

Addressing Social Determinants of Health Food Insecurity



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EQUALITY IMPROVEMENT & INNOVATION GROUP

Management Overview	Approach/Methods
<div data-bbox="44 318 388 695" style="background-color: #FFD700; padding: 5px;"> <p>An interview with Kathryn Powers, Director of Care, Coordination, Utilization and Population Health at MedStar Washington Hospital Center in Washington, D.C. October, 2021</p> </div> <ul style="list-style-type: none"> ❖ <i>MedStar Health’s community health program was decentralized from corporate to each hospital, as each has different patient social needs to address.</i> ❖ <i>It is clear that there are serious food inequities in some of the wards in D.C. The causes vary and are not always related to poverty, so we decided to screen all patients for food insecurity.</i> ❖ <i>Case managers screen for food insecurity and other social determinants of health, as part of an initial assessment prior to admission.</i> ❖ <i>We discovered there is a lot of excess food in the community. We just needed to tap into those resources to get the food.</i> ❖ <i>COVID-19 has raised awareness of food inequities and reduced the stigma associated with patients admitting they are food insecure.</i> ❖ <i>We learned that lack of transportation and food deserts are other barriers that exacerbate food inequities.</i> ❖ <i>We established programs to address staff food insecurity.</i> ❖ <i>Other MedStar departments are offering solutions to food insecurity to meet their patients’ needs.</i> 	<ul style="list-style-type: none"> • Attended community meetings in D.C. to learn more about community food insecurity and needs. • Explored several community-based food agencies to learn how their programs work. • Took nine months using PDSA method to refine the food insecurity questions. • Patient responses are tracked in the EHR. • Offer dietician-approved, protein-based food boxes at discharge with follow-up by community health advocates to set up a more permanent solution. • Use Aunt Bertha Social Care Services Platform integrated to the electronic health record to connect patients to social services. • Offer a public facing search tool MedStar Health Social Needs that allows anyone in the community to search for services. • Staff and family members of patients with lengthy hospital stays have access to a confidential voucher system for food in the hospital cafeteria. • A food pantry that is stocked through staff food and monetary donations serves more than 1000 employees per month.
Background	Screening Questions
<ul style="list-style-type: none"> • MedStar Health is a not-for-profit, regional healthcare system based in Columbia, MD, and is one of the largest employers in the region with a team of more than 31,000 physicians, nurses and other associates. • It is the largest healthcare and home healthcare provider in Maryland and the Washington, D.C. region with a complete spectrum of clinical services to advance patient care. • The system’s 300 care locations include 10 hospitals, 33 urgent care clinics, ambulatory care centers, and primary and secondary care providers. • It includes one of the largest graduate medical education programs in the country, training 1,150 medical residents annually, and is the medical education and clinical partner of Georgetown University. • The MedStar Health Research Institute has more than 150 scientists and investigators conducting high quality translational and health sciences research. • Over the years, MedStar Health has been recognized as a Best Place to Work in the region by The <i>Baltimore Business Journal</i> and other organizations. 	<ol style="list-style-type: none"> 1. Is it hard for you to pay for basic food needs? 2. In the last 2 months, did your basic foods run out before you had money to buy more? 3. Are you involved in any community resource: SSDI, Food Stamps, Community Social Worker, Meal Delivery Service?