

# SECURE Implementation Trial (SECURE IT): Studying Implementation and Effectiveness of Social Care in the Emergency Department

## Statement of Problem

Unmet social needs in childhood, such as inadequate access to healthy food and safe housing, are powerful drivers of poor health outcomes across the life course, even despite advanced medical care. Social care, which aims to address patient and family needs like access to nutritious food and safe housing from the health care setting, can facilitate family connection with resources and support thereby improving caregiver quality of life and child health outcomes.

The emergency department (ED) is a key setting for social care, as [40%](#) of pediatric ED patients report at least one unmet social need. Despite growing [health system and regulatory requirements](#) for social care, implementation is inconsistent and often inequitably applied. Furthermore, there is a critical knowledge gap in how to seamlessly embed multi-step and community-partnered social interventions in the fast-paced and high-stakes ED environment.

In 2025, our team completed the [Socially Equitable Care by Understanding Resource Engagement \(SECURE\) Study](#), a multisite randomized controlled trial including nearly 4,000 caregivers of pediatric patients, to define and test the first evidence-based protocol for social care integration in the ED. Combining data from this large-scale study with the growing literature around social needs interventions, the SECURE social care protocol consists of three core components:

1. a caregiver-facing electronic tool for self-selection and prioritization of social needs,
2. a searchable electronic resource map automatically loaded on the caregiver's smartphone, and
3. an option for telephone-based resource navigation following clinical care.

## Description

SECURE IT will use [implementation science](#) methods to rigorously evaluate the implementation and effectiveness of the SECURE protocol at scale in partnership with three pediatric EDs across Pennsylvania.

First, we will engage ED providers and staff, community organizations, and caregivers of pediatric patients in interviews and focus groups to understand current social care practices at each study site. We will also explore these key informants' beliefs and feelings about the adoption of the SECURE protocol in their pediatric ED. Guided by the [Health Equity Implementation Framework](#), we will then apply rapid qualitative analysis methods to identify barriers and facilitators to implementing the SECURE protocol at the population level.

We will use these findings to inform the process of implementation mapping, in which a multidisciplinary team of stakeholders in ED health informatics, social work, nursing, clinical care, and administration at each site will systematically prioritize the barriers and facilitators that are most likely to impact the implementation of the SECURE protocol.

The team will then collaboratively identify the aspects of ED care delivery and infrastructure that will need to be modified to support successful implementation as well as theory-based approaches to making needed changes. These strategies could include automated text message introductions to social care, clinical decision support tools and clinician-directed education. Taken together, this would make up an implementation strategy bundle.

Lastly, we will conduct a hybrid effectiveness-implementation trial to evaluate the impact of our implementation strategy bundle. All caregivers presenting to a study ED will be eligible to receive the SECURE protocol (social needs assessment + resource map + resource navigation) as the new standard of care. We will monitor receipt of protocol components across ED patients, and a random sample will complete a quality of life and resource use survey at the time of enrollment in the ED as well as 30 days later to understand the effect of the intervention on patient-family well-being.

## Next Steps

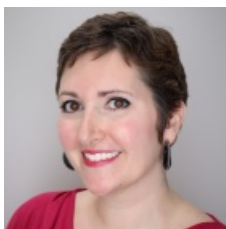
In addition to establishing sustained, evidence-based social care delivery at the three study EDs, our goal is to develop and widely disseminate an implementation strategy bundle with broad relevance to EDs across the country. This will support the expansion of evidence-based social care that accounts for the unique complexities of the ED and enables health systems to better address the social needs of pediatric patients and their families.

*This project page was last updated in September 2025.*

## Suggested Citation

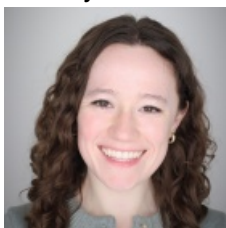
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## **Related Tools & Publications**

- [Considerations for Documenting and Sharing Health-related Social Needs Information in Pediatric Care Settings](#)  
[Issue Briefs](#)  
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Related Projects

[Socially Equitable Care by Understanding Resource Engagement \(SECURE\): Leveraging Research to Ensure Equity](#)  
[Health Equity](#)