

**Pediatric Version of Social Determinants of Health Screening Tool**

<b>Domain</b>	<b>Question</b>	<b>Response</b>	
<b>Healthcare</b>	In the past month, did poor health keep your child from doing his/her usual activities, like school or play?	<b>Yes</b>	<b>No</b>
	In the past year, was there a time when your child needed to see a doctor but could not because it cost too much?	<b>Yes</b>	<b>No</b>
<b>Food</b>	In the past year, did your child ever eat less than he/she needed to because there was not enough food?	<b>Yes</b>	<b>No</b>
<b>Employment &amp; Income</b>	Is it hard to find work or another source of income to meet your family's basic needs?	<b>Yes</b>	<b>No</b>
<b>Housing &amp; Shelter</b>	Are you worried that in the next few months you may not have housing for you and your child?	<b>Yes</b>	<b>No</b>
<b>Utilities</b>	In the past year, have you had a hard time paying your family's utility company bills?	<b>Yes</b>	<b>No</b>
<b>Family Care</b>	Do you need help finding or paying for child care?	<b>Yes</b>	<b>No</b>
<b>Education</b>	Do you want help with school or job training, like finishing a GED, going to college or learning a trade?	<b>Yes</b>	<b>No</b>
<b>Transportation</b>	Do you ever have trouble getting to school, work or the store because you don't have a way to get there? Do you have trouble getting your child to school or activities or appointments?	<b>Yes</b>	<b>No</b>
<b>Personal and Environmental Safety</b>	Do you ever feel unsafe in your home or neighborhood? Do you ever feel your child is unsafe?	<b>Yes</b>	<b>No</b>
<b>General</b>	If you answered yes to any of these questions, would you like help meeting any of these needs?	<b>Yes</b>	<b>No</b>
	Are any of your needs urgent?	<b>Yes</b>	<b>N</b>