

Supplemental Information

Basic Needs Support

2-1-1 can help anyone in the United States connect to resources in their area (not just food). Call **2-1-1** for free, private help. You can visit **pa211sw.org** or text your zip code to **898-211** to find help nearby.

Allegheny County Family Centers are community hubs where families can access resources, participate in educational programs, and connect with other children and caregivers. Call **412-350-3577** to learn more and find a family center near you in Allegheny County.

To find info online, place your smart phone camera over this QR code and click the link provided

Emergency Food Resources

Emergency Food Assistance (EFA) is for families who need food. Contact the Urban League of Greater Pittsburgh to get food by the next day. A family can get this service once a year. They will help you find a local food pantry: **1-866-395-3663**.

Pittsburgh Community Services, Inc. has emergency food for Pittsburgh residents. Call **412-904-4718**.

National Programs

SNAP (was called Food Stamps) is a government program for individuals and families who need help buying food. You may qualify based on your household size and income level. To find out more, **Just Harvest** can help you for free. Call at **412-431-8960 x 602** or visit them at 16 Terminal Way, Pittsburgh PA 15219. To apply online, go to the COMPASS website: <https://www.compass.state.pa.us/compass.web/Public/CMPHome>

Women, Infants, and Children (WIC) is a government program. You may qualify based on income. The program gives funds to pregnant women and households with young children. To find out more in Armstrong, Beaver, Butler, Indiana, and Lawrence counties, call Adagio Health at **1-866-942-2778**. For Allegheny County information, call **412-350-5801**. You can also visit <https://www.pawic.com/FindWICclinics.aspx>

Resources – Western Pennsylvania

Produce to People is a food program that gives foods like fresh fruits and veggies. It visits different neighborhoods during the month. Call **412-460-3663** or visit <https://www.pittsburghfoodbank.org/what-we-do/food-to-people/produce-people-p2p/>

Food for Early Development (FED) helps families who do not get help from WIC. They can give baby formula, soft foods, diapers, bottles, and wipes. Call the Urban League at **1-866-395-3663**.

***BigBurgh** is a website that can show you where to find help. It can help you find healthcare, free events, food, shelter, and more. www.BigBurgh.com

***The Green Grocer** brings fresh fruits and vegetables to communities around Pittsburgh. They also accept SNAP/EBT. Call **412-460-3663** or visit <https://www.pittsburghfoodbank.org/what-we-do/food-to-people/green-grocer/> to find out if the Green Grocer comes to your neighborhood.

***Farmers Markets** take place in Allegheny County. You can also use SNAP/EBT here. To find out more, visit <http://www.justharvest.org/fresh-access/> or call **412-431-8960**.

*These resources are specific to Allegheny County

SUPPLEMENTAL FIGURE 6

Example paper resources provided to patients. QR code (not pictured) takes families to: <https://familycenters.alleghenycounty.us/>.

SUPPLEMENTAL TABLE 3 Congenital Heart Disease Severity Categories: None, Mild, Moderate, and Severe

Categories of Congenital Heart Disease (CHD) Severity

None: No disease or can be followed by general pediatrician.

Innocent murmur

Noncardiac chest pain

Noncardiogenic syncope/dizziness/orthostatic intolerance/dysautonomia/postural orthostatic hypotension

Dyspnea/exercise intolerance

Palpitations

Patent foramen ovale

Normal cardiac evaluation for history of chemotherapy, genetic condition, or family history

Referral for abnormal testing (eg, abnormal EKG)

Benign arrhythmia (eg, first-degree heart block, premature contractions)

Persistent pulmonary hypertension in newborn

Breath-holding spells, color change

Cardiac clearance for medication or surgery

Failure to thrive

Elevated blood pressure

Lyme disease without carditis

Mild CHD: asymptomatic, often spontaneous resolution, less frequent follow-up (yearly), no cardiac intervention.

Structural mild CHD:

Shunt lesion: small atrial septal defect (ASD), ventricular septal defect (VSD), or patent ductus arteriosus (PDA) (no intervention or spontaneous closure)

Valvular abnormality not requiring intervention (eg, aortic stenosis (AS), bicuspid aortic valve (BAV), pulmonary stenosis (PS), mitral valve prolapse [MVP])

Mild, stable aortic root dilation

Aberrant coronary arteries

Acquired/Cardiomyopathy Mild CHD:

Cardiomyopathy, NYHA class I-II, (E.g. dilated cardiomyopathy, chemotherapy-induced)

Lyme carditis

History of myocarditis with normal or low normal function

Pericarditis

Pulmonary hypertension

Rheumatic heart disease

Electrophysiology Mild CHD:

Atrial or ventricular ectopy, follow up with no intervention, medical management

Atrial flutter, medically managed

Prolonged QTc

Moderate CHD: Those that require intervention and/or close, frequent cardiology follow-up (<1 y).

Structural Moderate CHD:

ASD, sinus venosus defect, VSD and PDA s/p repair or closure

Left superior vena cava to unroofed coronary sinus s/p repair

Partial or transitional atrioventricular septal defect (AVSD) s/p repair

Anomalous coronary artery s/p repair

Valvular abnormality requiring intervention (eg, AS, aortic insufficiency (AI), PS, pulmonary insufficiency (PI))

Subaortic membrane s/p resection

Aortic dilation s/p root repair

Congenitally corrected transposition of the great arteries (ccTGA) + intervention

Noncritical coarctation s/p repair

Vascular ring s/p repair

Acquired/Cardiomyopathy Moderate CHD:

Endocarditis with vegetation s/p resection

Cardiomyopathy (eg, hypertrophic cardiomyopathy, moderate-severe dilated cardiomyopathy)

Pulmonary hypertension s/p cardiac catheterization

Mitral regurgitation s/p valvuloplasty

Electrophysiology Moderate CHD:

Wolff-Parkinson-White syndrome, supraventricular tachycardia, or atrial/ventricular ectopy s/p ablation

Brugada syndrome ± ICD

Cardiac arrest s/p ICD

Heart block s/p pacemaker

Severe CHD: Structural disease that presents as severely ill in the newborn period or early infancy, acquired/cardiomyopathy/structural disease that results in cardiac transplantation.

Structural Severe CHD:

Cyanotic Lesions:

SUPPLEMENTAL TABLE 3 Continued

Categories of Congenital Heart Disease (CHD) Severity
D-TGA
Tetralogy of Fallot, including pulmonary atresia and absent valve
Double outlet right ventricle
Single ventricle physiology
Severe Ebstein's anomaly
Truncus arteriosus
Total anomalous pulmonary venous connection
ccTGA (double switch or single ventricle)
Acyanotic Lesions:
AVSD
Large VSD
Valvular lesions (eg, critical or severe AS, severe PS)
Critical coarctation of the aorta
Acquired/Cardiomyopathy Severe CHD:
Orthotopic heart transplant

SUPPLEMENTAL TABLE 4 Physician Respondent Comments on Screening

Physician Comments on Screening:
Glad this program was put into place, it helps to identify not only food insecurity, but opens the door to discovering other social needs that may otherwise be missed.
This screening tool helped identify patients with critical needs that otherwise would have been missed. This tool should be required in all pediatric clinics.
Screening has helped me identify my patients with food insecurity, increasing my ability to offer resources for food.
Patients feel very comfortable filling out the screening, and our social workers are very prompt in addressing these families and their concerns.
It is important for us to continue this screening!!
Great program, please keep it going!
Great idea for improved patient outcomes!
Excellent screening resource which has been valuable for connecting up our families with food insecurity with available community resources
Excellent that we are finally asking these questions!!!!

SUPPLEMENTAL TABLE 5 Food Insecurity by Race and Ethnicity

	Percent FI in CHD Severity Groups by Race/Ethnicity					<i>P</i>
	None (<i>n</i> = 1399)	Mild CHD (<i>n</i> = 1193)	Moderate CHD (<i>n</i> = 951)	Severe CHD (<i>n</i> = 1521) (%)	All Severity Groups (<i>n</i> = 5064)	
All race/ethnicity groups (<i>n</i> = 5064)	60/1399 (4.3)	46/1193 (3.9)	50/951 (5.3)	106/1521 (7.0)	262/5064 (5.2)	<.001
White, non-Hispanic (<i>n</i> = 3933)	32/1024 (3.1)	29/909 (3.2)	31/770 (4.0)	62/1230 (5.0)	154/3933 (3.9)	.07
Black (<i>n</i> = 695)	21/245 (8.6)	12/182 (6.6)	13/103 (12.6)	30/165 (18.2)	76/695 (10.9)	.003
Not specified (<i>n</i> = 172)	3/49 (6.1)	1/48 (2.1)	2/29 (6.9)	1/46 (2.2)	7/172 (4.1)	.57
Hispanic (<i>n</i> = 93)	2/29 (6.9)	1/17 (5.9)	0/15 (0.0)	4/32 (12.5)	7/93 (7.5)	.49
Asian (<i>n</i> = 92)	0/28 (0.0)	0/20 (0.0)	0/10 (0.0)	6/34 (17.6)	6/92 (6.5)	.01
Multiple (<i>n</i> = 79)	2/24 (8.3)	3/17 (17.6)	4/24 (16.7)	3/14 (21.4)	12/79 (15.2)	.70

Values are food insecure/race/ethnicity group (self-reported in medical record) (%).