

Whole Child Health Alliance

Whole Child Health Delivery and Payment Model Resources

October 2022 – December 2022

CTRL + click a resource to go directly to it.

New in Pediatrics3

Adverse Childhood Experiences During the COVID-19 Pandemic and Associations With Poor Mental Health and Suicidal Behaviors Among High School Students | Centers for Disease Control and Prevention.....3

Racial and Ethnic Differences in Children’s Mental Health Services in Medicaid Before and During the COVID-19 Pandemic | Assistant Secretary of Planning and Evaluation.....3

Adolescent and Young Adult Perspectives on Quality and Value in Health Care | Academic Pediatrics..... 4

Trends in Measures of Child and Adolescent Well-being in the US From 2000 to 2019 | JAMA Network..... 4

America Needs to Invest in Pediatric Health Care | Boston Globe 4

Disparities in Housing, Health Care, Child Care, and Economic Security Affect Babies for Life | Center for American Progress.....5

Mental Health Revisits at US Pediatric Emergency Departments | JAMA Network ..5

Promoting Health Equity..... 6

In the Effort to Improve Health Equity, Terminology Matters | Health Care Transformation Taskforce6

Strategic Directions in Preventive Intervention Research to Advance Health Equity | Prevention Science.....6

Centering Equity in the Nation's Public Health System | Robert Wood Johnson Foundation.....7

Integrating Care Delivery and Social Supports 7

Federal Funding May Boost Social Determinants of Health Infrastructure | McKinsey.....7

New Federal Efforts to Address Food and Nutrition Insecurity | The Journal of the American Medical Association.....7

Aligning Care for Families..... 8

Medical Certification for Utility Shut-Off Protection and Health-Related Social Needs | Pediatrics..... 8

No Evidence the Child Tax Credit Expansion Had an Effect on the Well-Being and Mental Health of Parents Health Affairs.....	8
Survey of Child Care Providers Shows Why Families, Children, Educators, Businesses, and States Need Congress to Fund Child Care National Association for the Education of Young Children	9
Caring for Children of Incarcerated Parents Pediatrics in Review	9
Understanding Take-up of the Earned Income Tax Credit Among Californians With Low Income Health Affairs.....	10
Parental and Other Caregiver Loss Due to COVID-19 in the United States: Prevalence by Race, State, Relationship, and Child Age Journal of Community Health.....	10
Fostering Healthy Communities.....	11
Improving Health and Well-Being Through Community Care Hubs Health Affairs	11
Partnering With High-Risk Communities to Successfully Reduce Pediatric Injury Over Time Journal of Pediatric Surgery.....	11
Supporting a Diverse, Multi-disciplinary Workforce.....	12
Engaging Pediatricians to Address Workforce Diversity Pediatric Research	12
Strategies to Increase Workforce Diversity in Pediatric Infectious Diseases Journal of the Pediatric Infectious Diseases Society.....	12
Incentivizing Cross-Sector Data Partnerships.....	13
Cross-Sector Data Sharing to Address Health-Related Social Needs: Lessons Learned From the Accountable Health Communities Model Centers for Medicare and Medicaid Services.....	13
Social Needs Screening and Referral in Pediatric Primary Care Clinics: A Multiple Case Study BMC Health Services Research	13
Advancing Financing Reforms that Incentivize Optimal Health.....	14
Population-Based Payment Models Can Streamline Care and Reduce Inequities for Children with Medical Complexity Health Affairs.....	14
Assessing Quality Improvement and Performance.....	14
Social Determinants of Health Measures, Baked Into the EHR, Are Improving Patient Care Health Leaders.....	14

New in Pediatrics

[Adverse Childhood Experiences During the COVID-19 Pandemic and Associations With Poor Mental Health and Suicidal Behaviors Among High School Students | Centers for Disease Control and Prevention](#)

Authors: Kayla N. Anderson, Elizabeth A. Swedo, Eva Trinh, Colleen M. Ray, Kathleen H. Krause, Jorge V. Verlenden, Heather B. Clayton, Andrés Villaveces, Greta M. Massetti, Phyllis Holditch Niolon

Date: October 14, 2022

Type: Research Article

“Adverse childhood experiences (ACEs) are associated with poor mental health and suicidal behaviors. The prevalences of poor current mental health and past-year suicide attempts among adolescents reporting four or more ACEs during the COVID-19 pandemic were four and 25 times as high as those without ACEs, respectively. Exposure to specific ACE types (e.g., emotional abuse) were associated with higher prevalences of poor mental health and suicidal behaviors. Primary prevention and intervention strategies for ACEs and their acute and long-term impacts, including early identification and trauma-informed mental health service and support provision, could help address the U.S. child and adolescent mental health and suicide crisis.”

[Racial and Ethnic Differences in Children’s Mental Health Services in Medicaid Before and During the COVID-19 Pandemic | Assistant Secretary of Planning and Evaluation](#)

Authors: Mir M. Ali, Kristina D. West, Timothy B. Creedon

Date: October 17, 2022

Type: Issue Brief

“The COVID-19 pandemic prompted a surge in mental health treatment needs among children, with recent research documenting a more than 20% increase in the incidence of anxiety and depression in 2020. In addition, the disproportionate impact of the pandemic for many people of color, including Asian American, Native Hawaiian, Pacific Islander; American Indian, Alaska Native (AIAN); Black; and Latino populations, has been documented across various age groups, including children.” The authors “used a national Medicaid claims database to compare mental health services use among children across treatment settings, examining outcomes by race and ethnicity before and during the pandemic. This analysis seeks to inform policy initiatives in targeting racial and ethnic disparities in pediatric access to mental health services in Medicaid and Children’s Health Insurance Program.”

[Adolescent and Young Adult Perspectives on Quality and Value in Health Care | Academic Pediatrics](#)

Authors: Austin Wesevich, Megan G. Jiao, Taruni S. Santanam, Richard J. Chung, Julie Uchitel, Qintian Zhang, Claire D. Brindis, Carol A. Ford, Nathaniel Z. Counts, Charlene A. Wong

Date: October 23, 2022

Type: Research Article

The purpose of this article is “to describe adolescent and young adult (AYA) perspectives on defining quality and value in health care and to gain understanding of their knowledge of value-based payment. ... A text message-based survey was sent to a convenience sample of AYAs aged 14 to 24 in 2019. ... Common themes included accessibility (specifically affordability), coverage benefits, and care experience (including compassion, respect, and clinical competence). Young adults more commonly mentioned affordability than adolescents (54.4% vs 43.3%, $P = .001$) and more commonly felt their opinion should matter more than their parents when rating doctors (80.6% vs 62.0%, $P < .001$). ... Only 21.0% of AYAs were familiar with the potential value-based link between physician payment and care quality. AYAs’ perspectives on health care quality, including the importance of care accessibility and affordability, should be considered when designing youth-centered care delivery and value-based payment models.”

[Trends in Measures of Child and Adolescent Well-being in the US From 2000 to 2019 | JAMA Network](#)

Authors: Nathaniel W. Anderson, Daniel Eisenberg, Neal Halfon, Anna Markowitz, Kristin Anderson Moore, Frederick J. Zimmerman

Date: October 26, 2022

Type: Journal Article

“In this cross-sectional study that applied a novel composite index, the Child and Adolescent Thriving Index 1.0, to data from 12,320 national, state, and racial and ethnic population-level estimates spanning a multidimensional set of population data indicators that proxy for child and adolescent well-being. Results show national well-being index scores increased steadily from 2000 to 2019, but disparities by geographic region and race and ethnicity persisted. Findings of this study suggest that, despite increases in index scores measuring well-being over the past 2 decades, substantial work remains to be done to address the enduring inequities in child and adolescent well-being.”

[America Needs to Invest in Pediatric Health Care | Boston Globe](#)

Authors: Mary Beth Miotto, Rebecca Bell, Laura Blaisdell, Allison Brindle, Scott Schoem, Erik Shessler

Date: November 16, 2022

Type: Journal Commentary

In this article, the Presidents of the New England Chapters of the American Academy of Pediatrics urge more investments in pediatrics as inpatient beds decline and increases in workforce shortages. “Nationally, pediatric inpatient beds declined by almost 20 percent in the decade before the pandemic as hospitals shifted to more profitable adult care units. These closures resulted in fewer pediatric-trained medical and nursing staff in community hospitals. ... The government must address the pediatric workforce shortage by raising the number of pediatric-trained clinicians, investing in nursing schools, and increasing loan repayment forgiveness for all pediatric professionals.”

[Disparities in Housing, Health Care, Child Care, and Economic Security Affect Babies for Life | Center for American Progress](#)

Authors: Allie Schnieder Haliey Gibbs

Date: December 7, 2022

Type: Report

“This report adopts a comprehensive view of infant and toddler well-being as shaped by these determinant (housing, health care, child care and economic security), putting this stage of development into context between the perinatal period and early childhood.” ... “Public policy choices often neglect to recognize that human development is a continuous and cascading process, during which the cognitive, social, behavioral, and physical changes in each developmental period lay the foundation for success and well-being in the next. An interconnected and cascading set of policy solutions that likewise treats the lifespan as continuous is necessary for supporting strong outcomes. Specifically, aiming policy interventions at addressing the intersecting social determinants of health (SDOH) and well-being that underscore educational and professional attainment, family economic security, and broader quality of life promotes a holistic model of both individual and community health.”

[Mental Health Revisits at US Pediatric Emergency Departments | JAMA Network](#)

Authors: Anna M. Cushing, Danica B. Liberman, Phung K. Pham, Kenneth A. Michelson, Ara Festekjian, Todd P. Chang, Pradip P. Chaudhari

Date: December 27, 2022

Type: Research Article

“Pediatric emergency department (ED) visits for mental health crises are increasing. Patients who frequently use the ED are of particular concern, as pediatric mental health ED visits are commonly repeat visits. ... In this cohort study, data were obtained from 38 US children’s hospital EDs in the Pediatric Health Information System between 2015 and 2020. The cohort included patients aged 3 to 17 years with a mental health ED visit. There were 308 264 mental health ED

visits from 217 865 unique patients, and 13.2% of patients had a mental health revisit within 6 months. Mental health visits increased by 8.0% annually, whereas all other ED visits increased by 1.5% annually. ... Markers of disease severity and health care access were associated with mental health revisits. Directing hospital and community interventions toward identified high-risk patients is needed to help mitigate recurrent mental health ED use and improve mental health care delivery.”

Promoting Health Equity

[In the Effort to Improve Health Equity, Terminology Matters | Health Care Transformation Taskforce](#)

Authors: Health Care Transformation Task Force

Date: October 2022

Type: Issue Brief

“The Task Force released this issue brief which explores the importance, when addressing health equity, of actors using terminology that is universally agreed upon and understood. The brief analyses similarities and themes that appear across several common definitions of health equity, as well as expands on the differences between the terms “health disparities” and “health inequities.” The distinction between these terms is important, given that health disparities can exist without fault of the system whereas health inequities are unjust and avoidable differences in care. The brief also discusses how health equity can be better achieved by transforming the system away from fee-for-service reimbursement, and toward value-based payment.”

[Strategic Directions in Preventive Intervention Research to Advance Health Equity | Prevention Science](#)

Authors: Rhonda C. Boyd, Felipe González Castro, Nadine Finigan-Carr, Scott K. Okamoto, Allison Barlow, Bo-Kyung Elizabeth Kim, Sharon Lambert, Jacqueline Lloyd, Xinzhi Zhang, Crystal L. Barksdale, Daniel M. Crowley, Mildred Maldonado-Molina, Ezemenari M. Obasi, Anne Kenney

Date: December 5, 2022

Type: Journal Article

“As commissioned by the Society for Prevention Research, this paper describes and illustrates strategic approaches for reducing health inequities and advancing health equity when adopting an equity-focused approach for applying prevention science evidence-based theory, methodologies, and practices. We introduce an ecosystemic framework as a guide for analyzing, designing, and planning innovative equity-focused evidence-based preventive interventions designed to attain intended health equity outcomes. ... A general goal is to apply prevention science knowledge to design, widely disseminate, and implement culturally grounded interventions that incrementally attain specific health equity outcomes

and an intended health equity goal. We conclude with recommendations for conducting equity-focused prevention science research, interventions, and training.”

[Centering Equity in the Nation's Public Health System | Robert Wood Johnson Foundation](#)

Authors: The Robert Wood Johnson Foundation

Date: December 7, 2022

Type: Issue Brief

“In this issue brief, Centering Equity in the Nation’s Public Health System, the Robert Wood Johnson Foundation offers the following five considerations to complement the equity component that the Centers of Disease Control and Prevention raised in its Moving Forward initiative: make a holistic approach to equity across the organization, and position and resource equity efforts for success; earn the trust of communities directly impacted by health injustice and support community-based health infrastructure; measure progress and hone strategy based on the experiences and outcomes of people most affected by structural discrimination; communicate accessibly and strategically with attention to messages, mindsets, and misinformation; and value equity when recruiting, training, and evaluating staff and when conceptualizing public health expertise.”

Integrating Care Delivery and Social Supports

[Federal Funding May Boost Social Determinants of Health Infrastructure | McKinsey](#)

Authors: Fadesola Adetosoye, Tamara Baer, Jessica Kahn, Savannah Leonard, and Alex Mandel,

Date: November 1, 2022

Type: Journal Article

“Federal-funding mechanisms represent an often-underused funding source for public- and private-sector stakeholders when enhancing social determinants of health (SDoH) data, analytics, and technology infrastructure. ... This article describes four federal financing mechanisms that are available to support SDoH data and analytics efforts and considerations for accessing them. While these insights primarily focus on possibilities for state Medicaid agencies, there are implications and potential opportunities for stakeholders across the ecosystem. This analysis is not exhaustive; rather, it provides a helpful starting point for planning and forming partnerships to support SDoH.”

[New Federal Efforts to Address Food and Nutrition Insecurity | The Journal of the American Medical Association](#)

Authors: Miranda Lynch-Smith, Sara N. Bleich, Benjamin D. Sommers

Date: November 10, 2022

Type: Journal Article

“In September 2022, the Biden administration hosted the White House Conference on Hunger, Nutrition, and Health, releasing a national strategy for action by federal agencies and many other entities, with the goal of ending hunger and reducing diet-related diseases and disparities by 2030. Given the interplay between nutrition, other social drivers, and health, the US Department of Health and Human Services (HHS) and the US Department of Agriculture (USDA) are both addressing food and nutrition security. ... The USDA administers more than 15 nutrition assistance programs serving roughly one-quarter of US residents each year. ...Both the HHS and the USDA are collaborating to leverage programs addressing poverty and early childhood development to support outreach and increase enrollment across programs. The Biden administration’s recent policy change to allow children receiving SNAP (Supplemental Nutrition Assistance Program) to be automatically eligible for Head Start is one such pathway.”

Aligning Care for Families

[Medical Certification for Utility Shut-Off Protection and Health-Related Social Needs | Pediatrics](#)

Authors: Julia Rosenberg, Alice Rosenthal, Suzanne Castillo; Emily Edwards, Caroline Erickson; Patricia Nogelo, Ada M Fenick

Date: October 13, 2022

Type: Research Article

“Children in families facing energy insecurity have greater odds of poor health and developmental problems. In this study of families who requested and received medical certification for utility shut-off protection and were contacted by our Medical Legal Partnership (MLP), (the researchers) aimed to assess concurrent health-related social needs related to utilities, housing, finances, and nutrition. ... Patients who were contacted by an MLP after receiving medical certification for utility shutoff protection were found to have challenges paying for utilities and faced multiple food, housing, and financial stressors. Through consultation and completion of medical forms for utility shutoff protection, pediatricians and MLPs can provide resources and advocacy to support families’ physical, emotional, and psychosocial needs.”

[No Evidence the Child Tax Credit Expansion Had an Effect on the Well-Being and Mental Health of Parents | Health Affairs](#)

Authors: Benjamin Glasner, Oscar Jiménez-Solomon, Sophie M. Collyer, Irwin Garfinkel, and Christopher T. Wimer

Date: November 2022

Type: Research Article

“In 2021 a temporary expansion to the child tax credit (CTC) increased the size of payments, extended payments to families with low or no earnings, and distributed payments monthly instead of annually. Quasi-experimental evidence from the US and experimental evidence from low- and middle-income countries shows that moderate-to-large cash transfers improve subjective well-being and mental health. (The authors) estimated the CTC’s expansion’s effects on the subjective well-being and mental health of adult recipients, using data from the Understanding America Study, a nationally representative survey with more than 7,000 respondents and more than 2,700 unique respondents with children. (The authors) found no evidence that the CTC expansion had a significant short-term impact on measures of life satisfaction, anxiety, and depression symptomology among adult recipients. We speculate that the null effects may be due to the expansion’s temporary nature.”

Survey of Child Care Providers Shows Why Families, Children, Educators, Businesses, and States Need Congress to Fund Child Care | National Association for the Education of Young Children

Authors: Meghan Salas Atwell, Gillian Frank, Lauren Hogan, Lucy Recio

Date: November 2022

Type: Report

“Families can’t find or afford child care because compensation is too low to attract and retain early childhood educators. As federal relief dollars that have saved the sector from complete collapse begin to dry up, the stability those dollars brought to programs will disappear with the funding. The solutions are clear: The public benefits from public investments in child care and early learning. Congress needs to build on the successes of child care funding to prioritize additional, sustainable investments that ensure programs and educators can meet the needs of families, children, and businesses, and states can continue to build towards an early childhood education system that works. Survey results show 75% of child care directors and 86% of family child care owners who responded said their programs had received stabilization funds. One-third said their program would have closed permanently without them.”

Caring for Children of Incarcerated Parents | Pediatrics in Review

Authors: Rosemary A. Martoma, Kelly J. Kelleher, Alex R. Kemper

Date: November 1, 2022

Type: Journal Article

“By age 18, one in fourteen American children has had a parent incarcerated. Although children from all backgrounds experience parental incarceration, racial and ethnic minority groups and those living in poverty are disproportionately affected. Parental incarceration is an adverse childhood experience that can negatively affect health and well-being over the life course. However, resilient children of incarcerated parents can flourish despite profound adversity. Pediatric

providers should create safe, inclusive medical homes that foster sensitive disclosures and discussions about parental incarceration. If pediatric providers identify parental incarceration, they should promote foundational relationships and family resilience (including relationships with incarcerated parents when appropriate) and consider referrals to mental health specialists and specialized programs for children of incarcerated parents. Pediatric providers are also uniquely positioned to advocate for partnerships and policies that support children of incarcerated parents.”

Understanding Take-up of the Earned Income Tax Credit Among Californians With Low Income | Health Affairs

Authors: Rita Hamad, Wendi Gosliner, Erika M. Brown, Mekhala Hoskote, Kaitlyn Jackson, Elsa M. Esparza, Lia C. H. Fernald

Date: December 2022

Type: Research Article

“The Assessing California Communities’ Experiences with Safety Net Supports (ACCESS) Study interviewed 411 EITC-eligible Californians with young children to understand low take-up of the federal EITC (Earned Income Tax Credit) and California’s supplemental CalEITC. Interviews were conducted in English and Spanish in 2020 and 2021 to gather information on sociodemographic characteristics, tax filing, and EITC receipt (verified via tax forms). Among those eligible for the EITC or CalEITC, 9 percent of participants did not file taxes; among those who did file taxes, about 84 percent received the EITC, and 83 percent received the CalEITC. ... These findings can inform policies and community interventions to increase EITC take-up and thereby help address health equity.”

Parental and Other Caregiver Loss Due to COVID-19 in the United States: Prevalence by Race, State, Relationship, and Child Age | Journal of Community Health

Authors: Dan Treglia, J. J. Cutuli, Kamyar Arasteh, John Bridgeland

Date: December 14, 2022

Type: Research Article

In this article, researchers “estimate the number of children who lost a parent or other co-residing caregiver to COVID-19 in the U.S. and identify racial, ethnic, and geographic disparities by aligning COVID-19 death counts through mid-May 2022 with household information from a representative sample of individuals. We estimate that 216,617 children lost a co-residing caregiver to COVID-19; 77,283 lost a parent and more than 17,000 children lost the only caregiver with whom they lived. Non-White children were more than twice as likely as White children to experience caregiver loss, and children under 14 years old experienced 70% of caregiver loss. These losses are a salient threat to the functioning of families and the communities in which COVID-19 deaths are concentrated... on historically disadvantaged populations.”

Fostering Healthy Communities

[Improving Health and Well-Being Through Community Care Hubs | Health Affairs](#)

Authors: Andre Chappel, Kelly Cronin, Kristie Kulinski, Amelia Whitman, Nancy DeLew, Karen Hacker, Arlene S. Bierman, Samantha Wallack Mekler, Susan C. Monarez, Kate Abowd Johnson, Ellen-Marie Whelan Douglas Jacobs Benjamin D. Sommers

Date: November 29, 2022

Type: Journal Article

“Multistakeholder collaborations to address SDOH have flourished in recent years and have informed what is needed to develop a sustainable operating infrastructure between health care and CBOs (community-based organizations) to address health-related social needs. This infrastructure is increasingly provided by community care hubs (hubs)—community-focused entities supporting a network of CBOs providing services addressing health-related social needs—which centralize administrative functions and operational infrastructure. Hubs can benefit from multistakeholder community governance and planning, similar to what occurred in a number of the accountable health community model implementations. This article discusses “the role of functions of hubs, provide examples of these organizations, and explore policy opportunities to maximize their role.”

[Partnering With High-Risk Communities to Successfully Reduce Pediatric Injury Over Time | Journal of Pediatric Surgery](#)

Authors: Kasiemobi Pulliam, Dawne Gardner Patrick Edmunds, Suzanne Moody Nichole Aldridge; Stephanie Lyons, Todd Jenkins, Meera Kotagal, Rebeccah L. Brown, Richard A. Falcone Jr.

Date: December 16, 2022

Type: Journal Article

“Injury is the leading cause of childhood morbidity and mortality. Injury prevention (IP) initiatives are often created in isolation from the communities most affected. (The researchers) hypothesized that the use of a comprehensive approach to injury prevention through community partnerships will result in a measurable reduction in pediatric injuries. ... Using trauma registry data, (the researchers) compared injuries rates in targeted communities with non-intervention communities county-wide over an eight-year period. Between 2012 and 2019, nearly 4,000 families received home safety equipment and education through community partnerships. Over this 8-year time period, the injury rates significantly decreased by 28.4%, across the eight targeted high-risk communities, compared to a 10.9% reduction in non-intervention communities across the county.”

Supporting a Diverse, Multi-disciplinary Workforce

[Engaging Pediatricians to Address Workforce Diversity | Pediatric Research](#)

Authors: Elena Fuentes-Afflick, Scott A. Shipman, Benard Dreyer, James M. Perrin, Gary L. Freed

Date: October 22, 2022

Type: Journal Comment

“To achieve greater representation, the physician workforce must diversify in an unprecedented fashion, which will require intentional, longitudinal commitments at multiple levels, from individual physicians to the entire profession. The authors believe that pediatrics is well positioned to drive change because we care for the most diverse segment of our society, our training prepares us to understand how individual, family, and community factors shape children’s life experiences, and we have a long, successful history of advocating to improve child health and wellbeing.” This article outlines “strategies and ideas to engage all pediatricians to promote workforce diversity.”

[Strategies to Increase Workforce Diversity in Pediatric Infectious Diseases | Journal of the Pediatric Infectious Diseases Society](#)

Authors: Tanya Rogo, Sabina Holland, Magali Fassiotto, Yvonne Maldonado, Tuhina Joseph, Octavio Ramilo, Katrina Byrd, Shirley Delair

Date: December 2022

Type: Journal Article

“The number of physicians who are underrepresented in medicine within the pediatric infectious diseases workforce remains disproportionate compared to the US population. Physician workforce diversity plays an important role in reducing health care disparities. Pathways to careers in pediatric infectious diseases require that a diverse pool of students enter medicine and subsequently choose pediatric residency followed by subspecialty training. Efforts must be made to expose learners to pediatric infectious diseases earlier in the education timeline. Along with recruitment and creation of pathways, cultures of inclusivity must be created and fostered within institutions of learning along the entire spectrum of medical training.”

Incentivizing Cross-Sector Data Partnerships

[Cross-Sector Data Sharing to Address Health-Related Social Needs: Lessons Learned From the Accountable Health Communities Model | Centers for Medicare and Medicaid Services](#)

Authors: Centers for Medicare & Medicaid Services

Date: October 2022

Type: Issue Brief

“Effective data sharing can streamline referrals and improve care coordination for patients, as well as enable more systematic reporting and analysis of HRSNs (Health Related Social Needs) at the community level. ... In February and March of 2022, Mathematica conducted a series of focus groups and interviews with 26 participants, including 19 bridge organizations, one health information exchange partner, three health care provider partners, and three CBO partners. Discussions explored whether and how HRSN data were shared with clinical and community partners, used to inform clinical care, or used to advance equity.”

[Social Needs Screening and Referral in Pediatric Primary Care Clinics: A Multiple Case Study | BMC Health Services Research](#)

Authors: Rachel E. Massar, Carolyn A. Berry & Margaret M. Paul

Date: November 17, 2022

Type: Research Article

“Unmet social risks such as housing, food insecurity and safety concerns are associated with adverse health outcomes in adults and children. Experimentation with social needs screening in primary care is currently underway throughout the United States. ... To describe common implementation barriers and facilitators, (the researchers) conducted 48 in-depth qualitative interviews with leadership, providers and staff between November 2018 and June 2019 as part of a multiple case study of social needs screening and referral programs based out of four pediatric ambulatory care clinics in New York City. ... Effective implementation strategies included tailoring screening tools to meet the needs of families seen at the clinic and reflect the resources available in the community, hiring dedicated staff to manage the program, building strong and lasting partnerships with community-based organizations, establishing shared communication methods between partners, and utilizing technology for efficient tracking of screening data.”

Advancing Financing Reforms that Incentivize Optimal Health

Population-Based Payment Models Can Streamline Care and Reduce Inequities for Children with Medical Complexity | Health Affairs

Authors: Paige Bhansali, Adam Boehler, Alison Curfman

Date: October 12, 2022

Type: Journal Article

“Children with medical complexities (CMC) experience fragmented, uncoordinated, or unavailable outpatient health care; inadequate home health services; high admission and readmission rates; and large health care costs. As a result, families experience high out-of-pocket expenses, higher rates of employment instability, financial issues, dissatisfaction, and stress. Prior work has suggested that the presence of pediatric medical complexity itself is a primary determinant of health care inequity.” This article outlines strategies that can be adopted from adult population-based payment models, such as a focus on equity considerations specific to the pediatric population and incorporating social risk.

Assessing Quality Improvement and Performance

Social Determinants of Health Measures, Baked Into the EHR, Are Improving Patient Care | Health Leaders

Authors: Scott Mace

Date: November 4, 2022

Type: Journal Article

“The Memorial Healthcare System is focusing on food, housing, and transportation to help reduce unnecessary ED visits and boost care quality. A Florida health system is putting social determinants of health right into the electronic health record problem list, where doctors can see and act on them. Spearheading this initiative is Jennifer Goldman, DO, chief of Memorial Primary Care at the six-hospital Memorial Healthcare System, based in Hollywood, Florida. In this interview with HealthLeaders, Goldman explains how SDOH is embedded in the EHR and used to improve outcomes.”