

# Food Insecurity Screening Algorithm for Adults with Diabetes

(or Parents/Caregivers of Children with Diabetes)

Download the algorithm at: <http://bit.ly/foodinsecurityscreening>

## Screening for Food Insecurity Using the Hunger Vital Sign<sup>\*™</sup>

### Preface Questions with:

*"I ask all of my patients about access to food. I want to make sure that you know the community resources that are available to you. Many of these resources are free of charge."*



*"For each statement, please tell me whether the statement was*

*Often True, Sometimes True, or Never True for your household in the past 12 months."*

*"Por cada una de las siguientes declaraciones, por favor indique si la declaracion se aplica a su familia frecuentemente, a veces o nunca durante los últimos 12 meses."*

- 1 **"I/We worried whether our food would run out before I/we got money to buy more."**  
*"Estábamos (Estaba) preocupado(s) de que los alimentos se acabaran antes de que tuviéramos (tuviera) suficiente dinero para comprar más."*
- 2 **"The food I/we bought just did not last, and I/we did not have money to get more."**  
*"Los alimentos que compramos (compré) no duraron mucho, y no teníamos (tenía) suficiente dinero para comprar más."*

**If Often True or Sometimes True to EITHER STATEMENT, patient is food insecure.**

### STEP 1: Clinical Management

Prioritize medications with lower risk for hypoglycemia

- Metformin, if clinically appropriate
- If using sulfonylureas: glipizide preferred immediately before meals (skip if not eating)
- If using long-acting insulin: dose low using a peakless analog (e.g., glargine)
- If using short-acting insulin: deliver by pen if possible; OK to use immediately after meal if meals are unreliable
- Prescribe glucose tabs

### STEP 2: Gather Supportive Clinical Data

- Hyperglycemia and hypoglycemia frequency, patterns, and management skills
- Adherence to and affordability of medications and supplies
- Depression and anxiety
- Social support
- Dietary intake, sleep, and physical activity

### STEP 3: Patient Education

- Medication Management:
  - Days with unreliable or inadequate food access may require lower medication doses
  - Medication schedules should be defined by when patient eats rather than time of day
- Diet Counseling: Emphasize cost-neutral strategies, such as reducing carbohydrate portion size
- Ensure patient has refrigeration for insulin
- Smoking cessation (tobacco products divert money from food budget)

### STEP 4: Refer to Resources

• Sustainable food resources may include:

- SNAP: formerly Food Stamps
- Congregate meal sites
- Home delivered meals (e.g., Meals on Wheels)
- Medically-tailored meals
- If children in household: child nutrition programs, like WIC or school meals

• Emergency food resources may include:

- Food pantries
- Soup kitchens/free dining rooms

• Enroll in all eligible household benefits

(e.g., childcare assistance, Medicaid, utilities/transportation assistance, earned income tax credit, etc.)

• Patient assistance programs for support with medication costs

### STEP 5: Code for Food Insecurity

Z59.4: Lack of adequate food and safe drinking water

### STEP 6: Follow-Up at Next Visit

- Referrals to resources
- Weight trajectory
- Hypoglycemic episodes
- Food insecurity

\*Hager E, Quigg A, Black M, Coleman S, Heeren T, Rose-Jabo. Development and validity of a 2-item screen to identify families at risk for food insecurity. *Pediatrics* 2010;126(1):e26-e32.  
Gundersen C, Engelhard EE, Crumbaugh AS, Seligman HK. Brief assessment of food insecurity accurately identifies high-risk US adults. *Public Health Nutr.* 2017 Feb 20;1-5. PubMed PMID:28215190.

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# Food Resource Referrals

Refer to a social worker for ongoing support, call a food assistance number below during the visit, or develop an outreach partnership with a hunger relief organization to connect patients with eligible food resources. Providing patients with phone numbers or websites and **not** facilitating community connections is much less successful.



Refer to federal nutrition programs – Call the **National Hunger Hotline** at **1-866-348-6479** or **1-877-842-6273** (for Spanish)  
 If ineligible for federal nutrition programs and/or emergency food is needed – Call **211** or the **Eldercare Locator** at **1-800-677-1116**  
 To refer older adults to other eligible federal and local benefits – Visit <https://www.benefitscheckup.org>

<b>Supplemental Nutrition Assistance Program (SNAP)*</b> <a href="https://www.fns.usda.gov/snap">https://www.fns.usda.gov/snap</a>	Money on debit card to purchase food. The average benefit is about \$127 per month per person.	
<b>Women, Infants, and Children (WIC) Program*</b> <a href="https://www.fns.usda.gov/wic">https://www.fns.usda.gov/wic</a>	Money to purchase pre-specified foods for pregnant/post-partum women, infants, and children under the age of 5. Nutrition education and breastfeeding support also provided.	
<b>School, Afterschool, and Summer Meals Programs for Children</b> <a href="http://www.fns.usda.gov">http://www.fns.usda.gov</a>	Free or reduced price healthy meals or snacks for students. Eligibility criteria for programs during the school year and summer may vary.	
<b>Food Pantries</b> <a href="http://www.feedingamerica.org">www.feedingamerica.org</a>	Free food and grocery items for people of all ages. Food must be picked-up in person by patient or a proxy.	
<b>Congregate Meal Sites</b>	Meals provided to older adults at specific sites, such as senior centers, churches, or housing communities.	
<b>Home Delivered Meals</b>	Meals delivered to older adults who cannot otherwise prepare or obtain nutritionally adequate meals.	
<b>Medically-Tailored Meals</b>	Home delivered meals tailored to meet the needs of a specific health condition or combination of conditions	
<b>Soup Kitchens / Free Dining Rooms</b>	Free prepared meals for people of all ages.	

\* Eligibility calculators are available online

For information on developing outreach partnerships with hunger organizations, please visit:  
<http://nopren.org/resource/clinic-to-community-treatment-models/>

To view the American Diabetes Association recommendations on addressing food insecurity in patients with diabetes, please visit (see page S8):  
[http://care.diabetesjournals.org/content/diacare/suppl/2016/12/15/40.Supplement\\_1.DC1/DC\\_40\\_S1\\_final.pdf](http://care.diabetesjournals.org/content/diacare/suppl/2016/12/15/40.Supplement_1.DC1/DC_40_S1_final.pdf)