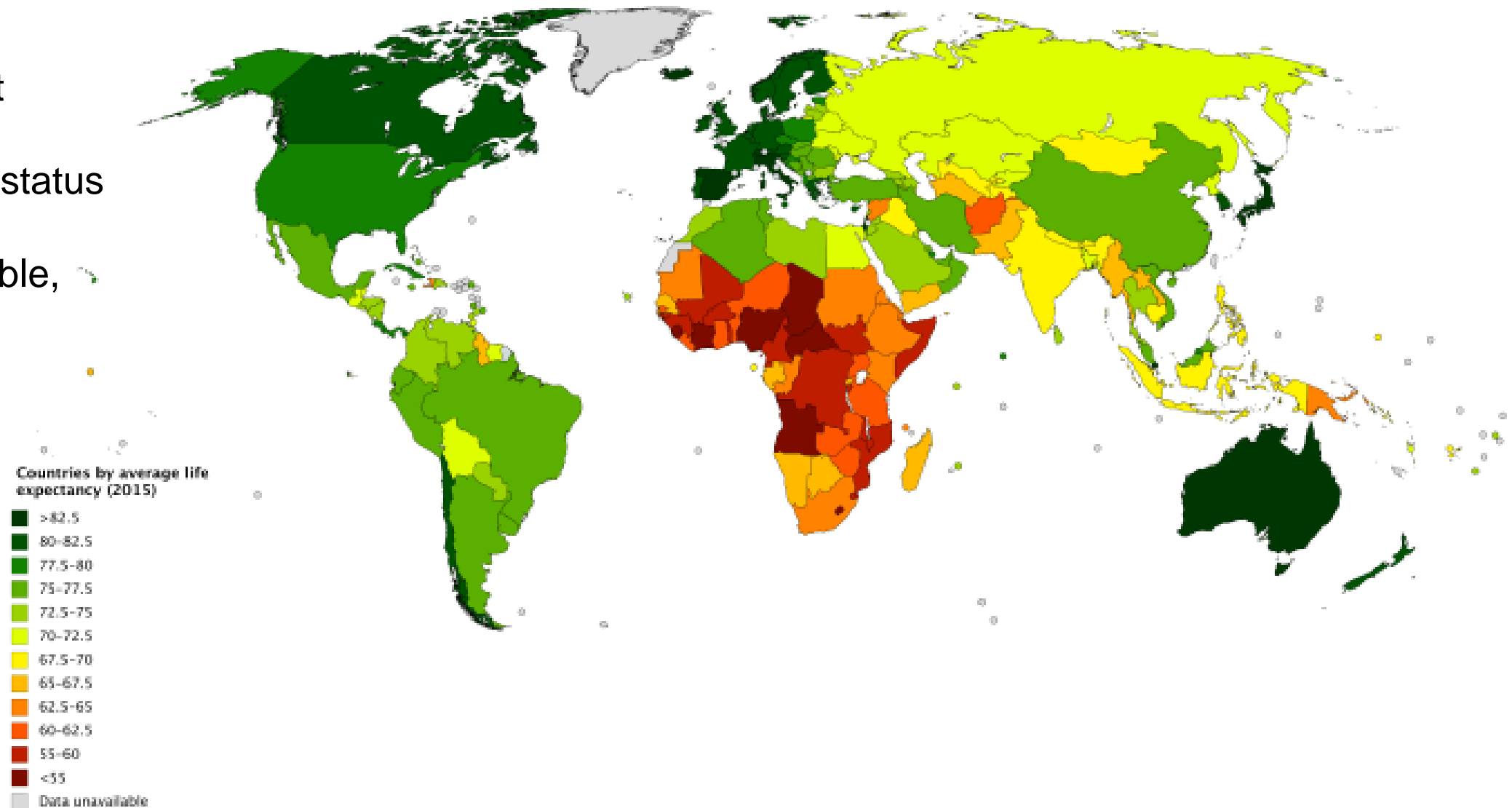
Senior Customer Success Manager, athenahealth

# Social Determinants of Health Background

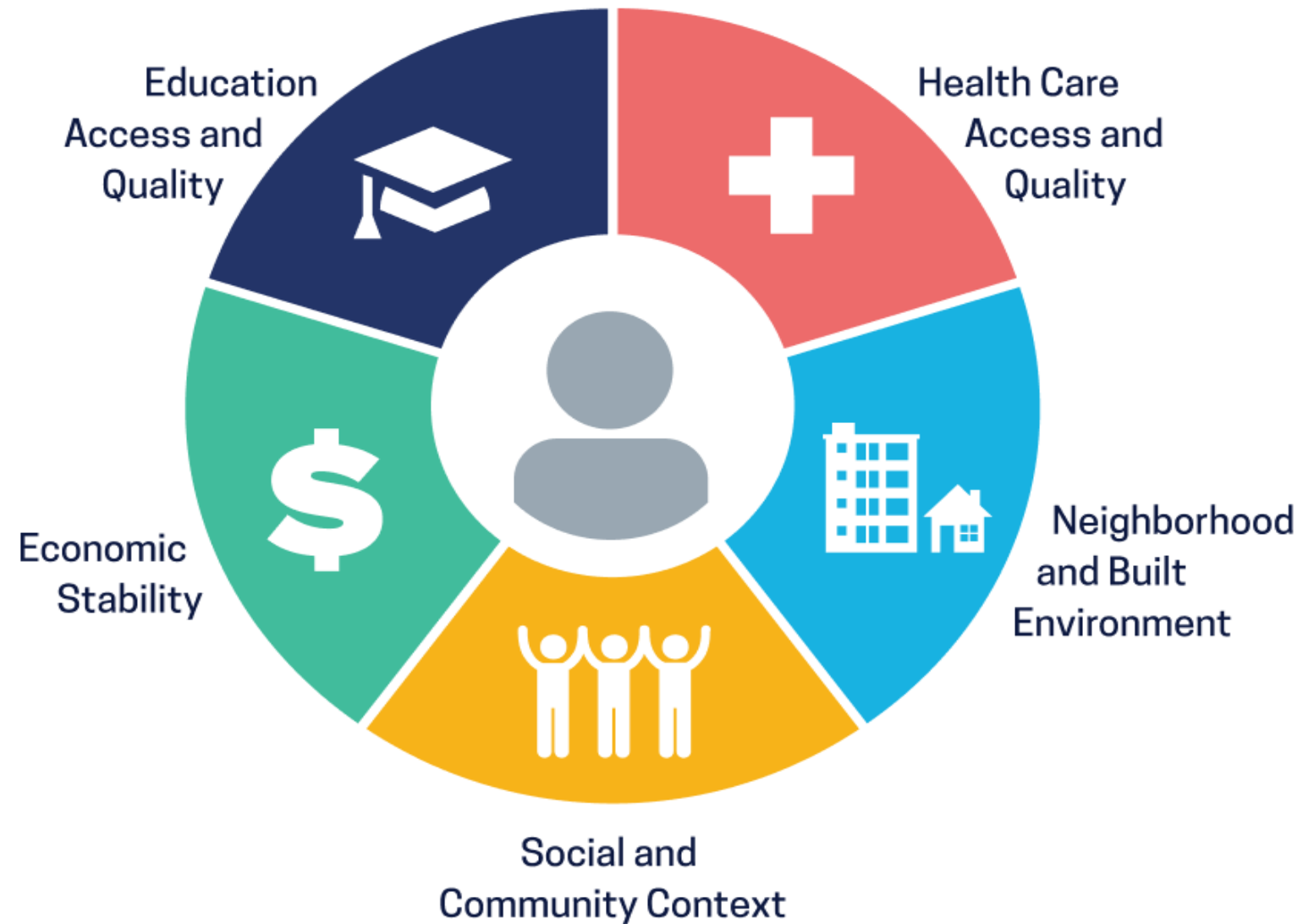
# The Commission on Social Determinants of Health

2008 WHO report served to highlight need for health equity

- Life expectancy between different countries can vary by 30+ years
- Worldwide, lower socioeconomic status is associated with worse health
- If differences in health are avoidable, their existence is unfair



# Social Determinants of Health



## Healthy People 2030


**Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.**

- Focus on “upstream” factors typically outside of the traditional delivery of health care
- Ensure the opportunity to make choices for good health by advances beyond health care
- Explore how programs and practices affect the health of individuals, families, and communities
- Establish common goals and constructive relationships between health sector and other areas related to SDOH
- Increase collaboration between Federal-, state-, local-level partners related to SDOH




# PRAPARE: Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences


- Developed by NACHC, this serves as a standardized tool for assessing and addressing SDOH.
- 21 questions covering the 5 key social determinants
- 16 Core Measures to drive population health planning
- Optional Measures: Refugee Status, Safety, Domestic Violence, and Incarceration History
- Available in 10 languages




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## PRAPARE: Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences

### Paper Version of PRAPARE for Implementation As of September 2, 2016

#### Personal Characteristics

1. Are you Hispanic or Latino?

Yes	No	I choose not to answer this question
-----	----	--------------------------------------

2. Which race(s) are you? Check all that apply.

Asian	Native Hawaiian
Pacific Islander	Black/African American
White	American Indian/Alaskan Native
Other (please write):	
I choose not to answer this question	

3. At any point in the past 2 years, has season or migrant farm work been your or your family's main source of income?

Yes	No	I choose not to answer this question
-----	----	--------------------------------------

4. Have you been discharged from the armed forces of the United States?

Yes	No	I choose not to answer this question
-----	----	--------------------------------------

5. What language are you most comfortable speaking?

English	Language other than English (please write)
I choose not to answer this question	

#### Family & Home

6. How many family members, including yourself, do you currently live with? \_\_\_\_\_

I choose not to answer this question
--------------------------------------

7. What is your housing situation today?

I have housing
I do not have housing (staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, or in a park)
I choose not to answer this question

8. Are you worried about losing your housing?

Yes	No	I choose not to answer this question
-----	----	--------------------------------------

9. What address do you live at?

Street: \_\_\_\_\_

City, State, Zipcode: \_\_\_\_\_

#### Money & Resources

10. What is the highest level of school that you have finished?

Less than high school degree	High school diploma or GED
More than high school	I choose not to answer this question

11. What is your current work situation?

Unemployed	Part-time or temporary work	Full-time work
Otherwise unemployed but not seeking work (ex: student, retired, disabled, unpaid primary care giver)		
Please write:		
I choose not to answer this question		

12. What is your main insurance?

None/uninsured	Medicaid
CHIP Medicaid	Medicare
Other public insurance (not CHIP)	Other Public Insurance (CHIP)
Private Insurance	

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13. During the past year, what was the total combined income for you and the family members you live with? This information will help us determine if you are eligible for any benefits.

	I choose not to answer this question
--	--------------------------------------

14. In the past year, have you or any family members you live with been **unable** to get any of the following when it was **really needed**? Check all that apply.

Yes	No	Food	Yes	No	Clothing
Yes	No	Utilities	Yes	No	Child Care
Yes	No	Medicine or Any Health Care (Medical, Dental, Mental Health, Vision)			
Yes	No	Phone	Yes	No	Other (please write):
I choose not to answer this question					

15. Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? Check all that apply.

Yes, it has kept me from medical appointments or from getting my medications
Yes, it has kept me from non-medical meetings, appointments, work, or from getting things that I need
No
I choose not to answer this question

### Social and Emotional Health

16. How often do you see or talk to people that that you care about and feel close to? (For example: talking to friends on the phone, visiting friends or family, going to church or club meetings)

Less than once a week	1 or 2 times a week
3 to 5 times a week	5 or more times a week
I choose not to answer this question	

17. Stress is when someone feels tense, nervous, anxious, or can't sleep at night because their mind is troubled. How stressed are you?

Not at all	A little bit
Somewhat	Quite a bit
Very much	I choose not to answer this question

### Optional Additional Questions

18. In the past year, have you spent more than 2 nights in a row in a jail, prison, detention center, or juvenile correctional facility?

Yes	No	I choose not to answer this question
-----	----	--------------------------------------

19. Are you a refugee?

Yes	No	I choose not to answer this question
-----	----	--------------------------------------

20. Do you feel physically and emotionally safe where you currently live?

Yes	No	Unsure
I choose not to answer this question		

21. In the past year, have you been afraid of your partner or ex-partner?

Yes	No	Unsure
I have not had a partner in the past year		
I choose not to answer this question		

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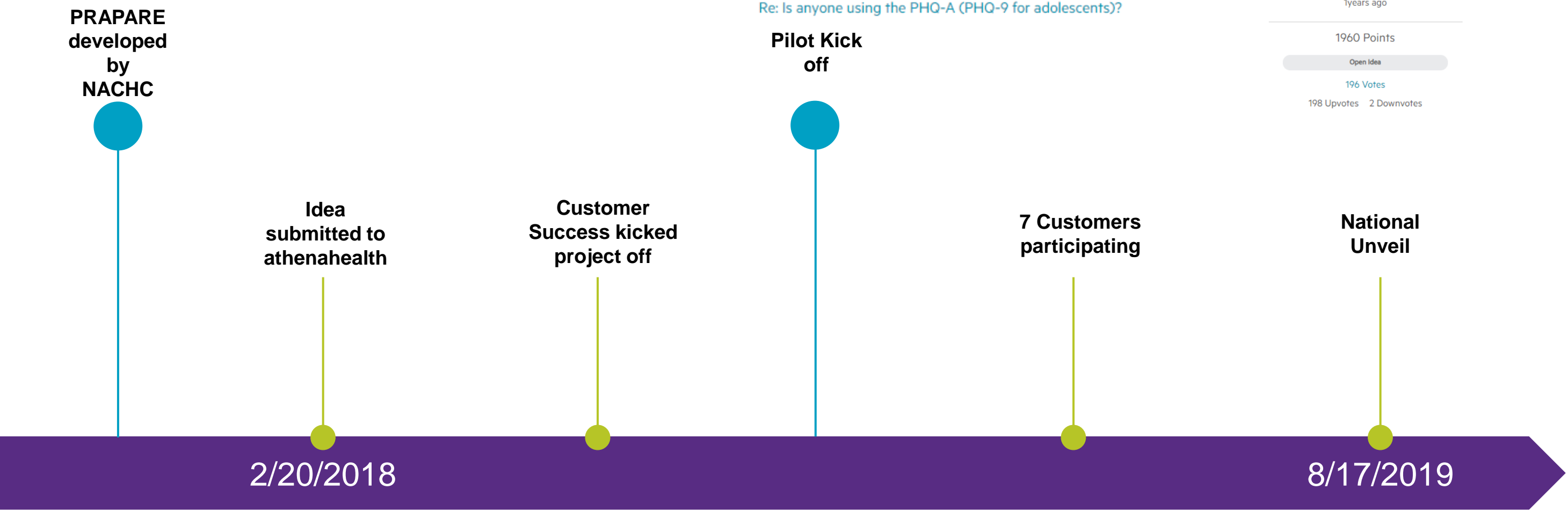
For more information about this tool, please visit our website at [www.nachc.org/PRAPARE](http://www.nachc.org/PRAPARE) or contact us at [miester@nachc.org](mailto:miester@nachc.org)

# Social Determinants and athenahealth

# PRAPARE Pilot

**465 Ideas implemented, 40,605 votes represented**

Your feedback matters, and we are listening to you in order to create the best experience possible. You can submit suggestions about our products and services. We use these ideas to help inform our development plans and projects.



## PRAPARE Action Toolkit


We are requesting Athena provide a PRAPARE (Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences) questionnaire or template. All other EHRs (eClinicalWorks, Epic, GE Centricity, NextGen) have this [PRAPARE EHR Templates - NACHC](#) but Athena does not. PRAPARE is a national effort to help health centers and other providers collect the data needed to better understand and act on their patients' social determinants of health.

[http://www.nachc.org/wp-content/uploads/2016/09/PRAPARE\\_Paper\\_Form\\_Sept\\_2016.pdf](http://www.nachc.org/wp-content/uploads/2016/09/PRAPARE_Paper_Form_Sept_2016.pdf)

It seems other practices are also looking for this support from Athena:

SDOH Documentation

[Re: Is anyone using the PHQ-A \(PHQ-9 for adolescents\)?](#)



Hannah Stella

1years ago

1960 Points

Open Idea

196 Votes

198 Upvotes 2 Downvotes



# Capturing SDOH Prapare Data within athenaNet

- Screening section of encounter
- Available in Intake, Exam, and One Stage Focus Visit
- Scores automatically upon completion
- Reportable

Screening

Next

PRAPARE x

^ PRAPARE

Status  
Incomplete

Questions Background

Personal Characteristics

1. Are you Hispanic or Latino?

☐ Yes ☐ No ☐ I choose not to answer this question

2. Which race(s) are you?

- Select -

3. At any point in the past 2 years, has season or migrant farm work been your or your family's main source of income?

☐ Yes ☐ No ☐ I choose not to answer this question

4. Have you been discharged from the armed forces of the United States?

☐ Yes ☐ No ☐ I choose not to answer this question

5. What language are you most comfortable speaking?

If "Language other than English" is selected, please document the language in the notes field at the bottom of this screening questionnaire.

☐ English ☐ Language other than English ☐ I choose not to answer this question

# Reporting within athenaNet

- Screening Questionnaires  
Report under “Other” tab
- Question and Answer version with no additional fields added.
- Additional reporting available to deep dive into SDOH data and your patient population

## Run Report: Screening Questionnaires Report

For a detailed description of the report output and filters, go to the [Success Community](#).

Encounter Date Range  to

Report Version

Questionnaire Name ☐ All ☒ Selected

Filter list

- ☐ 6CIT
- ☐ AAFP Social Needs Tool
- ☐ ABC
- ☐ ACE
- ☐ ACE for Adults
- ☐ ACQ
- ☐ AD8
- ☐ ADAM
- ☐ ADHD Rating Scale- Preschool Version
- ☐ ADHD Rating Scale; Preschool Version
- ☐ AHC HRSN
- ☐ AIMS
- ☐ ALS-FRS-R
- ☐ AM-PAC

Selected

PRAPARE

# SDOH Data

## PRAPARE Summary

1. Are you Hispanic or Latino?	Count of Patients
I choose not to answer this question	38
No	175
Yes	132
<b>Grand Total</b>	<b>345</b>

8. Are you worried about losing your housing?	Count of Patients
I choose not to answer	39
No	282
Yes	18
<b>Grand Total</b>	<b>339</b>

In the past year, have you or any family members you live with been unable to get clothing when it was really needed?	Count of Patients
I choose not to answer this question	121
No	184
Yes	16
<b>Grand Total</b>	<b>320</b>

2. Which race(s) are you?	Count of Patients
American Indian/Alaskan Native	7
Asian	2
Black/African American	8
I choose not to answer	49
Multiple Races	3
Other	14
Pacific Islander	15
White	245
<b>Grand Total</b>	<b>341</b>

10. What is the highest level of school that you have finished?	Count of Patients
I choose not to answer	53
High school diploma or GED	128
Less than high school degree	77
More than high school	87
<b>Grand Total</b>	<b>344</b>

In the past year, have you or any family members you live with been unable to get childcare when it was really needed?	Count of Patients
I choose not to answer this question	123
No	189
Yes	5
<b>Grand Total</b>	<b>316</b>

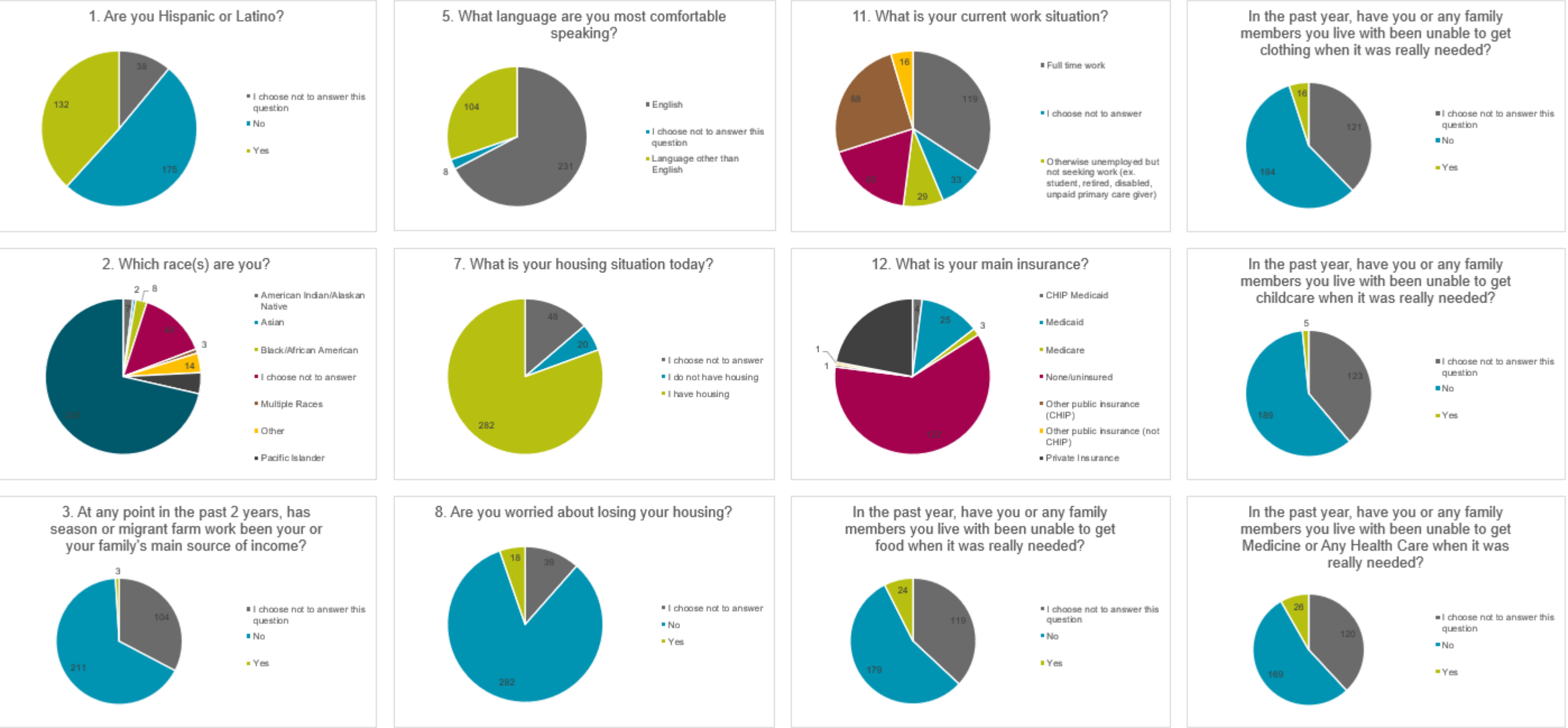
3. At any point in the past 2 years, has season or migrant farm work been your or your family's main source of income?	Count of Patients
I choose not to answer this question	104
No	211
Yes	3
<b>Grand Total</b>	<b>318</b>

11. What is your current work situation?	Count of Patients
Full time work	119
I choose not to answer	33
Otherwise unemployed but not seeking work (ex. student, retired, disabled, unpaid primary care giver)	29
Part-time or temporary work	63
Unemployed	88
Unemployed but not seeking employment	16
<b>Grand Total</b>	<b>348</b>

In the past year, have you or any family members you live with been unable to get Medicine or Any Health Care (Medical, Dental, Mental Health, Vision) when it was really needed?	Count of Patients
I choose not to answer this question	120
No	169
Yes	26
<b>Grand Total</b>	<b>314</b>

# SDOH Data

## PRAPARE Summary



# Drill down on specific factors important to your population or understand an individual patient

**Risk Group**

Patient ID	Count of Patients
3	1
101	1
2555	1
242906	1
264158	1
Grand Total	5

**Patient Ethnicity**

Hispanic or Latino/Sp...

(blank)

Dominican

Not Hispanic or Latino

**Agricultural Wo...**

(blank)

N

**What is your ho...**

I choose not to answer

I do not have housing

I have housing

**Are you worrie...**

No

Yes

**PRAPARE Questionnaire Individual Patient**

Select Patient ID: 4

Questions	Answers
Patient Ethnicity	(blank)
Agricultural Worker	(blank)
Patient Race	(blank)
Veteran Status	(blank)
Patient Language	(blank)
How many family members, including yourself, do you currently live with?	5
What is your housing situation today?	I choose not to answer
Are you worried about losing your housing?	Yes
What is the highest level of school that you have finished?	I choose not to answer
What is your current work situation?	Unemployed but not seeking work
During the past year, what was the total combined income for you and the family members you live with?	31133
In the past year have you or any of your family members been unable to get CHILD CARE when it was really needed?	Yes
In the past year have you or any of your family members been unable to get CLOTHING when it was really needed?	No
In the past year have you or any of your family members been unable to get FOOD when it was really needed?	No
In the past year have you or any of your family members been unable to get MEDICINE or HEALTH CARE when it was really needed?	No
In the past year have you or any of your family members been unable to get OTHER NECESSITIES when it was really needed?	yes
In the past year have you or any of your family members been unable to get PHONE when it was really needed?	Yes
In the past year have you or any of your family members been unable to get UTILITIES when it was really needed?	I choose not to answer
Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living?	It has kept me from MEDICAL appointments
How often do you see or talk to people that you care about and feel close to?	I choose not to answer
In the past year, have you spent more than 2 nights in a row in a jail, prison, detention center, or juvenile correctional facility?	I choose not to answer
Are you a refugee?	Choose not to answer
Do you feel physically and emotionally safe where you currently live?	No
In the past year, have you been afraid of your partner or ex-partner?	Have not had partner in past year
How stressed are you?	Very much
Patient Primary Custom Insurance Grouping	TEST
Patient Primary Insurance Package Name	*SELF PAY*
Usual Provider	drphil

## SDOH Data

- Your data can be loaded into a template that provides a macro view of the patient population
- Quickly identify trends in your patient population
- Highlight focus areas and direct care coordination efforts
- Present your data in the way that works best for you
  - Our report template offers a two views; chart and graph
- Drill down on specific factors important to your population
- Understand an individual patient



Q&A

# Thank you

**Chris Perry MSN, RN**

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