Management of the nutritional sequence in the hospital – the patient at the center

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החברה הישראלית לתזונה קלינית The Israeli Society for Clinical Nutrition

Background:

Implementation of a nutritional care plan by food service systems in medical institutions has often encountered difficulties, due to lack of co-operation of several disciplines, kitchen staff 's lack of knowledge and ability to implement the nutrition care plan. Patients don't get the food they require prescribed by the dietitian/nutritionist in the department.

Rationale for the initiative:

To ensure patients receive the food they need, we defined a specialized role for dietitians who supervise planning and preparation of the food tailored to patient's condition. The supervision includes: control of raw materials prior to purchase, storage, preparation, creation of standard recipes, serving of food and monitoring its consumption by the patient, all the while ensuring nutritional quality.

Objectives and scope:

To ensure that all patients receive food according to their medical condition and nutritional treatment plan.

Fig 1:The % of hospitals achieving the implementation of tested parameters:

We performed a process that included:

- 1. Definition and implementation of a new occupation role of "Food Service Dietitian".
- 2. A professional comprehensive training course for this role was developed. 30 dietitians carried out the training.
- 3. An intervention study was conducted, in 18 general hospitals, divided into two groups: 9 with a "Food Service Dietitian", and 9 without a "Food Service Dietitian".

 Results presented in fig 1.

100 80 ■ No Food Service 40 Dietitian 20 A Food Service Dietitian saving food Serving a late Nutritional analysis of night snack on-going for all menus training of patients kitchen staff

Planned activities & deliverables:

Outline the steps to be taken:

- 1. Provide training courses for 30 additional dietitians within 12 months
- 2. Expand the number of medical institutions employing Food service Dietitians
- 3. Assess the effect of the dietitian's supervision on the following parameters:
- Number of hospitalization days
- > Improvement of food prepared and served according to the patients' clinical condition
- Degree of patient satisfaction
- Reduction in food waste

What are the concrete deliverables of the project?

- ✓ Availability of suitably trained dietitians to fill the role of a Food Service Dietitian
- ✓ Increase in number of medical institutions employing a Food Service Dietitian
- ✓ Use the results of the assessment to demonstrate cost effectiveness of this role
- ✓ Improvements in patient care and satisfaction, including shortening of hospitalization
- √ What achievements are possible in the next 12 and 24 months
- √ Completion of training courses
- ✓ Employment of Food service dietitians in eight additional medical institutions
- √ Financial savings as a result of reducing food waste due to the work of a Food Service Dietitian

Resources & enablers:

Describe personnel, financial needs:

Teachers and physical facilities for conduction of training courses

Researchers and statisticians to evaluate the impact of the new role

Subsidizing travel and participation for one staff person to attend the ESPEN conference

Specify how the grant will be spent: 20,000 € on the training courses; 8,000 € on evaluation research; 2,000 € costs for one staff person to attend the ESPEN conference

<u>What factors will make it successful?</u> More employment of Food Service Dietitians, which will lead to more appropriate food for patients, with better acceptance and satisfaction.

Outcomes & expected impact:

How will the findings be implemented? Implementation in most Israeli hospitals

How will this project advance patient care / contribute to optimal nutritional care? Better tailored

nutrition, improvement of nutritional status, patient health, shortening of hospitalization and preventing rehospitalization.

What makes the project innovative? A relatively new role with therapeutic and economic benefits.

Will the project be likely to influence national nutrition policy? The Ministry of Health will require all hospitals to fill this role so as to improve nutrition care in hospitals, reduce malnutrition and reduce food waste.

<u>Is the project transferable to other settings / countries?</u> Yes ,we will be happy to teach and mentor EU countries about design and implementation, where the role either does not exist or is present in a very limited capacity.



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