Malnutrition Matters

BAPEN raises awareness & fights malnutrition 2006-8

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Advancing Clinical Nutrition
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RATIONALE

Malnutrition is detrimental to individuals, health services and society, and continues to be under-recognised and under-treated. BAPEN's approach to fighting malnutrition has been strategic and comprehensive, operating at multiple multidisciplinary levels, across many channels to many audiences *(see fig 1)*. These on-going integrated activities have created a 'mass action effect', a much greater effect than any single time limited activity could have achieved.

fig 1 ***Rationale***

BAPEN – making 'Malnutrition Matter' throughout the UK via a multi-disciplinary, multi-channel campaign addressing multiple audiences

Approach	Activity	Audience
Leadership	• Data collection • Data analysis • Development of tools • Publications • National Conferences • Regional meetings • Briefings • Partnership working • Education initiatives • Direct support • Networking • Website development • Media campaigns	Government
Partnership		Regulators
Facilitation		Educators
Influence		Healthcare professionals
Support		Patient /consumer groups
		Public

METHODS *(see fig 2)*

Establishing evidence: BAPEN has established collaborators throughout the UK to examine the prevalence of malnutrition,[1] and assessed the health economics of malnutrition using data collected by BAPEN and Department of Health (DH).[2]

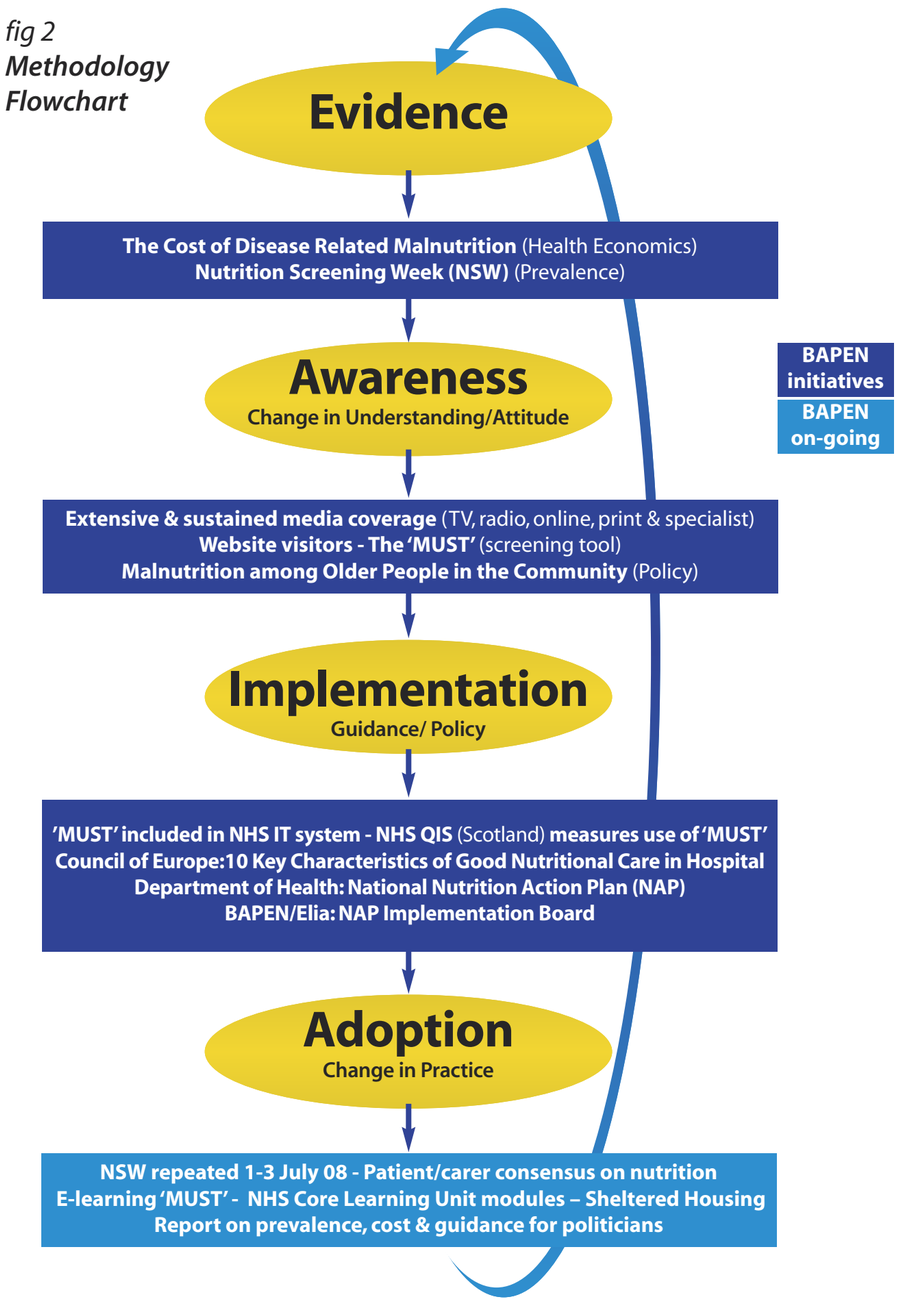
Increasing awareness: BAPEN has raised awareness at national, regional & local levels by: briefing Ministers, DH & government officials in all 4 UK nations;[3] using coordinated website & media campaigns; publishing reports[4], papers & editorials; organising national & regional meetings[5]; and feeding back to reporting centres on local prevalence of malnutrition to benchmark against national data.

Supporting implementation: Stimulated by the Malnutrition Universal Screening Tool ('MUST') and its evidence base, BAPEN has worked in partnership with governmental and non-governmental agencies (NGOs) to establish national guidelines for health and social care, and policy guidance focused on the importance of screening for malnutrition.[6]

Creating Adoption: To make malnutrition matter and change attitudes among health and social care workers BAPEN has integrated its activities and stimulated wide-ranging on-going work across the UK.

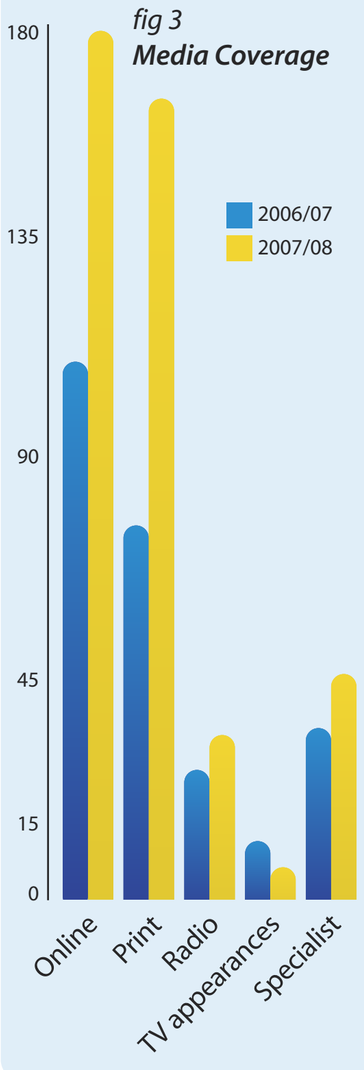
Resources: Almost all BAPEN's work has been done voluntarily by the charity's committees & members, with minimal additional funding from external sources. Funds raised by sale of 'MUST' resources (€80,000+ in last 18 months) have contributed.

fig 2 ***Methodology Flowchart***



RESULTS – Key achievements

fig 3 ***Media Coverage***



Creating Evidence

- ***BAPEN's Health Economic Report*** calculated the cost of *malnutrition in the UK* ≥ £7.3b a figure & report widely utilised, quoted, referenced & promoted.
- ***BAPEN Nutrition Screening Week 2007*** (NSW07) the largest screening survey ever conducted in the UK established risk of malnutrition ***on admission*** to hospital & care settings, indicating prevalence in the community. Data collected on ***~12, 000 subjects***, together with information on policy & practice from 370 centres. NSW07 supported by all 4 UK Health Departments. NSW07 results have fed into government[7] & consumer initiatives.[8]

Raising Awareness

- ***Extensive & sustained media coverage*** TV, radio, online, newspaper & specialist press *(see fig 3)*
- ***Growth in Unique Website Visitors*** *(see fig 4)*
- ***'MUST'*** in ***National Institute for Health and Clinical Excellence*** (NICE) clinical guidelines
- BAPEN partnered with ILC-UK[9] to produce ***'Malnutrition among Older People in the Community – Policy Recommendations for Change'*** stimulating further work by the European Nutrition for Health Alliance/ESPEN in the UK & Europe

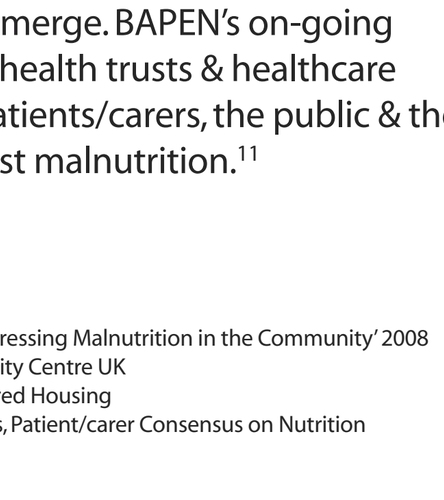
Supporting Implementation

- 'MUST' incorporated into the ***NHS 'Connecting for Health' IT*** system for use by all NHS staff.
- BAPEN a stakeholder in development of ***Council of Europe (UK) 10 key characteristics of good nutritional care***
- BAPEN's data & initiatives incorporated into ***DH/Stakeholders 'Improving Nutritional Care'***- the Nutrition Action Plan (NAP)
- BAPEN/Professor Elia ***Chair of Nutrition Screening Committee*** of NAP Implementation Board

Adoption

- BAPEN working with ***sheltered housing*** to assess use of 'MUST' by non-health professionals[10]
- BAPEN's expertise used in key educational initiatives: ***NHS Core Learning Unit nutrition modules; e-learning module on use of 'MUST'***

fig 4 ***Website Visitors***



CONCLUSION & THE FUTURE

- BAPEN's innovative & strategic fight against malnutrition in the UK has focused on (1) creating a sound scientific base accompanied by translational research, (2) adopting a long term strategic commitment with leadership, and (3) stimulating joined up thinking across health, social care & housing with government, professionals & NGOs to create synergy & impact from top down & bottom up. The successful outcome is 'MUST' & BAPEN embedded in national policy, professional guidance and training & education in nutritional care.
- Malnutrition awareness in the UK has never been greater. However, changes to established practice are only beginning to emerge. BAPEN's on-going integrated & multi-disciplinary initiatives, with health trusts & healthcare professionals, politicians, the housing sector, patients/carers, the public & the media, fuel the charity's continuing fight against malnutrition.[11]

1 BAPEN Nutrition Screening Week 2007 www.bapen.org.uk
2 The Cost of Disease Related Malnutrition 2006
3 DH Nutrition Summit, England, 2007
4 The 'MUST' Report; Malnutrition among Older People in the Community, 2006
5 Annual Conference; 10 Regional meetings 06-08
6 NICE Guidance on Adult Nutrition Support 2006; NHS Quality Improvement Scotland 2007
7 DH Nutrition Action Plan, 2007; Cabinet Office 'Food Matters' 2008
8 Welsh Consumer Council 'Addressing Malnutrition in the Community' 2008
9 ILC-UK – International Longevity Centre UK
10 Group on Nutrition & Sheltered Housing
11 NSW08, Report for Politicians, Patient/carer Consensus on Nutrition