

**Title:** Baseline CRxH resource need and discordance with HRSRs

**Abstract (max 300 words)**

### **Background**

The accuracy of health-related social risk (HRSR) screeners for detecting unmet resource needs is poorly understood, yet these screeners are increasingly used in pediatric settings.

### **Objective**

Among parents of hospitalized children: a) describe the prevalence of HRSRs and unmet resource needs, b) calculate the sensitivity and specificity of the CMS Accountable Health Communities (AHC) risk-based screener for identifying unmet resource needs, and c) test the association between sociodemographic characteristics and sensitivity of the Accountable Health Communities (AHC) screener.

### **Methods**

We used baseline data collected from parents of hospitalized children ( $N=637$ ) enrolled (November 2020-June 2022) in a double-blind RCT that evaluated a social care intervention initiated during a child's discharge from the hospital. We assessed caregivers' (1) unmet social resource needs for 9 resource types and (2) HRSRs using the AHC screening tool. Using unmet resource needs as the gold standard, we calculated the sensitivity and specificity of the AHC tool to detect unmet resource needs for food, housing, transportation, physical abuse, and interpersonal violence. We tested for associations between sociodemographic characteristics and discordance between unmet needs and the AHC tool.

### **Results**

Most caregivers were female (94%) and identified as African American/Black (81%). Unmet resource needs were prevalent (69%  $\geq 1$  need, 19% 3+ needs). The most common need was for food followed by housing. The AHC screener had poor sensitivity for detecting unmet transportation (42.8%, 95% CI: 35%-50.8%), interpersonal violence (28.6%, 95% CI: 11.3%-52.2%), housing (60.5%, 95% CI: 53.5%-67.1%), and food (63.1%, 95% CI: 57.7%-68.4%) needs. Specificity was lowest for housing needs (73%, 95% CI: 67.6%-77.9%). Race was associated with discordance for transportation needs ( $p=.003$ ). Education was associated with discordance for housing needs ( $p=0.016$ ).

### **Conclusion**

The widely used, AHC risk-based screener missed many unmet resource needs identified by parents of hospitalized children. Parental self-assessment of resource needs may be better than risk assessment for addressing needs.