A multi-disciplinary approach to improve identification, follow-up, and treatment of patients at risk for malnutrition in an internal medicine ward

Irena Papier, Svetlana Ilovaisky, Zivit Zaltz, Ayelet Raz, Irit Chermesh
Irena Papier, i_papier@rambam.health.gov.il
+972-502061897

Background and rationale
Malnourished patients have poor hospitalization outcomes. Low food intake during hospitalization causes worsening of nutritional status. Treatment of malnourished patients as well as prevention of nutritional deterioration includes: efficient screening for malnutrition, follow-up of dietary intake during hospitalization, and preparing and implementing a nutritional treatment program. Optimization of these treatments requires a multi-aspect and disciplinary intervention. Patients should be routinely screened upon admission using the Malnutrition Universal Screening Tool (MUST).

Phase I was mapping of the current situation. Results indicated that only 44% of patients underwent MUST screening with documentation of only 47% of meals with partial documentation for some meals, and artificial nutrition was provided to 17% of patients at risk for malnutrition. Problems of low screening rate, deficient follow-up and inadequate treatment are clearly demonstrated.

Resources & enablers
A project coordinator (8000 €), data collector (8000 €), statistician (1500 €), printing of educational material for staff, patients and families (10,000 €), institutional review board authorization (500 €), and presentation of the project in a professional congress including travel and expenses (2000 €).

This is a multiphase, multidisciplinary project. Coordination and collaboration are of utmost importance for the project to succeed

Results/outcomes & expected impact
This is a program to elevate screening performance, follow-up, and nutritional treatment by implementing a multi-faceted intervention. The intervention includes specific educational measures, feedback and development of a nutritional treatment protocol for hospitalized patients at risk for malnutrition. The project aims to advance patient care by providing better nutritional care. Providing a specific nutritional protocol for patients at risk for malnutrition could influence nutritional policy. The educational curriculum, including the specific workshops, handouts to patients and families, and use of a nutritional treatment protocol could be widely used. If this program is proved to be effective it could be implemented in other medical wards, nation wide, and in other countries.