Social Drivers of Health (SDOH) Screening

Tips for Adding SDOH Screening to Address Health-Related Social Needs (HRSN)

Social drivers of health (SDOH) are the broader community, economic, and social conditions that shape health. Health-related social needs (HRSNs) are the individual needs patients experience, such as food insecurity, housing instability, transportation barriers, or safety concerns.

Use a Standardized Screening Tool

Consider nationally recognized tools such as the Centers for Medicare & Medicaid Services (CMS) Accountable Health Communities (AHC) Health-Related Social Needs Screening Tool or the Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE). Select domains based on your patients, clinical relevance, and plans for using the information.

Build Screening Into the Workflow

Decide who will offer the screen, where responses will be documented, and who will follow up. Integrate screening into an existing intake process when possible. Paper, tablet, phone, text, and staff-administered options can all work; choose what best fits the setting and patient.

Prepare Staff and Patients

Explain why the questions are being asked, how responses will be used, and that patients may decline. Train staff to use respectful, empathetic language, protect privacy, respond to safety concerns, and make warm handoffs. Involve staff in designing the workflow to build buy-in.

Plan the Response Before You Screen

Know how screening results will inform care, referrals, quality improvement, or community planning. A service does not have to be guaranteed for every identified need, but staff should know what response they can offer. Establish a clear protocol for urgent safety concerns.

Keep Resources Current and Follow Up

Assign responsibility for maintaining the resource list and confirming program availability and eligibility requirements. Use warm handoffs to social work, CHWs, or other team members with expertise. If possible, track whether patients connect with services and use what you learn to improve the process.

Resource Links

- CMS Accountable Health Communities Model screening tools and guidance
- PRAPARE Implementation and Action Toolkit
- AHRQ Health Literacy Universal Precautions Toolkit Tools 18 and 21
- CMS Early Lessons from the Accountable Health Communities Model

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