

Identifying Families with Food Insecurities at the Adult and Pediatric Health Care Clinic

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Collaborative Team Members

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- Angie Mathai, MD, attending physician
- Karin Hillenbrand, MD, attending physician
- Jennifer Crotty, MD, attending physician
- Amber Davis, clinical social work
- Anna Laughman, MD, resident
- Brooke Baggett, DO, resident
- Riju Narayan, MD, resident
- Keith Savran, MD, resident
- Jacob Vaught, DO, resident
- Jasmyn Atalla, MD, resident
- Shiva Poola, MD, resident
- Jennifer Chu, DO, resident
- Chelcie Kurzontkowski, RD, clinical dietician
- Sam Johnson, lab technician and phlebotomist
- Kim Joyner, medical assistant
- Allie Hernandez, RN, nurse



Background and Objectives

- Food insecurity is defined by the USDA as lack of consistent access to nutritionally adequate food.
- Food insecurity is a major social determinant of health and is associated with poor health outcomes in children and their families.
- An estimated 400,000 children are affected by food insecurity in North Carolina.
- The American Academy of Pediatrics recommends screening for food insecurity however, up to 40% of pediatricians are not completing the appropriate screening or providing resources and support for their patients.
- The Duke Endowment via Carolinas Collaborative has promoted quality improvement projects to improve screening processes and interventions including an initiative at the ECU Adult and Pediatric Health Care (APHC).
- Prior to this project, there was no process for screening for food insecurity at the ECU APHC.



Aim Statements

March 2021

By March 1st 2021, to screen and document food insecurity in at least 60% of all patients under 18 years old presenting as well child checks to Thursday resident clinic.

May 2023

By May 1st 2023, at least 80% of all patients under 18 years old, who screen positive for food insecurity in Thursday Continuity clinic will have a phone follow up for re-screening at 1 month.

By May 1st 2022, at least 60% of ALL well-child checks at APHC will have screening and documentation for food insecurity

May 2022

How Are We Screening?

Hunger Vital Signs

Instructions: Please circle 1 answer for every question.

1. Within the past 12 months, you worried that your food would run out before you got money to buy more.

Never True Sometimes true Often True Prefer not to answer

2. Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.

Never true Sometimes true Often True Prefer not to answer

***Resources for food insecurity (food banks, etc.) can be found in the back of the packet given during your visit.**

The Basis of Our QI Project

“The Hunger Vital Sign”

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Development and Validity of a 2-Item Screen to Identify Families at Risk for Food Insecurity

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What to Do if There is a Positive Screen?

1. Social Services Referral, if patient and family agree

2. Dot phrase for food insecurity “.FOODINSRESOURCE” or ensuring there are appropriate resources stapled to the back of every WCC info packet

3. Document in EHR

4. Social Worker follow up, within a month for f/u on food insecurity

Goal of 2020-2022 PDSA Cycles

Chart Review

Abraham Test
Male, 65yrs, 6/20/1956
MRN: 1576784
COR MRN: 5401928
Code: FULL (no ACP docs)

COVID-19 Vaccine: Overdue for dose 2

Tamberelli, Wayne P., PA
PCP - General

When	Dept	Type	With	Description
Yesterday	VH-VCCO...	Patient Outreach	CC - Jones, J	TC Home
01/18/2022	ECUCVST...	Telephone	Thoracic - Shaffer, L	Prior Authorization
01/11/2022	HAVQNUT	Office Visit	Nutrition - Gold, A	Health education (Pir
01/11/2022	HAVQNUT	Clinical Documentation...	Nutrition	
01/10/2022	VH-NINF	Orders Only	HEM ONC - Beacon Ph...	Small lymphocytic lym

History

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Allegies (2)

Gen Adult Risk: N/A
Blood Type: None
Pharmacy/Prescriber Lock-In: Inactive

Weight: 250 lb (113.4 kg) >7 days
BP: 138/84 >1 day

Review Social Determinants

Social Determinants of Health

- Tobacco Use
- May 25 2021: High Risk
- Financial Resource Strain
- Not on file
- Transportation Needs
- Not on file
- Stress
- Not on file
- Inmate Partner Violence
- Not on file
- Housing Stability
- Not on file

History Tab

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Food Insecurity

Time taken: 1/20/2022 1:55

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Within the past 12 months, you worried that your food would run out before you got the money to buy more.

Never true Sometimes true Often true Patient refused

Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.

Never true Sometimes true Often true Patient refused

Goal of 2020-2022 PDSA Cycles

The screenshot shows the Epic EHR interface for patient 'Abraham Test'. The 'Medical history' dialog box is open, displaying a list of diagnoses. The entry 'Food Insecurity' is highlighted, and the '+ Add' button is visible. Red arrows point to the 'Food Insecurity' entry and the '+ Add' button. The dialog box also shows other diagnoses such as 'Scleroderma (CMS/HCC)', 'Rotator cuff syndrome', 'Coronary artery disease', 'Bronchiectasis without acute exacerbation (CMS/HCC)', 'Arthritis', and 'Allergic rhinitis'. The 'Date' and 'Age' columns are also visible.

Diagnosis	Date	Age
Scleroderma (CMS/HCC)	05/15/2021	64y
Rotator cuff syndrome		
Coronary artery disease		
Bronchiectasis without acute exacerbation (CMS/HCC)		
Arthritis		
Allergic rhinitis		

- Diagnosis Entry:
Food insecurity [Z59.41]

2022-2023 PDSA Cycles



1. Keeping food insecurity resources up to date in our paper handouts



2. Creating a re-screening phone script



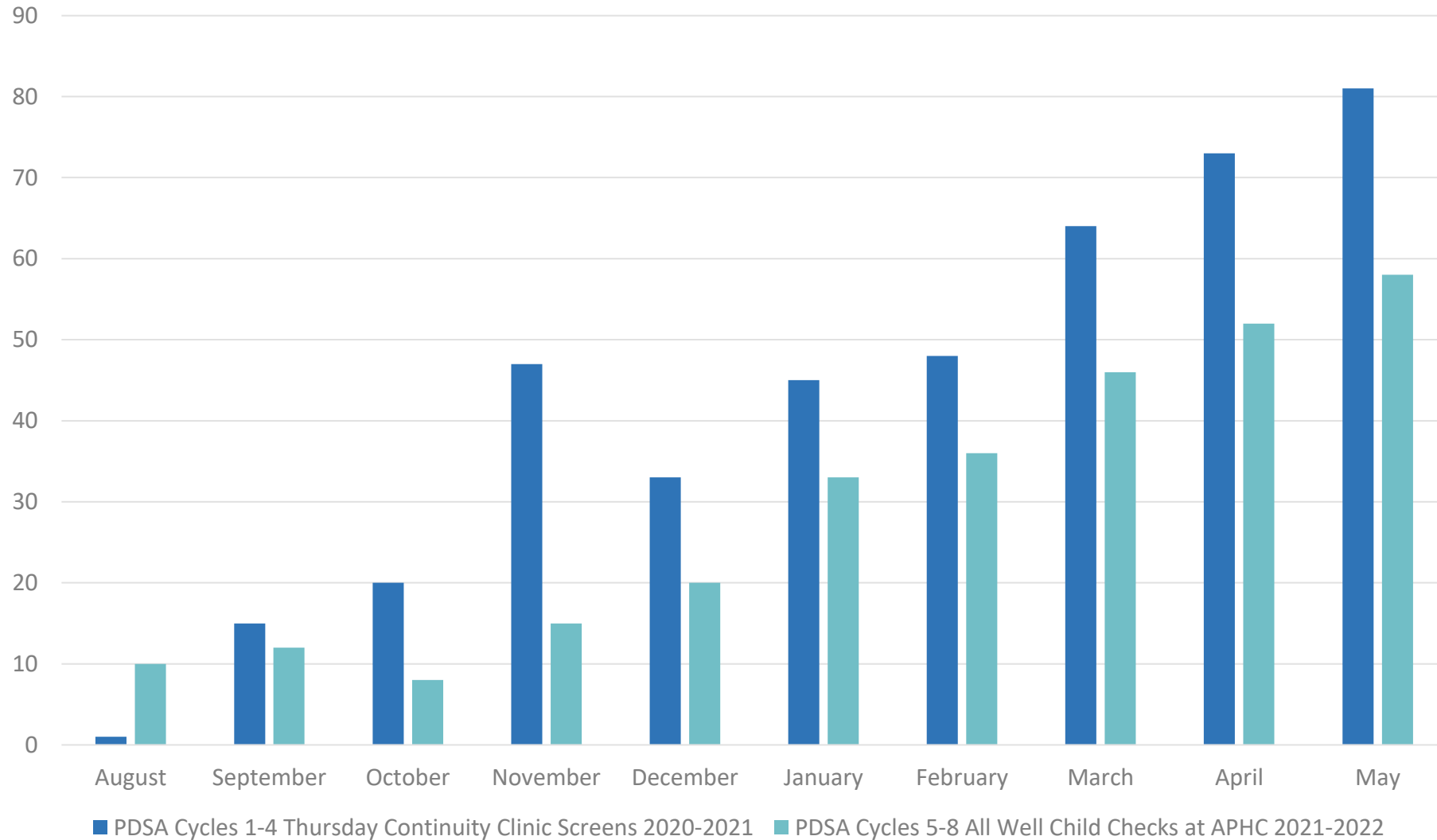
3. Enlisting the help of social work in reaching out to patients



4. Keeping track of forms

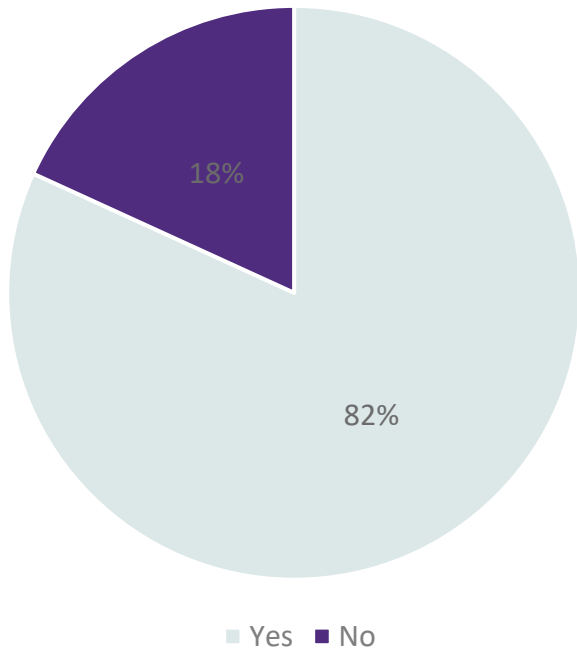
Results

Percentage of Screens Documented at Well Child Checks

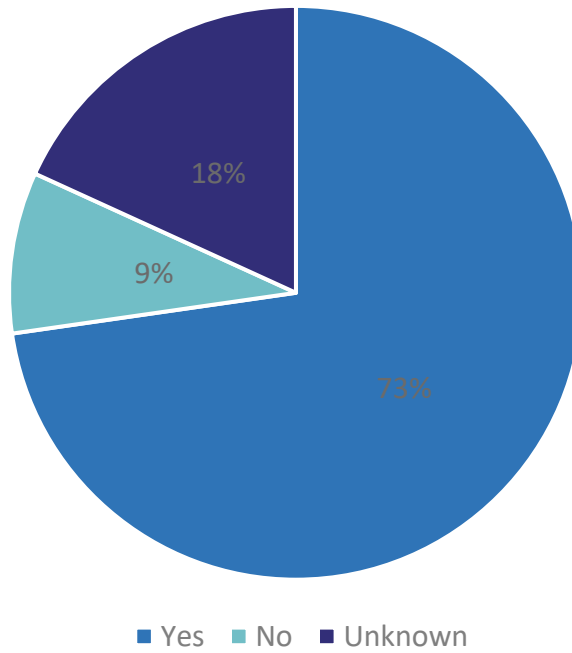


Results

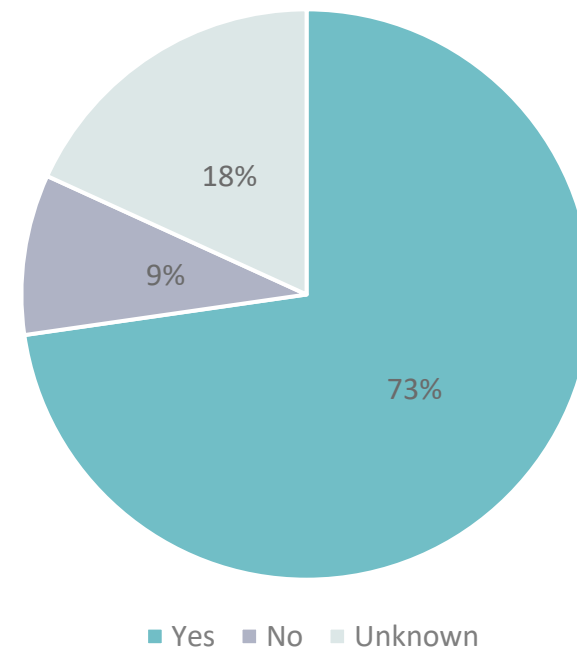
Re-screened



Still Food Insecure



Accessed Resources



Lessons Learned

How to work within an interdisciplinary team

Our patients and their families are experiencing food insecurity and seeking help

The resources we provide are helping our food insecure patients

Food insecurity is transient, so regular screening efforts are important

Our patients' resource needs change, which highlights the need for rescreening

Future Directions



- APHC has a newly implemented food pantry for those who screen positive
- Are there other social determinants of health that we should track/ provide resources for our patients?

References

1. Coleman-Jensen A, Rabbitt MP, Gregory CA, Singh A. Household food security in the united states in 2018. Economic Research Report No. (ERR-270) 47 pp.
2. Feeding America. Hunger in North Carolina. 2021. <https://www.feedingamerica.org/hunger-in-america/north-carolina#:~:text=In%20North%20Carolina%2C%201%2C456%2C200%20people,of%20them%20443%2C040%20are%20children.&text=1%20in%205%20children%20struggles,to%20meet%20their%20food%20needs>.

Questions?

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