

# Help Me Grow Inland Empire Electronic Data System (EDS) Evaluation Report FY 2020-2021

07.01.2020-06.30.2021



The following report presents Help Me Grow Inland Empire (HMGIE) Data from Fiscal Year 2020-2021. The data displays who HMGIE served, who was reached, and what assessments were provide.



#### Acknowledgements

At Loma Linda University Health (LLUH), our commitment to caring for the mind, body, and spirit is part of everything we do. We're combining our educational, clinical care, and research arms to fulfill our institutional mission: to further the teaching and healing ministry of Jesus Christ: to make man whole.

Listen, Respect, and Engage are three powerful words that encompass the LLUH's approach in promoting equity in our communities. Community engagement requires us to listen to our communities, which leads to an increased level of respect, that allows us to then engage and find problem-solving solutions. Loma Linda University's Institute for Community Partnership's (ICP) mission is to ensure that LLUH is both relevant and responsive to the needs of our community. The Institute for Community Partnerships supports the implementation of LLUH's hospital community benefit investments and fulfillment of the priority focus areas, in close collaboration with its community partners. ICP also promotes and supports meaningful community-engaged research, academic service-learning at Loma Linda University Health (LLUH). The Institute plays a centralizing, coordinating, and implementation function for the four licensed hospitals at LLUH's community benefit investment dollars. We are committed to strategically working with our community partners to better understand and address the needs and strengths of the community through research, teaching, and service. Community participation is at the core of our efforts, with structured learning opportunities for career pathways for underrepresented minoritized students, training and workforce integration for community health workers, and community research projects.

With our **community partners**, this took on new meaning in 2020 with the impact of Covid-19 in how we worked collaboratively to improve the health and wellness of the people most impacted by the pandemic in our region. At LLUH, our focus on the social determinants of health aligns with our value of wholeness and ensures our system invests health not just healthcare.

**Help Me Grow Inland Empire (HMGIE)** provides both an access point for our most vulnerable families to be connected to community resources, and a system framework for providers to work together to ensure an organized system of support is available in our community. To ensure that we are providing resources that are needed and helpful to families, we seek continuous feedback from parents with children from pregnancy through age 5 to determine what support they would most like to see available in their community.

#### Help Me Grow Inland Empire Partners:

- First 5 San Bernardino
- First 5 Riverside
- Loma Linda University Children's Hospital
- Riverside University Health System
- SAC Health System

LLU's Institute for Community Partnerships has been asked to analyze the data, review the research, engage in community conversations, share the research results, and deliver a summary of lessons learned as well as create action steps that can be taken to promote child well-being in the Inland Empire. These action steps are based on information provided by HMGIE. We have incorporated strengths from successful models and practices, which could potentially be used within the Inland Empire to support families. These action steps focus on identifying culturally relevant supports needed for families of color. In addition, these steps focus on reducing existing barriers (including stigma) which prevent families from accessing support.

In collaboration and thoughtful partnership with Help Me Grow Inland Empire (HMGIE,) this report features the work done by LLU's ICP & our partners in:

- Reporting out on the clients and families served through HMGIE in FY 2020-2021.
- Reporting out on the number of developmental screenings and their results.
- Reporting out on the number of social determinants of health screenings and their results.
- Reporting out on the type and number of referrals given to families, based on need, and their completion rate.

Lastly, this work would not be possible without the families, community stakeholders and leaders, early childhood educators, medical professionals, school systems, community-based organizations who engaged with the HMGIE system during the program year.

Specific Acknowledgements:

- Marti Baum, MD
- Ronald Stewart, PhD
- Brett Walls, MBA
- Sharlene Gozalians, DrPH, MPH
- Juan Carlos Belliard, PhD, MPH

Special thanks to Crissy Irani and Jasmine Hutchinson as well for their contributions.

With gratitude,

Juan Carlos Belliard, PhD, MPH Assistant Vice President for Community Partnerships Professor in Global Health at the School of Public Health Loma Linda University

Tab	le of	Cont	ents

Executive Summary	6-7
Background and Methods	8-10
Section 1: Evaluation Question #1: Who did HMGIE Serve?	11
Service Geography/Client County Residency	12
Zip Code	13
Client Demographics	14
Summary of Clients Serve	15
Section 2: Evaluation Question #2: What resources/referrals were families linked to?	16
Risk Factors and Social Determinants of Health (SDOH) by Race and County	
SDOH Screening Overview	17-24
Financial Strain Risk SDOH	25
Food Insecurity Risk SDOH	26
Transportation Risk SDOH	27
Physical Activity Risk SDOH	
Stress Risk SDOH	29
Social Connection Risk SDOH	30
Tobacco Risk SDOH	31
Partner Violence Risk SDOH	32
Alcohol Risk SDOH	33
SDOH Positive Screen by Race	34
Ages and Stages Questionnaire (ASQ-3)	
ASQ-3 Screening Overview	35-39
Last Dep ASQ Completed	39
ASQ Communication Score	40
ASQ Gross Motor Score	41
ASQ Fine Motor Score	42
ASQ Problem Solving Score	43

ASQ Personal Social Score	44
Discussion, Limitations and Next Steps	45-49
Appendix A: Evaluation Question #1: Comprehensive Tables and Figures	50-61
Appendix B: Evaluation Question #2: SDOH Comprehensive Tables and Figures	62-114
Appendix C: Evaluation Question #2: ASQ-3 Comprehensive Tables and Figures	115-145
References	146

#### Fiscal Year 2020-2021 Executive Summary

#### Help Me Grow (HMG) Background

Help Me Grow is a system model that works to promote integrated, cross-sector collaboration in order to build resourceful and effective early childhood systems that mitigate the impact of hardship and support protective factors among families. Through model implementation in communities and states across the country, the mission of HMG is to advance developmental promotion and promote early detection, referral, and linkage to community-based supports, such that all children can grow and thrive to their full potential.

#### **Research Questions and Purpose of Report**

This data report was compiled during fiscal year 2020-2021 to provide a comprehensive look at children from pregnancy to age eight served in San Bernardino and Riverside Counties (Inland Empire). It is intended to guide community efforts in reaching parents of young children and understanding their needs. This report provides measurements for the HMG action teams to determine desired long-term population outcomes, as well as implementation strategies that will reach families and meet existing resource needs. Wherever possible, the data in this report is provided in total, and when possible, by County and race level data for comparison.

This report aims to answer two priority questions: 1) *In FY 20-21, who did HMGIE serve?* This question will be answered by describing the quantitative summary of the first twelve months along with an analysis of indicators (who did we reach, what did we provide, how well did we do it) and 2) In FY 20-21, of the families served, what assessments were they linked to?

#### **Data Collection and Analysis Process:**

The Data and Evaluation component of HMG ensures that the appropriate information is being gathered to support families in connecting to services, provides useful information for the community on family needs and resource gaps, and informs ongoing improvement efforts.

The HMGIE Electronic Data System (EDS) is the activity recorded in EPIC as related to the HMGIE Pilot launched in 2020. This system connects Loma Linda University Children's Hospital (LLUCH,) Riverside University Health System, and SAC Health System (SACHS) so that in advance of Well Child appointments, parents are issued screeners electronically via My Chart (online patient portal.) The age appropriate ASQ-3 and SDOH screeners are currently issued as part of the Pilot. Parents complete these screeners using a smart device and the scores are automatically tabulated and returned to the physician's workflow for the upcoming appointment.

Analysis was completed using SPSS-27 and Microsoft Excel. Statistical tests used include T-Tests, ANOVA, Paired T-Tests and general frequency and descriptive data analyses.

#### Summary of Findings:

During FY 20-21, a total of 1,883 families were seen through the EDS. Of the 1,883 families enrolled through the EDS, nearly 43% of families identified living in Riverside County, while 56% reside in San Bernardino County. Nine-hundred ninety-one (52.6%) indicated that they were 'Male' and 892 (47.4%) indicated 'Female'. Based on the participant demographics, the majority of participants self-identified as 'Male' gender (N=991, 52.6%), 'White-Other' race (N=797, 42.3%), 'Hispanic or Latino-Mexican' ethnicity (N=587, 31.2%), and primarily spoke 'English' at home (N=1,657, 88.0%). Furthermore, the majority indicated that the child age in years and/or months at program entrance was '3 years old' (N=487, 25.9%).

A total of 5,277 individual SDOH domain screenings were completed, and 1,589 ASQ-3 Screenings (nearly 85% of all families.) Of the 1,883 clients, 100% received a screening on at least 1 domain of the SDOH. When it came to SDOH Positive screens, there was a statistically significant difference between race groups as pertaining to Food Insecurity (p = 0.01), Transportation Risk (p=0.03) and Alcohol Risk (p=0.000). Families who identified as White/Caucasian were more likely compared to their other race group counter parts to score a positive screen on an SDOH screening. After further analysis, it was also determined that there were no statistically significant differences between race groups or geographic location (County) and ASQ results.

#### **Conclusion and Next Steps:**

Data in this report demonstrates the correlation between children's health and development and the Social Determinants of Health (SDOH). It was found that families who had atypical scores in at least one domain of the SDOH screening, had a higher rate of an atypical score in at least one category of the ASQ-3. Based on these results, next steps can include further exploration of and identifying resource gaps in data, identifying workflow successes and challenges within and between families and providers. Additionally, creating a feedback mechanism with partners and health care providers to respond to community voices and establishing standardized protocols and continuously striving to improve the EDS by expanding to include additional physicians/health care providers/professionals/Early Childhood Educators and setting data collection and standardization goals.

#### Help Me Grow Background:

Help Me Grow (HMG) is a system model that works to promote integrated, cross-sector collaboration in order to build efficient and effective early childhood systems that mitigate the impact of adversity and support protective factors among families. Through model implementation in communities and states across the country, the mission of Help Me Grow is to advance developmental promotion and promote early detection, referral, and linkage to community-based supports, such that all children can grow and thrive to their full potential. Help Me Grow is not a stand-alone program, but rather utilizes and builds on existing resources in a community to provide a more comprehensive approach to early childhood system strengthening.

Successful implementation of Help Me Grow leverages community resources, maximizes existing opportunities, and advances a coalition working collaboratively toward a shared agenda through the implementation and cooperation of four Core Components:

- A Centralized Access Point integrally assists families and professionals in connecting children to appropriate community-based programs and services;
- 2) Child Health Care Provider Outreach supports early detection and intervention, and loops the medical home into the system;
- Family & Community Outreach supports education to advance developmental promotion, and also grows awareness of the system and the services that it offers to families and community-facing providers;
- 4) Data Collection and Analysis supports evaluation, helps identify systemic gaps, bolsters advocacy efforts, and guides quality improvement so the system is optimally supporting families and ensuring children receive what they need, when they need it.





#### **Database Entry and Background:**

The Help Me Grow Inland Empire's (HMGIE) Electronic Data System (EDS) is the activity recorded in EPIC as related to the HMGIE Pilot launched in 2020. This system connects Loma Linda University Children's Hospital (LLUCH), Riverside University Health System, and SAC Health System (SACHS) so that in advance of Well Child appointments, parents are issued screeners electronically via My Chart (online patient portal.) The age appropriate ASQ-3 and SDOH screeners are currently issued as part of the Pilot. Parents complete these screeners using a smart device and the scores are automatically tabulated and returned to the physician's workflow for the upcoming appointment.

#### Data Collection and Analysis:

The Data and Evaluation component of HMGIE ensures that the appropriate information is being gathered to support families in connecting to services, provides useful information for the community on family needs and resource gaps, and informs ongoing improvement efforts. Information on system operations is critical to ensuring that families are connected to the right services in an appropriate and timely manner.

HMGIE is in a unique position to collect data that reflect system-level issues: not only who calls and why, but also what happens to families seeking help. Data Collection and Analysis also serves as a crucial tool for Continuous Quality Improvement. Evaluation of the HMG system helps to assess how well it is working or what may need to be changed to improve the service, including gaps and barriers.

Data Collection and Analysis ensures ongoing capacity for continuous system improvement, a key structural requirement of HMGIE. Data are collected throughout all components of the HMGIE system, including child health provider outreach, family and community outreach, and within the centralized access point. Data is mutually exclusive and non-duplicated.

The collection of a set of shared metrics across the HMG National Network informs the national narrative regarding the impact of HMG on children and family across the country. The collection of locally-sourced metrics enable HMGIE affiliates to benchmark progress, identify areas of opportunity and systemic gaps, and guide strategic quality improvement projects.

Fidelity to the component of Data Collection and Analysis consists of the following criteria:

- HMG-specific data are regularly monitored to determine relevant trends, patterns, and opportunities for improvements;
- HMG-specific data are shared across partners through strategies such as provision of regular reports, ad hoc requests, and targeted evaluation projects;
- Opportunities are identified for and conducting continuous quality improvement projects using HMG-specific data; and

• HMG-specific data, such as identification of systemic barriers, are leveraged to generate community change.

Analysis was completed using SPSS-27 and Microsoft Excel. Statistical tests used include T-tests, ANOVA, Paired T-Tests and general frequency and descriptive data analyses.

#### About This Report:

This data report was compiled withing HMGIE during fiscal year 2020-2021 to provide a comprehensive look at children from pregnancy to age eight served in San Bernardino and Riverside Counties (which are located in the Inland Empire). It is intended to guide community efforts in reaching parents of young children and understanding their needs. This report provides measurements for the HMGIE action teams to determine desired long-term population outcomes, as well as implementation strategies that will reach families and meet existing resource needs. Wherever possible, the data in this report is provided in total, and when possible, by County level data for comparison. By coordinating services from pregnancy to age five under a coordinated access point, HMGIE provides a systematic way to gather ongoing data on family needs, available resources, and service gaps. Identifying service gaps can inform future advocacy and investment efforts.

This report is presented in two sections in order to answer the two main research questions. Section 1 covers a landscape of who was served during FY 2020-2021. Landscape data includes general demographics of participants. Section 2 covers a deeper analysis of what services and assessments were provided to families.

## Section 2

# **Evaluation Question #1**

Who did Help Me Grow Inland Empire Serve in FY 2020-2021?



<sup>29</sup>Map of the Inland Empire, California.

#### **Overall Participation**

A total of 1,883 families were enrolled in HMG in FY 2020-2021 through the Electronic Data System (EDS).

#### Service Geography

Of the 1,883 families enrolled through the EDS, nearly 43% of families identified living in Riverside County, while 56% reside in San Bernardino County. Note that within the EDS, any child/family from any County can be served within the clinic setting and hence is captured within this system as well for service\*.



#### Figure 1. Client County Residency

\*The EDS system will enroll any client who is seen at a Pilot partner clinic, as opposed to the CAP system that only serves clients in Riverside and San Bernardino Counties; clients who enter the CAP system and do not live in one of these two counties are referred back to their local care coordination hubs or HMG.

#### Zip Code

Top 5 zip codes identified were '92410' (N=114, 6.1%), '92324' (N=94, 5.0%), '92553' (N=85, 4.5%), '92404' (N=82, 4.4%), and '92201' (N=79, 4.2%).

For the service priority areas, the responses indicated the following zip-codes as the top three in each of the two Counties:

- San Bernardino
  - '92410' (N=114, 6.10%)
  - '92324' (N=94, 5.00%)
  - o '92404' (N=82, 4.40%)
- Riverside
  - o '92553' (N=85,4.50%)
  - '92201' (N=79, 4.20%)
  - '92509' (N=21, 1.10%)

Zip Code	Frequency	Percentage
92410	114	6.10%
92324	94	5.00%
92553	85	4.50%
92404	82	4.40%
92201	79	4.20%
92346	69	3.70%
92407	67	3.60%
92376	55	2.90%
92354	53	2.80%
92405	52	2.80%

\*Only the top ten zip codes are displayed. To view the comprehensive frequency and percentage table, please

refer to Appendix A, Table 2.

 Table 1. Top Ten Zip Code List, Overall

#### **Client Demographics**

#### **Client Gender**

Of the total responses (N=1883):

- 991 (52.6%) indicated that they were 'Male' and
- 892 (47.4%) indicated 'Female'.

The client is identified as the child here.

[Appendix A, Table 3. and Figure 2.]

#### **Client Race\***

Of the total responses (N=1883), the top five client races were...

- 'White-Other' (N=797, 42.3%),
- 'Hispanic/Latin Origin' (N=355, 18.9%),
- 'White or Caucasian' (N=274, 14.6%),
- 'Multi' (N=110, 5.8%), and
- 'Black or African American (N=61, 3.2%).

[Appendix A, Table 4. and Figure 3.]



#### **Client Ethnicity\***

Of the total responses (N=1883): the top three client ethnicities were

- 'Hispanic or Latino- Mexican' (N=587, 31.2%),
- 'Not Hispanic or Latino' (N=539, 28.6%), and
- 'Hispanic or Latino' (N=407, 21.6%).

[Appendix A, Table 5. and Figure 4.]

# Child Age in years and/or months (at program entrance)

Of the total responses (N=1883): the top three entry ages (in years or months) selected were

- '3 years old' (N=487, 25.9%),
- '2 years old' (N=359, 19.1%), and
- '10 months old' (N=111, 5.9%).

[Appendix A, Table 6. and Figure 5.]

#### Primary Language Spoken at Home\*

Of the total responses (N=1883): the top two languages spoken at home were

- 'English' (N=1657, 88.0%) and
- 'Spanish' (N=210, 11.2%).

[Appendix A, Table 7. and Figure 6.]

\*The client race, ethnicity and primary language spoken at home is self-identified.

#### Summary of Clients Served

In summary, during FY 2020-2021...

- The top zip code and city where families reside was '92410' (N=114, 6.1%) and 'San Bernardino' (N=403, 21.4%). (Note that 92410 is found in San Bernardino City.)
- Of the total families served, 43% identified as living in Riverside County and 56% reside in San Bernardino County.
- The majority of participants self-identified as...
  - 'Male' gender (N=991, 52.6%)
  - 'White-Other' race (N=797, 42.3%), 'Hispanic or Latino-Mexican' ethnicity (N=587, 31.2%), and primarily spoke 'English' at home (N=1657, 88.0%).
- The majority indicated that the child age in years and/or months at program entrance was '3 years old' (N=487, 25.9%).

# Section 2 Evaluation Question #2

# What Assessments Did Families Receive?

#### Part 2: Review of what assessments were provided to families and their results.

Help Me Grow Inland Empire utilizes a social determinants of health (SDOH) screening process to determine risk levels for certain categories in an effort to refer and link families to appropriate resources. Social determinants of health are the conditions in which people are born, grow, live, work and age that shape health. Social determinants of health include factors like socioeconomic status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care. Addressing SDOHs is important for improving health and reducing longstanding disparities in health and health care. It's important to note that any family who enters HMGIE through the EDS automatically receives an age appropriate ASQ-3 and SDOH screening. Completion is based off of the client's engagement.

Given their personal interactions with children and families, health care providers are uniquely positioned to identify risk factors that exist outside of the home. Furthermore, screening legitimizes the discussion of sensitive topics in a way that surveillance alone cannot, and builds trust among patients, fostering more discussion of need.

A total of 5,277 individual SDOH screenings were completed for 1,883 families. Social determinant of health screening is broken down into nine parts: financial strain, food insecurity, transportation risk, physical activity risk, stress risk, social connection risk, tobacco risk and intimate partner violence (IPV) risk.

Of the 1,883 clients, 100% received a screening on at least 1 domain of the SDOH. The overall total of SDOH screenings includes the sum of the various domains of the SDOH screenings, regardless of results (arriving at 5,277) whereas in total there were 1,883 individual client SDOH screens entered into the EDS. The only domain completed 100% of the time was for tobacco use. Below is a table breaking down the number of screenings per domain of the SDOH, and how many percent of screenings.

SDOH Domains Screened		Of the number of screenings, % that had an
(total)	5277	atypical score
Social Connection Risk	390	48.70%
Physical Activity Risk	390	33.30%
Food Insecurity	394	18.20%
Financial Strain	391	17.60%
Stress Risk	259	9.60%
Tobacco risk	1883	9.40%
Transportation Risk	392	6.10%
IPV Risk	374	1.80%
Alcohol Risk	804	0.30%

#### Table 8. Social Determinants of Health: Atypical Score

#### Table 9. Social Determinants of Health: Comprehensive List by Race

Label Legend:

- Green: No/Low Risk
- Yellow: Medium/Some Risk
- Red: High Risk

SDOH Sereened	Daga	Creen	Vollow	Dod	Unknown	Total (N)
SDOH Screened	White	199	38	9 <b>Keu</b>	UIKIIOWII	
		(80.1%)	(15.4%)	(3.7%)	0	246
	Black or					
	African-	21	1	0	0	22
	American	(95.5%)	(4.5%)			
	Other Race	1				
	Other Race	(100%)	0	0	0	1
	Asian	16	1	1	0	10
		(88.9%)	(5.6%)	(5.6%)	0	10
	Hispanic/Latino	58	11	3	0	70
	Origin	(80.1%)	(15.3%)	(4.2%)	0	12
E'	Unknown	5	0	1	0	ſ
Financial Strain		(83.3%)	0	(16.7%)	0	0
	Patient refused	6	0	0	0	r c
		(100%)	0	0	0	0
	Multi-race	15	4	0	0	10
		(78.9%)	(21.1%)	0	0	19
	American-					
	Indian or					
	Alaska Native	0	0	0	0	0
	Nation					
	Nauve Hawaijan	0	0	0	0	0
	11u wunun					
	Race	Green	Red	Unknown	Total (N)	
	White	191	48	4	242	
		(78.6%)	(19.8%)	(1.6%)	243	
	Black or					
	African-	22	$\begin{pmatrix} 1 \\ (4 \ 20 \end{pmatrix}$	0	23	
	American	(95.7%)	(4.5%)			
	Other Race	1	C	C		
		(100%)	0	0	1	
Food Insecurity	Asian	16	1	2	19	
		(84.2%)	(5.3%)	(10.5%)	1)	
	Hispanic/Latino	57	16	3	76	
	Origin	(75.0%)	(21.1%)	(3.9%)	70	
	Unknown	4	2	0	6	
		(66.7%)	(33.3%)	0		
	Patient refused	7	0	0	7	
		(100%)	0	0	/	
	Multi-race	15	4	0	10	
		(78.9%)	(21.1%)	0	19	

	American- Indian or Alaska Native	0	0	0	0	
	Native Hawaiian	0	0	0	0	
	Race	Green	Red	Unknown	Total (N)	
	White	199 (81.6%)	19 (7.8%)	26 (10.7%)	244	
	Black or African- American	22 (95.7%)	0	1 (4.3%)	23	
	Other Race	1 (100%)	0	0	1	
	Asian	15 (78.9%)	1 (5.3%)	3 (15.8%)	19	
Transportation Risk	Hispanic/Latino Origin	56 (76.7%)	2 (2.7%)	15 (20.5%)	73	
	Unknown	4 (66.7%)	1 (16.7%)	1 (16.7%)	6	
	Patient refused	5 (71.4%)	0	2 (28.6%)	7	
	Multi-race	17 (89.5%)	1 (5.3%)	1 (5.3%)	19	
	American- Indian or Alaska Native	0	0	0	0	
	Native Hawaiian	0	0	0	0	
	Race	Green	Yellow	Red	Unknown	Total (N)
	White	70 (29.4%)	66 (27.7%)	19 (8.0%)	83 (34.9%)	238
Physical Activity Risk	Black or African- American	7 (33.3%)	7 (33.3%)	2 (9.5%)	5 (23.8%)	21
	Other Race	0	1 (100%)	0	0	1
	Asian	8 (40.0%)	3 (15.0%)	0	9 (45.0%)	20
	Hispanic/Latino Origin	25 (32.1%)	14 (17.9%)	7 (9.0%)	32 (41.0%)	78
	Unknown	1 (16.7%)	1 (16.7%)	1 (16.7%)	3 (50.0%)	6
	Patient refused	0	2 (33.3%)	1 (16.7%)	3 (50.0%)	6
	Multi-race	5 (25.0%)	4 (20.0%)	2 10.0%)	9 (45.0%)	20



	American- Indian or					
	Alaska Native	0	0	0	0	0
	Native					
	Hawaiian	0	0	0	0	0
	Race	Green	Red	Unknown	Total (N)	
	White	138	19	1	158	
	Black or	(87.3%)	(12.0%)	(0.63%)		
	African- American	16 (100%)	0	0	16	
	Other Race	1 (100%)	0	0	1	
	Asian	12 (92.3%)	1 (7.7%)	0	13	
Stress Risk	Hispanic/Latino Origin	49 (90.1%)	5 (9.3%)	0	54	
	Unknown	3 (100%)	0	0	3	
	Patient refused	3 (100%)	0	0	3	
	Multi-race	11 (100%)	0	0	11	
	American- Indian or Alaska Native	0	0	0	0	
	Native Hawaiian	0	0	0	0	
	Race White	Green 13	115	Red 6	Unknown 107	Total (N)
	,, inte	(5.4%)	(47.4%)	(2.5%)	(44.4%)	241
Social Connection Risk	Black or African- American	1 (4.5%)	10 (45.4%)	0	11 (50.0%)	22
	Other Race	0	1 (100%)	0	0	1
	Asian	2 (10.0%)	10	0	8	20
	Hispanic/Latino Origin	5 (6.6%)	33 (43.4%)	0	38 (50.0%)	76
	Unknown	0	3 (50.0%)	0	3 (50.0%)	6
	Patient refused	0	3 (50.1%)	0	3 (50.0%)	6
	Multi-race	0	9 (50.0%)	0	9 (50.0%)	18

	American- Indian or Alaska Native	0	0	0	0	0
	Native Hawaiian	0	0	0	0	0
	Race White	<b>Green</b> 992 (87.1%)	<b>Yellow</b> 110 (9.7%)	<b>Red</b> 3 (0.26%)	Unknown 34 (3.0%)	Total (N) 1139
	Black or African- American	128 (91.4%)	11 (7.9%)	0	1 (0.71%)	140
	Other Race	5 (71.4%)	2 (28.6%)	0	0	7
	Asian	70 (87.5%)	7 (8.8%)	0	3 (3.8%)	80
Tobacco risk	Hispanic/Latino Origin	319 (89.9%)	29 (8.2%)	0	7 (2.0%)	355
Tobacco Tisk	Unknown	23 (88.5%)	3 (11.5%)	0	0	26
	Patient refused	16 (80.0%)	4 (20.0%)	0	0	20
	Multi-race	100 (90.9%)	8 (7.3%)	0	2 (1.8%)	110
	American- Indian or Alaska Native	4 (80.0%)	1 (20.0%)	0	0	5
	Native Hawaiian	1 (100%)	0	0	0	1
	Race	Green	Red	Unknown	Total (N)	
	White	215 (93.5%)	6 (2.6%)	9 (3.9%)	230	
	Black or African- American	21 (100%)	0	0	21	
	Other Race	1 (100%)	0	0	1	
IPV Risk	Asian	18 (94.7%)	0	1 (5.3%)	19	
	Hispanic/Latino Origin	71 (94.7%)	1 (1.3%)	3 (4.0%)	75	
	Unknown	5 (100%)	0	0	5	
	Patient refused	5 (83.3%)	0	1 (16.7%)	6	
	Multi-race	17 (100%)	0	0	17	

	American- Indian or Alaska Native	0	0	0	0
	Native Hawaiian	0	0	0	0
	Race	Green	Red	Unknown	Total (N)
	White	470 (99.4%)	3	0	473
	Black or African- American	57 (95.0%)	0	3 (5.0%)	60
	Other Race	4 (100%)	0	0	4
	Asian	33 (97.1%)	0	1 (2.9%)	34
Alcohol Risk	Hispanic/Latino Origin	151 (97.1%)	0	4 (2.6%)	155
	Unknown	9 (100%)	0	0	9
	Patient refused	9 (100%)	0	0	9
	Multi-race	42 (100%)	0	0	42
	American- Indian or Alaska Native	3 (100%)	0	0	3
	Native Hawaiian	1 (100%)	0	0	1

# Table 10. Social Determinants of Health: Comprehensive List by County (Riverside and San Bernardino County Only)

Label Legend:

- Green: No/Low Risk
- Yellow: Medium/Some Risk
- Red: High Risk

	County	Green	Yellow	Red	Unknown	Total (N)
Financial Strain	Riverside County	139 (82.7%)	23 (13.7%)	5 (3.0%)	1 (0.60%)	168
SDOH	San Bernardino County	168 (80.8%)	31 (14.9%)	9 (4.3%)	0	208
	County	Green	Red	Unknown	Total (N)	
Food Insecurity	Riverside County	131 (77.1%)	33 (19.4%)	6 (3.5%)	170	
	San Bernardino County	170 (81.0%)	37 (17.6%)	3 (1.4%)	210	
	County	Green	Red	Unknown	Total (N)	
Transportation Risk	Riverside County	137 (82.0%)	10 (6.0%)	20 (12.0%)	167	
	San Bernardino County	169 (80.5%)	14 (6.67%)	27 (12.9%)	210	
	County	Green	Yellow	Red	Unknown	Total (N)
Physical Activity Risk SDOH	Riverside County	41 (25.3%)	40 (24.7%)	13 (8.0%)	68 (42.0%)	162
	San Bernardino County	70 (33.2%)	53 (25.1%)	18 (8.5%)	70 (33.2%)	211
	County	Green	Red	Unknown	Total (N)	
Stress Risk SDOH	Riverside County	97 (92.4%)	8 (7.6%)	0	105	
	San Bernardino County	128 (88.9%)	15 (10.4%)	1 (0.69%)	144	
Social Connection Risk SDOH	County	Green	Yellow	Red	Unknown	Total (N)

	Riverside County	7 (4.4%)	70 (44.1%)	4 (2.5%)	78 (49.1%)	159
	San Bernardino County	14 (6.5%)	106 (49.5%)	2 (0.93%)	92 (43.0%)	214
	County	Green	Yellow	Red	Unknown	Total (N)
Tobacco Risk SDOH	Riverside County	717 (88.3%)	73 (9.0%)	1 (0.12%)	21 (2.59%)	812
	San Bernardino County	885 (88.3%)	93 (9.3%)	2 (0.20%)	22 (2.20%)	1002
	County	Green	Red	Unknown	Total (N)	
IPV Risk SDOH	Riverside County	151 (96.2%)	1 (0.64%)	5 (3.2%)	157	
	San Bernardino County	187 (92.6%)	6 (3.0%)	9 (4.5%)	202	
Alcohol Risk SDOH	County	Green	Red	Unknown	Total (N)	
	Riverside County	332 (97.6%)	0	8 (2.4%)	340	
	San Bernardino County	420 (96.3%)	2 (0.46%)	14 (3.2%)	436	

#### Financial Strain Risk SDOH

Of the total responses (N=391) when looking at financial strain risk,

- 321 (82.1%) were identified as being in the green zone,
- 55 (14.1%) were in the yellow zone,
- 14 (3.6%) were in the red zone and 1 (0.3%) were 'unknown'.

[Appendix B, Table 11. and Figure 9.]

#### Financial Strain Risk SDOH by Race

- Of the 246 families who identify as White and received a screening on Financial Strain, 199 (80.1%) scored in green zone, 38 scored in the yellow zone (15.4%) and 9 scored in the red zone (3.7%.).
- Of the 22 families who identify as Black or African-American, 21 (95.5%) scored in the green zone and 1 (4.5%) scored in the yellow zone.
- Of the 18 families who identify as Asian, 16 (88.9%) scored in the green zone, 1 (5.6%) scored in the yellow zone, and 1 (5.6%) scored in the red zone.
- Of the 72 families who identify as Hispanic/Latino Origin, 58 scored in the green zone (80.1%), 11 (15.3%) scored in the yellow zone, and 3 (4.2%) scored in the red zone.
- Of the 19 families who identify as multi-race, 15 (78.9%) scored in the green zone and 4 (21.1%) scored in the yellow zone.

[Appendix B, Table 11a. and Figure 9a.]

## **Financial Strain:**

Of the total families screened on Financial Strain Risk:

- 14.1% were in the yellow zone
- **3.6%** were in the red zone.

Riverside County: **16.7%** of identified as being in the yellow and red zone.

San Bernardino County: **19.2%** identified as being in the yellow and red zone.

#### Financial Strain Risk SDOH by County

Of the 391 families who received a screening on Financial Strain,

- 43% of the families reside in Riverside County
- 53% in San Bernardino County.

Of those who identified living in Riverside County, 139 (82.7%) scored in the green zone, 23 (13.7%) scored in the yellow zone and 5 (3.0%) scored in the red zone.

Of those living in San Bernardino County, 168 (80.8%) scored in the green zone, 31 (14.9%) scored in the yellow zone and 9 (4.3%) scored in the red zone.

[Appendix B, Table 11b. and Figure 9b.]

#### Food Insecurity Risk SDOH

Of the total responses (N=394): when looking at food insecurity risk...

- 313 (79.4%) were identified as having 'no food insecurity',
- 72 (18.3%) were identified as 'food insecurity present', and
- 9 (2.3%) were 'unknown'.

[Appendix B, Table 12. and Figure 10.]

#### Food Insecurity Risk SDOH by Race

- Of the 243 families who identify as White and received a screening on Food Insecurity, 191 (78.6%) had no food insecurity and 48 (19.8%) had food insecurity.
- Of the 23 families who identify as Black or African-American, 22 (95.7%) had no food insecurity and 1 (4.3%) had food insecurity.
- Of the 19 families who identify as Asian, 16 (84.2%) had no food insecurity and 1 (5.3%) had food insecurity.
- Of the 19 families who identify as multi-race, 15 (78.9%) had no food insecurity and 4 (21.1%) had food insecurity.

[Appendix B, Table 12a. and Figure 10a.]

#### Food Insecurity SDOH by County

Of the 394 families who received a screening on Food Insecurity...

- 43% of the families reside in Riverside County
- 53% in San Bernardino County.

Of those who identified living in Riverside County, 131 (77.1%) had no food insecurity and 33 (19.4%) had food insecurity.

Of those living in San Bernardino County, 170 (81.0%) had no food insecurity and 37 (17.6%) had food insecurity.

[Appendix B, Table 12b. and Figure 10b.]

# **Unmet Food Need:**

- A total of 18.3% identified as having food insecurity (red zone.)
- 19.4% of those living in Riverside County identified as having food insecurity (red zone.)
- 17.6% of those living in San Bernardino County identified as having food insecurity (red zone.)

#### **Transportation Risk SDOH**

Of the total responses (N=392): when looking at transportation risk...

- 392 (81.4%) were identified as being in the green zone,
- 24 (6.1%) were identified as being in the red zone, and
- 49 (12.5%) were 'unknown'.

[Appendix B, Table 13. and Figure 11.]

#### **Transportation Risk SDOH by Race**

- Of the 244 families who identify as White and received a screening on Transportation Risk, 199 (81.6%) were identified as being in the green zone, and 19 (7.8%) were identified as being in the red zone.
- Of the 23 families who identify as Black or African-American and 22 (95.7%) were identified as being in the green zone.
- Of the 19 families who identify as Asian, 15 (78.9%) were identified as being in the green zone, and 1 (5.3%) were identified as being in the red zone.
- Of the 73 families who identify as Hispanic/Latino Origin, 56 (76.7%) were identified as being in the green zone, and 2 (2.7%) were identified as being in the red zone.
- Of the 19 families who identify as multi-race, 17 (89.5%) were identified as being in the green zone,

needs and 1 (5.3%) had unmet transportation needs.

[Appendix B, Table 13a. and Figure 11a.]



#### Transportation Risk SDOH by County

Of the 390 families who received a screening on Transportation Risk...

- 43% of the families reside in Riverside County
- 54% in San Bernardino County.

Of those who identified living in Riverside County, 137 (82.0%) were identified as being in the green zone, and 10 (6.0%) were identified as being in the red zone.

Of those living in San Bernardino County, 169 (80.5%) were identified as being in the green zone, and 14 (6.67%) were identified as being in the red zone.

[Appendix B, Table 13b. and Figure 11b.]

#### **Physical Activity Risk SDOH**

Of the total responses (N=390): when looking at physical activity risk...

- 32 (8.2%) were identified as being in the red zone,
- 98 (25.1%) were identified as being in the yellow zone,
- 116 (29.7%) were identified as being in the green zone, and
- 144 (36.9%) were 'unknown'.

[Appendix B, Table 14. and Figure 12.]

#### Physical Activity Risk:

Of the families screened for Physical Activity Risk:

#### 8.2% inactive

- Of those living in San Bernardino County, 8.5% were inactive (red zone) and 25.1% were insufficiently active (yellow zone.)
- Of those who identified living in Riverside County, 8% were inactive (red zone,) 24.7% were insufficiently active (yellow zone.)

#### Physical Activity Risk SDOH by Race

- Of the 238 families who identify as White and received a screening on Physical Activity Risk, 19 (8.0%) were identified as being in the red zone 66 (27.7%) were identified as being in the yellow zone, and 70 (29.4%) were identified as being in the green zone.
- Of the 21 families who identify as Black or African-American, 2 (9.5%) were identified as being in the red zone, 7 (33.3%) were identified as being in the yellow zone and 7

(33.3%) were identified as being in the green zone.

- Of the 20 families who identify as Asian, 3 (15.0%) were identified as being in the yellow zone, and 8 (40.0%) were identified as being in the green zone.
- Of the 78 families who identify as Hispanic/Latino Origin, 7 (9.0%) were identified as being in the red zone, 14 (17.9%) were identified as being in the yellow zone, and 25 (32.1%) were identified as being in the green zone.
- Of the 20 families who identified as multi-race, 2 (10.0%) were identified as being in the red zone, 4 (20.0%) were identified as being in the yellow zone, and 5 (25.0%) were identified as being in the green zone.

[Appendix B, Table 14a. and Figure 12a.]

#### Physical Activity Risk SDOH by County

Of the 390 families who received a screening on Physical Activity Risk...

- 42% of the families reside in Riverside County
- 54% in San Bernardino County.

Of those who identified living in Riverside County, 13 (8.0%) were identified as being in the red zone, 40 (24.7%) were identified as being in the yellow zone, and 41 (25.3%) were identified as being in the green zone.

Of those living in San Bernardino County, 18 (8.5%) were identified as being in the red zone, 53 (25.1%) were identified as being in the yellow zone, and 70 (33.2%) were identified as being in the green zone.

[ Appendix B, Table 14b. and Figure 12b.]

#### Stress Risk SDOH

Of the total responses (N=259,) when looking at stress risk...

- 233 (90.0%) were identified as being in the green zone,
- 25 (9.7%) were identified as being in the red zone, and
- 1 (0.4%) was 'unknown'.

[Appendix B, Table 15. and Figure 13.]

#### Stress Risk SDOH by Race

- Of the 158 families who identify as White and received a screening on Stress Risk,138 (87.3%) were identified as being in the green zone and 19 (12.0%) were identified as being in the red zone.
- Of the 16 families who identify as Black or African-American, all 16 (100%) were identified as being in the green zone.
- Of the 13 families who identify as Asian, 12 (92.3%) were identified as being in the green zone and 1 (7.7%) were identified as being in the red zone.
- Of the 54 families who identify as Hispanic/Latino Origin, 49 (90.1%) were identified as being in the green zone and 5 (9.3%) were identified as being in the red zone.
- Of the 11 families who identify as multi-race, all 11 (100%) were identified as being in the green zone.

[Appendix B, Table 15a. and Figure 13a.]

## Stress Risk:

Overall, **9.7%** indicated a stress concern present (red zone.)

San Bernardino County: **10.4%** had stress present (red zone.)

Riverside County: **7.6%** had stress present (red zone.)

#### Stress Risk SDOH by County

Of the 259 families who received a screening on Stress Risk...

- 41% of the families reside in Riverside County and
- 56% in San Bernardino County.

Of those who identified living in Riverside County, 97 (92.4%) were identified as being in the green zone, and 8 (7.6%) were identified as being in the red zone.

Of those living in San Bernardino County, 128 (88.9%) were identified as being in the green zone, and 15 (10.4%) were identified as being in the red zone.

[Appendix B, Table 15b. and Figure 13b.]

#### Social Connection Risk SDOH

Of the total responses (N=390,) when looking at social connection risk...

- The majority of clients were identified as 'no response' (N=179, 45.9%),
- Green zone (N=21; 8.7%)
- Yellow zone (N=184; 76.3%)
- Red zone (N=6; 2.4%)

[Appendix B, Table 16. and Figure 14.]

### Social Connection Risk:

Of the responses, **21.5%** were somewhat isolated while **13.1%** were moderately isolated.

## Severely Isolated (Red Zone:)

2.5% in Riverside County

0.93% in San Bernardino

#### Social Connection Risk SDOH by Race

- Of the 241 families who identify as White and received a screening on Social Connection Risk, 6 (2.5%) were in the red zone, 125 (47.7%) were in the yellow zone and 13 (5.4%) were in the green zone.
- Of the 22 families who identify as Black or African-American, 10 (33.4%) were in the yellow zone and 1 (4.5%) was in the green zone

- Of the 20 families who identify as Asian, 10 (50.0%) were in the yellow zone and 2 (10.0%) were in the green zone.
- Of the 76 families who identify as Hispanic/Latino Origin, 33 (43.4%) were in the yellow zone and 5 (6.5%) were in the green zone.
- Of the 18 families who identify as multi-race, 9 (50.0%) were in the yellow zone.

[Appendix B, Table 16a. and Figure 14a.]

#### Social Connection Risk SDOH by County

Of the 390 families who received a screening on Social Connection Risk,

- 41% of the families reside in Riverside County and
- 55% in San Bernardino County.

Of those who identified living in Riverside County, 4 (2.5%) were in the red zone, 70 (44.1%) were in the yellow zone and 7 (4.4%) were in the green zone.

Of those living in San Bernardino County, 2 (0.93%) were in the red zone, 106 (49.5%) were in the yellow zone and 14 (6.5%) were in the green zone.

[Appendix B, Table 16b. and Figure 14b.]

#### **Tobacco Risk SDOH**

Of the total responses (N=1883): when looking at tobacco risk, the majority of clients were identified as being in the green zone (N=1685, 88.1%).

[Appendix B, Table 17. and Figure 15.]

## Tobacco Risk:

Of the 1,883 families screened for Tobacco Risk, the majority of families screened low risk (green zone; 88.1%).

#### **Tobacco Risk SDOH by Race**

- Of the 1139 families who identify as White and received a screening on Tobacco Risk, 992 (87.1%) scored in the green zone, 110 (9.7%) scored yellow zone and 3 (0.26%) scored in the red zone.
- Of the 140 families who identify as Black or African-American, 128 (91.4%) scored in the green zone and 11 (7.9%) scored in the yellow zone.
- Of the 80 families who identify as Asian, 70 (87.5%) scored in the green zone and 7 (8.8%) scored in the yellow zone.

- Of the 355 families who identify as Hispanic/Latino Origin, 319 (89.9%) scored in the green zone and 29 (8.2%) scored in the yellow zone.
- Of the 110 families who identify as multi-race, 100 (90.9%) scored in the green zone and 8 (7.3%) scored in the yellow zone.
- Of the 5 families who identify as American-Indian or Alaska Native, 4 (80.0%) scored in the green zone and 1 (20.0%) scored in the yellow zone.
- Of the 1 family who identify as Native Hawaiian, 1 (100%) scored in the green zone.

[Appendix B, Table 17a. and Figure 15a.]

#### **Tobacco Risk SDOH by County**

Of the 1883 families who received a screening on Tobacco Risk...

- 43% of the families reside in Riverside County and
- 53% in San Bernardino County.

Of those who identified living in Riverside County, 717 (88.3%) scored in the green zone, 73 (9.0%) scored in the yellow zone and 1 (0.12%) scored in the red zone.

Of those living in San Bernardino County, 885 (88.3%) scored in the green zone, 93 (9.3%) scored in the yellow zone and 2 (0.20%) scored in the red zone.

[Appendix B, Table 17b. and Figure 15b.]

#### Intimate Partner Violence Risk SDOH

Of the total responses (N=374): when looking at partner violence risk...

- 353 (94.4%) were identified as being in the green zone,
- 7 (1.9%) were identified as being in the red zone, and
- 14 (3.7%) were 'unknown'.

[Appendix B, Table 18. and Figure 16.]

# Intimate Partner Violence Risk SDOH by Race

- Of the 230 families who identify as White and received a screening on Intimate Partner Violence Risk, 215 (93.5%) were identified as being in the green zone and 6 (2.6%) were identified as being in the red zone.
- Of the 21 families who identify as Black or African-American, all 21 (100%) were identified as being in the green zone.
- Of the 19 families who identify as Asian and 18 (94.7%) were identified as being in the green zone.
- Of the 75 families who identify as Hispanic/Latino Origin, 71 (94.7%) were identified as being in the green zone and 1 (1.3%) were identified as being in the red zone.
- Of the 17 families who identify as multi-race, all 17 (100%) were identified as being in the green zone.

[Appendix B, Table 18a. and Figure 16a.]

#### Intimate Partner Violence Risk SDOH by County

Of the 374 families who received a screening on Intimate Partner Violence Risk,

- 42% of the families reside in Riverside County and
- 54% in San Bernardino County.

Of those who identified living in Riverside County, 151 (96.2%) were identified as being in the green zone and 1 (0.64\%) were identified as being in the red zone.

Of those living in San Bernardino County, 187 (92.6%) were identified as being in the green zone and 6 (3.0%) were identified as being in the red zone.

# Intimate Partner Violence Risk:

Of the 374 families screened on Intimate Partner Violence Risk 1.9% were at risk (red zone.)

Riverside County:

0.64% at risk

San Bernardino County:

3% at risk

[Appendix B, Table 18b. and Figure 16b.]

#### Alcohol Risk SDOH

Of the total responses (N=804): when looking at alcohol risk, the majority of clients were identified as being in the green zone (N=779, 96.9%).

[Appendix B, Table 19. and Figure 17.]



#### Alcohol Risk SDOH by Race

- Of the 473 families who identify as White and received a screening on Alcohol Risk, 470 (99.4%) were identified as being in the green zone and 3 (0.6%) were identified as being in the red zone.
- Of the 60 families who identify as Black or African-American and 57 (95.0%) were identified as being in the green zone.
- Of the 34 families who identify as Asian and 33 (97.1%) were identified as being in the green zone.

- Of the 155 families who identify as Hispanic/Latino Origin and 151 (97.1%) were identified as being in the green zone.
- Of the 42 families who identify as multi-race, all 42 (100%) were identified as being in the green zone.
- Of the 3 families who identify as American-Indian or Alaska Native, all 3 (100%) were identified as being in the green zone.
- Of the 1 family who identify as Native Hawaiian, 1 (100%) were identified as being in the green zone.

[Appendix B, Table 19a. and Figure 17a.]

#### **Alcohol Risk SDOH by County**

Of the 804 families who received a screening on Alcohol Risk,

- 42% of the families reside in Riverside County and
- 54% in San Bernardino County.

Of those who identified living in Riverside County, 332 (97.6%) were identified as being in the green zone.

Of those living in San Bernardino, 420 (96.3%) were identified as being in the green zone and 2 (0.46%) were identified as being in the red zone.

[Appendix B, Table 19b. and Figure 17b.]

#### SDOH Positive Screen by Race

To further determine if a certain race group was impacted by a positive SDOH screening at a higher rate, a deeper level analysis was conducted using ANOVA. When it came to SDOH Positive screens, there was a statistically significant difference between race groups as pertaining to Food Insecurity (p = 0.01), Transportation Risk (p=0.03) and Alcohol Risk (p=0.000.) Families who identified as White/Caucasian were more likely compared to their other race group counter parts to score a positive screen on an SDOH screening.

ANOVA (SDOH Positive Screen by Race)				
SDOH	Statistical Significance			
Alcohol Risk SDOH	0.000			
Food Insecurity Risk SDOH	0.013			
Transportation Risk SDOH	0.033			
Physical Activity Risk SDOH	0.256			
Financial Strain Risk SDOH	0.912			
Stress Risk SDOH	0.953			
Social Connection Risk SDOH	0.971			
Tobacco Risk SDOH	0.978			
Partner Violence Risk SDOH	0.997			

#### Table 20. ANOVA (SDOH Positive Screen by Race)

#### Ages and Stages Questionnaire – 3 (ASQ-3) Screening

Completing a developmental screening can be both fun and educational. A screening can identify a child's strengths or areas where a child may need encouragement or support, provide new activities to try with the child, and help a parent/caregiver understand the skills the child may be learning at each new stage. HMGIE offers the ASQ -3 developmental questionnaires: Ages and Stages Questionnaire (ASQ-3). It's important to note that any family who enters HMGIE through the EDS automatically receives an age appropriate ASQ-3, ASQ-SE 2 and SDOH screening.

This screening tool can help parents discover their child's strengths and uncover any opportunities for growth. Results of the ASQ can assist parents and caregivers in talking with pediatricians, child care providers, teachers, and other professionals. The assessment also creates opportunities for referrals to resources as needed. The ASQ-3 assesses five major areas of development: communication, gross motor, fine motor, problem solving, and personal-social. This is available for children ages one month through 5 1/2 years.

Of the 1,883 clients served in FY 20-21, 100% received an ASQ-3 screening. Of all the clients that received an age appropriate ASQ-3, 1,589 completed at least one ASQ 3 screening (84.3%.) Pending the age of the child, they could have received multiple ASQs depending on their entry age. Nearly 15% of clients did not receive an ASQ-3; potential reasons could be the parent declined, the child already had a diagnosis and a screening was not necessary or the provider didn't find it necessary.

The table below summarizes what percentage of each domain that noted atypical results.

ASQ-3 Screening	Total number of Screenings	Of the number of screenings,	
		% that had an atypical score	
Fine Motor	1589	28%	
Communication	1589	24.90%	
Gross Motor	1589	1.50%	
Problem Solving	1589	0.12%	
Personal Social	1589	0.12%	

#### Table 21. Ages and Stages Questionnaire-3 (ASQ-3): Atypical Screening Percentage

After further analysis, it was also determined that there were no statistically significant differences between race groups or geographic location (County) and ASQ results.

	Race	Concern	Monitor	Typical	Total (N)
ASQ Communication Score	White	105 (10.9%)	128 (13.3%)	727 (75.7%)	960
	Black or African- American	17 (14.4%)	14 (11.9%)	87 (73.7%)	118
	Other Race	1 (16.7%)	0	5 (83.3%)	6
	Asian	7 (10.9%)	6 (9.4%)	51 (79.7%)	64
	Hispanic/Latino Origin	45 (14.5%)	39 (12.6%)	226 (72.9%)	310
	Unknown	2 (9.1%)	6 (27.3%)	14 (63.6%)	22
	Patient refused	2 (12.5%)	3 (18.8%)	11 (68.8%)	16
	Multi-race	14 (15.9%)	6 (6.8%)	68 (77.3%)	88
	American- Indian or Alaska Native	1 (20.0%)	0	4 (80.0%)	5
	Native Hawaiian	0	0	0	0
ASQ Gross Motor Score	Race	Concern	Monitor	Typical	Total (N)
	White	114 (11.9%)	88 (9.2%)	758 (79.0%)	960
	Black or African- American	22 (18.6%)	9 (7.6%)	87 (73.7%)	118
	Other Race	2 (33.3%)	1 (16.7%)	3 (50.0%)	6
	Asian	10 (15.6%)	4 (6.3%)	50 (78.1%)	64
	Hispanic/Latino Origin	33 (10.6%)	32 (10.3%)	245 (79.0%)	310
	Unknown	1 (4.5%)	4 (18.2%)	17 (77.3%)	22
	Patient refused	1 (3.1%)	15 (46.9%)	16 (50.0%)	32
	Multi-race	11 (12.5%)	6 (6.8%)	71 (80.7%)	88
	American- Indian or Alaska Native	1 (20.0%)	0	4 (80.0%)	5
	Native Hawaiian	0	0	0	0
ASQ Fine Motor Score	Race	Concern	Monitor	Typical	Total (N)
	White	112 (11.7%)	154 (16.0%)	694 (72.3%)	960

### Table 22. Ages and Stages Questionnaire (ASQ-3): Comprehensive List by Race
	Black or African- American	17 (14.4%)	22 (18.6%)	79 (66.9%)	118
	Other Race	2 (33.3%)	0	4 (66.7%)	6
	Asian	6 (9.4%)	12 (18.8%)	46 (71.9%)	64
	Hispanic/Latino Origin	42 (13.6%)	45 (13.6%)	223 (72.7%)	310
	Unknown	3 (13.6%)	3 (13.6%)	16 (72.7%)	22
	Patient refused	3 (18.8%)	1 (6.3%)	12 (75.0%)	16
	Multi-race	10 (11.4%)	12 (13.6%)	66 (75.0%)	88
	American- Indian or Alaska Native	1 (20.0%)	0	4 (80.0%)	5
	Native Hawaiian	0	0	0	0
	Race	Concern	Monitor	Typical	Total (N)
	White	118 (12.3%)	104 (10.8%)	738 (76.9%)	960
	Black or African- American	22 (18.6%)	12 (10.2%)	84 (71.2%)	118
	Other Race	1 (16.7%)	1 (16.7%)	4 (66.7%)	6
	Asian	8 (12.5%)	6 (9.4%)	50 (78.1%)	64
ASQ Problem	Hispanic/Latino Origin	35 (11.3%)	33 (10.6%)	242 (78.1%)	310
Solving Score	Unknown	3 (13.6%)	0	19 (86.4%)	22
	Patient refused	0	4 (%)	12 (%)	16
	Multi-race	9 (10.2%)	9 (10.2%)	70 (79.5%)	88
	American- Indian or Alaska Native	1 (20.0%)	0	4 (80.0%)	5
	Native Hawaiian	0	0	0	0
	Race	Concern	Monitor	Typical	Total (N)
	White	118 (12.3%)	104 (10.8%)	738 (76.9%)	960
ASQ Personal Social Score	Black or African- American	22 (18.6%)	12 (10.2%)	84 (71.2%)	118
	Other Race	1 (16.7%)	1 (16.7%)	4 (66.7%)	6
	Asian	8 (12.5%)	6 (9.4%)	50 (78.1%)	64

Hispanic/Latino Origin	35 (11.3%)	33 (10.6%)	242 (78.1%)	310
Unknown	3 (13.6%)	0	19 (86.4%)	22
Patient refused	0	4	12	16
Multi-race	9 (10.2%)	9 (10.2%)	70 (79.5%)	88
American- Indian or Alaska Native	1 (20.0%)	0	4 (80.0%)	5
Native Hawaiian	0	0	0	0

Table 22a. Ages and Stages Questionnaire (ASQ-3): Comprehensive List by County(Riverside County and San Bernardino County Only)

	County	Concern	Monitor	Typical	Total (N)
ASQ Communication	Riverside County	88 (12.6%)	78 (11.2%)	533 (76.3%)	699
Score	San Bernardino County	100 (12.0%)	115 (13.8%)	618 (74.2%)	833
	County	Concern	Monitor	Typical	Total (N)
ASQ Gross Motor Score	Riverside County	81 (11.6%)	69 (9.9%)	549 (78.5%)	699
Store	San Bernardino County	107 (12.8%)	69 (8.3%)	657 (78.9%)	833
	County	Concern	Monitor	Typical	Total (N)
ASQ Fine Motor	Riverside County	88 (12.6%)	84 (12.0%)	527 (75.4%)	699
Score	San Bernardino County	101 (12.1%)	155 (18.6%)	577 (69.3%)	833
	County	Concern	Monitor	Typical	Total (N)
ASQ Problem Solving Score	Riverside County	90 (12.9%)	69 (9.9%)	540 (77.3%)	699
	San Bernardino County	100 (12.0%)	96 (11.5%)	637 (76.5%)	833
	County	Concern	Monitor	Typical	Total (N)
ASQ Personal Social Score	Riverside County	90 (12.9%)	69 (9.9%)	540 (77.3%)	699
	San Bernardino County	100 (12.0%)	96 (11.5%)	637 (76.5%)	833

# **ASQ Completion Source**

Of the total responses (N=1787): when assessing for where the last ASQ was completed, 1081 (60.5%) indicated 'SAC Health Care System', 351 (19.6%) indicated 'Riverside University Health', and 355 (19.86%) indicated 'Loma Linda University'. [Appendix A., Table 23.]

#### ASQ Communication Score

Of the total responses (N=1589): the majority scored in the typical zone (N=1161, 73.1%) on the ASQ communication score.

[Appendix C, Table 24. and Figure 19.]

#### ASQ Communication Score by Race

- Of the 960 families who identify as White and received a ASQ Communication Score Screening, 105 (10.9%) scored in the concern zone, 128 (13.3%) scored in the monitor zone and 727 (75.7%) scored in the typical zone.
- Of the 118 families who identify as Black or African-American, 17 (14.4%) scored in the concern zone, 14 (11.9%) scored in the monitor zone and 87 (73.7%) scored in the typical zone.
- Of the 64 families who identify as Asian, 7 (10.9%) scored in the concern zone, 6 (9.4%) scored in the monitor zone, and 51 (79.7%) scored in the typical zone.
- Of the 310 families who identify as Hispanic/Latino Origin, 45 (14.5%) scored in the concern zone, 39 (12.6%) scored in the monitor zone and 226 (72.9%) scored in the typical zone.
- Of the 88 families who identify as multi-race, 14 (15.9%) scored in the concern zone, 6 (6.8%) scored in the monitor zone and 68 (77.3%) scored in the typical zone.

• Of the 5 families who identify as American-Indian or Alaska Native, 1 (20.0%) scored in the concern zone and 4 (80.0%) scored in the typical zone.

[Appendix C, Table 24a. and Figure 19a.]

# **ASQ-3** Communication Score:

Riverside County:

- 12.6% concern zone
- **11.2%** monitor zone

San Bernardino County:

- 12.0% concern zone
- 13.8% monitor zone

## ASQ Communication Score by County

Of the 1589 families who received an ASQ Communication screening,

- 44% of the families reside in Riverside County and
- 52% in San Bernardino County.

Of those who identified living in Riverside County, 88 (12.6%) scored in the concern zone, 78 (11.2%) scored in the monitor zone and 533 (76.3%) scored in the typical zone.

Of those living in San Bernardino County, 100 (12.0%) scored in the concern zone, 115 (13.8%) scored in the monitor zone and 618 (74.2%) scored in typical zone.

[Appendix C, Table 24b. and Figure 19b.]

## ASQ Gross Motor Score

Of the total responses (N=1589): the majority were identified as 'typical' (N=1250, 78.7%) on the ASQ gross motor score.

[Appendix C, Table 25. and Figure 20.]

# ASQ-3 Gross Motor Score:

Riverside County:

- 11.6% concern
- 9.9% monitor

# San Bernardino County:

- 12.8% concern
- 8.3% monitor

## ASQ Gross Motor Score by Race

- Of the 960 families who identify as White and received an ASQ Gross Motor Score Screening, 114 (11.9%) scored in the concern zone, 88 (9.2%) scored in the monitor zone and 758 (79.0%) scored in typical zone.
- Of the 118 families who identified as Black or African-American, 22 (18.6%) scored in the concern zone, 9 (7.6%) scored in the monitor zone and 87 (73.7%) scored in the typical zone.
- Of the 64 families who identify as Asian, 10 (15.6%) scored in the concern zone, 4 (6.3%) scored in the monitor zone and 50 (78.1%) scored in the typical zone.

- Of the 310 families who identify as Hispanic/Latino Origin, 33 (10.6%) scored in the concern zone, 32 (10.3%) scored in the monitor zone and 245 (78.1%) scored in the typical zone.
- Of the 88 families who identify as multi-race, 11 (12.5%) scored in the concern zone, 6 (6.8%) scored in monitor zone and 71 (80.7%) scored in the typical zone.
- Of the 5 families who identify as American-Indian or Alaska Native, 1 (20.0%) scored in the concern zone and 4 (80.0%) scored in the typical zone.

[Appendix C, Table 25a. and Figure 20a.]

# ASQ Gross Motor Score by County

Of the 1589 families who received an ASQ Gross Motor screening,

- 44% of the families reside in Riverside County and
- 52% in San Bernardino County.

Of those who identified living in Riverside County, 81 (11.6%) scored in the concern zone, 69 (9.9%) scored in the monitor zone and 549 (78.5%) scored in the typical zone.

Of those living in San Bernardino County, 107 (12.8%) scored in the concern zone, 69 (8.3%) scored in monitor zone and 657 (78.9%) scored in the typical zone.

[Appendix C, Table 25b. and Figure 20b.]

#### ASQ Fine Motor Score

Of the total responses (N=1589), the majority were identified as 'typical' (N=1144, 72.0%) on the ASQ fine motor score.

[Appendix C, Table 26. and Figure 21.]

#### **ASQ Fine Motor Score by Race**

- Of the 960 families who identify as White and received an ASQ Fine Motor Score Screening, 112 (11.7%) scored in the concern zone, 154 (16.0%) scored in the monitor zone and 694 (72.3%) scored in the typical zone.
- Of the 118 families who identify as Black or African-American, 17 (14.4%) scored in the concern zone, 22 (18.6%) scored in the monitor zone and 79 (66.9%) scored in the typical zone.
- Of the 64 families who identify as Asian, 6 (9.4%) scored in the concern zone, 12 (18.8%) scored in the monitor zone and 46 (71.9%) scored in the typical zone.
- Of the 310 families who identified as Hispanic/Latino Origin, 42 (13.6%) scored in the concern zone, 45 (13.6%) scored in the monitor zone and 223 (72.7%) scored in the typical zone.
- Of the 88 families who identify as multi-race, 10 (11.4%) scored in the concern zone, 12 (13.6%) scored in the monitor zone and 66 (75.0%) scored in the typical zone.
- Of the 5 families who identify as American-Indian or Alaska Native, 1

(20.0%) scored in the concern zone and 4 (80.0%) scored in the typical zone.

[Appendix C, Table 26a. and Figure 21a.]

# ASQ-3 Fine Motor Scores in the Concern Zone by County

Riverside County:

- **12.6%** concern
- **12.0%** monitor

San Bernardino County:

- 12.1% concern
- 18.6% monitor

## ASQ Fine Motor Score by County

Of the 1589 families who received an ASQ Fine Motor screening...

- 44% of the families reside in Riverside County and
- 52% in San Bernardino County.

Of those who identified living in Riverside County, 88 (12.6%) scored in the concern zone, 84 (12.0%) scored in the monitor zone and 527 (75.4%) scored in the typical zone.

Of those living in San Bernardino County, 101 (12.1%) scored in the concern zone, 155 (18.6%) scored in the monitor zone and 577 (69.3%) scored in the typical zone.

[Appendix C, Table 26b. and Figure 21b.]

# ASQ Problem Solving Score

Of the total responses (N=1589): the majority were identified as 'typical' (N=1223, 77.0%) on the ASQ problem solving score.

[Appendix C, Table 27. and Figure 22.]

# ASQ-3 Problem Solving Concern Zone by County:

Riverside County:

- 12.9% concern
- 9.9% monitor

# San Bernardino County:

- 12.0% concern
- 11.5% monitor

## ASQ Problem Solving Score by Race

- Of the 960 families who identify as White and received an ASQ Problem Solving Screening, 118 (12.3%) scored in the concern zone, 104 (10.8%) scored in the monitor zone and 738 (76.9%) scored in the typical zone.
- Of the 118 families who identify as Black or African-American, 22 (18.6%) scored in the concern zone, 12 (10.2%) scored in the monitor zone and 84 (71.2%) scored in the typical zone.
- Of the 64 families who identify as Asian, 8 (12.5%) scored in the concern zone, 6 (9.4%) scored in the

monitor zone and 50 (78.1%) scored in the typical zone.

- Of the 310 families who identify as Hispanic/Latino Origin, 35 (11.3%) scored in the concern zone, 33 (10.6%) scored in the monitor zone and 242 (78.1%) scored in the typical zone.
- Of the 88 families who identify as multi-race, 9 (10.2%) scored in the concern zone, 9 (10.2%) scored in the monitor zone and 70 (79.5%) scored in the typical zone.
- Of the 5 families who identify as American-Indian or Alaska Native, 1 (20.0%) scored in the concern zone and 4 (80.0%) scored in the typical zone.

[Appendix C, Table 27a. and Figure 22a.]

# ASQ Problem Solving Score by County

Of the 1589 families who received an ASQ Problem Solving screening...

- 44% of the families reside in Riverside County and
- 52% in San Bernardino County.

Of those who identified living in Riverside County, 90 (12.9%) scored in the concern zone, 69 (9.9%) scored in the monitor zone and 540 (77.3%) scored in the typical zone.

Of those living in San Bernardino County, 100 (12.0%) scored in the concern zone, 96 (11.5%) scored in the monitor zone and 637 (76.5%) scored in the typical zone.

[Appendix C, Table 27b. and Figure 22b.]

## **ASQ Personal Social Score**

Of the total responses (N=1589): the majority were identified as 'typical' (N=1223, 77.0%) on the ASQ personal social score.

[Appendix C, Table 28. and Figure 23.]

## **ASQ Personal Social Score by Race**

- Of the 960 families who identify as White and received an ASQ Personal Social Screening, 118 (12.3%) scored in the concern zone, 104 (10.8%) scored in the monitor zone and 738 (76.9%) scored in the typical zone.
- Of the 118 families who identify as Black or African-American, 22 (18.6%) scored in the concern zone, 12 (10.2%) scored in the monitor zone and 84 (71.2%) scored in the typical zone.
- Of the 64 families who identify as Asian, 8 (12.5%) scored in the concern zone, 6 (9.4%) scored in the monitor zone and 50 (78.1%) scored in the typical zone.
- Of the 310 families who identify as Hispanic/Latino Origin, 35 (11.3%) scored in the concern zone, 33 (10.6%) scored in the monitor zone and242 (78.1%) scored in the typical zone.
- Of the 88 families who identify as multi-race, 9 (10.2%) scored in the concern zone, 9 (10.2%) scored in the monitor zone and 70 (79.5%) scored in the typical zone.
- Of the 5 families who identify as American-Indian or Alaska Native, 1 (20.0%) scored in the concern zone

and 4 (80.0%) scored in the typical zone.

[Appendix C, Table 28a. and Figure 23a.]

## ASQ Personal Social Score by County

Of the 1589 families who received an ASQ Personal Social screening,

- 44% of the families reside in Riverside County and
- 53% in San Bernardino County.

Of those who identified living in Riverside County, 90 (12.9%) scored in the concern zone, 69 (9.9%) scored in the monitor zone and 540 (77.3%) scored in the typical zone.

Of those living in San Bernardino County, 100 (12.0%) scored in the concern zone, 96 (11.5%) scored in the monitor zone and 637 (76.5%) scored in the typical zone.

[Appendix C, Table 28b. and Figure 23b.]

# ASQ-3 Personal Social Score:

Riverside County:

- 12.9% concern
- **9.9%** monitor

San Bernardino County:

- 12.0% concern
- 11.5% monitor

#### Discussion

Understanding the needs of children and families in our community is crucial to determine appropriate interventions to address the most pressing local inequities and improve outcomes for children and families. Help Me Grow Inland Empire aims to address the most common struggles for parents of young children to ensure that resource investment will be timely, accessible, and helpful to those who need it most. Reducing inequity begins by building upon the existing strengths and resources in a community. Through better coordination among services, consistent data tracking, and targeted efforts to address resource gaps, a local Help Me Grow system aims to strengthen the support system for all parents and improve early childhood outcomes. These efforts have become more crucial than ever in 2020, as many families faced increased health and economic hardships due to the COVID-19 pandemic. How the pandemic will impact the data indicators for children in our community remains to be seen in the coming years. Despite pandemic-related challenges in data collection, the available data guided the team's focus toward efforts in key communities and expressed needs.

It is clear that engaged partnerships are a crucial part of the referral system of HMGIE. Engaged community partnerships are supportive relationships between programs and other community agencies. Partners value and nurture relationships. Each partner looks for ways to strengthen the partnership. Partners seek to understand each other's goals, perspectives, strengths, and challenges. Communication between community partners is regular and responsive. The goals of each partner are best met through their work with each other. Together, they share leadership and assess effectiveness to inform continuous learning and improve the quality of their partnership. As HMGIE comes out of its pilot year, sustaining, strengthening and growing these partnerships is crucial for ongoing collaboration and thoughtful partnership.

Based on the analysis above, it is seeming that certain race and ethnicity groups are accessing services at a higher rate than their counterparts. This is mainly due to the fact that this was considered a HMGIE pilot year and clinics for entry and referrals were chosen based on existing relationships and partnerships. However, there is an opportunity to expand EDS referral systems for both counties to go beyond just existing partnerships. Data can be used to identify areas for growth and lack of direct access at this time and consider future partnership with those clinics to enroll families.

Overall, nearly 58% of HMGIE participants self-identified as White/Caucasian, 4.5% as Black/African/African American and 19% as Hispanic/Latino. Areas to further explore include 1) Developing new methods of engagement that can lead to improved access for race/ethnicity groups focused on child safety, growth and development and family well-being and permanency outcomes, 2) Augmenting or developing their best practice skills in client engagement and 3) Understanding cultural differences and reasons for attrition and tactics for retention.

Given the deeper level of analysis, we also know that families who had atypical scores in at least one domain of the SDOH screening, had a higher rate of an atypical score in at least one category of the ASQ-3. This further confirms that children's health and development outcomes follow a social gradient: the further up the socioeconomic spectrum, the better likely the outcomes and access to resources. Early childhood, particularly the first 5 years of life, impacts long-term social, cognitive, emotional, and physical development (Anderson, Shinn, Fullilove, Scrimshaw, Fielding et al., 2003). Healthy development in early childhood helps prepare children for the educational experiences of kindergarten and beyond (Arnold & Doctoroff, 2003). Early childhood development and education opportunities are affected by various environmental and social factors (Currie, 2005; Evans & Kim, 2013).

# Limitations

The data reporting and evaluation for the first year is complete, creating a uniform and centralized snapshot of Help Me Grow Inland Empire. One of the emerging challenges in analyzing the data is the need for standardization across the two databases. Data information collected from the Centralized Access Point (CAP) and Electronic Data Systems (EDS), when merged appear to have different standardized scales due to entry methods. This is a struggle across all electronic health records as categories are defined differently. Without defined definitions, it is difficult to compare outcomes. As a result, this challenge becomes a missed opportunity to present data, but highlights the opportunities ahead.

Perhaps the largest limitation discovered is that most of the data identified was 'not applicable'. Having large gaps in data may underrepresent information of the population and possible correlations with other data collected. Furthermore, with such many 'not applicable' responses it becomes another missed opportunity to present data. An example is the following: Social Determinants of Health questionnaire required several answers in a single category to give a composite score. If however, the family only answered two of the four questions, a score could not be determined, which resulted in a 'not applicable' response. Part of the next steps should be to further determine how to change collection of information to reduce a 'not applicable' response.

Another consideration is the COVID-19 Pandemic which may have had a potential impact of the data collected during this fiscal year. However, this information will not become clear until resolution of the Pandemic subsides, and data collected in the future is compared against the data presented in this report. Epidemics or pandemics, such as COVID-19, produce potential risks to child development due to the risk of illness, protective confinement, social isolation, and the increased stress level of parents and caregivers. This situation becomes an adverse childhood experience and may generate toxic stress, with consequent potential losses for brain development, individual and collective health, with long-term impairment of cognition, mental and physical health. Studies to improve the understanding of the impact of epidemics and pandemics such as COVID-19 on children's mental health and development can help to guide strategies to prevent damage to children's growth and promote positive development.

## **Next Steps**

#### Gaps:

Future recommendations for Help Me Grow Inland Empire include utilizing the data collected during fiscal year 2020-2021 to identify and address resource gaps. In identifying these resource areas there is a opportunity and potential to strengthening early emerging community support system. In addition, it is also recommended to highlight areas of strength in the community, continue to implement strategies and techniques for best practices to model. By recognizing in the different communities, the varying gaps in resources, emerging new resources, and models of best practices, the full scope of social care and developmental services can support families.

#### **System Categories:**

HMGIE is targeting the collection process of data through a similar assignment of categories that will stretch into this new fiscal year. Standardization allows data to become easily accessible for reporting and comparative analyses. HMGIE recognizes the challenge in collecting complete data as the mechanism in the EDS is a different workflow in contrast to the CAP. While the category classifications are important, it is recommended to be sensitive to a collection opportunity with qualitative data to provide space for 'other' responses. This would provide an opportunity to receive information from families to give guidance for future efforts to support our community resources.

#### Early Developmental Risk:

Early childhood development and education are key determinants of future health and well-being (Magnuson & Waldfogel, 2005; Shonkoff & Phillips, 2000). Addressing the disparities in access to early childhood development and education opportunities can greatly bolster young children's future health outcomes (Hahn, Rammohan, Truman, Milstein, Johnson, et al. 2014; Noble, McCandliss & Farah, 2007). Often the "slightly behind" child's developmental risk is overlooked. HMGIE has an opportunity to create the connection for families to early enrichment opportunities with system partners. The COVID-19 pandemic exacerbated already existing health disparities for a broad range of populations, but specifically for people of color as a child is not followed for marginal results in developmental testing due to health access. In the state of California, addressing the 'Pre-School for All' concept is critical for HMGIE involvement to advance and build upon.

## **Disparities:**

The association of social inequalities and COVID-19 morbidity is further compounded in the context of underlying chronic conditions. One example of a chronic health condition is asthma, where there is a possible additive, or even multiplicative, effect on COVID-19 morbidity. Several adverse social determinants that impact the risk of COVID-19 morbidity also increase asthma

morbidity, including poverty and smoke exposure. These additional health data sources will allow HMGIE to determine additional needs of families and link them to services. Additional information from other screening options and reports could be helpful for identifying chronic stress conditions: Adverse Childhood Experiences (ACES)/ Pediatric ACEs and Related Life-events Screener (PEARLS) – for caregivers/parents and child. Additional research is needed to increase the evidence base for successful impact on childhood development and education when controlling or accounting for disparity resilience and chronic health conditions. This additional evidence will facilitate public health efforts to address early childhood development and education as social determinants of health. Additional evidence and analysis of social determinants of health will facilitate public health efforts to address early childhood development and education.

## **Community and Provider Engagement:**

As the network of community and provider partners grow, it will be beneficial to create a bidirectional feedback mechanism. Staff and providers know their communities, and many are members of the communities they serve. They collaborate with families, community members, and other local agencies to identify common goals, align resources, and share data for continuous improvement and effective partnerships. The engagement of community partners and providers can assist in further identifying the needs of diverse communities that might speak beyond data. Additionally, it would be valuable to explore what constitutes a provider who might be hesitant to initiate an ASQ Screening. Understanding this would serve as an opportunity to establish a standardized protocol to ensure that all children receive the necessary ASQ screenings, even beyond age thirty-six months of testing with Well-Child visits.

## **Family Engagement:**

A consistent, uniform family and client engagement satisfaction survey process could assist in understanding how families see the benefits of HMGIE with a focus on understanding of their child's development, knowledge of available services, connection to services, and ability to advocate for their child's improvement because of HMGIE. Questions asked of families could target and inform the ways that HMGIE helped to resolve caregivers' concerns about the development, learning, or behavior of children, and facilitate access to appropriate services to address identified needs.

# Health In All Policies:

Lastly, the effort of data collection through HMGIE is an adjunct effort that supports the "Health in All Policies" philosophy. It engages diverse partners and stakeholders to work together to promote health, equity, and sustainability. A consequence of the integrated work leads to simultaneously advancing other goals such as promoting job creation and economic stability, transportation access and mobility, and improved educational attainment. This consideration for decision making across sectors and policy areas, identifies the ways in which multiple systems affect health, how improved health can also support the intersection of goals from multiple sectors

(Puska, 2007.). State and local funders along with service providers could join through task forces and workgroups focused on bringing together leaders across agencies and the community to collaborate and prioritize health as a focus.

Appendix A.

Evaluation Question #1: Comprehensive Program Demographic Tables and Figures

# Table 2. Comprehensive Zip Code List

Zip Code	Frequency	Percentage
84664	1	0.1%
90061	1	0.1%
91207	1	0.1%
91710	3	0.2%
91730	7	0.4%
91737	1	0.1%
91739	6	0.3%
91752	3	0.2%
91761	2	0.1%
91762	3	0.2%
91764	7	0.4%
91765	1	0.1%
91766	1	0.1%
91768	1	0.1%
91784	2	0.1%
91786	1	0.1%
92201	79	4.2%
92201-5721	1	0.1%
92202	1	0.1%
92203	19	1.0%
92203-0000	1	0.1%
92211	4	0.2%
92220	22	1.2%
92223	33	1.8%
92225	2	0.1%
92230	2	0.1%
92234	4	0.2%
92236	43	2.3%
92240	6	0.3%
92241	2	0.1%
92253	5	0.3%
92254	10	0.5%
92260	6	0.3%
92262	1	0.1%
92264	2	0.1%
92274	15	0.8%

92276	4	0.2%
92282	2	0.1%
92284	3	0.2%
92301	7	0.4%
92301-2405	1	0.1%
92307	1	0.1%
92308	6	0.3%
92311	8	0.4%
92313	12	0.6%
92314	3	0.2%
92315	2	0.1%
92316	17	0.9%
92317	3	0.2%
92317-1053	1	0.1%
92320	5	0.3%
92321	1	0.1%
92322	2	0.1%
92324	94	5.0%
92324-0000	2	0.1%
92325	8	0.4%
92335	30	1.6%
92336	23	1.2%
92337	8	0.4%
92339	1	0.1%
92340	1	0.1%
92344	8	0.4%
92345	19	1.0%
92346	69	3.7%
92352	6	0.3%
92354	53	2.8%
92359	6	0.3%
92371	5	0.3%
92372	1	0.1%
92373	30	1.6%
92374	48	2.5%
92375	1	0.1%
92376	55	2.9%
92377	15	0.8%
92378	1	0.1%
92382	4	0.2%

92386	3	0.2%
92392	8	0.4%
92394	6	0.3%
92395	4	0.2%
92397	2	0.1%
92399	45	2.4%
92401	8	0.4%
92404	82	4.4%
92405	52	2.8%
92406	2	0.1%
92407	67	3.6%
92407-3730	1	0.1%
92407-6619	1	0.1%
92408	40	2.1%
92408-3056	1	0.1%
92408-3694	1	0.1%
92410	114	6.1%
92410-1315	2	0.1%
92411	31	1.6%
92415	1	0.1%
92423	1	0.1%
92427	1	0.1%
92501	19	1.0%
92503	17	0.9%
92504	7	0.4%
92505	5	0.3%
92506	8	0.4%
92507	21	1.1%
92508	7	0.4%
92509	21	1.1%
92517	1	0.1%
92518	1	0.1%
92530	7	0.4%
92532	2	0.1%
92543	21	1.1%
92544	16	0.8%
92545	12	0.6%
92548	3	0.2%
92549	1	0.1%
92551	38	2.0%

92553	85	4.5%
92554	1	0.1%
92555	49	2.6%
92557	39	2.1%
92557-6036	1	0.1%
92562	1	0.1%
92563	5	0.3%
92567	8	0.4%
92570	30	1.6%
92571	42	2.2%
92572	1	0.1%
92582	14	0.7%
92583	19	1.0%
92584	9	0.5%
92585	5	0.3%
92585-0000	1	0.1%
92586	1	0.1%
92587	2	0.1%
92587-0000	1	0.1%
92591	2	0.1%
92595	1	0.1%
92596	3	0.2%
92602	2	0.1%
92603	1	0.1%
92703	1	0.1%
92860	3	0.2%
92880	5	0.3%
92881	1	0.1%
92882	1	0.1%
92883	2	0.1%
93543	1	0.1%
95457	1	0.1%
Total	1883	100%

#### Table 3. Client Gender

Client Gender	Frequency	Percentage
Male	991	52.6%
Female	892	47.4%
Total	1883	100%





# Table 4. Comprehensive Client Race List

Client Race	Frequency	Percentage
White or Caucasian	274	14.6%
White - Middle Eastern or North African	3	0.2%
White - Other	797	42.3%
Black or African American - African	24	1.3%
Other Race	7	0.4%
Asian - Filipino	17	0.9%
Hispanic/Latin Origin	355	18.9%
Unknown	26	1.4%
Patient Refused	20	1.1%
Black or African American - African American	41	2.2%
White - Arab	4	0.2%
Black or African American	61	3.2%
White - European	28	1.5%
Multi*	110	5.8%
American Indian	4	0.2%

Black or African American- Black	33	1.8%
Asian - Other	6	0.3%
Asian - Laotian	1	0.1%
Asian-Asian India	11	0.6%
Asian-Korean	8	0.4%
Asian-Chinese	3	0.2%
Asian-Indonesian	3	0.2%
Asian	18	1.0%
Asian-Vietnamese	1	0.1%
Black or African American - Other	13	0.7%
Native Hawaiian	1	0.1%
Asian-Cambodian	4	0.2%
Asian-Japanese	2	0.1%
American Indian or Alaska Native	1	0.1%
Asian-Bhutanese	2	0.1%
Asian-Hmong	2	0.1%
Black or African American - Jamaican	1	0.1%

Asian - Pakistani	2	0.1%
Total	1883	100%

\*If more than one race was selected, the client was categorized as "Multi" Race.

#### Figure 3. Client Race



#### Table 5. Comprehensive Client Ethnicity List

Client Ethnicity	Frequency	Percentage
Not Hispanic or Latino	539	28.6%
Hispanic or Latino	407	21.6%
Hispanic or Latino - Mexican	587	31.2%
Hispanic or Latino - Other	240	12.7%
Hispanic or Latino - Latin American	33	1.8%
Hispanic or Latino - Central American	26	1.4%
Hispanic or Latino - Spaniard	8	0.4%
Unknown	27	1.4%
Hispanic or Latino - Cuban	3	0.2%
Hispanic or Latino - South American	4	0.2%
Hispanic or Latino - Puerto Rican	9	0.5%
Total	1883	100%

#### Figure 4. Client Ethnicity



Table 6. Child Age in years and/or months (at program entrance)

Child Age in years and/or months (at program entrance and Child Age in months (at program entrance AND less than or equal to 66 months)	Frequency	Percentage
2 y.o.	359	19.1%
3 y.o.	487	25.9%
4 y.o.	11	0.6%
9 m.o.	68	3.6%
10 m.o.	111	5.9%
11 m.o.	110	5.8%
12 m.o./1 y.o.	75	4.0%
13 m.o.	55	2.9%
14 m.o.	50	2.7%
15 m.o.	41	2.2%
16 m.o.	48	2.5%
17 m.o.	66	3.5%
18 m.o.	98	5.2%
19 m.o.	105	5.6%
20 m.o.	73	3.9%
21 m.o.	46	2.4%
22 m.o.	38	2.0%
23 m.o.	42	2.2%
Total	1883	100%

#### Figure 5. Child Age in years and/or months (at program entrance)



Child Age in years (at program entrance) and/or Child Age in months (at program entrance AND less than or equal to 66 months)

Child Age in years (at program entrance) and/or Child Age in months (at program entrance AND less than or equal to 66 months)

#### Table 7. Primary Language Spoken at Home

Primary Language Spoken at Home	Frequency	Percentage
English	1657	88.0%
Spanish	210	11.2%
Sign Language	3	0.2%
Portuguese	2	0.1%
Korean	1	0.1%
Mandarin	2	0.1%
Panjabi/Punjabi	3	0.2%
Armenian	1	0.1%
Other	1	0.1%
Cambodian	2	0.1%
Arabic	1	0.1%
Total	1883	100%

#### Figure 6. Primary Language Spoken at Home



Appendix B.

Evaluation Question #2: SDOH Comprehensive Tables and Figures

#### Table 11. Financial Strain Risk SDOH

Financial Strain Risk SDOH	Frequency	Percentage
Low Risk	321	82.1%
Medium Risk	55	14.1%
High Risk	14	3.6%
Unknown	1	0.3%
Total	391	100%

#### Figure 9. Financial Strain Risk SDOH



	Financial Strain SDOH by Race									
Race	Low Risk	Medium Risk	High Risk	Unknown	Frequency	Percentage				
White	199	38	9	0	246	63%				
Black or African- American	21	1	0	0	22	6%				
Other Race	1	0	0	0	1	0%				
Asian	16	1	1	0	18	5%				
Hispanic/Latino Origin	58	11	3	0	72	18%				
Unknown	5	0	1	0	6	2%				
Patient refused	6	0	0	0	6	2%				
Multi-race	15	4	0	0	19	5%				
American- Indian or Alaska Native	0	0	0	0	0	0%				
Native Hawaiian	0	0	0	0	0	0%				
Total	321	55	14	0	390	100%				

#### Table 11a. Financial Strain Risk SDOH by Race

Figure 9a. Financial Strain Risk SDOH by Race



Financial Strain SDOH by County									
County	Low Risk	Medium Risk	High Risk	Unknown	Frequency	Percentage			
Lake County	1	0	0	0	1	0%			
Los Angeles County	12	1	0	0	13	3%			
Orange County	1	0	0	0	1	0%			
Riverside County	139	23	5	1	168	43%			
San Bernardino County	168	31	9	0	208	53%			
Total	321	55	14	1	391	100%			

#### Table 11b. Financial Strain Risk SDOH by County

#### Figure 9b. Financial Strain Risk SDOH by County



Financial Strain by Race and by County									
Race	County	Low Risk	Medium Risk	High Risk	Unknown	Frequency	Percentage		
White	Lake County	0	0	0	0	0	0%		
	Los Angeles County	9	0	0	0	9	2%		
	Orange County	0	0	0	0	0	0%		
	Riverside County	86	14	4	0	104	27%		
	San Bernardino County	104	24	5	0	133	34%		
Black or African-	Lake County	0	0	0	0	0	0%		
American	Los Angeles County	0	0	0	0	0	0%		
	Orange County	0	0	0	0	0	0%		
	Riverside County	9	1	0	0	10	3%		
	San Bernardino County	12	0	0	0	12	3%		
Other Race	Lake County	0	0	0	0	0	0%		
	Los Angeles County	0	0	0	0	0	0%		
	Orange County	0	0	0	0	0	0%		
	Riverside County	1	0	0	0	1	0%		
	San Bernardino County	0	0	0	0	0	0%		
Asian	Lake County	0	0	0	0	0	0%		

# Table 11c. Financial Strain Risk SDOH by Race and by County

	Los Angeles County	1	0	0	0	1	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	6	0	0	0	6	2%
	San Bernardino County	9	1	1	0	11	3%
Hispanic/Latino Origin	Lake County	1	0	0	0	1	0%
	Los Angeles County	1	1	0	0	2	1%
	Orange County	1	0	0	0	1	0%
	Riverside County	26	6	1	0	33	8%
	San Bernardino County	29	4	2	0	35	9%
Unknown	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	2	0	0	0	2	1%
	San Bernardino County	3	0	1	0	4	1%
Patient refused	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	3	0	0	1	4	1%

	San Bernardino County	3	0	0	0	3	1%
Multi-race	Lake County	0	0	0	0	0	0%
	Los Angeles County	1	0	0	0	1	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	6	2	0	0	8	2%
	San Bernardino County	8	2	0	0	10	3%
American Indian or	Lake County	0	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0	0%
Native Hawaiian	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0	0%
Tota	1	321	55	14	1	391	100%

#### **Table 12. Food Insecurity SDOH**

Food Insecurity Risk	Frequency	Percentage
No Food Insecurity	313	79.4%
Food Insecurity Present	72	18.3%
Unknown	9	2.3%
Total	394	100%



Food Insecurity SDOH by Race									
Race	No Food Insecurity	Food Insecurity	Unknown	Frequency	Percentage				
White	191	48	4	243	62%				
Black or African- American	22	1	0	23	6%				
Other Race	1	0	0	1	0%				
Asian	16	1	2	19	5%				
Hispanic/Latino Origin	57	16	3	76	19%				
Unknown	4	2	0	6	2%				
Patient refused	7	0	0	7	2%				
Multi-race	15	4	0	19	5%				
American- Indian or Alaska Native	0	0	0	0	0%				
Native Hawaiian	0	0	0	0	0%				
Total	313	72	9	394	100%				

#### Table 12a. Food Insecurity SDOH by Race

#### Figure 10a. Food Insecurity SDOH by Race



#### Table 12b. Food Insecurity SDOH by County

Food Insecurity SDOH by County									
County	No Food Insecurity	Food Insecurity	Unknown	Frequency	Percentage				
Lake County	1	0	0	1	0%				
Los Angeles County	10	2	0	12	3%				
Orange County	1	0	0	1	0%				
Riverside County	131	33	6	170	43%				
San Bernardino County	170	37	3	210	53%				
Total	313	72	9	394	100%				

#### Figure 10b. Food Insecurity SDOH by County



Food Insecurity by Race and by County									
Race	County	No Food Insecurity	Food Insecurity	Unknown	Frequency	Percentage			
White	Lake County	0	0	0	0	0%			
	Los Angeles County	8	0	0	8	2%			
	Orange County	0	0	0	0	0%			
	Riverside County	78	22	3	103	26%			
	San Bernardino County	105	26	1	132	34%			
Black or African-	Lake County	0	0	0	0	0%			
American	Los Angeles County	0	0	0	0	0%			
	Orange County	0	0	0	0	0%			
	Riverside County	10	1	0	11	3%			
	San Bernardino County	12	0	0	12	3%			
Other Race	Lake County	0	0	0	0	0%			
	Los Angeles County	0	0	0	0	0%			
	Orange County	0	0	0	0	0%			
	Riverside County	1	0	0	1	0%			
	San Bernardino County	0	0	0	0	0%			
Asian	Lake County	0	0	0	0	0%			

# Table 12c. Food Insecurity SDOH by Race and by County
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	6	0	1	7	2%
	San Bernardino County	9	1	1	11	3%
Hispanic/Latino Origin	Lake County	1	0	0	1	0%
	Los Angeles County	0	2	0	2	1%
	Orange County	1	0	0	1	0%
	Riverside County	25	7	2	34	9%
	San Bernardino County	30	7	1	38	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	1	0	2	1%
	San Bernardino County	3	1	0	4	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	4	0	0	4	1%

	San Bernardino County	3	0	0	3	1%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	6	2	0	8	2%
	San Bernardino County	8	2	0	10	3%
American Indian or	Lake County	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Tota	l	313	72	9	394	100%

#### Table 13. Transportation Risk SDOH

Transportation Risk SDOH	Frequency	Percentage
No Transportation Needs	319	81.4%
Unmet Transportation Needs	24	6.1%
Unknown	49	12.5%
Total	392	100%

Figure 11. Transportation Risk SDOH



**Transportation Risk SDOH** 

Transportation Risk SDOH by Race									
Race	No Transportation Needs	Unmet Transportation Needs	Unknown	Frequency	Percentage				
White	199	19	26	244	62%				
Black or African- American	22	0	1	23	6%				
Other Race	1	0	0	1	0%				
Asian	15	1	3	19	5%				
Hispanic/Latino Origin	56	2	15	73	19%				
Unknown	4	1	1	6	2%				
Patient refused	5	0	2	7	2%				
Multi-race	17	1	1	19	5%				
American- Indian or Alaska Native	0	0	0	0	0%				
Native Hawaiian	0	0	0	0	0%				
Total	319	24	49	392	100%				

# Table 13a. Transportation Risk SDOH by Race





Table 13b. Transport	ation Risk SDOH	by County
----------------------	-----------------	-----------

Transportation Risk SDOH by County									
County	No Transportation Needs	Unmet Transportation Needs	Unknown	Frequency	Percentage				
Lake County	1	0	0	1	0%				
Los Angeles County	11	0	0	11	3%				
Orange County	1	0	0	1	0%				
Riverside County	137	10	20	167	43%				
San Bernardino County	169	14	27	210	54%				
Total	319	24	47	390	100%				



Figure 11b. Transportation Risk SDOH by County

#### Table 13c. Transportation Risk SDOH by Race and by County

	Transportation Risk by Race and by County							
Race	County	No Transportation Needs	Unmet Transportation Needs	Unknown	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	8	0	0	8	2%		
	Orange County	0	0	0	0	0%		
	Riverside County	85	9	9	103	26%		
	San Bernardino County	106	10	17	133	34%		
	Lake County	0	0	0	0	0%		

Black or African-	Los Angeles County	0	0	0	0	0%
American	Orange County	0	0	0	0	0%
	Riverside County	11	0	0	11	3%
	San Bernardino County	11	0	1	12	3%
Other Race	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%
	San Bernardino County	0	0	0	0	0%
Asian	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	6	0	1	7	2%
	San Bernardino County	8	1	2	11	3%
Hispanic/Latino Origin	Lake County	1	0	0	1	0%
	Los Angeles County	1	0	2	3	1%
	Orange County	1	0	0	1	0%
	Riverside County	23	0	8	31	8%
	San Bernardino County	30	2	5	37	9%
Unknown	Lake County	0	0	0	0	0%

	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	0	0	2	1%
	San Bernardino County	2	1	1	4	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	0	2	4	1%
	San Bernardino County	3	0	0	3	1%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	7	1	0	8	2%
	San Bernardino County	9	0	1	10	3%
American	Lake County	0	0	0	0	0%
Indian or Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Native	Lake County	0	0	0	0	0%
Hawaiian	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Total		319	24	49	392	100%

# Table 14. Physical Activity Risk SDOH

Physical Activity Risk SDOH	Frequency	Percentage
Inactive	32	8.2%
Insufficiently Active	98	25.1%
Sufficiently Active	116	29.7%
Unknown	144	36.9%
Total	390	100%





Physical Activity Risk SDOH

Physical Activity SDOH by County									
County	Inactive	Insufficiently Active	Sufficiently Active	Unknown	Frequency	Percentage			
Lake County	0	1	0	0	1	0%			
Los Angeles County	1	3	5	6	15	4%			
Orange County	0	1	0	0	1	0%			
Riverside County	13	40	41	68	162	42%			
San Bernardino County	18	53	70	70	211	54%			
Total	32	98	116	144	390	100%			

#### Table 14a. Physical Activity Risk SDOH by Race

## Figure 12a. Physical Activity Risk SDOH by Race



Physical Activity SDOH by County									
County	Inactive	Insufficiently Active	Sufficiently Active	Unknown	Frequency	Percentage			
Lake County	0	1	0	0	1	0%			
Los Angeles County	1	3	5	б	15	4%			
Orange County	0	1	0	0	1	0%			
Riverside County	13	40	41	68	162	42%			
San Bernardino County	18	53	70	70	211	54%			
Total	32	98	116	144	390	100%			

#### Table 14b. Physical Activity Risk SDOH by County

## Figure 12b. Physical Activity Risk SDOH by County



Physical Activity SDOH by Race and by County								
Race	County	Inactive	Insufficiently Active	Sufficiently Active	Unknown	Frequency	Percentage	
White	Lake County	0	0	0	0	0	0%	
	Los Angeles County	1	2	4	2	9	2%	
	Orange County	0	0	0	0	0	0%	
	Riverside County	6	27	22	41	96	25%	
	San Bernardino County	12	37	44	40	133	34%	
Black or African-	Lake County	0	0	0	0	0	0%	
American	Los Angeles County	0	0	0	0	0	0%	
	Orange County	0	0	0	0	0	0%	
	Riverside County	0	3	5	2	10	3%	
	San Bernardino County	2	4	2	3	11	3%	
Other Race	Lake County	0	0	0	0	0	0%	
	Los Angeles County	0	0	0	0	0	0%	
	Orange County	0	0	0	0	0	0%	
	Riverside County	0	1	0	0	1	0%	
	San Bernardino County	0	0	0	0	0	0%	
Asian	Lake County	0	0	0	0	0	0%	
	Los Angeles County	0	1	0	0	1	0%	
	Orange County	0	0	0	0	0	0%	
	Riverside County	0	0	2	5	7	2%	

# Table 14c. Physical Activity Risk SDOH by Race and by County

	San Bernardino County	0	2	6	4	12	3%
Hispanic/Latino Origin	Lake County	0	1	0	0	1	0%
G	Los Angeles County	0	0	1	3	4	1%
	Orange County	0	1	0	0	1	0%
	Riverside County	5	5	10	14	34	9%
	San Bernardino County	2	7	14	15	38	10%
Unknown	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	1	0	0	1	2	1%
	San Bernardino County	0	1	1	2	4	1%
Patient refused	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	0	1	0	2	3	1%
	San Bernardino County	1	1	0	1	3	1%
Multi-race	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	1	3	2	3	9	2%

	San Bernardino County	1	1	3	5	10	3%
American Indian or Alaska Native	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0	0%
Native Hawaiian	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0	0%
Total		32	98	116	143	389	100%

#### Table 15. Stress Risk SDOH

Stress Risk SDOH	Frequency	Percentage
No Stress Concern Present	233	90.0%
Stress Concern Present	25	9.7%
Unknown	1	0.4%
Total	259	100%

## Figure 13. Stress Risk SDOH



# Table 15a. Stress Risk SDOH by Race

Stress Risk SDOH by Race						
Race	No Stress Concern Present	Stress Concern Present	Unknown	Frequency	Percentage	
White	138	19	1	158	61%	
Black or African- American	16	0	0	16	6%	
Other Race	1	0	0	1	0%	
Asian	12	1	0	13	5%	
Hispanic/Latino Origin	49	5	0	54	21%	
Unknown	3	0	0	3	1%	
Patient refused	3	0	0	3	1%	
Multi-race	11	0	0	11	4%	
American-Indian or Alaska Native	0	0	0	0	0%	
Native Hawaiian	0	0	0	0	0%	
Total	233	25	1	259	100%	





Table 15h	. Stress	Risk	SDOH	by	County
-----------	----------	------	------	----	--------

Stress Risk SDOH by County						
County	No Stress Concern Present	Stress Concern Present	Unknown	Frequency	Percentage	
Lake County	1	0	0	1	0%	
Los Angeles County	6	2	0	8	3%	
Orange County	1	0	0	1	0%	
Riverside County	97	8	0	105	41%	
San Bernardino County	128	15	1	144	56%	
Total	233	25	1	259	100%	

#### Figure 13b. Stress Risk SDOH by County



#### Table 15c. Stress Risk SDOH by Race and by County

Stress Risk by Race and by County						
Race	County	No Stress Concern Present	Stress Concern Present	Unknown	Frequency	Percentage
White	Lake County	0	0	0	0	0%
	Los Angeles County	5	1	0	6	2%
	Orange County	0	0	0	0	0%
	Riverside County	52	7	0	59	23%
	San Bernardino County	81	11	1	93	36%
Black or African-	Lake County	0	0	0	0	0%
American	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	8	0	0	8	3%

	San Bernardino County	8	0	0	8	3%
Other Race	Lake Countv	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%
	San Bernardino County	0	0	0	0	0%
Asian	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	4	1	0	5	2%
	San Bernardino County	7	0	0	7	3%
Hispanic/Latino Origin	Lake County	1	0	0	1	0%
	Los Angeles County	0	1	0	1	0%
	Orange County	1	0	0	1	0%
	Riverside County	24	0	0	24	9%
	San Bernardino County	23	4	0	27	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%

	San Bernardino County	2	0	0	2	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%
	San Bernardino County	2	0	0	2	1%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	6	0	0	6	2%
	San Bernardino County	5	0	0	5	2%
American Indian or Alaska Native	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%

	San Bernardino County	0	0	0	0	0%
Total		233	25	1	259	100%

#### Table 16. Social Connection Risk SDOH

Social Connection Risk SDOH	Frequency	Percentage
Severely Isolated	6	1.5%
Somewhat Isolated	84	21.5%
Slightly Isolated	49	12.6%
Moderately Isolated	51	13.1%
Not Isolated	21	5.4%
Unknown	179	45.9%
Total	390	100%

### Figure 14. Social Connection Risk SDOH



#### Social Connection Risk SDOH

Table 16a	. Social	Connection	Risk	SDOH	by	Race
-----------	----------	------------	------	------	----	------

	Social Connection SDOH by Race												
Race	Severely Isolated	Somewhat Isolated	Slightly Isolated	Moderately Isolated	Not Isolated	Unknown	Frequency	Percentage					
White	6	55	29	31	13	107	241	62%					
Black or African- American	0	3	3	4	1	11	22	6%					
Other Race	0	1	0	0	0	0	1	0%					
Asian	0	4	1	5	2	8	20	5%					
Hispanic/Latino Origin	0	13	12	8	5	38	76	19%					
Unknown	0	2	1	0	0	3	6	2%					
Patient refused	0	1	1	1	0	3	6	2%					
Multi-race	0	5	2	2	0	9	18	5%					
American- Indian or Alaska Native	0	0	0	0	0	0	0	0%					
Native Hawaiian	0	0	0	0	0	0	0	0%					
Total	6	84	49	51	21	179	390	100%					

#### Figure 14a. Social Connection Risk SDOH by Race



Social Connection SDOH by County											
County	Severely Isolated	Somewhat Isolated	Slightly Isolated	Moderately Isolated	Not Isolated	Unknown	Frequency	Percentage			
Lake County	0	0	0	0	0	1	1	0%			
Los Angeles County	0	5	2	0	0	8	15	4%			
Orange County	0	0	1	0	0	0	1	0%			
Riverside County	4	28	16	26	7	78	159	41%			
San Bernardino County	2	51	30	25	14	92	214	55%			
Total	6	84	49	51	21	179	390	100%			

#### Table 16b. Social Connection Risk SDOH by County

Figure 14b. Social Connection Risk SDOH by County



		Soci	al Connec	ction by Ra	ice and by Co	ounty			
Race	County	Severely Isolated	Some- what Isolated	Slightly Isolated	Moderately Isolated	Not Isolated	Unknown	Frequency	%
White	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	3	2	0	0	4	9	2%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	4	18	8	14	3	51	98	25%
	San Bernardino County	2	34	19	17	10	52	134	35%
Black or African-	Lake County	0	0	0	0	0	0	0	0%
American	Los Angeles County	0	0	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	2	1	2	1	4	10	3%
	San Bernardino County	0	1	2	2	0	7	12	3%
Other Race	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	1	0	0	0	0	1	0%
	San Bernardino County	0	0	0	0	0	0	0	0%
Asian	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	1	0	0	0	0	1	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	1	0	2	1	3	7	2%

# Table 16c. Social Connection Risk SDOH by Race and by County

	San Bernardino County	0	2	1	3	1	5	12	3%
Hispanic/ Latino	Lake County	0	0	0	0	0	1	1	0%
Origin	Los Angeles County	0	0	0	0	0	1	1	0%
	Orange County	0	0	1	0	0	0	1	0%
	Riverside County	0	3	5	5	2	16	31	8%
	San Bernardino County	0	10	6	3	3	17	39	10%
Unknown	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	1	0	0	0	1	2	1%
	San Bernardino County	0	1	1	0	0	2	4	1%
Patient refused	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	0	1	1	0	1	3	1%
	San Bernardino County	0	1	0	0	0	2	3	1%
Multi- race	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	1	0	0	0	0	1	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	2	1	2	0	2	7	2%

	San Bernardino County	0	2	1	0	0	7	10	3%
American Indian or	Lake County	0	0	0	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0	0	0	0%
Native Hawaiian	Lake County	0	0	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0	0	0	0%
Т	otal	6	84	49	51	21	176	387	100 %

# Table 17. Tobacco Risk SDOH

Tobacco Risk SDOH	Frequency	Percentage
Low Risk	1658	88.1%
Medium Risk	175	9.3%
High Risk	3	0.2%
Unknown	47	2.5%
Total	1883	100%

Figure 15. Tobacco Risk SDOH



Table 17a. Tobacco Risk SDOH by Race

	Tobacco Risk SDOH by Race											
Race	Low Risk	Medium Risk	High Risk	Unknown	Frequency	Percentage						
White	992	110	3	34	1139	60%						
Black or African- American	128	11	0	1	140	7%						
Other Race	5	2	0	0	7	0%						
Asian	70	7	0	3	80	4%						
Hispanic/Latino Origin	319	29	0	7	355	19%						
Unknown	23	3	0	0	26	1%						
Patient refused	16	4	0	0	20	1%						
Multi-race	100	8	0	2	110	6%						
American- Indian or Alaska Native	4	1	0	0	5	0%						
Native Hawaiian	1	0	0	0	1	0%						
Total	1658	175	3	47	1883	100%						

Figure 15a. Tobacco Risk SDOH by Race



Table 17b. Tobacco Risk SDOH by County

	Tobacco Risk SDOH by County											
County	Low Risk	Medium Risk	High Risk	Unknown	Frequency	Percentage						
Lake County	1	0	0	0	1	0%						
Los Angeles County	52	9	0	3	64	3%						
Orange County	3	0	0	1	4	0%						
Riverside County	717	73	1	21	812	43%						
San Bernardino County	885	93	2	22	1002	53%						
Total	1658	175	3	47	1883	100%						

Figure 15b. Tobacco Risk SDOH by County



#### Table 17c. Tobacco Risk SDOH by Race and by County

	Tobacco Risk by Race and by County											
Race	County	Low Risk	Medium Risk	High Risk	Unknown	Frequency	Percentage					
White	Lake County	0	0	0	0	0	0%					
	Los Angeles County	34	6	0	2	42	2%					
	Orange County	1	0	0	1	2	0%					
	Riverside County	428	42	1	14	485	26%					
	San Bernardino County	529	62	2	17	610	32%					
Black or African-	Lake County	0	0	0	0	0	0%					
American	Los Angeles County	2	0	0	0	2	0%					
	Orange County	0	0	0	0	0	0%					
	Riverside County	55	7	0	1	63	3%					
	San Bernardino County	71	4	0	0	75	4%					
Other Race	Lake County	0	0	0	0	0	0%					

	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	3	1	0	0	4	0%
	San Bernardino County	2	1	0	0	3	0%
Asian	Lake County	0	0	0	0	0	0%
Hispanic/Latino Origin	Los Angeles County	3	0	0	0	3	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	30	2	0	3	35	2%
	San Bernardino County	37	5	0	0	42	2%
	Lake Countv	1	0	0	0	1	0%
e e e e e e e e e e e e e e e e e e e	Los Angeles County	11	2	0	0	13	1%
	Orange County	2	0	0	0	2	0%
	Riverside County	135	15	0	2	152	8%
	San Bernardino County	170	12	0	5	187	10%
Unknown	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	11	1	0	0	12	1%
	San Bernardino County	12	2	0	0	14	1%
Patient refused	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%

	Orange County	0	0	0	0	0	0%
	Riverside County	7	3	0	0	10	1%
	San Bernardino County	9	1	0	0	10	1%
Multi-race	Lake County	0	0	0	0	0	0%
	Los Angeles County	2	1	0	1	4	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	46	2	0	1	49	3%
	San Bernardino County	52	5	0	0	57	3%
American Indian or Alaska Native	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	2	0	0	0	2	0%
	San Bernardino County	2	1	0	0	3	0%
Native Hawaiian	Lake County	0	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0	0%
	Orange County	0	0	0	0	0	0%
	Riverside County	0	0	0	0	0	0%
	San Bernardino County	1	0	0	0	1	0%
Total		1658	175	3	47	1883	100%

Table 18. Intimate Partner Violence Risk SDOH

Partner Violence Risk	Frequency	Percentage
Not at Risk	353	94.4%
At Risk	7	1.9%
Unknown	14	3.7%
Total	374	100%





Table 18a. Intimate Partner Violence Risk SDOH by Race

Partner Violence Risk SDOH by Race						
Race	Not at Risk	At Risk	Unknown	Frequency	Percentage	
White	215	6	9	230	61%	
Black or African- American	21	0	0	21	6%	
Other Race	1	0	0	1	0%	
Asian	18	0	1	19	5%	
Hispanic/Latino Origin	71	1	3	75	20%	
Unknown	5	0	0	5	1%	
Patient refused	5	0	1	6	2%	
Multi-race	17	0	0	17	5%	
American- Indian or Alaska Native	0	0	0	0	0%	
Native Hawaiian	0	0	0	0	0%	
Total	353	7	14	374	100%	

#### Figure 16a. Intimate Partner Violence Risk SDOH by Race



Table 18b. Intimate Partner Violence Risk SDOH by County

Partner Violence Risk SDOH by County						
County	Not at Risk	At Risk	Unknown	Frequency	Percentage	
Lake County	1	0	0	1	0%	
Los Angeles County	13	0	0	13	3%	
Orange County	1	0	0	1	0%	
Riverside County	151	1	5	157	42%	
San Bernardino County	187	6	9	202	54%	
Total	353	7	14	374	100%	

Figure 16b. Intimate Partner Violence Risk SDOH by County



Table 18c. Intimate Partner Violence Risk SDOH by Race and by County

Intimate Partner Violence Risk by Race and by County						
Race	County	Not at Risk	At Risk	Unknown	Frequency	Percentage
White	Lake County	0	0	0	0	0%
	Los Angeles County	8	0	0	8	2%
	Orange County	0	0	0	0	0%
	Riverside County	91	1	4	96	26%
	San Bernardino County	116	5	5	126	34%
Black or African-	Lake County	0	0	0	0	0%
American	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	10	0	0	10	3%
	San Bernardino County	11	0	0	11	3%
Other Race	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%
	San Bernardino County	0	0	0	0	0%
Asian	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	7	0	0	7	2%
	San Bernardino County	10	0	1	11	3%

Hispanic/Latino Origin	Lake County	1	0	0	1	0%
U	Los Angeles County	3	0	0	3	1%
	Orange County	1	0	0	1	0%
	Riverside County	31	0	1	32	9%
	San Bernardino County	35	1	2	38	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%
	San Bernardino County	4	0	0	4	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	3	0	0	3	1%
	San Bernardino County	2	0	1	3	1%
<b>Multi-race</b>	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	7	0	0	7	2%
	San Bernardino County	9	0	0	9	2%
American Indian or Alaska Native	Lake County	0	0	0	0	0%

	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Total	l	353	7	14	374	100%

#### Table 19. Alcohol Risk SDOH

Alcohol Risk SDOH	Frequency	Percentage
Not at Risk	779	96.9%
Heavy Drinker	3	.4%
Unknown	22	2.7%
Total	804	100%

Figure 17. Alcohol Risk SDOH
## Alcohol Risk SDOH



# Table 19a. Alcohol Risk SDOH by Race.

Alcohol Risk SDOH by Race									
Race	Not at Risk	Heavy Drinker	Unknown	Frequency	Percentage				
White	470	3	0	473	60%				
Black or African- American	57	0	3	60	8%				
Other Race	4	0	0	4	1%				
Asian	33	0	1	34	4%				
Hispanic/Latino Origin	151	0	4	155	20%				
Unknown	9	0	0	9	1%				
Patient refused	9	0	0	9	1%				
Multi-race	42	0	0	42	5%				

American- Indian or Alaska Native	3	0	0	3	0%
Native Hawaiian	1	0	0	1	0%
Total	779	3	8	790	100%

Figure 17a. Alcohol Risk SDOH by Race



## Table 19b. Alcohol Risk SDOH by County

Alcohol Risk by County									
County	Not at Risk	Heavy Drinker	Unknown	Frequency	Percentage				
Lake County	1	0	0	1	0%				
Los Angeles County	25	1	0	26	3%				
Orange County	1	0	0	1	0%				
Riverside County	332	0	8	340	42%				
San Bernardino County	420	2	14	436	54%				
Total	779	3	22	804	100%				

Figure 17b. Alcohol Risk SDOH by County



## Table 19c. Alcohol Risk SDOH by Race and by County

Alcohol Risk by Race and by County								
Race	County	Not at Risk	Heavy Drinker	Unknown	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	16	1	0	17	2%		
	Orange County	0	0	0	0	0%		
	Riverside County	204	0	5	209	26%		
	San Bernardino County	250	2	9	261	32%		
Black or African-	Lake County	0	0	0	0	0%		
American	Los Angeles County	0	0	0	0	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	26	0	2	28	3%		

	San Bernardino County	31	0	1	32	4%
Other Race	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	0	0	2	0%
	San Bernardino County	2	0	0	2	0%
Asian	Lake County	0	0	0	0	0%
	Los Angeles County	1	0	0	1	0%
	Orange County	0	0	0	0	0%
	Riverside County	13	0	0	13	2%
	San Bernardino County	19	0	1	20	2%
Hispanic/Latino Origin	Lake County	1	0	0	1	0%
	Los Angeles County	6	0	0	6	1%
	Orange County	1	0	0	1	0%
	Riverside County	61	0	1	62	8%
	San Bernardino County	82	0	3	85	11%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	3	0	0	3	0%

	San Bernardino County	6	0	0	6	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	5	0	0	5	1%
	San Bernardino County	4	0	0	4	0%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	2	0	0	2	0%
	Orange County	0	0	0	0	0%
	Riverside County	17	0	0	17	2%
	San Bernardino County	23	0	0	23	3%
American Indian or	Lake County	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	0	0	1	0%
	San Bernardino County	2	0	0	2	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%

	San Bernardino County	1	0	0	1	0%
Tota	l –	779	3	22	804	100%

Appendix C.

Evaluation Question #2: ASQ-3 Comprehensive Tables and Figures

## Table 23. Last Source of ASQ Completion

Last ASQ Completed Source	Frequency	Percentage
Loma Linda University Pediatrics	355	19.86%
Riverside University Health	351	19.64%
SAC Health Care System	1081	60.50%
Total	1787	100%

#### Table 24. ASQ Communication Score

ASQ Communication Score	Frequency	Percentage
Concern	194	12.2%
Monitor	202	12.7%
Typical	1193	75.1%
Total	1589	100%

## Figure 19. ASQ Communication Score



ASQ Communication Score by Race									
Race	Concern	Monitor	Typical	Frequency	Percentage				
White	105	128	727	960	60%				
Black or African- American	17	14	87	118	7%				
Other Race	1	0	5	6	0%				
Asian	7	6	51	64	4%				
Hispanic/Latino Origin	45	39	226	310	20%				
Unknown	2	6	14	22	1%				
Patient refused	2	3	11	16	1%				
Multi-race	14	6	68	88	6%				
American- Indian or Alaska Native	1	0	4	5	0%				
Native Hawaiian	0	0	0	0	0%				
Total	194	202	1193	1589	100%				

## Table 24a. ASQ Communication Score by Race

#### Figure 19a. ASQ Communication Score by Race



ASQ Communication Score by County									
County	Concern	Monitor	Typical	Frequency	Percentage				
Lake County	0	0	1	1	0%				
Los Angeles County	5	9	38	52	3%				
Orange County	1	0	3	4	0%				
Riverside County	88	78	533	699	44%				
San Bernardino County	100	115	618	833	52%				
Total	194	202	1193	1589	100%				

### Table 24b. ASQ Communication Score by County

#### Figure 19b. ASQ Communication Score by County



ASQ Communication by Race and by County								
Race	County	Concern	Monitor	Typical	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	3	6	25	34	2%		
	Orange County	1	0	1	2	0%		
	Riverside County	47	49	329	425	27%		
	San Bernardino County	54	73	372	499	31%		
Black or African-	Lake County	0	0	0	0	0%		
American	Los Angeles County	0	0	2	2	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	8	6	38	52	3%		
	San Bernardino County	9	8	47	64	4%		
Other Race	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	0	0	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	1	0	2	3	0%		
	San Bernardino County	0	0	3	3	0%		

# Table 24c. ASQ Communication Score by Race and by County

Asian	Lake County	0	0	0	0	0%
	Los Angeles County	0	1	1	2	0%
	Orange County	0	0	0	0	0%
	Riverside County	5	1	22	28	2%
	San Bernardino County	2	4	28	34	2%
Hispanic/Latino Origin	Lake County	0	0	1	1	0%
	Los Angeles County	1	1	8	10	1%
	Orange County	0	0	2	2	0%
	Riverside County	20	17	97	134	8%
	San Bernardino County	24	21	118	163	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	4	5	10	1%
	San Bernardino County	1	2	9	12	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	1	5	8	1%

	San Bernardino County	0	2	6	8	1%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	1	1	2	4	0%
	Orange County	0	0	0	0	0%
	Riverside County	4	0	33	37	2%
	San Bernardino County	9	5	33	47	3%
American Indian or	Lake County	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	2	2	0%
	San Bernardino County	1	1	4	6	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Tota	1	194	203	1195	1592	100%

# Table 25. ASQ Gross Motor Score

ASQ Gross Motor Score	Frequency	Percentage
Concern	194	12.2%
Monitor	145	9.1%
Typical	1250	78.7%
Total	1589	100%

# Figure 20. ASQ Gross Motor Score



## ASQ Gross Motor Score

ASQ Gross Motor Score by Race									
Race	Concern	Monitor	Typical	Frequency	Percentage				
White	114	88	758	960	60%				
Black or African- American	22	9	87	118	7%				
Other Race	2	1	3	6	0%				
Asian	10	4	50	64	4%				
Hispanic/Latino Origin	33	32	245	310	19%				
Unknown	1	4	17	22	1%				
Patient refused	1	15	16	32	2%				
Multi-race	11	6	71	88	5%				
American- Indian or Alaska Native	1	0	4	5	0%				
Native Hawaiian	0	0	0	0	0%				
Total	195	159	1251	1605	100%				

## Table 25a. ASQ Gross Motor Score by Race

#### Figure 20a. ASQ Gross Motor Score by Race



ASQ Gross Motor Score by County									
County	Concern	Monitor	Typical	Frequency	Percentage				
Lake County	0	0	1	1	0%				
Los Angeles County	6	6	40	52	3%				
Orange County	0	1	3	4	0%				
Riverside County	81	69	549	699	44%				
San Bernardino County	107	69	657	833	52%				
Total	194	145	1250	1589	100%				

#### Table 25b. ASQ Gross Motor Score by County

## Figure 20b. ASQ Gross Motor Score by County



ASQ Gross Motor Score by Race and by County								
Race	County	Concern	Monitor	Typical	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	3	4	27	34	2%		
	Orange County	0	1	1	2	0%		
	Riverside County	45	38	342	425	27%		
	San Bernardino County	66	45	388	499	31%		
Black or African- American	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	2	2	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	10	3	39	52	3%		
	San Bernardino County	12	6	46	64	4%		
Other Race	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	0	0	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	1	1	1	3	0%		
	San Bernardino County	1	0	2	3	0%		
Asian	Lake County	0	0	0	0	0%		
	Los Angeles County	0	1	1	2	0%		

# Table 25c. ASQ Gross Motor Score by Race and by County

	Orange County	0	0	0	0	0%
	Riverside County	5	1	22	28	2%
	San Bernardino County	5	2	27	34	2%
Hispanic/Latino Origin	Lake County	0	0	1	1	0%
	Los Angeles County	3	0	7	10	1%
	Orange County	0	0	2	2	0%
	Riverside County	15	18	101	134	8%
	San Bernardino County	15	14	134	163	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	4	5	10	1%
	San Bernardino County	0	0	12	12	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	8	8	1%
	San Bernardino County	0	1	7	8	1%
Multi-race	Lake County	0	0	0	0	0%

	Los Angeles County	0	1	3	4	0%
	Orange County	0	0	0	0	0%
	Riverside County	4	4	29	37	2%
	San Bernardino County	7	1	39	47	3%
American Indian or Alaska Native	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	2	2	0%
	San Bernardino County	0	1	2	3	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Total	l	193	146	1250	1589	100%

# Table 26. ASQ Fine Motor Score

ASQ Fine Motor Score	Frequency	Percentage
Concern	196	12.3%
Monitor	249	15.7%
Typical	1144	72.0%
Total	1589	100%

Figure 21. ASQ Fine Motor Score



# ASQ Fine Motor Score

ASQ Fine Motor Score by Race									
Race	Concern	Monitor	Typical	Frequency	Percentage				
White	112	154	694	960	60%				
Black or African- American	17	22	79	118	7%				
Other Race	2	0	4	6	0%				
Asian	6	12	46	64	4%				
Hispanic/Latino Origin	42	45	223	310	20%				
Unknown	3	3	16	22	1%				
Patient refused	3	1	12	16	1%				
Multi-race	10	12	66	88	6%				
American- Indian or Alaska Native	1	0	4	5	0%				
Native Hawaiian	0	0	0	0	0%				
Total	196	249	1144	1589	100%				

## Table 26a. ASQ Fine Motor Score by Race

#### Figure 21a. ASQ Fine Motor Score by Race



ASQ Fine Motor Score by County									
County	Concern	Monitor	Typical	Frequency	Percentage				
Lake County	0	0	1	1	0%				
Los Angeles County	5	10	37	52	3%				
Orange County	2	0	2	4	0%				
Riverside County	88	84	527	699	44%				
San Bernardino County	101	155	577	833	52%				
Total	196	249	1144	1589	100%				

### Table 26b. ASQ Fine Motor Score by County

# Figure 21b. ASQ Fine Motor Score by County



ASQ Fine Motor Score by Race and by County								
Race	County	Concern	Monitor	Typical	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	2	7	25	34	2%		
	Orange County	1	0	1	2	0%		
	Riverside County	50	46	329	425	27%		
	San Bernardino County	59	101	339	499	31%		
Black or African-	Lake County	0	0	0	0	0%		
American	Los Angeles County	0	1	1	2	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	10	10	32	52	3%		
	San Bernardino County	7	11	46	64	4%		
Other Race	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	0	0	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	1	0	2	3	0%		
	San Bernardino County	1	0	2	3	0%		

# Table 26c. ASQ Fine Motor Score by Race and by County

Asian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	2	2	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	7	19	28	2%
	San Bernardino County	4	5	25	34	2%
Hispanic/Latino Origin	Lake County	0	0	1	1	0%
	Los Angeles County	2	1	7	10	1%
	Orange County	1	0	1	2	0%
	Riverside County	19	11	104	134	8%
	San Bernardino County	20	33	110	163	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	3	5	10	1%
	San Bernardino County	1	0	11	12	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	3	0	5	8	1%

	San Bernardino County	0	1	7	8	1%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	1	1	2	4	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	7	29	37	2%
	San Bernardino County	8	4	35	47	3%
American Indian or	Lake County	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	2	2	0%
	San Bernardino County	1	0	2	3	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Tota	1	196	249	1144	1589	100%

# Table 27. ASQ Problem Solving Score

ASQ Problem Solving Score	Frequency	Percentage
Concern	197	12.4%
Monitor	169	10.6%
Typical	1223	77.0%
Total	1589	100%

# Figure 22. ASQ Problem Solving Score



# ASQ Problem Solving Score

ASQ Problem Solving Score by Race									
Race	Concern	Monitor	Typical	Frequency	Percentage				
White	118	104	738	960	60%				
Black or African- American	22	12	84	118	7%				
Other Race	1	1	4	6	0%				
Asian	8	6	50	64	4%				
Hispanic/Latino Origin	35	33	242	310	20%				
Unknown	3	0	19	22	1%				
Patient refused	0	4	12	16	1%				
Multi-race	9	9	70	88	6%				
American- Indian or Alaska Native	1	0	4	5	0%				
Native Hawaiian	0	0	0	0	0%				
Total	197	169	1223	1589	100%				

## Table 27a. ASQ Problem Solving Score by Race

#### Figure 22a. ASQ Problem Solving Score by Race



ASQ Problem Solving Score by County									
County	Concern	Monitor	Typical	Frequency	Percentage				
Lake County	0	0	1	1	0%				
Los Angeles County	7	3	42	52	3%				
Orange County	0	1	3	4	0%				
Riverside County	90	69	540	699	44%				
San Bernardino County	100	96	637	833	52%				
Total	197	169	1223	1589	100%				

#### Table 27b. ASQ Problem Solving Score by County

## Figure 22b. ASQ Problem Solving Score by County



ASQ Problem Solving Score by Race and by County								
	a i	a			-			
Race	County	Concern	Monitor	Typical	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	3	1	30	34	2%		
	Orange County	0	1	1	2	0%		
	Riverside County	57	42	326	425	27%		
	San Bernardino County	58	60	381	499	31%		
Black or African- American	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	2	2	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	10	6	36	52	3%		
	San Bernardino County	12	6	46	64	4%		
Other Race	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	0	0	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	1	1	1	3	0%		
	San Bernardino County	0	0	3	3	0%		
Asian	Lake County	0	0	0	0	0%		

# Table 27c. ASQ Problem Solving Score by Race and by County

	Los Angeles County	0	0	2	2	0%
	Orange County	0	0	0	0	0%
	Riverside County	6	2	20	28	2%
	San Bernardino County	2	4	28	34	2%
Hispanic/Latino Origin	Lake County	0	0	1	1	0%
	Los Angeles County	3	1	6	10	1%
	Orange County	0	0	2	2	0%
	Riverside County	13	13	108	134	8%
	San Bernardino County	19	19	125	163	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	8	10	20	1%
	San Bernardino County	1	0	11	12	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	1	7	8	1%

	San Bernardino County	0	3	5	8	1%
Multi-race	Lake County	0	0	0	0	0%
	Los Angeles County	1	1	2	4	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	4	32	37	2%
	San Bernardino County	7	4	36	47	3%
American Indian or	Lake County	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	2	2	0%
	San Bernardino County	1	0	2	3	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Tota	1	197	177	1225	1599	100%

## Table 28. ASQ Personal Social Score

ASQ Personal Social Score	Frequency	Percentage
Concern	197	12.4%
Monitor	169	10.6%
Typical	1223	77.0%
Total	1589	100%

Figure 23. ASQ Personal Social Score



ASQ Personal Social Score

HMGIE FY 20-21 Data Report

ASQ Personal Social Score by Race									
Race	Concern	Monitor	Typical	Frequency	Percentage				
White	118	104	738	960	60%				
Black or African- American	22	12	84	118	7%				
Other Race	1	1	4	6	0%				
Asian	8	6	50	64	4%				
Hispanic/Latino Origin	35	33	242	310	20%				
Unknown	3	0	19	22	1%				
Patient refused	0	4	12	16	1%				
Multi-race	9	9	70	88	6%				
American- Indian or Alaska Native	1	0	4	5	0%				
Native Hawaiian	0	0	0	0	0%				
Total	197	169	1223	1589	100%				

Table 28a. ASQ Personal Social Score by Race

#### Figure 23a. ASQ Personal Social Score by Race



ASQ Personal Social Score by County									
County	Concern	Monitor	Typical	Frequency	Percentage				
Lake County	7	0	1	1	0%				
Los Angeles County	1	3	42	46	3%				
Orange County	0	1	3	4	0%				
Riverside County	90	69	540	699	44%				
San Bernardino County	100	96	637	833	53%				
Total	191	169	1223	1589	100%				

## Table 28b. ASQ Personal Social Score by County

## Figure 23b. ASQ Personal Social Score by County



ASQ Personal Social Score by Race and by County								
Race	County	Concern	Monitor	Typical	Frequency	Percentage		
White	Lake County	0	0	0	0	0%		
	Los Angeles County	3	1	30	34	2%		
	Orange County	0	1	1	2	0%		
	Riverside County	57	42	326	425	27%		
	San Bernardino County	58	60	381	499	31%		
Black or African-	Lake County	0	0	0	0	0%		
American	Los Angeles County	0	0	2	2	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	10	6	36	52	3%		
	San Bernardino County	12	6	46	64	4%		
Other Race	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	0	0	0%		
	Orange County	0	0	0	0	0%		
	Riverside County	1	1	1	3	0%		
	San Bernardino County	0	0	3	3	0%		
Asian	Lake County	0	0	0	0	0%		
	Los Angeles County	0	0	2	2	0%		

# Table 28c. ASQ Personal Social Score by Race and by County

	Orange County	0	0	0	0	0%
	Riverside County	6	2	20	28	2%
	San Bernardino County	2	4	28	34	2%
Hispanic/Latino Origin	Lake County	0	0	1	1	0%
	Los Angeles County	3	1	6	10	1%
	Orange County	0	0	2	2	0%
	Riverside County	13	13	108	134	8%
	San Bernardino County	19	19	125	163	10%
Unknown	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	2	0	8	10	1%
	San Bernardino County	1	0	11	12	1%
Patient refused	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	1	7	8	1%
	San Bernardino County	0	3	5	8	1%
<b>Multi-race</b>	Lake County	0	0	0	0	0%
-----------------------	-----------------------------	-----	-----	------	------	------
	Los Angeles County	1	1	2	4	0%
	Orange County	0	0	0	0	0%
	Riverside County	1	4	32	37	2%
	San Bernardino County	7	4	36	47	3%
American Indian or	Lake County	0	0	0	0	0%
Alaska Native	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	2	2	0%
	San Bernardino County	1	0	2	3	0%
Native Hawaiian	Lake County	0	0	0	0	0%
	Los Angeles County	0	0	0	0	0%
	Orange County	0	0	0	0	0%
	Riverside County	0	0	0	0	0%
	San Bernardino County	0	0	0	0	0%
Total		197	169	1223	1589	100%

## REFERENCES

- Anderson LM, Shinn C, Fullilove MT, Scrimshaw SC, Fielding JE, Normand J. (2003). Task Force on Community Preventive Services. The effectiveness of early childhood development programs: a systematic review. *American Journal of Preventive Medicine*, 24(3), 32-46.
- Arnold DH, Doctoroff GL. (2003). The early education of socioeconomically disadvantaged children. *Annual Review of Psychology*, 54(1), 517–545.
- Currie J. (2005). Health disparities and gaps in school readiness. Future Child, 15(1), 117–138.
- Evans GW, Kim P. (2013). Childhood poverty, chronic stress, self-regulation, and coping. *Child Development Perspectives*, 7(1), 43–48.
- Hahn RA, Rammohan V, Truman BI, Milstein B, Johnson RL, Muntañer C, Jones CP, Fullilove MT, Chattopadhyay SK, Hunt PC, Abraido-Lanza AF, Community Preventive Services Task Force. (2014). Effects of full-day kindergarten on the long-term health prospects of children in low-income and racial/ethnic-minority populations: a community guide systematic review. *American Journal of Preventive Medicine*, 46(3), 312–323.
- Magnuson KA, Waldfogel J. (2005). Early childhood care and education: effects on ethnic and racial gaps in school readiness. *Future Child*, 15(1), 169–196.
- Map of the Inland Empire, California. (2021, September 7). *Mapchart.net*. map. https://mapchart.net/usacounties.html. The map of the Inland Empire, California was generated through MapChart.net.
- Noble KG, McCandliss BD, Farah MJ. (2007). Socioeconomic gradients predict individual differences in neurocognitive abilities. *Developmental Science*, 10(4), 464–480.
- Shonkoff JP, Phillips DA (Eds.). (2000). Institute of Medicine and National Research Council. *From neurons to neighborhoods: the science of early childhood development*. Washington, DC: The National Academies Press.