Why did Boston Medical Center begin screening for food insecurity?

Clinicians in the pediatric Grow Clinic at Boston Medical Center (BMC) were looking for ways to help their underweight patients. Research findings showed that many young children and their families at the clinic were food insecure. It became a priority to help patients access adequate nutrition during this critical period of growth. To accurately identify food insecure patients, pediatricians began using the Hunger Vital Sign™, a validated 2-question food insecurity screening tool. Over time, other departments throughout the hospital have also begun to screen and intervene.

Quick Facts:

Boston Medical Center (BMC) in partnership with The Greater Boston Food Bank (GBFB)

- Location: Boston, MA
- Largest safety net hospital and busiest trauma and emergency services center in New England
- First hospital nationally to open on-site food pantry
- Incorporated Hunger Vital Sign™ into the electronic health records system
- On-site WIC office and on-site SNAP application assistance
- On-site preventive food pantry serves 7,000 individuals each month
- 40% of patients served are children

The Hunger Vital Sign™ identifies individuals and families as being at risk for food insecurity if they answer that either or both of the following two statements is ‘often true’ or ‘sometimes true’ (vs. ‘never true’):

“Within the past 12 months we worried whether our food would run out before we got money to buy more.”

“Within the past 12 months the food we bought just didn’t last and we didn’t have money to get more.”
Raising a sensitive subject…

Food insecurity and other social determinants of health (e.g., safe housing, access to health care services, transportation, residential segregation) are often stigmatized and not openly discussed in our society. Clinicians may be concerned about their patients’ status, but not know how to ask about it appropriately and compassionately. BMC has given great attention to this challenge and developed a social determinants of health training curriculum for their pediatric medical residents. Residents develop the skills and understanding necessary to communicate with patients about medically relevant social hardships. They are trained to use ‘normative phrasing’ to help patients feel comfortable to communicate honestly.

Screening for Food Insecurity

Health care providers at BMC are able to screen their patients, record their food security status, and document their progress through the hospital’s electronic health records system. Currently, the primary care department is the largest referral source to BMC’s on-site preventive food pantry. For example, referrals from primary care may help an overweight food-insecure adult gain access to fresh vegetables and an under-weight child access the calories and nutrition they need to thrive.

“I want to make sure I can take care of you and you should know, we actually have a food pantry on-site. In the past 12 months, did you worry whether your food would run out before you got money to buy more? Or did the food you buy just not last and you didn’t have money to get more?”

–Example of normative phrasing (BMC training curriculum)
Intervening in Food Insecurity

The intervention process had humble beginnings. Desperate to help her food insecure patients, BMC pediatrician and founder of the pediatric Grow Clinic, Dr. Deborah Frank started the ‘food pantry’ from her desk drawer, keeping a stash of canned vegetables on hand for young families who needed it most. Over time, this operation grew and would develop into the hospital wide food pantry. BMC’s award-winning on-site Preventive Food Pantry was built 15 years ago. It helps fill a therapeutic gap by providing food prescriptions for patients.

Food pantry staff are trained nutritionists. They also speak multiple languages, allowing them to serve the many immigrant and refugee patients they encounter. The pantry holds 40-50% fresh food products and all the food is supplied by BMC’s strong partner: The Greater Boston Food Bank.

REFERRALS TO THE BMC PREVENTIVE FOOD PANTRY: INTERVENTION STEPS

Patients who screen positively for food insecurity...

1. Receive an e-referral for food prescription
2. May immediately pick-up the prescription at on-site pantry
3. Receive food that meets their health needs and tastes
   ⇒ Diabetic patients receive low-sugar foods
   ⇒ Under-weight patients receive higher calorie foods
4. Receive enough food for themselves and their household for 3-4 days
5. May refill prescription every 2 weeks for 1 year (with renewal if needed)

“WE WANT PATIENTS WHO FEEL SHAME TO KNOW THAT FOOD IS PART OF THEIR MEDICAL CARE AND WE ARE HERE TO PROVIDE IT.”

-Latchman Hiralall, D.T.R., Preventive Food Pantry Manager
Keys to success

♦ Integrating nutritional resources into the hospital setting:

In addition to a Preventive Food Pantry, BMC has several on-site nutrition resources:
⇒ WIC office
⇒ SNAP application assistance
⇒ Physician refer patients to the hospital’s social work department
⇒ Demonstration kitchen

♦ Setting big goals with strong institutional support:

The Vice President of Mission, Thea James, has set a 2017 quality improvement goal to screen every patient that walks through the doors at BMC.

♦ Moving the needle on related policy

Researchers and physicians at BMC are working to make screening for social determinants of health a national performance measure for hospitals that receive Medicare and Medicaid funding.

About Children’s HealthWatch: Children’s HealthWatch is a nonpartisan network of pediatricians, public health researchers, and children’s health and policy experts. Our network is committed to improving children’s health in America. We do that by first collecting data in urban hospitals across the country on infants and toddlers from families facing economic hardship. We then analyze and share our findings with academics, legislators, and the public. These efforts help inform public policies and practices that can give all children equal opportunities for healthy, successful lives.

Authors: Rebecca Rottapel, Research and Policy Intern; Richard Sheward, MPP, Senior Policy Analyst-State Policy;

For additional information, please contact:

Richard Sheward, Senior Policy Analyst – State Policy Tel. (518) 265-5343 / Email: richard.sheward@bmc.org

Created August 2016.