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## Social Determinants of Health Screening in Hospitalized Pediatric Patients

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**Social Determinants of Health Screening in Hospitalized Pediatric Patients** 

Lauren B. Mault The University of Tennessee, Knoxville Social Determinants of Health Screening in Hospitalized Pediatric Patients

#### **Abstract**

*Objective*: Examine effectiveness of the implementation of a social determinant screening tool for hospitalized pediatric patients. Methods: An adaptation of the WE CARE screening tool produced by Boston Medical Center was used on admission for pediatric patients admitted to an acute care children's hospital in the southeastern United States. The screening tool was implemented over a three month period from October 2021-January 2022. Based on survey results social work consults were initiated and resource connections made as needed. Disparities identified and resource connections made with the use of the survey was compared to the same three month time period of the year prior. Results: While no statistically significant findings were obtained due to a small project sample size there were several takeaways when analyzing obtained data. When compared to pre-data, there was an increase in determinant screening with the implementation of a standardized screening tool with 100% of patients being screened during implementation compared to 83.3% prior. Further, there appeared to be a reduction in social work referrals made and resource connections secured when comparing post data to predata but several factors seemed to influence these results including bias related to sample size and outlying factors to consider for patients in the project sample size. Conclusions: As it is estimated that medical care only accounts for 10-20% of overall health, with the remaining 80-90% influenced by social factors, it is of upmost importance to regularly screen for social determinants of health (Magnan, 2017). While the primary care setting is normally the main focus of determinant screening, the AAP recommends screening for social determinants at each patient encounter (AAP, 2020). The acute care setting provides a unique opportunity for social disparity screening as needs can be discovered at admission and may be resolved by discharge. Evidence supports the use of a screening tool for social determinant recognition and after the review of available tools, the WE CARE screening tool was chosen based on delivery method, accessibility, and length (Morone, 2017). The implementation of this tool has the potential to improve management and care of patients in the pediatric population and their families.

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