





CASE EXAMPLE

SCREENING, REFERRAL AND FOLLOW UP

Brief Background on State Affiliate

Youth Healthcare Alliance has been supporting Colorado's school-based health centers (SBHCs) since 1996 as the non-profit membership organization for SBHCs in Colorado. Our fourperson team drives the organization's mission to optimize health outcomes among young people through access to quality, integrated healthcare in schools to optimize our vision that all Colorado school-based clinics provide high-quality, equitable, comprehensive healthcare in support of positive academic outcomes.

As the unifying, collaborative body for Colorado's 70 school-based clinics, we are committed to identifying and translating the needs of our members into policy and providing them with essential resources, guidance and services. The project, which is supported by the School-Based Health Alliance and Share Our Strength's No Kid Hungry campaign, aligns well with our work. In addition to allowing us to engage in state-level partnerships, the project also enables us to work directly with 10 school-based health centers across Colorado to improve SBHC efforts to address food security needs. A major aim of this project was to increase screening for food security in SBHCs by embedding these screenings in workflows for routine clinic visits, inclusive of referrals and resources for youth and families who indicated food security needs.

Getting Started

Youth Healthcare Alliance approached increasing screening, referral and follow-up on two levels. First, we provided technical assistance to the SBHCs in the project to support the development and/or refinement of clinic-specific workflows inclusive of food security needs. This was done through monthly check-ins, quarterly report sharing and email communications. Support was provided to individual SBHCs as requested. Many SBHCs had existing workflows they were able to modify to include food security screening, referral and follow-up.

Second, we partnered with the Colorado Department of Public Health and Environment's School-Based Health Center (CDPHE's SBHC) program. This entailed bringing the two-question Hunger Vital Signs Screening into the screening tool options available to program grantees through Possibility for Change's virtual platform, Partnering with CDPHE extended the reach of this work beyond the 10 SBHCs directly engaged in the project to any SBHC who receives state funding managed by CDPHE's SBHC Program. Youth Healthcare Alliance worked with both CDPHE's SBHC program and Possibilities for Change to develop the tool and a corresponding workflow. CDPHE's SBHC program staff and Youth Healthcare Alliance then shared its purpose and availability with the program's grantees.

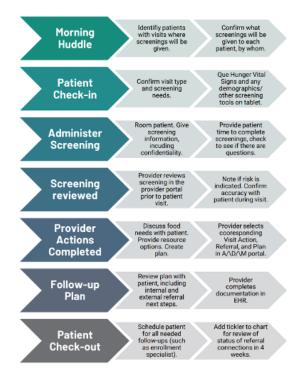


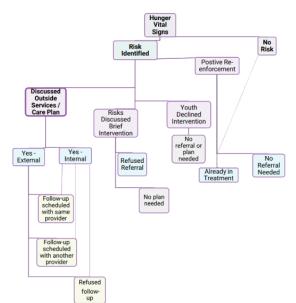
Workflow Considerations

Youth Healthcare Alliance worked directly with Possibilities for Change to inform how their system displayed results for the Hunger Vital Signs screening and ensured it aligned with how other screening tool results are displayed to providers, including providing language for brief intervention prompts for positive screenings. Additionally, Youth Healthcare Alliance designed a workflow to share with CDPHE SBHC program grantees for

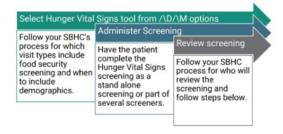
utilizing the Hunger Vital Signs screening. This included a sample workflow for administering food insecurity screening within the clinic's workflow; a decision tree for selecting provider actions within the provider response to the Hunger Vital Sign screening; and text descriptions to explain the tool and what the various follow-up actions include. The complete workflow created for this platform can be accessed here.

Examples





Workflow for Hunger Vital Signs Screening Tool



Responding to results



Follow-up

The collaboration between Youth Healthcare Alliance, CDPHE's SBHC program, and Possibilities for Change focused on providing a universal screening tool to CDPHE's SBHC grantees for assessing food security needs. The provider action section of Possibilities for Change presents options for how to respond to a positive screening, with the explanations and decision tree in the workflow created by Youth Healthcare Alliance for reference. We anticipate using the lessons learned from the SBHCs participating in this project to inform the entire Colorado SBHC network on more specific, community-level referral and follow-up strategies.

What Makes This Model/Workflow Successful?

This collaboration resulted in a common, accessible food security screening tool that can be given as a standalone screening or included as part of a suite of routine screenings a SBHC gives at a single appointment. The results are kept in the virtual platform maintained by Possibilities for Change. They can be tracked over time and looked at alongside other screenings a patient has completed.

While we see great potential for this to increase the number of SBHCs who regularly screen for food insecurity, we also noted a few challenges to be addressed. This includes a need to increase awareness of the screening and promote its use, as well as to recognize that not all SBHCs in Colorado are CDPHE SBHC grantees, and that not all grantees in the program choose to use Possibilities for Change's platform for their screening needs.

Youth Healthcare Alliance plans to create increased awareness of the need to screen for food insecurity and the availability of Hunger Vital Signs as a resource for CDPHE's SBHC grantees. It will achieve this by hosting a network-wide Lunch and Learn at the start of the school year to share this information in a more interactive fashion. Additionally, we continue to work closely with CDPHE's SBHC program to identify ways they can foster the use of the screening tool within their program.

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