

Addressing Social Determinants of Health in Family Planning Care

Plan for Improvement



An understanding of the conditions of communities served by family planning projects, in conjunction with identifying and addressing the social determinants they experience, will contribute to client-centered, culturally- and linguistically-appropriate, trauma-informed care that ensures equitable and quality service delivery.

Family planning staff can take steps to address the conditions experienced by their clients. Engage in a discussion with your family planning staff team to come up with ideas for action; if your project has a community and/or youth advisory group, consider engaging them in these discussions as well. Use this worksheet to record priority actions or change ideas and create a plan for improvement.

Action/Change Idea	What action or change will occur?	Who will carry it out?	By when?	What resources are needed?	How and with whom will we communicate?	What are our immediate next steps?	How will success of the action/change idea be evaluated?
<i>For example: Integrate social determinants of health screening into client visits</i>	<i>Identify and implement a standardized social determinants of health assessment tool in the clinic workflow</i>	<i>Clinic manager will identify the screening tool Medical assistant will administer the screening during the client visit, and a clinical services provider will review the results</i>	<i>January 1, 2023</i>	<i>Social determinants of health screening tool, updated protocol, and workflow</i>	<i>We will hold a meeting with all staff to discuss the purpose of social determinants of health screening, the screening tool, and changes to existing protocol and workflow</i>	<i>Identify social determinants of health screening tool, how and when the screening will be administered, and follow-up steps based on screening results</i>	<i>Monitor the % of clients screened Use a quality improvement approach to increase screening rates, as needed</i>