**HungerCare Food & Nutrition Screening Algorithm**

What providers need to be aware of:

The USDA defines food security as having “access, at all times, to enough food for an active, healthy life for all household members.” Families may be considered food insecure if they:

- experience anxiety about having enough food in the house
- have to purchase lower quality, lower variety, or less desirable food
- have to eat less or less often

Research shows that food insecurity can have serious health effects across the lifespan.

What clinic/hospital staff can do:

Ask 2 questions to screen for food insecurity:

For each statement, please tell me whether the statement was “often true, sometimes true, or never true” for your household:

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

2) “Within the past 12 months the food we bought just didn’t last and we didn’t have money to get more.”

If a patient says “often true” or “sometimes true” to either question, provide a list of local food resources and refer the patient to a social worker who can assist them in applying for all eligible programs.

(See back for resource list)

Test, treat, and refer for health consequences as appropriate. Keep food insecurity status in mind when making diagnoses and care plans.

Check back about food access and program enrollment with follow up call from social worker.

---

Children in food insecure households are more likely to have:

- Poor overall health
- Frequent stomachaches and headaches
- Psychosocial & behavior problems
- Worse developmental outcomes
- More chronic illnesses

Food insecure adults are more likely to suffer from:

- Depression
- Lowered immune function
- Hypertension
- Heart attack & congestive heart failure
- Dizziness/falls
How to Support a Patient Without Access to Adequate Nutritious Food

1. **Screen all patients—never assume a patient has adequate food resources.** Many families may not appear to be struggling financially but are just a job loss or unexpected expense away from being food insecure. Universal screening using the two USDA-validated questions is the best way to ensure that all food insecure patients are identified and assisted.

2. **Sensitivity is key.** Patients may be afraid to share their food insecurity concerns if they feel that they will be judged or could be reported to Child Protective Services. The questions should be asked in a sensitive and supportive manner.

3. **Consider food insecurity status when making diagnoses and creating care plans.** Could lack of access to nutritious food be the cause of or exacerbating a patient’s symptoms? Could financial stress cause the patient to fail to take their prescribed medications?

4. **Follow-up is important.** Social workers and nurses can provide encouragement and follow-up to ensure that patients receive the assistance that they need.

Food Resources

2-1-1 — Call 2-1-1 or go to http://www.211wisconsin.org/

2-1-1 is an easy to remember three-digit phone number that connects people with free and confidential information and referral services. 2-1-1 provides callers with access to resources such as food pantries and meal sites, bill payment assistance, housing search assistance, support groups, and community clinics. 2-1-1 is free, available every hour of every day, can assist in 140 languages, and is accessible in every community in Wisconsin.

**FoodShare Helpline** — Call 1-877-366-3635 or go to www.GetAQuestCard.org

FoodShare Wisconsin (otherwise known as SNAP) is a nutrition assistance program that provides money for groceries on a Quest (EBT) card. Feeding Wisconsin’s FoodShare Helpline screens for potential eligibility and offers appointments for free, personalized application assistance.

**WIC (Women, Infants and Children)** — Call the Maternal and Child Health Hotline at 1-800-722-2295 or go to https://www.dhs.wisconsin.gov/wic/wic-offices.htm to find the county WIC office in your area

WIC is a supplemental nutrition and health program for pregnant and post-partum women, infants, and children less than 5 years of age. WIC helps families buy specific foods for good health, supports breastfeeding, and provides information on nutrition, feeding, and offers community resources. There is no citizenship requirement for WIC.

**Aging & Disability Resource Centers (ADRCs)** - Go to https://www.dhs.wisconsin.gov/adrc/consumer/index.htm or call 2-1-1 to find your county’s ADRC

The ADRCs provide information on a broad range of programs and services for seniors and people with disabilities regardless of income, including senior meal sites, nutrition, home delivered meals, and financial assistance. These services can be provided by telephone or a home visit.

For more information visit www.hungercare.org