

Addressing Food Insecurity Among NICU Parents & Families

Submitted by a Taskforce Member:

Patients can be transferred to our Level IV NICU resulting in parents and families traveling long distances to be at their baby's bedside. Social Services can assist with on campus housing for those who live > 50 miles away but there is often a waiting list. Campus housing has a kitchen, but families may not have transportation to get to the grocery store.

We expect parents to room-in prior to discharge, but no food is allowed in the NICU. Our home ventilator trial training is 24/7 x 10-14 days in a hospital room, resulting in many barriers to food access.

How is your unit addressing food insecurity among NICU parents and families? How would you handle the situation shared by your fellow Taskforce member?

Responses:

- Our unit is an 80-bed (mainly single room, where food is not allowed) Level IV NICU and we have patients transferred from several community sites far from families' homes. During the week, **our family area that houses 2 fridges (for home food) and a kitchenette area, has grab-and-go lunch items for families. We also have a display case that is code-locked and made available for families with fresh food stocked every few days from a local meal delivery service that is free to families to grab at any time and is convenient in off-hours when the cafeteria is closed.**
- Our unit offers **one free meal tray per meal (breakfast, lunch, and dinner)**; the second parent if staying can also order a meal tray but has to pay \$5. However, the free tray can order anything and can be split by both parents if unable to pay. We also offer meal tickets or vouchers if driving far (only \$10). We also have amazing support from a group called [Grady's Decision](#). They offer gift cards for meals, gas and hotel stays if parents aren't able to stay in the unit.
- We have a **Ronald McDonald room right outside of our NICU where there are lots of free food and drink items.** Our hospital also has a Ronald McDonald house that families can stay for free if they qualify and receive free food if needed.
- 1) Lactation diets for all pumping parents
2) As a former NICU parent, not being allowed to eat in NICU is absolutely torturous especially in the early postpartum days. It is awful and I highly recommend reevaluating that practice.
3) Our social workers do a family dinner every few weeks.
4) Maybe the unit could consider a grocery delivery subscription and allow families to place orders once a week?
- We are fortunate that our NICU parents are able to have food in the NICU [room]. We have couplet care rooms to care for both moms and babies who are inpatient, as well as sleep areas in all rooms for parents who room-in. **We offer complimentary snacks, drinks and**



frozen meals in our parent lounge area funded by our NICU grants/donations and donated by Ronald McDonald/Cultivate Food Rescue. We are fortunate to have Ronald McDonald house attached to our hospital via the skyway bridge so our families can request a referral for overnight accommodations or **day services which include three meals per day.** We also have the Ronald McDonald cart that comes daily to offer drinks and snacks to families in the NICU. **NICU social worker provides community resource lists for local food banks, connects NICU moms with our hospital WIC rep to enroll in WIC benefits onsite, provides information for local food stamp offices and refers to several different community programs that can continue to assist with food insecure families after discharge.** NICU social work refers to nationwide NICU support organizations that often can provide some fast financial support to families for housing, food or gas via prepaid gift cards. There is also a new program in which social work can provide pantry staple food bags to families who are identified as being food insecure. We also are able to give cafeteria vouchers to families on a case-by-case basis. The goal is to refer appropriately before discharge to ensure these families have ongoing support.

- We feed all mothers in the NICU (they share with Dads by ordering extra). They can order three meals and two snacks a day. **Round McDonald house has a family room in the hospital where they provide snacks and sometimes meals.** They have two sleep rooms in the hospital and in the [Ronald McDonald] house across the parking lot. Families can eat at the house and visit there daily even without a room as long as they meet their criteria of being >25 miles away from home. **Parents can eat in NICU rooms and can bring their own food. We have family refrigerators**
- **Families that are rooming in with their baby receive a hospital tray for every meal. We also have vouchers where the families can go to the cafeteria, these are available for all families.** Do families know about the kitchen prior to arriving? They could bring some food with them? Otherwise I would think if they are required to room in for 10-14 days, the hospital should provide meals during that time.
- **Our hospital provides 2 trays per meal, 3 times a day for the parent/support person. This cost is something the hospital takes on as part of the infants stay.** We are however looking at infection prevention and parents eating in the same room/area as the infant. It's hard to have the expectation of rooming in, while having barriers to food access. Could they get meal tickets from the hospital/social services for the 10-14 days?
- Currently, our unit does have meal "tickets" that we can provide to our parents as needed after they are discharged. We offer rooming in services, but **our hospital provides three free meals a day during the time the mother/father are in-house rooming in with their infant.**
- **Our NICU has a parent "lounge" with a refrigerator/freezer with stocked frozen meals (~5-7 at a time, at least 2 vegetarian meals), milk, juice, fruit, string cheese, granola bars, chips, crackers, etc.** It also has a microwave, filtered water dispenser, coffee machine with supplies, etc. We provide plastic utensils and paper plates/cups. Families can bring in meals which are allowed in the refrigerator for 24 hours. There are 4-5 small tables in the parent lounge. **Our social worker provides gift cards to the hospital cafeteria (provided by the**

hospital) and gift cards for grocery stores & gas stations (funded by the hospital foundation) - per her discretion/needs of the family.

- There are a few different options available for our NICU families.
 - The food services staff keeps a refrigerator stocked on the unit with sandwiches that we can provide to our families whenever they need them
 - **Parents (especially moms) can order meals under the baby in the NICU from food services and it's billed to insurance**
 - There is a family room in the NICU where parents/visitors can eat and still be accessible to their baby
 - We have **grocery store gift cards provided to us by community partners** that we can distribute to parents so that they don't have to worry about affording food as much

In terms of the home ventilator trial training- that is extensive training and I'm wondering if at least one parent is present while the other eats/takes care of personal needs, is that sufficient to satisfy the training? Is it possible to adjust the training to be more representative of life circumstances?
- When it is Eat Sleep Console, they are housed together as a couplet on Mother Baby Unit and can order from the [inpatient] menu. There is a Ronald McDonald Kitchen onsite along with four rooms; The larger Ronald McDonald House is a block away. [Families] can prepare food in the [kitchen] onsite, and **volunteer groups provide food to the RMHC on a regular basis.** Most of these families are rural and live a long distance away, sometimes Amazon gift cards have been provided by RMHC but these are limited. There is a store within walking distance BUT it is an expensive health food store and walking to the more affordable location is not a very safe walk in evenings as it passes under the freeway. There is a shuttle bus to the hospital and I am wondering if they provide a shuttle to the grocery store. Unsure. This is a significant concern.
- I am a veteran NICU parent. I first want to say that **I am unbelievably pleased that this issue is being addressed in the NICU, as material needs such as this one were not addressed in my situation.** I lived over an hour and a half away, and was denied local housing, and was not offered any transportation or food assistance. For families staying in on-campus housing, families who don't have transportation should be given taxi chits, or Uber Eats or other food delivery gift cards so they can order online. For the rooming-in issue for the home ventilator trial training, I would need more details to comment. Is this indicating that the parent cannot leave the hospital room for 10 -14 days?
- For the kitchen: organize grocery deliveries on a scheduled basis; notify parents of the cutoff time for including their own requests; keep the kitchen well stocked in basics and protein-rich snacks for easy access. Can the 'no food in the NICU' rule be reviewed or a specific place for food be allowed? I was a parent in a level IV NICU and I do not recall heavy food restrictions. They had a snack cart come by the main desk every night with a variety of food and drinks to choose. Covered liquids were definitely allowed at the bedside. All mamas need their water! There was a family/break room down the hall with a fridge, coffee, and fountain drinks, etc. where we could eat freely. **When we roomed-in, food was allowed in our room and they provided dinner through the hospital meal system.** My thought is that either food needs to



be brought to the parent, or the parent needs to be able to exit the NICU but not have to travel for healthy food. Maybe even have a list of local food delivery options available. Could agreements be set up with restaurants to waive delivery fees?

- Food security should be on the **forefront of economic planning** and to be addressed accordingly.
- Social workers have VERY limited meal vouchers for onsite food services. They connect families with other local resources for home delivery as well. **Last year, our hospital foundation built and continues to support a ROBUST family lounge in our inner city 60-bed Level III NICU.** The lounge has buzz-in access for parents. Unit clerks ask for bed/last name if they do not recognize the family. The space is equipped with a microwave, fridge, toaster, coffee maker, and kettle. **It is stocked, cleaned, and managed by volunteers during the day but available to families 24/7.** There is a security camera, but it is only checked if something concerning happens. There are also lockers available to families. Paper plates and bowls, napkins, cutlery, cleaning wipes, and hand sanitizer. Food items include canned soup and instant noodles, crackers, cookies, granola bars, cereal, bread, peanut butter, jam, butter, cheese, yogurt, milk, oranges and apples. Clear signage states that the room is monitored, that food is not to take out of the room and for parents and siblings only. Guests are welcome to coffee and tea. At times, people will take more than they need but with consistent presence and clarity, in the last year, there has been only a few concerns. **Families often donate back to the foundation for this initiative specifically, out of gratitude for the access that they had during admission.**
- When we have moms stay in a "quiet room" so they can be available to breastfeed their infant in our Level 2 IICN, **we order them a tray from Food and Nutrition services.**
- In our NICU, **breastfeeding or pumping mothers may get up to three [meal] trays a day.** Fathers or partners, or non-breastfeeding parents may get food in the cafeteria at 10% discount with their NICU badge. We have two parent galleys with snacks like crackers, broth, peanut butter, jelly, bread, coffee, juice, and milk and paper goods. Families are only allowed covered drinks at the bedside. We have one parent lounge where the trays are delivered. Parents eat meal trays and snacks in the lounge. **All NICU families are supposed to get a social service/Care Management consult for insecurities of any kind.** They will set them up with WIC, gas cards as needed, transportation to the NICU provided by their insurance if insurance provides. Sometimes there are grocery cards but not very often. Transportation to the grocery store? Not sure that is available. We have a Ronald McDonald house on campus for families who live more than 30 miles away. I am unsure of the food situation there. What a great question! Very thoughtful and a necessary question, especially now.
- We have faced similar difficulties, however after much discussion with hospital administration, meal trays are now provided for parents at bedside. In addition, we describe the rooming in process at length before parents come so **they are prepared for the long interval and know they will need to partially support themselves**
- All families with patients in the NICU, whether they are actively providing breastmilk or not, are given an order for one tray of food per meal (breakfast, lunch & dinner) throughout the duration of their stay in the NICU. In addition, **we are supported by [Hand 2 Hold](#) by providing**

meals and snacks almost daily for our families. The food is sometimes donations from the community, and sometimes it is in the form of lunch bag sandwiches.

- We have food for breastfeeding mothers and if there is an identified person with food insecurities, SW gets involved in getting food while they are [at the bedside].

Resources:

- [Addressing Food Insecurity through Hospital-Community Partnerships in a Changing Policy Landscape](#), Children's Hospital of Philadelphia Program
- [Building Pediatrician Capacity to Address Food Insecurity](#), Webinar series by the AAP, CHA, Share Our Strength, and Food Research Action Council (FRAC); See [Children's Hospitals Lead the Charge Against Food Insecurity](#)
- [Food as Medicine Collaborative's Food Pharmacy Toolkit](#), Resources for starting clinic-based programs
- [Inpatient Food Insecurity: A Call for Recognition, Investigation, and Intervention](#), Laura M. Plencner, MD
- [Home Food Delivery to Address Food Insecurity Following Hospital Discharge](#), Denver Health Program