



Summary of project results

Cancer malnutrition: feeding everyone from hospital to home

The aim of this project was to explore knowledge, nutrition practice and nutrition governance in the primary care and community sector in regards to cancer malnutrition and promote the value of cancer malnutrition as a key quality and safety issue in Victoria

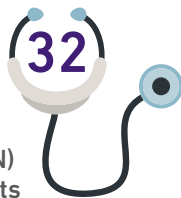
State-wide indicator work

This project has raised the profile of malnutrition as a quality and safety issue within Victoria

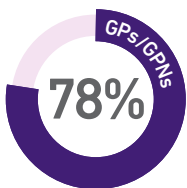
Positively, cancer malnutrition prevalence has been included as an indicator within the Victorian cancer plan monitoring and evaluation framework released in August 2018

RESPONDENTS

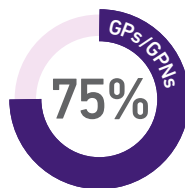
GP and general practice nurse (GPN) respondents



Dietitian respondents
(including acute oncology, community health, community rehabilitation and private practice dietitians)
52% metropolitan based,
48% regional/rural



78% of GPs/GPNs and 63% of primary care/community dietitians believe that there are patients with cancer malnutrition going unrecognised in their practice



75% of GPs/GPNs rated their knowledge of cancer malnutrition as either poor or moderate

What does this mean?

Improvements are needed in:

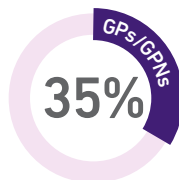
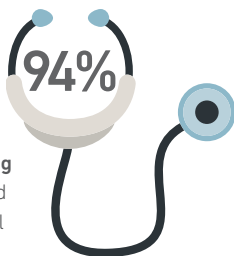
- The transition of nutrition care between acute services and primary/community care
- Knowledge and processes around malnutrition screening, pathways of nutrition care and nutrition governance across all health sectors
- Information sharing of current available education resources about cancer malnutrition and options for nutrition care (i.e. cancer rehabilitation programs; community-based nutrition programs including face-to-face, phone and telehealth)

Additional support, education and resources on cancer malnutrition are wanted and needed for health professionals



Dietitians report that the predominant screening tool used in primary/community care is the Malnutrition Screening Tool (MST)

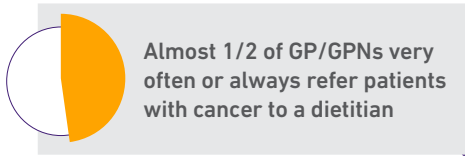
Almost all (94%) GPs and GPNs would see benefit in having access to a malnutrition screening tool that could be used for all patients, as well as cancer patients



Only 35% of GPs/GPNs very often/always weigh a cancer patient in their practice

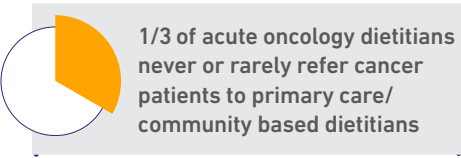


Dietitians working in community health indicate approximately 1/4 of patients are screened for nutrition risk



Top five barriers for GPs/GPNs referring patients to a dietitian

- Availability
- Wait times
- Time taken for referrals
- Cost
- Patient receptiveness

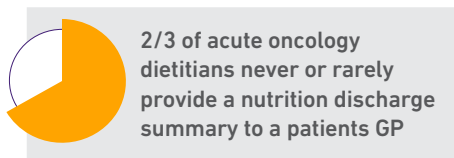


Top five reasons acute oncology dietitians do not refer to primary care/community dietitians

- Patients are followed up in hospital outpatients
- Patients receive phone reviews until stable
- Complex care needs of patients
- Time/resources required to make referral
- Long wait lists for community dietitian.

What are we doing about it?

- Developing a new cancer nutrition pathway to guide evidence-based, consistent care across the entire continuum of care through the newly funded Optimising the cancer nutrition path project
- Developing and sharing education resources and tools to help support and upskill health professionals to provide better nutrition care (i.e. Optimising the cancer nutrition path project; Malnutrition in cancer eLearning program update)
- Further work on promoting the value of a state-wide cancer malnutrition indicator and/ or cancer malnutrition as a reportable quality and safety measure
- VCMC program of work is trying to address gaps identified and continue to reduce the prevalence of cancer malnutrition in Victoria



Reasons acute oncology dietitians do not provide a nutrition discharge summary to GPs:

- Lack of time/resources
- Not standard practice
- Admission summary provided by treating medical team
- Patient does not require follow-up

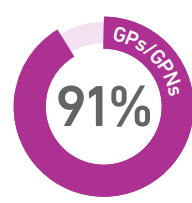
The majority of dietitians working in primary and community care are unclear about what nutrition governance processes their service should comply with



95% of acute oncology dietitians would like more information about cancer rehabilitation programs running in Victoria



84% of GPs/GPNs were not aware of available cancer malnutrition resources



91% GP/GPNs and 75% dietitians want additional support, education and resources in regards to cancer malnutrition

