

Putting nutrition at the heart of patient care

An Update on Specialist Nutrition

Specialist nutrition supports positive health outcomes and reduces costs to the NHS.

Forgotten not Fixed: a blueprint to tackle the increasing burden of malnutrition in England

Malnutrition continues to be a serious and growing problem, affecting more than three million people in Britain and costing £19.6 billion every year in England alone.¹ The number of deaths from underlying malnutrition or where malnutrition was named as a contributory factor is also increasing, having risen by more than 30% from 2007 to 2016.²

New research commissioned by BSNA found that more than half the hospital Trusts in England are significantly under-reporting malnutrition rates compared to accepted national estimates, meaning the overall incidence of malnutrition is likely to be significantly under recorded.³

BSNA's research, *Forgotten not Fixed: a blueprint to tackle the increasing burden of malnutrition in England*, analysed admittances to 221 English NHS Trusts in 2015/16.³ The data revealed that:

- 91 Trusts currently categorise fewer than one in 2,000 patients as showing signs of malnutrition
- This compares to 2011 Nutrition Screening Week data, which found that malnutrition affects 1 in 4 adults on admission into hospital⁴
- Implying that the true scale of malnutrition is hidden within the hospital system.

This issue is consistent across England, implying a system-wide failure to correctly screen and identify those patients with, or at risk of, malnutrition, or a failure to correctly record the data.

NICE and NHS England guidelines already exist to improve the identification, recording and management of malnutrition across clinical settings, but it seems that these are frequently not followed in practice. Trusts must be given support to accurately record malnutrition risk, thus reducing its incidence over time. BSNA recommends changes that would both improve outcomes for patients and deliver savings to the public purse:

- 1. NICE and NHS guidelines must be implemented and followed in all healthcare settings.** NICE Clinical Guideline 32 (CG32) and NICE Quality Standard 24 (QS24) on nutrition support in adults, and NHS England's Guidance on Commissioning Excellent Nutrition and Hydration 2015-18 should all be followed as a matter of course.
- 2. Introduction of a new comprehensive jointly developed and delivered clinical care pathway.**
- 3. Introduction of incentives,** such as a QOF or its equivalent for malnutrition, to transform how malnutrition is identified, recorded and managed.
- 4. Recognition of the integral role of oral nutritional supplements (ONS).** Early intervention, through dietetic support, and use of ONS where appropriate, can ensure that patients receive the best support for their specific clinical conditions and circumstances.

IDDSI: Everything you need to know

The International Dysphagia Diet Standardisation Initiative (IDDSI) Framework consists of international standardised terminology and definitions for texture modified foods and thickened liquids for people with dysphagia, with the aim of improving clinical safety and efficiency.

It consists of a continuum of eight levels (0-7) and includes descriptors, testing methods and evidence for both liquid thickness and food texture levels.

The transition to IDDSI in the UK has begun

The transition to implement the IDDSI Framework in the UK is underway, with IDDSI being fully implemented across all healthcare settings by April 2019.

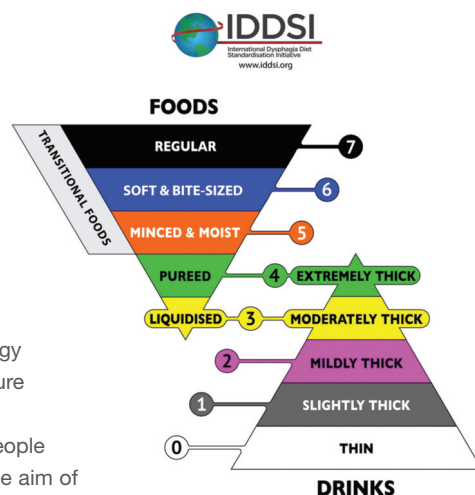
Manufacturers of dysphagia products (such as texture modified meals or thickeners) will be updating their labels to be in line with the IDDSI descriptors. It is important for healthcare professionals to note that these products will transition at different times and that there will be no dual labelling for thickeners.

Tools available

An 'Implementation Pack' is available for healthcare professionals to help implement IDDSI in a planned and coordinated way. These resources can be accessed via the BDA or RCSLT websites. Alternatively, the links are available on the BSNA website.

Manufacturers will also produce appropriate support for their products and healthcare professionals are encouraged to speak to their suppliers if they have any questions.

References: 1. Elia, M, (on behalf of the Malnutrition Action Group of BAPEN and the National Institute for Health Research Southampton Biomedical Research Centre) (2015). The cost of malnutrition in England and potential cost savings from nutritional interventions.; 2. Office for National Statistics (2016) Deaths from selected causes, by place of death, England and Wales, 2014 to 2015. [Accessed: January 2018].; 3. BSNA (2018). *Forgotten Not Fixed*: <https://bsna.co.uk/uploads/knowledge-hub/FINAL-Malnutrition-Map-20-February-2018.docx.pdf> (Accessed: April 2018).; BAPEN (2011). Nutrition Screening Week: www.bapen.org.uk/resources-and-education/publications-and-reports/nsw-reports/nsw11 (Accessed: April 2018).



About the British Specialist Nutrition Association

BSNA is the trade association representing the manufacturers of products designed to meet the particular nutritional needs of individuals; these include specialist products for infants and young children (including infant formula, follow-on formula, young child formula and complementary weaning foods), medical nutrition products for diagnosed disorders and medical conditions, including parenteral nutrition, and gluten-free foods on prescription. www.bsna.co.uk