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# Bridging the Gap

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# BRIDGING THE GAP: FOOD INSECURITY IN VERMONT SENIORS

WINOOSKI FAMILY HEALTH, OCTOBER/NOVEMBER 2015

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# FOOD INSECURITY

Food Insecurity: The lack of access to enough food to fully meet basic needs at all times due to lack of financial resources.

- Many elders must choose between paying bills, buying medication or buying food. Some elders are unaware that they qualify for food assistance, or would feel stigmatized using it.
- Nationally, 56% of physicians reported that they were not knowledgeable about food insecurity.
- Food insecurity can be screened for by using Hunger Free Vermont's Two Question Screen.
- Screening, followed by a multidisciplinary team approach with contributions from dietitians, geriatricians, social workers and psychologists may be the most effective way of assessing at-risk patients.
- Only 1 in 3 eligible seniors (60+) participate in 3SquaresVT (SNAP), a federal nutrition program of the USDA administered by the Vermont Department for Children and Families.

## COSTS OF FOOD INSECURITY

- Seniors (60+) are the fastest growing population group in Vermont, a projected 46.9% increase in population by year 2020.
- Over 14,000 (11%) of Vermont seniors face the threat of hunger and almost 7,000 (5%) are at-risk for hunger (food-insecure).
- Food insecure seniors are more likely to have lower intakes of calories and major nutrients, to be in poor or fair health, to have limitations in activities of daily living.
- An estimated 1/3-1/2 of all health conditions in the elderly are due to poor nutritional intake.
- Many seniors living in rural areas struggle with isolation, transportation, and the high cost of heating through Vermont's long winters, increasing the likelihood that they will experience hunger.
- Younger seniors (aged 60-69) are particularly vulnerable to hunger and inadequate nutrition because they are often not yet eligible for other safety net programs such as Medicare.

## COMMUNITY PERSPECTIVE

- “It’s exciting to have a simple screening tool to help identify at risk seniors.” – Anne Knott MD, Family Physician, Winooski Family Health
- “Poverty and food insecurity are serious issues facing the elderly. Consequently, seniors often do not openly share that they are struggling or do not have enough food. A screening tool that starts the conversation will lead to awareness of resources and programs that are there to help. This is an important step to addressing food insecurity among our patients.” - Diane Collias, LICSW Social Worker, Community Health Team
- “As we strive to find ways for our growing senior population to stay in their own homes longer, maintain mobility, fight illness and face growing food insecurity it is paramount that they have access to the necessary nutrition resources. Health professionals are in a unique position to intervene and help ensure that seniors have access to the nutrition they need through consistent screening of seniors for food insecurity.” - Katy Davis, Nutrition Education & Outreach Manager, Hunger Free Vermont

# INTERVENTION & METHODOLOGY

## INTERVENTION

- Pilot an in-office screening and referral system for senior food insecurity at Winooski Family Health
- Create an easy to use screening protocol that can serve as a resource for Hunger Free Vermont to provide to Primary Care Offices across Vermont

## METHODOLOGY

- Utilize the existing Hunger Free Vermont Two Question Screen to create a laminated multi-use questionnaire in every exam room with a reusable marker
- Office staff will provide laminated screen to patients  $\geq 60$  years old upon intake in the exam room for patients to fill out themselves while waiting for the provider
- If any of the screening questions are positive, the provider will add “positive screen: food insecurity” to patient’s problem list and make a referral to the social worker
- At check out, the patient will schedule an appointment with the social worker to discuss eligibility for available resources

# THE TWO QUESTION SCREEN

Winooski Family Health

Ann Goering, MD – Anne Knott, MD – Christine Staats, MD – Bang To, PA

32 Malletts Bay Ave Winooski, VT 05404 (802) 655-4422

If you are 60 or older, please let us know if either of these statements is true for your family:

- Within the last 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 did not last and we did not have money to get more.

## RESULTS

- Prior to implementation, an office staff meeting was held to discuss the importance of screening and to gather input from all office staff
- Primary care office staff began offering the Two Question Screen to all patients 60+
- EMR ICD-10 Code identified for documenting food insecurity – “Z59.4 Lack of access to adequate food” – leading to development of electronic template for easier screening
- Office staff doing intake (MA, LPN, RN) all felt comfortable providing the questionnaire or asking the Two Question Screen
- Initial results are mostly negative screens with a few positive screens, the office will continue to screen their patients 60+ and collect data
- Hunger Free Vermont can follow up with Winooski Family Health regarding pilot project and utilize their experience for further education



# EFFECTIVENESS & LIMITATIONS

## EVALUATE EFFECTIVENESS

- Have other Vermont Primary Care Offices interested in screening for food insecurity in seniors implement the protocol in their offices and allow offices to provide feedback to Hunger Free Vermont
- Utilize the electronic health record to collect data and assess screening outcomes
- In-house tracking of number of positive screens, number of referrals and number of appointments with the in-house social worker

## LIMITATIONS

- Primary Care Offices interested in screening for food insecurity may naturally comprise of providers who are already well versed in food insecurity and therefore miss practices unaware of issues of food insecurity
- The protocol assumes office participation in Vermont's Blueprint for Health and/or easy access to a social worker
- The screening tool is available in print and some seniors may have visual difficulties, limiting the effectiveness of a paper format or access to an electronic health record

## RECOMMENDATIONS FOR FUTURE PROJECTS

- Help bring this screening tool to all primary care offices in Vermont where seniors 60+ are seen. This can be done through Hunger Free Vermont in partnership with Area Health Education Centers (AHEC).
  - Vermont provider surveys in the past have found that many are interested in an online module or an in-office workshop about food insecurity and how to screen and address the issue.
- Continue to track data on how many patients are screened as positive, how many are referred to a social worker, how many meet with the social worker and how many become connected with resources.
  - This may lead to data to support provider payment for asking these important questions, encouraging more providers to participate in screening. Perhaps practices with electronic medical records can create a template for screening.
- The screening protocol is simply the first step to healthy dietary habits necessary for health.
  - Possibly creating a follow up survey on food insecurity and dietary habits for seniors screened and addressed to greater understand what foods seniors are able to access and eat.

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