Advancing Patient-Centered Malnutrition Care Transitions

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WHAT WE LEARNED
Significant opportunities exist to facilitate improved care for patients with poor nutrition or malnutrition as they transition across care settings; operating multi-stakeholder recommendations to advance screening and nutrition care; data infrastructure, and patient education and shared decision making can address these needs and improve patients’ overall health.

BACKGROUND
Malnutrition—both under- and overnutrition—is an important issue that can impact functionality, healthy aging, and quality of life. Malnutrition affects individuals in acute, post-acute, and community settings alike, and includes overweight and obese individuals who lack sufficient nutrition (Figure 1).

METHODS
OBJECTIVES
1. Evaluate the current state of care transitions for malnourished patients and patients at risk for malnutrition; 2. Identify high-priority care transition gaps and opportunities to address these gaps across the care continuum; and 3. Outline key considerations for integrating malnutrition care into system-level care pathways to support patient goals and improve outcomes.

RESULTS
Multi-stakeholder input received during the Dialogue, as well as findings from the literature review, highlighted a significant opportunity to better integrate care transitions for malnourished patients and patients at risk for malnutrition into care coordination models and programs. Dialogue participants outlined key recommendations for multiple stakeholders, including patients and caregivers, policymakers, healthcare providers, and payers, to promote improved patient transitions between care settings (Figure 3).

CONCLUSIONS
The Dialogue outlined ways that clinicians, communities and social service providers, patients and caregivers, payers, and policymakers can partner to address malnutrition care gaps and operational recommendations that (1) support systematic nutrition screening and care, (2) provide better education and shared decision making to patients and their caregivers, and (3) improve data infrastructure to capture and share critical nutrition information.

Finally, Dialogue participants outlined key recommendations for multiple stakeholders, including patients and caregivers, policymakers, healthcare providers, and payers, to promote improved patient transitions between care settings (Figure 5).

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