

Mandatory Screening Implementation

To promote an effective malnutrition diagnosis

APNEP - Portuguese PEN Society
Aníbal Marinho (anibalmarinho@gmail.pt) - President
Lino Mendes (linomendes@apnep.pt) - General Secretary



Description of the initiative

- **Background / context:** Nutritional screening is now mandatory at public hospitals (NRS-2002 for adults & STRONGkids for pediatrics); ideally at 1st 24h after patient admission. APNEP is aware of barriers for mandatory screening implementation as a standard procedure. Legal framework is published but there is no national policy regarding nutritional screening implementation neither screening tools. The lack of diagnosis (malnutrition prevalence is still unknown) leads to low awareness from Health Care Professionals and relevant health and political stakeholders. It's estimated that around 205,000 Portuguese are or are at risk of being malnourished at hospital discharge. In addition, there is no reimbursement or access for Medical Nutrition in outpatient setting.
- **Rationale for the initiative:** Aligned with the Portuguese Ministry of Health (MoH) APNEP's three year implementation programme of ONCA strategy obtained a firm commitment on DRM management from the Minister of Health and also from Parliamentary Health Committee (includes all parties). Mandatory DRM screening at hospital level has to be effectively implemented, and legal framework defining medical nutrition accessibility for outpatient is expected to be published in the coming months.
- **Objectives and scope:**
 - 1) Ensure the implementation of mandatory nutritional screening by publishing a national policy for effective screening implementation and respective nutritional intervention pathway & training for all members of multidisciplinary teams;
 - 2) Ensure that MoH implements tools for national data analysis of nutritional screening by monitoring the different actions within hospital setting & training of delegated teams.

Planned activities & deliverables

- **Outline the steps to be taken:**
 - 1) Develop and disseminate a national policy (including the defined monitor KPIs and audit grid) for nutritional screening at hospital level;
 - 2) Training of HCPs (physicians, nurses and dieticians) responsible for screening;
 - 3) Monitor national data analysis (parameters to be included, training of delegated teams, publish annual reports, etc).
- **What are the concrete deliverables of the project?** Widespread malnutrition at hospital level and national data analysis implementation will:
 - Guarantee an effective diagnosis and respective nutritional individualized intervention with an early referral;
 - Obtain robust data on prevalence and health economics: like cost-savings of screening programme and medical nutrition recommendation.
- **What achievements are possible in the next 12 and 24 months?**
 - **2019:** Development of national policy, training ≈30% of target HCPs and screening programme implemented at 15% of public hospitals
 - **2020:** Dissemination of national policy, training >50% of target HCPs and screening programme implemented at 30% of public hospitals
 - **2021:** Implementation of national policy, training >80% of target HCPs and screening programme implemented at 60% of public hospitals

Resources & enablers

- **Describe personnel, financial needs:** APNEP's trainers/speakers and DRM experts, 50€K
- **Specify how the grant will be spent:** Development/dissemination of national policy and training sessions (eLearning & F2F) for HCPs
- **What factors will make it successful?** The success will be measured with the final assessment at HCPs training & tracking of screening programmes implementation at hospital level.

Results/outcomes & expected impact

- **How will the findings be implemented?** In line with MoH actions (legal framework, policies).
- **How will this project advance patient care / contribute to optimal nutritional care?** This project will contribute to a substantial improvement in quality care and treatment of malnourished patients, ensuring a nondiscriminatory access to medical nutrition for both hospitalized patients and outpatients.
- **What makes the project innovative?** Mandatory nutritional screening & national data analysis will be implemented along with reimbursement of medical nutrition for outpatients.
- **Will the project be likely to influence national nutrition policy?** We are creating the national nutrition policy with this project.
- **Is the project transferable to other settings / countries?** Yes, especially the countries without mandatory screening and/or community accessibility. APNEP is available to support/mentor other PEN societies.