Using Quality Improvement and Technology to Improve Social Supports for Hospitalized Children

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OBJECTIVES: To develop and test the feasibility of a caregiver self-administered social needs screener, a Web-based searchable community resource map, and a process map for implementation of these tools as part of social needs screening and referral on a pediatric inpatient unit. METHODS: A multidisciplinary team used quality improvement methodology to develop an electronic social needs screener, resource map Web site, and electronic health record enhancements. A process map for implementation of these tools was refined through plan-do-study-act cycles before full implementation. Weekly measures included the number of eligible caregivers screened, prevalence of reported social needs, and use of social work resources. RESULTS: During the 22-week study period, 147 caregivers were screened and 2 declined to participate. Thirty-four percent of caregivers endorsed ?1 social need. The most common needs identified were depressive symptoms (23%), food insecurity (19%), and need for assistance with utilities (10%). All participants received information about the resource map, and 99% of caregivers with an identified need met with a social worker during their admission. CONCLUSIONS: Using quality improvement methodology and technology, the team implemented a new standardized process for addressing social needs on an inpatient unit. This led to identification of social needs in more than one-third of caregivers screened and provision of resource map information to all caregivers. These findings reinforce the importance of standardized assessment of social needs in the pediatric inpatient setting. The role of technology, including resource maps and electronic health record enhancements, was highlighted.

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