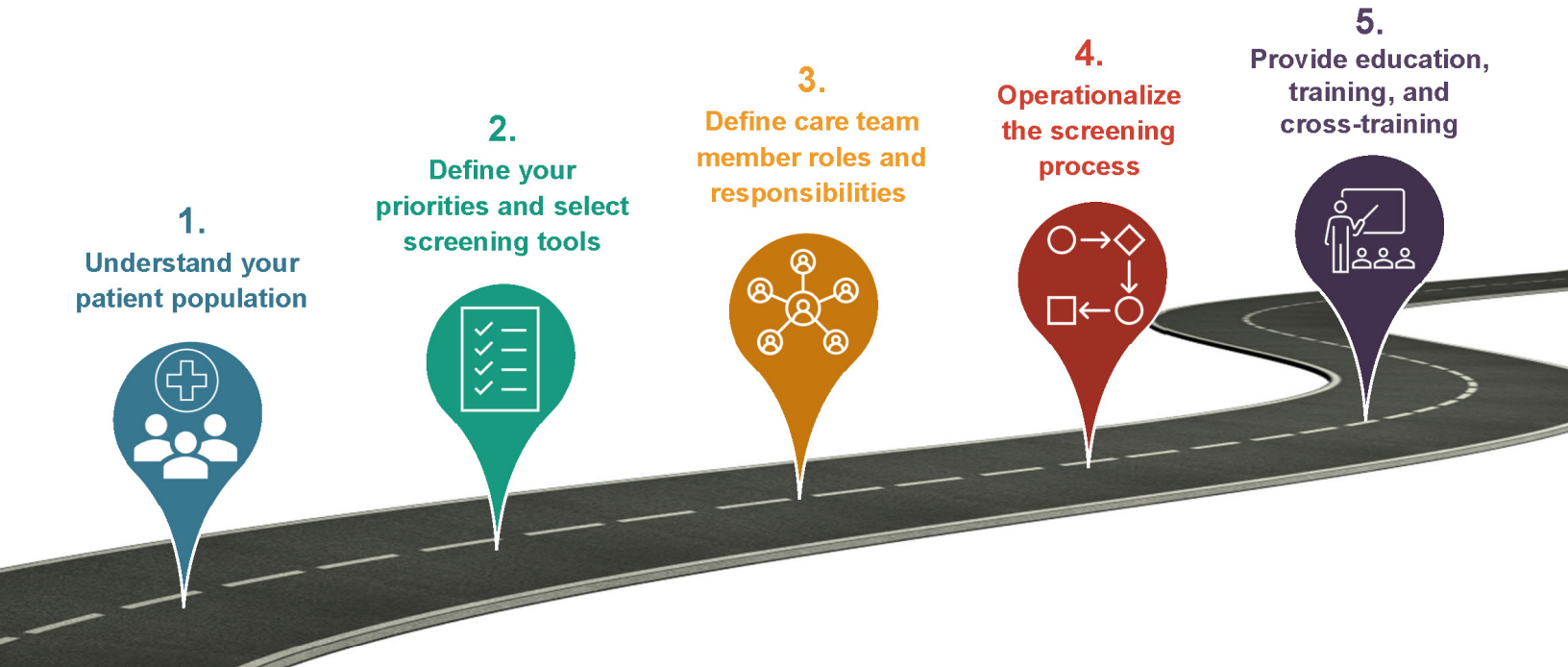


PREVENTIVE SCREENING IN INTEGRATED CARE

START YOUR JOURNEY WITH THE PREVENTIVE SCREENING ROAD MAP:



TYPES OF REGISTRIES TO HELP MEET YOUR SCREENING GOALS:

MANUAL

Reports run by individuals using identified criteria

ELECTRONIC

Built into the electronic health record, but must be manually run

AUTOMATED

Reports are built into the system and automatically run at a selected frequency

INTEGRATED

Real-time population management platform that can be viewed by all care team members at any time



REMEMBER: SCREENING NEEDS TO BE LINKED TO SUPPORT AND REFERRALS



Reality Check List:

- Screening for behavioral health conditions does not automatically mean you have access to support/referrals
- Screening does not necessarily mean an increase in billable service
- Screening and patient education does not equal adherence
- Finding referral support may require the PCP network with behavioral health providers to develop referral compacts

BEST PRACTICES



Clearly identify which standardized tools will be used to complete the screenings



Ensure the essential tools are integrated into the electronic health record



Clarify **who** will conduct the screening and **how often**

Some of the evidence-based, standardized tools recommended for screening purposes:

1. Tobacco Screening
2. Depression - PHQ-2 and PHQ-9 for all patients 18 years and older
3. Alcohol and Substance Abuse - SBIRT pre-screen for adults, CRAFFT for adolescents
 - Alcohol - Audit and Audit C for Adults, CRAFFT for adolescents
 - Substance Use - DAST-10 for adults
4. Childhood Developmental Screening
 - PEDS administered during Well-Child Care (WCC) visit for ages 0 to 7 years
 - PSC administered during WCC visit for ages 8 to 13 years
 - CRAFFT administered during WCC visit for ages 14 to 17 years
5. Social Determinants of Health Screening (SDOH)
 - PREPARE tool used for all patients

Contact us to discuss how our services can help your care teams. Email: cqp@pcdc.org

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