Intimate Partner Violence Screening Rates Among Primary Care Patients

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BACKGROUND
Intimate partner violence, or IPV, is prevalent among primary care patients in the United States and has a substantial impact on health and social well-being. It is particularly prevalent in urban underserved populations such as West Philadelphia. Screening for IPV and standardizing an approach for effective screening protocol has been a challenge for primary care physicians.

OBJECTIVE
Assess rates of IPV screening in primary care patients

METHODS
- As part of new patient visits, patient complete intake assessment forms. These forms document alcohol use, tobacco use, and have single intake item to assess for safety
- 180 new patient visits at PFC were reviewed for completion of intake forms
- New patient charts were also evaluated for separate documentation of IPV screening either in progress note or Epic History tab

RESULTS
- Intake forms were completed (filled out and scanned into chart) for 29% of new patient visits.
- When selecting for adult patients only, 32.5% of new patients had a completed intake form.
- Separate provider documentation of IPV in progress notes or in the chart was also low at about 27%
- Total percentage of patients screened by any means is just over half at 48% of patients.
- Only 4 intake forms and 2 separate provider notes positively documented IPV out of 180, which is lower than what would be expected based on prior prevalence studies for IPV.

CONCLUSIONS AND NEXT STEPS
- Chart review suggests that additional work is needed to standardize screening for intimate partner violence in order to improve rates of screening and improve detection of patients at risk.
- Next step is to survey providers to determine what barriers there are to screening patients for IPV
- Next step is to add E-HITS scale to intake forms for more thorough surveying of patients for IPV.