

**Title:** The Proverbial “What do you do?”: An Evaluation of FQHC Pediatrician Perspective on DOH Screening

**Background:** A 2022 study found that approximately 70% of Federally Qualified Health Centers (FQHCs) have social risk-screening capabilities<sup>1</sup>. Children living in households with low socioeconomic status and with health-related social needs have worse health outcomes<sup>2</sup>.

Pediatricians in FQHCs experience the confluence of these findings. This study captures the views of front-line, community pediatricians working in FQHCs participating in drivers of health (DOH) screening and provides insight on improving screening practices, building response systems, and affecting physician morale.

**Objective:** To explore pediatrician perspectives, practices, and patterns of screening for drivers of health in FQHCs across the United States.

**Methods:** Standard qualitative interview practices and analysis were followed. A grounded theory and constructivist approach was used to identify themes and subthemes. A coding framework was developed, the transcripts were reviewed, and disputes were resolved by a designated content expert. The codebook was edited to clarify emerging themes and subthemes.

**Results:** Three general themes emerged:

- 1) Support for drivers of health screening and response systems. Subthemes included: a) Dedicated staffing models, b) Access to community resources, c) Co-location of services, d) Stable organizational funding.
- 2) Barriers for successful screening for drivers of health. Subthemes included: a) Perception of time related to screening fatigue and care prioritization, b) Language barriers, c) Availability of resources.

3) FQHC pediatrician perspective on screening for drivers of health. Subthemes included: a) Recognizing social need importance, b) Responsibility for health and well being, c) Moral distress, d) Physician burnout.

**Conclusions:** The FQHC pediatricians interviewed recognized the importance of screening patients for drivers of health. The perception of screening success was shaped by the support or barriers felt in the clinic. Using dedicated staffing models and stable funding alleviates some of the stressors that can lead to moral distress and burnout. Future efforts should target interprofessional team development, advocacy skills training, and health policy changes.

1. Cole M, Nguyen K, Byhoff E, Murray GF. Screening for Social Risk at Federally Qualified Health Centers: A National Study. *American Journal of Preventive Medicine*. 2022;62(5):670-678. doi:<https://doi.org/10.1016/j.amepre.2021.11.008>
2. Pearce A, Dundas R, Whitehead M, Taylor-Robinson D. Pathways to inequalities in child health. *Archives of Disease in Childhood*. 2019;104(10):998-1003. doi:<https://doi.org/10.1136/archdischild-2018-314808>