

# Increasing Social Determinants of Health (SDoH) Screening Rates among Hospitalized Patients through increased Utilization of the SDoH Navigator and Nurse Education

## BACKGROUND

- **SDoH** are non-medical factors that heavily impact health, particularly in underserved communities (WHO, 2024).
- Many providers feel undertrained and under-resourced, with less than half routinely screening for SDoH (Glenn et al., 2024).
- **Healthy People 2030** highlights five key SDoH domains.
- SDoH disparities drive broader health inequities.
- Identifying those at risk is critical to improving health outcomes.

## PURPOSE

The aim of the project is to increase screening rates for Social Determinants of Health using the SDoH navigator in Electronic Medical Record (EMR) systems.

## METHODS

**Design:** QI guided by Pre and Post test design

**Setting:** 40-bed inpatient telemetry unit, metropolitan teaching hospital, New York City

**Sample:** Convenience sample of 5 Registered Nurses (RNs) with access to SDoH screening navigator.

**Theoretical Framework:** Donabedian

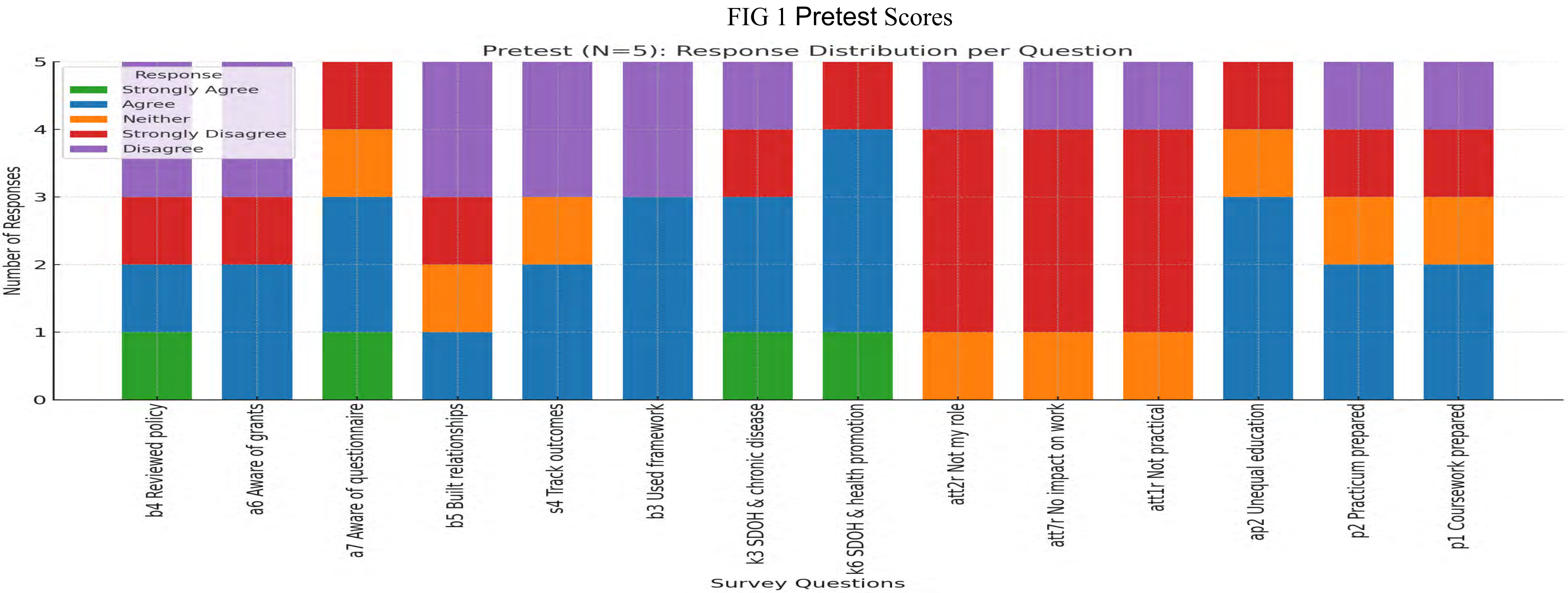
**Intervention:**

- Educational sessions on SDoH impact
- Training on the effective utilization of the SDoH navigator.

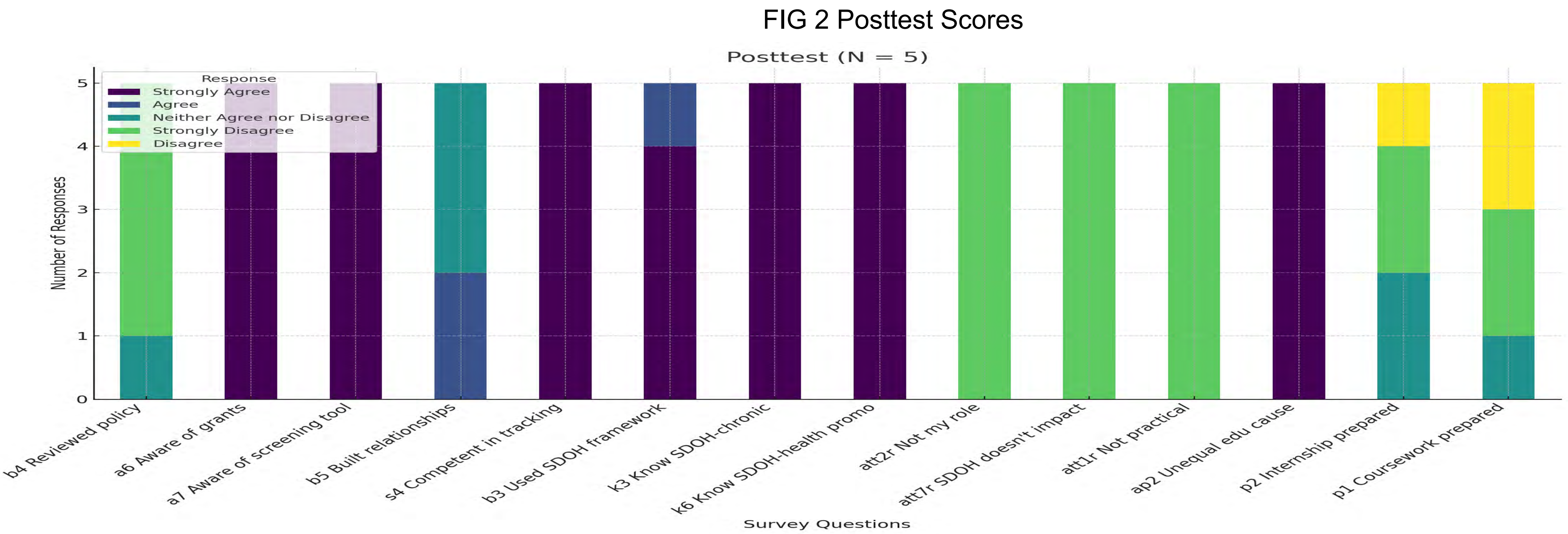
**Data Collection:**

- Retrospective and post-intervention chart review SDoH screening rates
- Validated 22-item ACN: SDH Likert scale for measuring nurses' baseline knowledge and knowledge retention, pre and post.

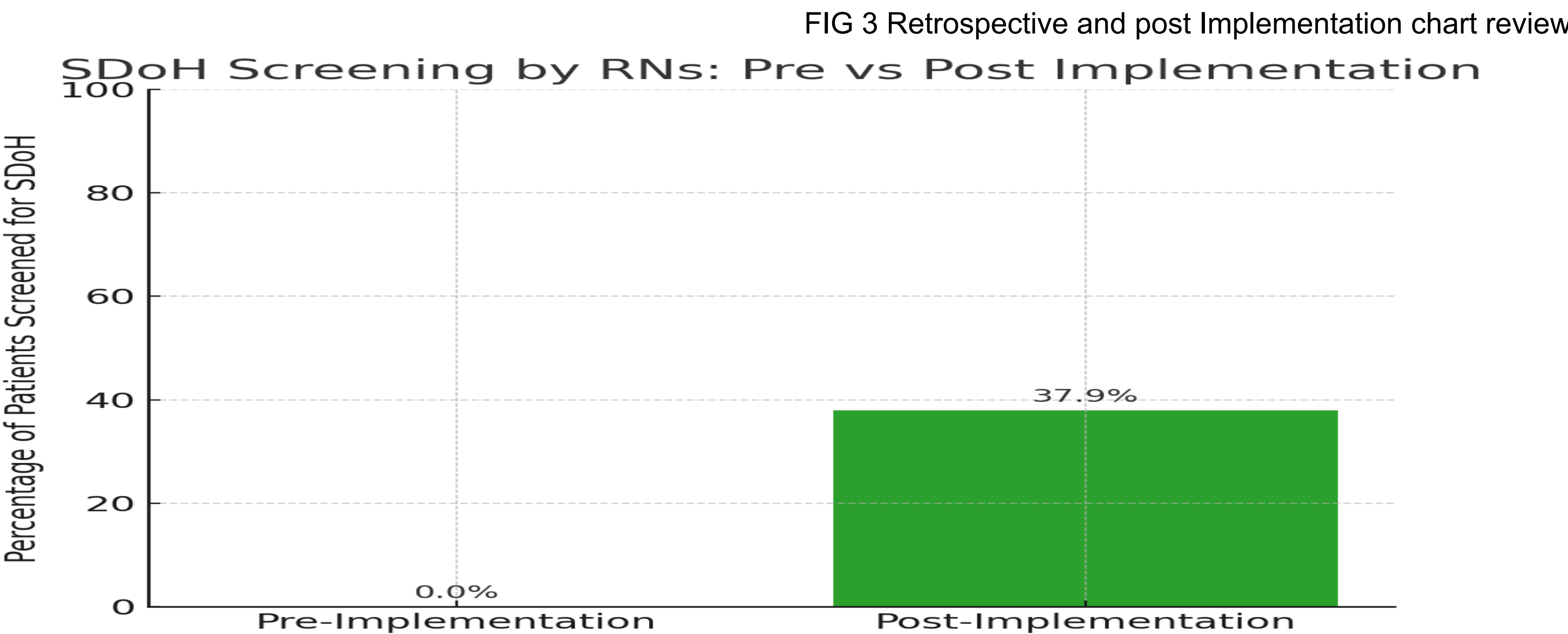
**FOLLOWING THE INTERVENTION, THE SDOH SCREENING RATE BY REGISTERED NURSES (RNS) INCREASED BY 37.9%, WITH 100% OF SCREENINGS COMPLETED. OF THE 58 PATIENT CHARTS REVIEWED, 22 (37.9%) WERE INDEPENDENTLY SCREENED BY RNS.**



**Pretest Summary**  
**Low Screening Awareness:** Only 60% has knowledge of SDoH screening tool.  
**Minimal Framework Use:** Rare application of the SDoH screening tool.  
**Knowledge Gaps:** Uncertainty in tracking outcomes and linking SDOH to health.  
**Educational Gaps:** Many felt unprepared by training.  
**Role Uncertainty:** Some uncertainty about their responsibility in addressing SDOH.



**Posttest Summary**  
**Improved Screening Awareness:** All participants recognized the navigator tool for SDoH screening.  
**Increased Framework Use:** More nurses applied the SDoH screening tool in practice.  
**Stronger Knowledge & Confidence:** Participants felt more confident in screening patients for SDoH factors.  
**Clear Role Acceptance:** Attitudinal uncertainty decreased—nurses affirmed their role in addressing SDOH.



## RESULTS

- RNs SDoH screening rate increased from 0 out of 58 charts to 22 out of 58 (37.9%) following the educational intervention.
- Nurses reported increased confidence and competence in screening patients for SDoH.
- All participants strongly disagreed with the notion that addressing SDoH falls outside their professional role.
- Education on the impact of SDoH and training on the use of SDoH screening tools can significantly improve screening rates and support efforts to advance health equity.

## DISCUSSION

- Ongoing SDoH education can improve screening practices and highlight nurses' roles.
- Early SDoH screening may mitigate social factors affecting health and promote health equity.

## Next Steps:

Facility developing policy for RNs to conduct SDoH screenings using EMR tool in routine assessments.

## Limitations:

- - Convenience sampling may limit generalizability
- - Potential threats to internal validity
- - Risk of intervention diffusion or inconsistent interpretation among participants

## REFERENCES

