

## Health Action Plan (HAP) Assessment Guide

Note: All screening tools (required and additional) may be found in the 2-day training manual at:

<https://www.dshs.wa.gov/sites/default/files/ALSA/stakeholders/documents/duals/Trainers%20Manual/2%20Day%20training%20Manual.pdf>

and the Care Coordinator Toolkit at: <https://www.dshs.wa.gov/alsa/stakeholders/washington-health-home-program-core-training>

Assessment	Age	When to Offer	Notes & Considerations	Translations & Resources
PAM®	18+	Required	Required if CAM not present and client is 18 years or older.	Multiple languages available. Visit Phreesia/Insignia website.
CAM®	18+	Required	Required if PAM not present and client is 18 years or older. Caregivers may be informal or formal caregivers	Multiple languages available. Visit Phreesia/Insignia website.
P-PAM®	Under 18	Required	Required if client is less than 18 years of age. If client is 18 years or older, field is not required on HAP and no data is accepted. Parents include: Biological, adoptive, or foster.	Multiple languages available. Visit Phreesia/Insignia website.
Katz ADL	18+	Required	If a client indicates that they are	<a href="https://hign.org/consultgeri/try-this-series/katz-index-independence-activities-daily-living-adl">https://hign.org/consultgeri/try-this-series/katz-index-independence-activities-daily-living-adl</a>

			<p>dependent and could use assistance with two or more ADLs consider a discussion about applying for LTSS (or follow-up with case manager on changes if client already has LTSS). If client is less than 18 years of age, field is not required on HAP and no data is accepted. For minors, discuss any need for ADLs with parent/ guardian and if referrals are needed (e.g. DDA)</p>	
PHQ-9	18+	Required	<p>Score of 10 or higher indicates potential depression. Have discussion with client. Do they receive treatment, is a referral needed, share elevated scores with PCP or BH provider.</p>	<p>Multiple languages available <a href="https://www.phqscreeners.com/select-screener">https://www.phqscreeners.com/select-screener</a></p>



## Health Home Program Washington

			"Yes" on question 9 (suicide) would result in action	
PSC-17	4-17	Required	<p>Completed by parent/guardian. A child age 13 and over may self-administer the screening. Total score of 15 or higher, or any subscale score exceeding the cut-off should lead to referral to behavioral health provider or back to PCP for further assessment.</p> <p>Subscales</p> <ul style="list-style-type: none"><li>• Internalizing-anxiety &amp; mood disorder, cut-off score 5</li><li>• Attention-hyperactivity, attention deficit, cut-off score 7</li><li>• Externalizing – conduct problems, oppositional behavior, cut-off score 7</li></ul>	<p>Multiple languages available</p> <p><a href="https://www.massgeneral.org/psychiatry/treatments-and-services/pediatric-symptom-checklist/">https://www.massgeneral.org/psychiatry/treatments-and-services/pediatric-symptom-checklist/</a></p>

BMI	2+	Required	Anything below 18.5 or 25 and above as score considered outside of healthy	<p>BMI tools online</p> <p><a href="http://www.cdc.gov/healthyweight/assessing/bmi/index.html">http://www.cdc.gov/healthyweight/assessing/bmi/index.html</a></p> <p>BMI Calculator for Children and Teens (2-19)</p> <p><a href="https://www.cdc.gov/healthyweight/bmi/calculator.html">https://www.cdc.gov/healthyweight/bmi/calculator.html</a></p> <p>BMI Calculator for Adults <a href="#">Adult BMI Calculator   Healthy Weight, Nutrition, and Physical Activity   CDC</a></p>
DAST	16+	When indicated	<p>Score of 1 and above may indicate a need for intervention.</p> <p>If there is an elevated score, the focus is getting clients to the appropriate professional or resource.</p>	<p>English</p> <p><a href="https://sbirt.publichealthcloud.com/resources/links/DAST-10%20Revised.pdf">https://sbirt.publichealthcloud.com/resources/links/DAST-10%20Revised.pdf</a></p> <p>Spanish (some differences including 6 month lookback &amp; 4 more items)</p> <p><a href="https://elcentro.sonhs.miami.edu/research/measures-library/dast-10/dast-10_spa.pdf">https://elcentro.sonhs.miami.edu/research/measures-library/dast-10/dast-10_spa.pdf</a></p> <p>DBHR: <a href="https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/substance-use-treatment#type-of-services">https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/substance-use-treatment#type-of-services</a></p>
GAD-7	12+	When indicated	<p>Score of 10+ may indicate anxiety.</p> <p>Discuss with client, notify PCP or BH provider of elevated score</p>	<p>Multiple languages available</p> <p><a href="https://www.phqscreeners.com/select-screener">https://www.phqscreeners.com/select-screener</a></p>
AUDIT	14+	When indicated	<p>A score of 8 or more may indicate a need for intervention.</p> <p>If there is an elevated score, the focus is getting clients to the appropriate</p>	<p>Multiple languages available</p> <p><a href="https://auditscreen.org/translations">https://auditscreen.org/translations</a></p> <ul style="list-style-type: none"> <li>DBHR: <a href="https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/substance-use-treatment#type-of-services">https://www.hca.wa.gov/health-care-services-supports/behavioral-health-recovery/substance-use-treatment#type-of-services</a></li> <li>AUDIT : the Alcohol Use Disorders Identification Test : <a href="#">guidelines for use in primary health care (who.int)</a></li> </ul>

			professional or resource.	<ul style="list-style-type: none"> <li>• <a href="#">Drinking Levels Defined   National Institute on Alcohol Abuse and Alcoholism (NIAAA) (nih.gov)</a></li> <li>• <a href="#">Screening, Brief Intervention, and Referral to Treatment (SBIRT)   SAMHSA</a></li> <li>• <a href="#">Alcohol Use Disorders Identification Test (AUDIT)   SAMHSA</a></li> <li>• <a href="#">How to Start Drinking Less   CDC</a></li> </ul>
Falls Risk	18+	When indicated	<p>0 to 2 indicates a low risk for falls</p> <p>2 to 4 indicates a moderate risk for falls</p> <p>4 or more indicates a high risk for falls</p>	<p>English version <a href="#">My Falls-Free Plan (wa.gov)</a></p> <ul style="list-style-type: none"> <li>• Fall Prevention Resources <a href="#">Fall Prevention Resources   Washington State Department of Health</a></li> <li>• Check for Safety (CDC) <a href="https://www.cdc.gov/steady/pdf/check_for_safety_brochure-a.pdf">https://www.cdc.gov/steady/pdf/check_for_safety_brochure-a.pdf</a></li> <li>• What YOU Can Do To Prevent Falls (CDC) <a href="https://www.cdc.gov/steady/pdf/STEADI-Brochure-WhatYouCanDo-508.pdf">https://www.cdc.gov/steady/pdf/STEADI-Brochure-WhatYouCanDo-508.pdf</a></li> <li>• AARP HomeFit Guide is a room by room guide to modifying homes for safety (AARP) <a href="http://www.aarp.org/livable-communities/info-2014/aarp-home-fit-guide-aging-in-place.html">http://www.aarp.org/livable-communities/info-2014/aarp-home-fit-guide-aging-in-place.html</a></li> </ul>
FLACC (Behavioral pain assessment scale)	When self report not possible. For ages 2 months to 7 years, or if an individual is not able to communicate pain level	When indicated	A score of 4 or above indicates a moderate level of pain that may interfere with activities of daily living. Discuss results with client, notify PCP of elevated score.	Find English version on the Care Coordinator toolkit
Wong-Baker FACES®	Use with adults and children 3	When indicated	A score of 4 or above indicates a moderate level of	Multiple languages available <a href="http://www.wongbakerfaces.org/faces-download/">http://www.wongbakerfaces.org/faces-download/</a>

(pain rating scale)	years and older		pain that may interfere with activities of daily living. Discuss results with client, notify PCP of elevated score.	
Numeric (pain scale)	Adults and children 9 years and older	When indicated	A score of 4 or above indicates a moderate level of pain that may interfere with activities of daily living. Discuss results with client, notify PCP of elevated score.	Find English version on the Care Coordinator toolkit