



## OHIO STANDARDIZED NURSING ASSESSMENT & EDUCATION MODULE ON THE CORE DETERMINANTS OF HEALTH

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### PURPOSE

The intents of this policy and procedures are to:

1. Provide a framework for universal nursing screening for the core determinants of health (CDHs);
2. Assist Ohio's registered nurses and nursing students with understanding the essence of CDHs;
3. Implement a brief and concise screening tool for registered nurses and nursing students to assess their patients' CDHs;
4. Establish processes to address clients' gaps in CDHs, thus improving clients' health; and
5. Improve the overall culture of health in Ohio.

### POLICY

All registered nurses and nursing students conducting a nursing assessment with a client in a setting in which the client is directly returning to the community shall incorporate screening of the Centers for Medicare & Medicaid Services' (CMS) five core social determinants of health. If any one or more of the CDHs is a "yes:"

- The registered nurse or nursing student shall refer the client for more in-depth assessment and assistance to address the need(s) imposed by the CDHs per their institution's specific protocols; or
- The registered nurse or nursing student shall him/herself conduct a more in-depth assessment and address the need(s) imposed by the CDHs per their institution's specific protocols.

Institutions shall establish internal processes for referral and intervention for clients who have one or more of the five CDHs unmet.

### APPLICABILITY & SCOPE

1. These policy and procedures are intended for all clients/patients encountering the medical care system.
2. The Core Determinants of Health Screening Tool, also referred to as the "Core 5" tool, is recommended for use in all clinical settings in which a client will be directly back in the community, such as outpatient clinics, emergency departments (for patients not being admitted), inpatient units prior to patient discharge, and community clinical settings.
3. These policy and procedures are relative to all currently practicing registered nurses and all nursing students who will become registered nurses.
4. These policies and procedures pertain to integrating the CDHs into nurses' use of nursing process as a routine aspect of their scope of practice.

## BACKGROUND

A person's health is affected 20% by clinical care and 80% by opportunities where one lives, works, plays and worships<sup>1</sup>. These opportunities such as income level, safe neighborhoods, education, housing, public transportation, healthy foods, and access to healthcare---among others---are often referred to as **social determinants of health (SDHs)**. These SDHs are known to contribute to a person's overall health.

CMS, in their *Accountable Care Communities Model*, have defined five core SDHs---**housing security, food security, utilities, transportation and safety**<sup>2,3,4</sup>. SDHs are not merely core benefits for individuals; their presence or lack thereof can promote or deter health. Longstanding literature clearly documents that nutritious food elements are essential for healing and immune system functioning. A patient being treated for an infection, having had a surgical procedure or experiencing a medical condition in which the immune system is stressed and tissues need to regenerate cannot heal well without healthy food. Similarly chronic high levels of stress hormones (cortisol) also impact healing and immune system functioning. Continuous or repetitive stressful conditions---such as food insecurity, potential housing eviction or homelessness, no heat in frigid weather, no transportation to be able to work or get to health care appointments, and/or the continuous threat of domestic or other violence---can result in persons living with high levels of stress hormones. According to the CMS, "Unmet health-related core needs, such as food insecurity and inadequate or unstable housing, may increase the risk of developing chronic conditions, reduce an individual's ability to manage these conditions, increase health care costs, and lead to avoidable health care utilization<sup>3</sup>." In order for people to regain and achieve optimal health, a person's core SDHs must be met in their lives. The SDHs are not an isolated core assessment: **SDHs relate so directly to health that they should be integrated into the nursing assessment for every client. The core SDHs are not merely "social" attributes to health; they are part of an individual's ability to achieve health within medical and nursing models of care.** They are more accurately "**core determinants of health (CDHs)**" rather than "social" determinants of health.

Nurses are duty-bound to help their clients achieve optimal health. Since optimal health cannot be achieved without the CDHs being met for individuals, nurses should incorporate screening, assessment and intervention for the CDHs as a basic component of nursing care, especially for clients who will be imminently returning to their communities from a medical visit. Yet institutions where nurses work and learn do not routinely integrate the CDHs as part of nursing care. A 2016 survey done across the state with chief nursing officers, directors of nursing, and deans from Ohio's hospitals, public health departments, and nursing schools & colleges revealed that among respondents (Attachment D):

- 41% of hospitals and 67% of public health departments do not have a formal policy or procedure to screen for SDH's;
- 64% of hospitals and 77% of public health departments do not provide training about SDHs to newly hired nurses; and
- Nursing academic programs do not integrate SDH assessment throughout their curriculum.
- 88% of hospitals and 90% of public health agencies do not provide annual training or competency assessments about SDHs for nurses.

This initiative to integrate CDH screening and intervention as a part of routine nursing care with all medical clients is the collaborative work of multiple individual partners from hospitals, health departments and nursing colleges across Ohio; the *Ohio Action Coalition*, the *Robert Wood Johnson Foundation* and *AARP, Inc.*

## GLOSSARY OF TERMS

**CMS:** Centers for Medicare & Medicaid Services

**Core 5 and the Core 5 tool:** See Core Determinants of Health (CDHs) Screening Tool below

**Core Determinants of Health (CDHs):** Five specific determinants of health identified by CMS as essential to a person's health; these include housing, nutritious food, utilities, transportation and safety<sup>3</sup>.

**CDH Screening Tool:** Five concise questions intended to quickly determine if medical clients are experiencing a gap in any one or more of the five core CMS SDHs; clients who are found to have one or more gaps in CDHs during this screening are referred for a sequel CDH assessment and/or intervention to address the gap in their CDHs. This tool is also known as the "Core 5" and the "Core 5 tool."

**CDH Referral:** Referral of a client for sequel CDH assessment or intervention for gaps in CDHs

**SDHs:** Social determinants of health are the myriad conditions in which people are born, grow, live, work and age; these SDH conditions are shaped by the distribution of money, power and resources at global, national and local levels<sup>6</sup>.

**Sequel CDH Assessment:** A more in-depth assessment for identifying gaps in CDHs; the sequel CDH assessment is done after the CDH Screening Tool (aka the Core 5 tool) indicates one or more gaps in CDHs

## PROCEDURES

### I. Institutional Oversight and Infrastructure

- A. Institutional leadership should endorse that the CDH screening and intervention processes are a part of the institution's standard nursing assessment.
- B. Institutional leadership should specify in which clinical settings the CDH Screening Tool, aka the "Core 5," will be adopted prior to its implementation.
  1. The Core 5 tool is recommended for use by registered nurses and nursing students in clinical settings in which a client will be back in the community directly after the medical episode, such as outpatient clinics, emergency departments (for patients not being admitted), inpatient hospital units prior to patient discharge, and community clinical settings.
- C. To implement the Core 5 tool, the institution should also endorse the related training for sequel CDH assessment (see Sections II and III).
- D. The institution should incorporate the Core 5 tool in its routinely-used nursing assessment forms.
  1. The institution should incorporate the Core 5 tool in its routinely used format for nursing assessment documentation, either on paper or in its electronic health record.
  2. The Core 5 tool includes these five questions:
    - a. *Do you/your family worry about whether your food will run out and you won't be able to get more?*
    - b. *Are you worried about losing your housing, or are you homeless?*
    - c. *Are you currently having issues at home with your utilities such as your heat, electric, natural gas or water?*
    - d. *Has a lack of transportation kept you from attending medical appointments or from work, or from getting things you need for daily living?*
    - e. *Are you worried that someone may hurt you or your family?*

- E. The institution must establish internal processes for how clients identified as having one or more gaps in the CDHs are referred for further assessment and/or service to ameliorate the gap (see Section IV).
  - 1. The institution's assessment form that incorporates the Core 5 tool should have the ability to designate a referral for subsequent ("sequel") CDH assessment and/or intervention.
  - 2. An institution, per its protocols, should determine who is most appropriate to further assess and intervene with the client to meet the gaps in CDHs.
  - 3. Referrals for a sequel CDH assessment and/or intervention may be internal or external to the institution based on the institution's protocols and available resources.
- F. The institution should monitor compliance of its nursing assessment documentation including the CDHs, and engage in process improvement efforts if screening, assessment, referral and/or documentation are inconsistent, incomplete, or not done.
- G. Institutions who do not have internal or external resources to address gaps in their clients' CDHs should work with the local health department, government officials, and non-profits in their area to determine how such resources could be made available.
- H. These policy and procedures and the Core 5 tool may be cut and pasted into institutions' documents as needed to endorse, adopt and implement CDH screening.
- I. These policy and procedures are available on-line for ease of access and download at <http://www.ohioleaguefornursing.org/?page=OACCulture>.

## II. Staff Training

- A. All registered nursing staff and nursing students in clinical areas using the Core 5 tool should complete the educational module, *The Essential Role of the Nurse in Improving Health Outcomes: A Core Determinants of Health Education Module and Nursing Assessment Tool, "The Core 5."*
  - 1. The educational module is available on-line for ease of access and download at <http://www.ohioleaguefornursing.org/?page=OACCulture>.
- B. All nurses should complete the educational module early on in their orientation to the respective clinical area so that they can use the tool in their nursing assessment of clients.
- C. Thereafter for current nursing personnel, all nurses should complete the *The Essential Role of the Nurse in Improving Health Outcomes: A Core Determinants of Health Education Module and Nursing Assessment Tool* educational module or an equivalent as part of the institution's annual nursing competency process.
- D. Nurses who do not consistently document CDHs once the nurse's institution adopts these policy and procedures should receive additional education regarding the relevance of CDHs and how to screen for them.

## III. Utilization of the Core Determinants of Health (CDH) Screening Tool, aka the "Core 5"

- A. Once the Core 5 tool is implemented in a clinical area, all nurses and nursing students should utilize it as a part of their routine nursing assessment.
- B. All five questions of the Core 5 tool should be asked to every client.
- C. If one or more of the CDHs in the Core 5 is stated to be a "yes" by a client, or if the client is hesitant to answer any of the Core 5 questions, the nurse shall refer the client per the institution's established process for subsequent/sequel CDH assessment and intervention.
- D. Nurses should educate and encourage their clients to follow through with sequel CDH assessment and referral to address their gaps in CDHs.
- E. Nurses and other staff conducting CDH screening should do so in a sensitive manner, as patients with gaps in CDHs may feel or experience stigma.
- F. Clients have the right to refuse to answer the CDH questions.

#### IV. Sequel CDH Assessment and Referral

- A. Sequel CDH assessment is intended to be more in-depth to determine additional needs that a client may have in relation to the CDHs; to determine the urgency for intervention; and to determine the best referral option(s) to meet those needs.
- B. Sequel CDH assessment is done if any one or more of the CDHs in indicated a “yes” by a client, or if a client is hesitant to answer any of the Core 5 questions.
- C. Nurses and other staff conducting sequel CDH assessment, referral and/or intervention for gaps in CDHs should do so in a sensitive manner, as patients with gaps in CDHs may feel or experience stigma.
- D. Each institution must establish internal processes for how clients identified as having one or more gaps in the CDHs are referred for further assessment and/or service to ameliorate the gap. These referral processes will vary from institution to institution, depending on institution-specific processes as well as internal and external capacities and partnerships.
- E. Institutions may want to select one of the many published, evidenced-based CDH assessment tools for sequel CDH assessment. Examples of such tools include (but are not limited to):
  - *CMS’ Accountable Health Communities Health-Related Core Needs Screening Questions*<sup>6</sup>;
  - *Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences (PRAPARE)*<sup>7</sup>.
- F. Institutions may want to partner with Ohio’s managed care plans to provide sequel CDH assessment and intervention for applicable clients.

#### V. Questions and Support

- A. For further questions and support in regards to these policy and procedures for utilizing the Core 5 tool, sequel CDH assessment, referral, and/or strategizing about available resources, feel free to contact:
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## ATTACHMENTS

Attachment A: Process Algorithm

Attachment B: Core Determinants of Health (CDH) Screening Tool, aka "Core 5"

Attachment C: Training Module, *The Essential Role Of The Nurse In Improving Health Outcomes: Core Determinants of Health Education Module And Nursing Assessment Tool, "The Core 5"*

Attachment D: Standardized Nursing Assessment of the Core Determinants of Health among Ohio's Hospital and Health Department CNOs & DONs, and Among Ohio's Deans of Colleges and Schools of Nursing: *Baseline Survey Results*. 2017 Jan 27.

Attachment E: Core Determinants of Health Assessment Tool Evidence Table

Attachment F: Core Determinants of Health Education and Training Evidence Table