Promoting the recovery, function in hospitals, and thus performance

- 45% of patients admitted to a medical or surgical ward in Canadian hospitals are malnourished.1
- Malnutrition has been shown to increase mortality, length of stay, and risk of readmission, affecting patient flow and health care costs.1,2
- The Integrated Nutrition Pathway for Acute Care (INPAC) is an evidence-informed, consensus based algorithm designed to promote the detection, treatment and monitoring of malnutrition.
- The More-2-Eat (M2E) project is the implementation of INPAC in 5 hospitals across Canada.

To optimize nutrition care in hospitals, and thus performance of the healthcare system by ensuring that malnutrition and poor food intake are prevented, detected and treated, hence promoting the recovery, function and quality of life of patients, with particular attention on the needs of frail elderly.

**Summary of the More-2-Eat Project**

- M2E is designed to test and implement all aspects of the INPAC in five diverse hospitals in four provinces of Canada.
- M2E utilises the Knowledge-to-Action process, Plan-Do-Study-Act (PDSA) cycles, and an overarching Model for Improvement and Quality Implementation Framework.

  - **Staff will be educated** regarding malnutrition (prevalence, barriers, cost etc.), the INPAC, and tips for implementation.
  - **Patient education materials** will be created regarding the importance of treating ‘food as medicine’.
  - **Data collection** is qualitative and quantitative at the **site, unit, staff, and patient levels**, including audits of INPAC components as well as patient reported outcomes (e.g. food intake).
  - The primary outcome of M2E is the INPAC implementation toolkit.

**KEY MESSAGE**

Changing hospital nutrition care requires an interdisciplinary, complex intervention. More-2-Eat will identify and test the processes required for the implementation of a nutrition care improvement, how it is sustained and the resource implications required for scaling up.

**References**