Acceptability of Social Health Screening to Patients and Providers

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Panelists

- **Arwen Bunce**, MA
  Lead Qualitative Research Associate, OCHIN

- **Aisha Lofters**, MD, CCFP, PhD
  Family Physician and Assistant Professor, St. Michael's Hospital and University of Toronto

- **Emilia De Marchis**, MD
  Clinical Research Fellow, UCSF School of Medicine

State of the Science:
A National Research Meeting on Medical & Social Care Integration
Sending in your questions

- Go to menti.com and enter 51 39 94
- Alternative: Point your smartphone camera at the QR code in your program
- If your question is for a specific presenter, please include their name before your question
Disclosures

• Eric Fleegler is a consultant to Veta Health, which develops chronic disease management tools and supports HelpSteps which was developed by Dr. Fleegler

• Author for UpToDate (PALS)

• Honorariums for Grand Rounds and other speaking engagements related to firearms, social determinants of health, sedation.

### Drugs and Alcohol

<table>
<thead>
<tr>
<th></th>
<th>Non-problematic drinkers</th>
<th>Problematic drinkers</th>
<th>Non-drug users</th>
<th>Drug users</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient</strong>: How comfortable do you feel telling your HIV provider about using drugs or alcohol? (High comfort 5/5)</td>
<td>78%</td>
<td>56%</td>
<td>79%</td>
<td>66%</td>
</tr>
<tr>
<td><strong>Provider</strong>: Indicate your level of comfort discussing illicit drug use with patients (High comfort 5/5)</td>
<td>Physicians 65%</td>
<td>RN/NP/PA 100%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Patients and their providers must have the freedom to openly discuss substance use issues in primary care.

Table 2: Primary Care Patient Preferences for Raising Sexual Health Concerns

<table>
<thead>
<tr>
<th>Preference Statement</th>
<th>Strongly Disagree/Disagree</th>
<th>No Opinion</th>
<th>Strongly Agree/Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary care doctors should ask all patients if they have sexual concerns or questions.*</td>
<td>5 (6%)</td>
<td>18 (23%)</td>
<td>56 (71%)</td>
</tr>
<tr>
<td>Primary care doctors should only talk about sexual concerns if patients bring them up first.**</td>
<td>39 (49%)</td>
<td>15 (19%)</td>
<td>25 (32%)</td>
</tr>
<tr>
<td>Medical history forms should include a question about sexual concerns.*</td>
<td>5 (6%)</td>
<td>15 (19%)</td>
<td>58 (74%)</td>
</tr>
<tr>
<td>If I had a sexual concern, I would want a primary care doctor to ask me about it.*</td>
<td>8 (10%)</td>
<td>15 (20%)</td>
<td>53 (70%)</td>
</tr>
<tr>
<td>If I had a sexual concern, I would want my primary care doctor to wait until I brought it up.**</td>
<td>40 (52%)</td>
<td>17 (22%)</td>
<td>20 (26%)</td>
</tr>
</tbody>
</table>

Patient’s Perspective on Tobacco Screening

• **Expectation**: “Smoking’s important it should be every time a person comes in like when they take my blood pressure”

• **Trust**: “The only person who is in the position to help me is that doctor because I trust him”

• **Respect**: “You sit in the waiting room fill out 15 minutes worth of paper work. You go in and they’ll ask you the exact same questions. Did you read it? No they didn’t”

• **Positively and Targeted Messaging**: “Listen just say the word we have plenty of things for you to help and just let me know this is what works”

Halladay *et al.* Patient Perspectives on Tobacco Use Treatment in Primary Care. *Primary Care Prev Chronic Dis.* 2015
Do Patients Think its OK to Discuss Firearms?

82% of families had one or more health-related social problems

Determining Acceptability

“How would you feel about taking a computer-based survey in your doctor’s waiting room that evaluated a family’s social issues and made referrals to local agencies?”

Acceptance and interest: 92%

HelpSteps: Patient Perspective

“... [HelpSteps] actually turned out to be a good survey because it showed that somebody was trying to care about what I needed and they really tried to pinpoint all of my specific needs. I liked that.”

- Patient in Young Adult Clinic

Food insecure: 31%

Food secure: 69%

Requesting food help: 32%

Not requesting help: 68%

HelpSteps & Nutrition Study
340 Families in CHPCC

Bottino et al. Academic Peds 2017
Food insecure
Not requesting help
14%

Food insecure
Requesting help
17%

Food secure
Requesting help
15%

Food secure
Not requesting help
54%

Bottino et al. Academic Peds 2017