

# Session 1

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# EPT Program: Health-Related Social Needs (HRSN) Milestone Office Hours Series

**Session 1: Formalizing Screening Policies & Roles**  
February 26, 2026

*Facilitated by HealthBegins in collaboration with the Population Health Learning Center*

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# Welcome & Introductions

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# Our Facilitators

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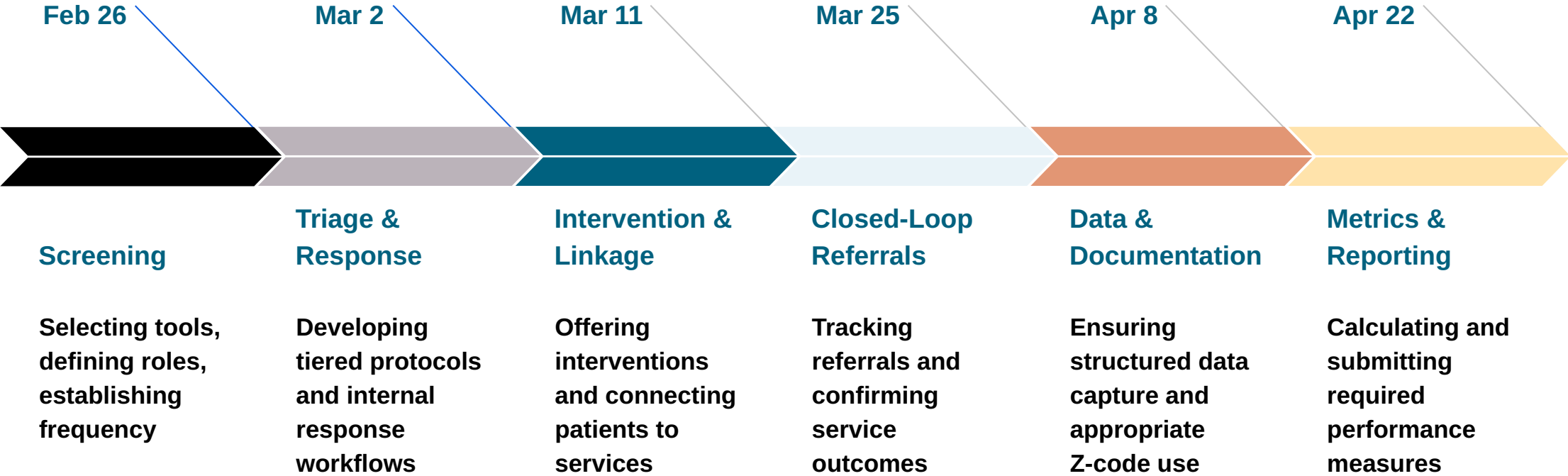
# Check In Question

**Please put your name, role, organization in the chat and respond to our check in question:**

What's one thing you're looking forward to this spring?

# Office Hours Series Overview

This Office Hours Series is structured to support implementation across the full HRSN process:



# Session Learning Objectives

Remember: These sessions are designed to help you to meet the requirements in the HRSN Documentation Template & EPT Rubric.

**By the end of this session, participants will be able to:**

1. **Select** a standardized HRSN screening tool appropriate for the population of focus (including pediatric populations) and distinguish it from ACEs screening.
2. **Map** specific staff roles across each step of the HRSN screening workflow and integrate screening efficiently into existing processes.
3. **Define and document** a standardized screening frequency in practice policy.

# Live Polls: Screening Workflow Baseline

## **We'll run five quick polls to understand:**

- Your current HRSN screening approach
- Which priority social need(s) you've identified
- Whether screening roles are clearly defined
- Who primarily administers the screening
- How often patients are screened for HRSNs

# Designing Your Screening Workflow

Questions?

## Screening Tool

- Use a standardized HRSN instrument (e.g., PRAPARE, AHC-HRSN, WE CARE)
- ACEs screening alone does not meet HRSN screening requirements

## Roles

- Who administers the screening?
- Are screening roles clearly defined and documented?

## Frequency

- Every visit
- Annually / wellness visits
- Other defined interval

**Goal: A clear, documented, and repeatable process.**

# Example: FQHC Screening Workflow

Questions?

## Context

- Multi-site FQHC
- Priority Social Need: Housing
- Why Housing: High health impact & rising local housing instability
- Tool Selection: PRAPARE embedded in EHR

## Screening Workflow & Role Assignments

- **Front Desk** flags patients due for screening
- **Medical Assistant (MA)** administers screening during rooming
- **Provider** reviews results during visit
- **EHR** auto-flags positive screens
- **Care Coordinator** conducts outreach within 3 days

# Example: Small Independent Practice Workflow

Questions?

## Context

- Small independent practice (3 providers)
- Priority Social Need: Food Insecurity
- Why Food Insecurity: High prevalence & feasible interventions
- Tool Selection: AHC embedded in EHR

## Screening Workflow & Role Assignments

- **Front Desk** flags patients due for screening
- **Medical Assistant (MA)** administers screening during rooming
- **Medical Assistant** reviews results during visit
- **EHR** auto-flags positive screens so provider can discuss as desired
- **Medical Assistant** initiates referral and follow-up process

# Key Takeaways & Next Steps

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# Key Takeaways & Next Steps

## **Key Decisions to Finalize:**

- Confirm your standardized HRSN screening tool
- Define and document screening roles
- Establish a consistent screening frequency
- Integrate screening into your existing workflow

## **Before Session 2:**

- Identify gaps in tool selection or role clarity
- Review how screening results are documented
- Come prepared with questions about triage and response

**Next Session: HRSN Triage & Response Protocols**



# Thank You!

Thank you for your participation and engagement.

If you have questions after today's session or would like additional support, please reach out to [info@pophealthlc.org](mailto:info@pophealthlc.org) or [info@healthbegins.org](mailto:info@healthbegins.org).

We look forward to continuing this work together in the next session!

