

Feasibility of Expanding “Kids Eat Free” SFSP to MUSC Health Regional Hospitals

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Objective: To determine the feasibility of implementing the USDA summer feeding program in four regional hospitals located in rural parts of SC based on the experience of MUSC Health Charleston, the first SC hospital to host a summer feeding program.

Design: We determined area eligibility and local needs, assessed leadership support at each institution, and considered models to meet federal, state, and cost requirements to realistically operate in the space.

Methods: Area eligibility was determined using school data. Other summer feeding sites were mapped using the Summer Food Service Program (SFSP) site finder. To assess local support, senior executives were provided information and example case studies. Models used at MUSC Health Charleston and in hospitals across the country were referred to as examples for developing new programs.

Results: Four rural hospitals were located in eligible areas (defined as where at least 50% of children enrolled in school are eligible for free or reduced-price meals); none had SFSP sites within walking distance of the hospitals. One hundred percent of the executives from each location expressed interest, but none of the locations made a commitment to administer the n 2020 using a particular model. Several different program models were identified and shown to comply with federal, state, and financial constraints.

Conclusion: The implementation of summer feeding programs in more hospitals in South Carolina is feasible due to need and interest. Successful models that demonstrate many different ways to manage a program that meets federal and state requirements can be financially sustainable.

Conflict of Interest: none

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