

Food Insecurity in a FQHC Residency Program

Jillian Keighron, D.O., Tiffany Hill, M.D.
HCA Healthcare-Orange Park Medical Center



Background

- The U.S. Department of Agriculture defines food insecurity (FI) as a household-level economic and social condition of limited or uncertain access to adequate food. It is a lack of consistent access to enough food for an active, healthy life for all household members, and limited or uncertain availability of nutritionally adequate foods. FI can be temporary, occasional, part-year, or at the end of the month. It may reflect trade-offs between important basic needs, such as housing, medical bills, or purchasing nutritional foods. The American Academy of Family Physicians recommends screening all patients for FI at every visit as it is a situation that is typically recurrent.
- Of our Palms Medical Group patient base in Orange Park, Florida, 1/3 are medically-uninsured, and 1/3 have Medicaid/Medicare. Of Clay County, in 2017 there were 25,050 food-insecure people, including 8,980 children, with a rate of 12.3% overall and 18.1% of children. 42% of food-insecure people were ineligible for SNAP or other nutrition programs. Duval County had even higher numbers, with 161,370 food insecure people, including 43,720 children, with a rate of 17.7% overall and 21.2% of children. 32% were ineligible for nutrition programs. We realized that we could potentially identify and help many of these adults and children, as we serve patients from both counties.

Objective

Our intent was to identify our patients at Palms Clinic with food insecurity, and to help them achieve short and long term food security.

Methods

- After our project was approved by the Orange Park Medical Center research committee, health care provider training with the Family Medicine residents occurred, to ensure understanding of the importance of screening for FI and our screening process. Our timeline was 3 months of screening, from approximately May through July 2020. Family Medicine patients at Palms Clinic received a paper screening questionnaire during check-in. We utilized the Hunger Vital Signs as our screening tool, with a sensitivity of 97% and specificity of 83%, provided in Spanish as well.

Screening period:
May to July 2020

Family Medicine patients at Palms Clinic received the Hunger Vital Signs questionnaire during check-in

“Often true/sometimes true” to either or both questions indicated a positive screen

- The ICD code Z59.4 “Lack of adequate food” was added to the chart by the provider to facilitate patient follow-up. The patient was offered a locally donated bag of healthy “emergency food” to help their short term food security, with a list of resources for long term food security via community food banks, farmers’ markets, church services, and government programs. These were organized in our “food pantry” in Palms Clinic, supplied with donations through our community connections. We offered an assortment of meal options, including low salt, sugar, carb, and fat, vegetarian, kosher and halal. The screening phase was monitored continually with adjustments made as needed.

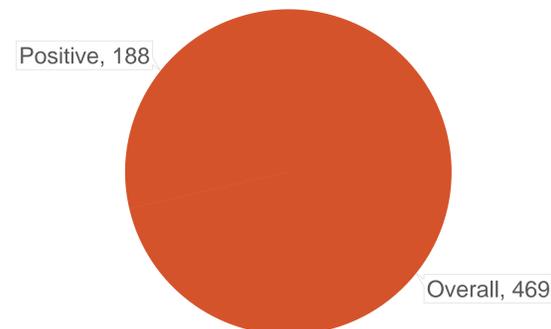
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Results

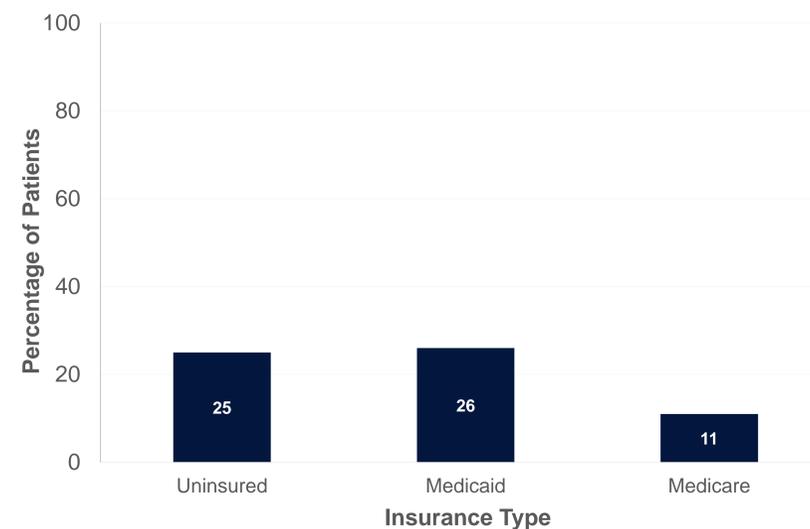
Outcomes For Our Patients

Characteristic	Overall	Significant Improvement	Improvement	No change	Worsened
FI status	188	15 (42%)	19 (54%)	11 (31%)	5 (14%)

Proportion of Food-Insecure Patients



Insurance Status and Food Insecurity



Discussion

- Telephone follow-up with patients who screened positive was done by Family Medicine residents. We utilized the same questionnaire to compare responses, and to see if our efforts improved their food security.
- Our results are as follows:
 - In total, we screened 469 patients, and of these 188 screened positive (40%).
 - We provided 270 total meals to these patients. On average, we provided about 23 meals per week.
 - Of the 35 patients that were able to be rescreened, FI status improved for 19 (54%), 11 had no change (31%), and 5 worsened (14%). 15 patients had significant improvement in FI status (42%).
 - Of the 60 patients that had the FI ICD code added to their chart permitting data review, 15 were uninsured (25%), 16 with Medicaid (26%), and 7 with Medicare (11%).

Conclusion

Our future goals are to maintain ability to provide food for patients in need, and to establish screening for food insecurity as a standard of care at Palms Clinic.

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