















Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

Article /Doc #	Author/Institution	CMS Determinants	Other Determinants	Mitigation/ Referral of SDH	Evidence Rating (Level/Quality)		Public Domain/ Authorization/ Licensing
1	Minnesota Self-Sufficiency Matrix  Minnesota Housing Self Sufficiency Matr	Housing, food, mobility, safety	Community involvement, parenting skills, legal, mental health, SA, disabilities, employment, income, child care, education, insurance, life skills, family/social support	Yes  Minnesota Housing Self Sufficiency Matr	NA	NA	Unknown
2	Yakima WA using "Arizona Self-Sufficiency Matrix  Yakima County Using-the-Arizona-S	Housing, food, mobility, safety	Community involvement, parenting skills, legal, mental health, SA, disabilities, employment, income, child care, education, insurance, life skills, family/social support	Yes	NA	NA	Unknown
3	Snohomish County, WA Self-Sufficiency Matrix  The Snohomish County Self Sufficier	Food, housing, safety, transportation	Access, employment, child-care, clothing, education, language, ADL, income, legal, life skills, mental health, parenting skills, physical health, SA, support system,	No	NA	NA	Unknown
4	Oregon Food Insecurity Screening  Oregon Screening_Question	Food	None	Yes  Oregon Screening Food Insecurity and	V	C	Unknown
5	U.S. Agriculture Food Security  U.S. ADULT FOOD SECURITY SURVEY M	Food	None *other versions of tool; intended for researchers (peds, Spanish, shorter) https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/survey-tools/	No	III	A	Public

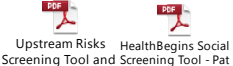
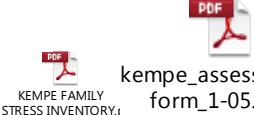



Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

Article /Doc #	Author/Institution	CMS Determinants	Other Determinants	Mitigation/ Referral of SDH	Evidence Rating (Level/Quality)		Public Domain/ Authorization/ Licensing
6	Sea Mar Social History Tool  SEA_MAR_AdultSocialHistory.pdf	Food, housing, safety	Stress, education, aspirations	No	NA	NA	Unknown
7	U.S. VA Homelessness Screening  VA_Homelessness_Screening_Clinical_Re	Housing	None	No	V	C	Public
					<i>Creating evidence</i>		
8	Pinto et al. (2016)  Building a Foundation to Redu	Housing	Language, religion, income	No	III	B	Unknown
9	Berkowitz et al. (2016)  Addressing basic resource needs . Ber	Housing, transportation, utilities	Insurance, employment, employment, income, *simplified self-reporting tool  Addressing basic resource needs . Ber	Yes	III	B	Unknown
10	The Online Advocate  Online Advocate. Assessing and refer	Housing, food, violence	Education, access, income, SA, sexual health *Self-administered, Web-based system that screens for and identifies social problems in multiple domains	Y	III	B	Available upon request  food insecurity and the burden of health



Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

Article /Doc #	Author/Institution	CMS Determinants	Other Determinants	Mitigation/ Referral of SDH	Evidence Rating (Level/Quality)		Public Domain/ Authorization/ Licensing
11	HealthBegins Upstream Risks Screening Tool & Guide  Upstream Risks Screening Tool and HealthBegins Social Screening Tool - Pat	Housing, food, violence, transportation	Education, employment, social connection, physical activity, immigration, income, dietary pattern, stress	Yes - minimal	V	NA	Unsure
12	Kempe Family Stress Inventory  KEMPE FAMILY STRESS INVENTORY, kempe_assessment_form_1-05.pdf	Violence	Legal, SA, mental health, parenting *family/child focused	No	III	A	No copyright when used in service settings. Need permission to re-publish.
13	HITS (Hurt, Insult, Threaten, Scream)  HITS_screen.pdf	Violence	None	No	III	A	Copyrighted for permission to use contact: Dr. Kevin Sherin by email: kevin_sherin@doh.state.fl.us
14	PVS (Partner Violence Screen)  Partner_Violence_Screen.pdf	Violence	None	No	III	A	Copyrighted. Contact developers.
15	WAST (Women Abuse Screening Tool)  WAST.pdf	Violence	None	No	III	B	Copyrighted. For permission, contact the Society for Teachers of Family Medicine, www.stfm.org
16	Patient Centered Assessment Method (PCAM) <i>*vague</i>	Violence, transportation,	Physical health, mental health, life-style behaviors, social network, employment, income, health literacy PCAM Training PPT coming soon	Yes	NA	NA	Copyrighted contact the team to inform and involve



Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

	 Patient Centered Assessment Method		http://www.pcamonline.org/training---resources.html				
Article /Doc #	Author/Institution	CMS Determinants	Other Determinants	Mitigation/Referral of SDH	Evidence Rating (Level/Quality)		Public Domain/Authorization/Licensing
17	CDC - Intimate Partner Violence and Sexual Violence Victimization Assessment Instruments for Use in Healthcare Settings  Intimate Partner Violence Instrument	Violence	None *~30 different tools recommended by CDC	Varies per individual tool			Varies
18	Healthify https://www.healthify.us/	Unknown	The Healthify Community Resource and Psychosocial Assessment Platform will allow your practice to implement software-based assessments to determine patients' psychosocial needs and provide them with an inventory of community resources. Healthify is a great solution that allows practices to improve and focus on Case Management, Patient Needs, Community Referrals, Social Determinants Management	Unknown	NA	NA	Commercial

Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

Article /Doc #	Author/Institution	CMS Determinants	Other Determinants	Mitigation/ Referral of SDH	Evidence Rating (Level/Quality)		Public Domain/ Authorization/ Licensing
19	Nursing Knowledge: 2016 Big Data Science, Action Plan: Social and Behavioral Determinants of Health https://www.nursing.umn.edu/sites/nursing.umn.edu/files/nursing_big_data_proceedings_2016.pdf	PURPOSE Develop a toolkit of resources to support the inclusion of Social and Behavioral Determinants of Health (SBDOH) in electronic health records, including expected requirements for the CMS Meaningful Use Programs. KEY PRIORITIES <ul style="list-style-type: none"> • Connect/coordinate with other work groups to consistently address Social and Behavioral Determinants of Health. • Design and prototype how to consistently capture SBDOHs, building on data, information, and knowledge models from the Scope and Standards of Nursing Practice, comprehensive longitudinal client-centered plan supported by the American Nurses Association, Health Resources and Services Administration, and the Office of the National Coordinator, and review of the literature. • Assess clinical workflow implications of capturing SBDOHs. 					
20	Collecting the Social Determinants of Health within The Omaha System – EHR  Collecting_the_SDOH_in_The_Omaha_Sy	Violence	Race/Ethnicity, education, financial strain, stress, depression, physical activity, alcohol, social, neighborhood characteristics	No	V	C	Unknown
21	 Health-Leads-Screening-Toolkit-July-20	Food, housing, utility, transportation, violence	Financial strain, sociodemographic, childcare, education, employment, health behaviors, social isolation & support, behavioral health	No	IV	A	Public

Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

Evidence Guide	
Evidence Levels I, II, & III (Includes Experimental, Quasi-Experimental & Non-Experimental Research Studies)	
<p><u>Level I:</u> Experimental study, randomized controlled trial (RCT); Systematic review of RCTs, with or without meta-analysis</p> <p><u>Level II:</u> Quasi-experimental Study; Systematic review of a combination of RCTs and quasi-experimental, or quasi-experimental studies only, with or without meta-analysis.</p> <p><u>Level III:</u> Non-experimental study; Systematic review of a combination of RCTs, quasi-experimental and non-experimental, or non-experimental studies only, with or without meta-analysis; Qualitative study or systematic review, with or without meta-analysis</p>	<p><u>A High Quality:</u> Consistent, generalizable results; sufficient sample size for the study design; adequate control; definitive conclusions; consistent recommendations based on comprehensive literature review that includes thorough reference to scientific evidence</p> <p><u>B Good Quality:</u> Reasonably consistent results; sufficient sample size for the study design; some control, fairly definitive conclusions; reasonably consistent recommendations based on fairly comprehensive literature review that includes some reference to scientific evidence</p> <p><u>C Low Quality or Major Flaws:</u> Little evidence with inconsistent results; insufficient sample size for the study design; conclusions cannot be drawn</p>
Evidence Level IV (Includes Clinical Practice Guidelines & Position Statements)	
<p>Opinion of respected authorities and/or nationally recognized expert committee/consensus panels based on scientific evidence includes: clinical practice guidelines & consensus panels</p>	<p><u>A High Quality:</u> Material officially sponsored by a professional, public, private organization, or government agency; documentation of a systematic literature search strategy; consistent results with sufficient numbers of well-designed studies; criteria-based evaluation of overall scientific strength and quality of included studies and definitive conclusions; national expertise is clearly evident; developed or revised within the last 5 years</p> <p><u>B Good Quality:</u> Material officially sponsored by a professional, public, private organization, or government agency; reasonably thorough and appropriate systematic literature search strategy; reasonably consistent results, sufficient numbers of well-designed studies; evaluation of strengths and limitations of included studies with fairly definitive conclusions; national expertise is clearly evident; developed or revised within the last 5 years</p> <p><u>C Low Quality or Major Flaws:</u> Material not sponsored by an official organization or agency; undefined, poorly defined, or limited literature search strategy; no evaluation of strengths and limitations of included studies, insufficient evidence with inconsistent results, conclusions cannot be drawn; not revised within the last 5 years</p>

Core Determinants of Health Assessment Tool Evidence Table

Housing Instability/Utility Needs/Food Insecurity/Interpersonal Violence/Transportation Barrier

Evidence Level V (Includes Literature Reviews, Expert Opinion, Quality Improvement, Financial/Program Evaluation)	
<p>Based on experiential and non-research evidence. Includes: Literature review; Quality improvement, program or financial evaluation; Case reports; Opinion of nationally recognized experts(s) based on experiential evidence</p>	<p>Organizational Experience: <u>A High Quality:</u> Clear aims and objectives; consistent results across multiple settings; formal quality improvement; financial or program evaluation methods used; definitive conclusions consistent recommendations with thorough reference to scientific evidence <u>B Good Quality:</u> Clear aims and objectives; consistent results in a single setting; formal quality improvement or financial or program evaluation methods used; reasonably consistent recommendations with some reference to scientific evidence <u>C Low Quality or Major Flaws:</u> Unclear or missing aims and objectives; inconsistent results; poorly defined quality improvement, financial or program evaluation methods; recommendations cannot be made</p> <p>Literature Review, Expert Opinion, Case Report, Community Standard, Clinician Experience, Consumer Preference: <u>A High Quality:</u> Expertise is clearly evident; draws definitive conclusions; provides scientific rationale; thought leader(s) in the field <u>B Good Quality:</u> Expertise appears to be credible; draws fairly definitive conclusions; provides logical argument for opinions <u>C Low Quality or Major Flaws:</u> Expertise is not discernible or is dubious; conclusions cannot be drawn</p> <p style="text-align: right;">Dearholt & Dang, 2012</p>