

BACKGROUND

American College of Obstetrics and Gynecology (ACOG) recommends screening for social determinants of health (SDOH), including housing. SDOH can impact mother/baby health outcomes at the individual and population level.

The primary purpose of this project is to implement a standard of practice that improves screening for housing insecurity in pregnant populations and improve clinical and administrative resources for patients.

OBJECTIVES

- Identify the current usage of the screening tool for housing insecurity
- Increase the usage and identification of housing insecure patients by 50% at the end of the calendar year
- Implement a comprehensive screening tool to identify pregnant patients with housing insecurity.

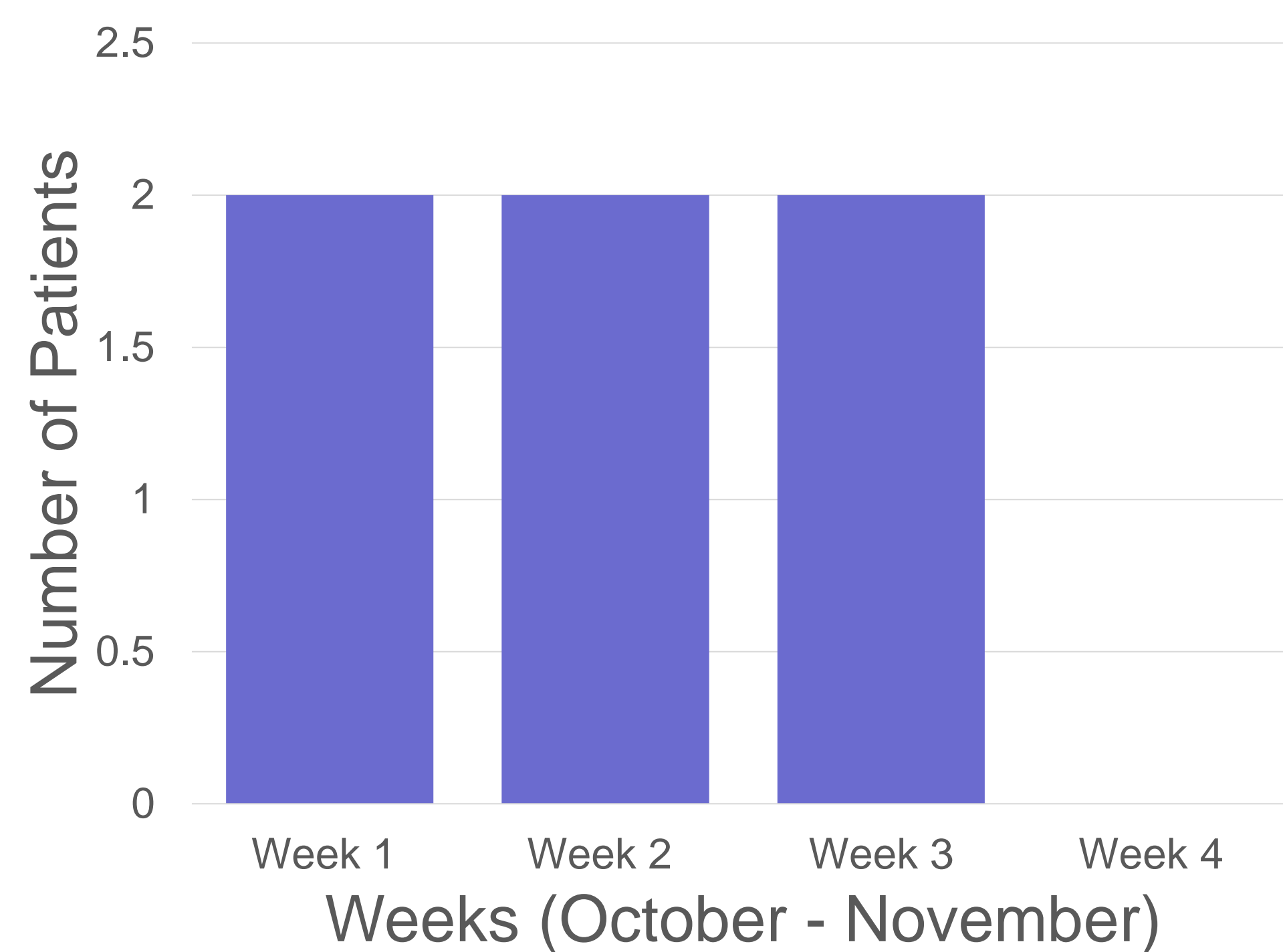
MATERIALS & METHODS



OUTCOMES

Preintervention

Preintervention Observation



Summary of Patients over 1 month period prior to intervention

WEEK 1	WEEK 2	WEEK 3	WEEK 4
2 patients	2 patients	2 patients	2 patients with housing needs
1st trimester and 1st pregnancies	2nd pregnancy/ 2nd and 3rd trimesters	Undocumented immigrants/ refugees	Transient homelessness due to the pandemic
Fleeing interpersonal violence	Consistent and transient homelessness, (i.e.: living in cars and shelters)		GYN patients with complex social issues
Referral by PHQ-9 and provider			

Intervention

10 question screening tool from ACOG and Boston Health Leads Social Needs Toolkit



The screenshot shows a 'HOUSING SCREENING FORM' with 10 numbered questions. Each question has a 'Yes' and 'No' checkbox. The questions cover topics such as declining screening, homelessness, food insecurity, stable housing, living arrangements, future housing concerns, health care access, and referral preferences.

- 1 month intervention : March to April
- Identified 1 patient with housing needs
- Themes that Emerged:
 - Comprehensive self identification
 - Emergent intervention vs. stable housing insecurity identified before appointment with clinical staff (physicians, residents, midwives)

Postintervention

DISCUSSION

There are unique housing needs presented in the high-risk obstetric clinic population. The clinical staff's referrals to the clinical social worker captured the patients who needed the services the most. However, over one month, the paper screening tool yielded fewer but more comprehensive results necessary to impact clinical practice in the clinic. Although the social worker was able to capture the need, there were difficulties in permanent housing placement. The next steps of the project include the utilization of the new screening tool over an extended period and implementing standardized ways to capture patients with housing needs. Other next steps include addressing and increasing resources for emergency shelters for pregnant women and women facing complex social issues such as IPV, rape etc. Also, increase diverse housing options for women as well as funding to the established housing authorities for long term stays especially for mothers and babies. Identifying housing insecurity is one step but eradicating housing insecurity is the goal.

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