Food Insecurity Screening and Referral in Pediatric Inpatient Units: A Quality Improvement Project

Introduction: Food insecurity (FI) is defined as limited or uncertain access to adequate food. According to the American Academy of Pediatrics, 1/7 children live in a food insecure household. Due to the COVID-19 pandemic, there was an increase in FI and many children missed health maintenance visits. We aimed to increase the percentage of pediatric patients screened for FI in the hospital setting from 0% to 75% and to improve the percentage of screen-positive patients referred to food services and resources from 0% to 70% in a period of 6 months.

Methods: From Aug 2020, an interdisciplinary group of pediatric hospitalists, residents, social workers, and food navigators convened to address FI in the inpatient setting, which included the well-baby nursery (WBN), general pediatrics unit and pediatric critical care unit (PCCU). Baseline data were collected via manual chart review from Sep-Nov 2020. The model for improvement was used as improvement methodology. Screening for FI was done using the validated Hunger Vital Sign questionnaire. The following plan-do-study-act cycles were initiated at various stages of the project: FI educational conference, workflow, FI screen in admission, progress note and handoff and food navigator flyers in resident workroom. Our outcome measure was referral of screen positive patients to food navigators and process measures were FI screening rates and referral of screen positive patients to social work. Data were tracked continuously using run charts.

Results: From Dec 2020 to May 2021, screening rates increased from 0 to a median of 97% in the WBN and 78% in the general pediatrics unit and PCCU. A total of 28/28 families who screened positive were referred to social work and 22/28 were connected to food services.

Conclusions: Using QI methodology, we improved FI screening in the hospital setting. Future interventions should focus on the families who were connected to food services to identify gaps and barriers in using those services.