

Practice Bulletin:

Community Resources for Patient Referrals



In the conditions created by the COVID-19 crisis, pediatric providers are uniquely positioned to refer families to social supports for food insecurity, housing, and other resources to minimize children's adverse experiences. A brief conversation and referral process can make a meaningful difference in the life of a family.

Why a Referral to Community Resources Matters

Families consistently express a high degree of trust in providers,ⁱ making pediatric visits a critical avenue for timely, nonstigmatizing connections to community resources in response to the COVID-19 pandemic. Pediatric providers have long recognized the importance of asking a few questions to identify emergent needs, then connecting families to social and material supports, including housing and cash assistance. However, providers have limited time during 15-minute well-child visits and varied skill levels in [asking families sensitive questions](#).ⁱⁱ Pediatric providers can also be reluctant to talk to families about referrals without having timely, accurate information to share. They do not want to offer solutions that have months- or years-long waiting lists or will not be covered under different healthcare insurance plans.ⁱⁱⁱ

While it is challenging to stay on top of changing community resources—as well as to integrate screening and referrals into a new virtual well-child

visit workflow—it is even more important now that pediatric providers leverage the trusted role that they can play in assisting families getting help. Pediatric providers need not do this work alone. Many communities have resource referral networks or family navigator services that are supported by private payors or school districts that actively maintain service directories.

These are systems that pediatric providers should leverage, not replicate. To increase family access to screening and referral, these networks have adapted developmental screening tools to be available online and are providing virtual trainings, resources, and activities to support child mental health and development.^{iv} Organizations are also using social media and texting platforms to more efficiently spread the word about resources available for families during this crisis.

How to Connect Families to Community Resources

Rather than waiting for families to volunteer information about their social support needs, providers who ask families about their needs have higher referral rates to food pantries, bill payment assistance, and counseling centers.^v Pediatric providers are a source of referrals for some essential community services, such as legal consultation, which early reports suggest are underused during this crisis.^{vi} By connecting families with community resources, pediatric providers can play

a critical role in helping families weather the COVID-19 crisis.

While it is challenging to stay on top of changing community resources—as well as to integrate screening and referrals into new virtual well-child visit workflow—this also underscores the important and trusted role that pediatric providers play in helping families weather the COVID-19 crisis.



RECOMMENDATIONS FOR PEDIATRIC PROVIDERS

1.

SPREAD THE WORD

on social media about resources that you want to learn about for families and ask friends and local networks for suggestions. Ask a volunteer or motivated staff member to compile responses and update resource lists regularly.

2.

COLLECT CURRENT INFORMATION

from community referral partners describing their services and resources. Set up a physical table and dedicate a section of your website to house information created by these partners. These partners may also be able to support “warm handoffs” to services and feedback loops about referral progress.

3.

REACH OUT TO FAMILIES about upcoming well-child visits and encourage them to attend (even if virtual). Task an “office champion” with proactive outreach to communicate the importance of keeping well-child appointments. When families do not keep these appointments, critical immunizations, timely screenings, and referrals can be delayed.

4.

INVOLVE YOUR STAFF in sharing the responsibility for assessing needs and follow-up, including nurses, social workers, and other clinic staff. Adapt staffing and workflow guidelines for screening, assessment, and managing positive screens and referral. These changes may also create greater flexibility for providers.

5.

CONSIDER PRIVACY

during virtual visits. Ask parents if they are able to have a private conversation; if not, provide follow-up options.

6.

FOCUS ON THE POSITIVE.

Notice and tell families about things that they are doing well during developmental screenings.⁷

7.

PROVIDE NEXT STEPS.

Suggest actions that families can take at home to support their child’s development—and their own self-care.⁸

8.

ASK FAMILIES FOR FEEDBACK

about their referral experiences. Use this information to clarify and strengthen the guidance you share with families.

Tools and Resources

Tools for Supporting Families

The [Common Factors Intervention \(HELP model\)](#). The American Academy of Pediatrics (AAP) offers this model to promote interactions with families that address behavioral and emotional concerns in primary care.

The [Clear Toolkit](#). A clinical decision aid developed to help physicians, nurses and other allied health workers (e.g. midwives, community health workers, etc.) assess different aspects of patient vulnerability in a contextually appropriate and caring way and easily identify key referral resources in their local area.

The [STEPS forward module on Empathetic Listening](#). The American Medical Association offers this CME course to improve skills for listening and communicating empathy in conversations with patients.

The [EveryONE Project Neighborhood Navigator](#). The American Academy of Family Physicians' EveryONE project promotes health equity providing tools for assessing and referring patients for social needs. The Neighborhood Navigator is an interactive tool intended to connect patients with local resources and programs by zip code.

[COVID-19 Family Resources](#). The AAP recommends articles for parents in response to the pandemic, in addition to general information for parents on [HealthyChildren.org](#). Many articles are available in both English and Spanish.

The AAP [STAR center](#) offers technical assistance including toolkits for screening for a variety of social care needs.

The [Bright Futures website](#) offer tools and guidelines for building systems for prevention and health promotion in the medical home.

Common Community Resources

2-1-1. Every state has a 2-1-1 call center that can help families locate resources in their area for food assistance, housing assistance, economic support, and crisis resources. 2-1-1 is a good resource for questions and information related to immigration. It is also equipped to support families experiencing domestic abuse.

Family Resource Centers (FRC). Many states have a network of community-based Family Resource Centers that can be important sources of support. FRCs typically offer or can help families access services such as parenting skills training, job training, substance abuse prevention services, mental health services, housing support, crisis intervention services, literacy programs, and concrete supports such as food and clothing banks.

Help Me Grow (HMG). Currently with 34 HMG network affiliates, HMG houses centralized information about resources centered on early childhood systems and supports. HMG affiliates maintain a current directory of available community services. Families can be referred to HMG, call HMG directly, and, in many locations, complete application forms online.

United Way. Located in every state and many communities, United Way operates as a community-based nonprofit and coordinates with many local partners that provide direct assistance to families. United Way typically focuses on education, financial stability, and health.

[Learn about Chapin Hall's evaluation of innovations designed to promote screening for contributors to toxic stress during pediatric well-child visits and connect families to early childhood and community service providers.](#)

ⁱ See <https://news.gallup.com/poll/245597/nurses-again-outpace-professions-honesty-ethics.aspx>

ⁱⁱ Miller, E. J. (2013). Surveillance for behavioral health problems and developmental disabilities in pediatric primary care. *North Carolina Medical Journal*, 74(1), 63–64.

ⁱⁱⁱ Walders, N., Childs, G. E., Comer, D., Kelleher, K. J., & Drotar, D. (2003). Barriers to mental health referral from pediatric primary care settings. *American Journal of Managed Care*, 9(10), 677–683.

^{iv} See <https://helpmefrownational.org/wp-content/uploads/2020/03/HMG-COVID-19-Response-FINAL.pdf>

^v Chung, E. K., Siegel, B. S., Garg, A., Conroy, K., Gross, R. S., Long, D. A., . . . Yin, H. S. (2016). Screening for social determinants of health among children and families living in poverty: A guide for clinicians. *Current Problems in Pediatric and Adolescent Health Care*, 46(5), 135–153; Selvaraj, K., Ruiz, M. J., Aschkenasy, J., Chang, J. D., Heard, A., Minier, M., . . . Scotellaro, M. A. (2019). Screening for toxic stress risk factors at well-child visits: The Addressing Social Key Questions for Health study. *The Journal of Pediatrics*, 205, 244–249.

^{vi} National Center for Medical Legal Partnership. (2020). *8 things every Medical Legal Partner can do right now to respond to COVID-19*. Washington, DC: Author. Retrieved from: <https://medical-legalpartnership.org/wp-content/uploads/2020/04/8-Things-Every-MLP-Can-Do-Right-Now-To-Address-COVID-19.pdf>

^{vii} American Academy of Pediatrics. (2019). Bright Futures tip sheet: Integrating social determinants of health into health supervision visits. Itasca, IL: Author. Retrieved from: https://brightfutures.aap.org/Bright%20Futures%20Documents/BF_IntegrateSDoH_Tipsheet.pdf

^{viii} Center for the Developing Child. (2020). How to support children (and yourself) during the COVID-19 outbreak. Cambridge, MA: Author. Retrieved from: <https://developingchild.harvard.edu/resources/how-to-support-children-and-yourself-during-the-covid-19-outbreak/>

For more information about Chapin Hall’s work on mitigating toxic stress through interventions at pediatric clinics, contact [Julie McCrae](#).