LiFTS: Equitably Implementing a Social Needs Screening Program

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Introduction: Poverty and associated health-related social needs can negatively impact child health. As pediatric health systems implement social needs screening programs, they should aim to measure and promote equal rates of screening across demographic groups and to support families in connecting to resources.

Methods: We describe implementation of the Linking Families to Support (LiFTS) quality improvement initiative, an inpatient social needs screening and support program. Our objectives were to (1) implement screening across inpatient units, (2) promote equal screening rates across demographic groups, and (3) optimize rates of resource connection. LiFTS was implemented at a quaternary care children's hospital. Families of children admitted to participating units during the study period (September 2022-February 2024) were eligible for screening.

Results: Over the 18-month project period, we implemented screening in 9 inpatient units. Of 2582 eligible caregivers, 1741 (67.4%) were offered screening. Of these caregivers, 667 (38.3%) declined screening and 1074 (61.6%) completed screening. A total of 496 families (46.2%) reported 1 or more social needs. In analyses stratified by child race, ethnicity, insurance status, and preferred language, we observed equal rates of screening. Among 233 families reached in follow-up, 183 (78.5%) recalled receiving resources and 133 (57.1%) reported connecting to 1 or more resources.

Discussion: Our interdisciplinary team successfully implemented social needs screening across 9 inpatient units, achieved equal rates of screening, and measured caregiver-reported rates of resource connection. Our approach could guide other health systems as they implement social needs screening programs that meet regulatory requirements, prioritize equality in screening, and support resource connection.

Journal:

Hospital Pediatrics
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