

---

## FHCQ | Social Needs and Health Equity Steering Committee

Social Needs Screening Workgroup

July 20<sup>th</sup>, 2022 | 2:00 – 3:00 p.m.

Virtual

---

### MEMBERS PRESENT

---

Andrew Breukman, Community Health Plan of  
Washington

Erin Darrah, Molina Healthcare  
Judy Nelson, HICOR Fred Hutch

### STAFF AND MEMBERS OF THE PUBLIC

---

Nick Locke, MPH, Bree Collaborative

### WELCOME

---

Nick Locke, Bree Collaborative, welcomed the group to the Social Needs Screening workgroup, an ad-hoc workgroup of the Social Needs and Health Equity Steering Committee. Members introduced themselves and their current work with addressing social needs in a healthcare setting.

As new members were present for their first meeting, the group did not vote on June minutes.

### REVIEW: CHARTER AND SCOPE

---

Mr. Locke shared the priorities for social needs screening that had been discussed in the June meeting. New members provided feedback.

- “Criteria for screening tool” was clarified to apply to the tool and its capabilities, including domains and data capabilities.
- Workgroup members added a priority about how to plan to implement social need screening tools – including how to collaborate with staff and patients and phase up a smaller pilot.
- Stratifying patients by high-risk or low-risk for social need may be important. Some screening tools include a scoring rubric to help triage patients.
- Different locations may require different workflows. It may be best to point to several workflow examples, not necessarily develop new workflows. Workgroup members agreed to focus on clinical spaces.
  - Some examples of WA screening workflows include Seattle Children’s, Kaiser Permanente, and VM. It may be good to invite members from these organizations to the conversations.

### DISCUSSION: DELIVERABLES AND NEXT STEPS

---

Based on the discussion for priorities, Mr. Locke asked members what deliverables would be useful.

- Evidence for Screening: workgroup members agree that additional evidence for screening would be useful. SIREN may provide some national resources, but it would be useful to include both research and stakeholder interviews.
- Example Workflows: as discussed during the charter and scope conversation, this workgroup will find sample workflows for screening that may be adopted by other organizations
- All the different pieces of the deliverable may be one full report that moves from evidence to examples to recommendations for scaling up.
  - Recommended resources for WA may cut through the issue of resource overload.
  - Examples from WSHA/WSMA, HCA, and community clinics may be useful.
  - Pieces of the report should also discuss reimbursement and coding of screening results.

Based on the conversation, the next step is to begin to consolidate resources and examples of screening workflows in Washington state. Mr. Locke will work on finding a shared drive for the workgroup's resources for future work.

#### **PUBLIC COMMENT AND GOOD OF THE ORDER**

---

Mr. Locke invited final comments, then thanked everyone for attending. The workgroup's next meeting will be held on Wednesday, August 17<sup>th</sup> from 2:00 – 3:00 PM.

DRAFT