

Expression of Interest

Managing malnutrition in older adults in the community.

Dear Practice Manager,

Grand Pacific Health (GPH) in partnership with the University of Wollongong (UoW) is implementing a project aiming to reduce malnutrition rates among older people in the Shoalhaven community. The project will work to support General Practices to integrate routine malnutrition screening and care pathways in primary care, to help older adults in the community stay independent and living at home for as long as possible.

We are inviting General Practices interested in participating in this project within their practice and help improve health outcomes for our older community members. For the purposes of this project, only 12 practices will be selected for participation. We have selected your practice as an important provider of primary health care services for older people living in the Shoalhaven region.

On the next page we have outlined the roles and responsibilities for GPH and participating General Practices to clarify what is involved in the project.

The project will be implemented from May 2017 to June 2018, our hope being to commence data collection before the end of June 2017.

If your practice is interested in participating in this project, would like more information from the GPH project team please contact us on (02) 4448 2233 or via email at dietitian@gph.org.au.

Kind Regards,



Simon Sadler

Aboriginal and Preventative Health Manager

Responsibility Agreement

Roles and Responsibilities of Participating General Practices

- Identify a staff member as champion of the project, who will act as the primary contact person for that practice, as well as a person to support nutrition screening of patients on a regular basis within the practice.
- A minimum of 50% of GPs and practice nurses are required to attend a one hour training session, although all clinical staff are encouraged to attend. For a practice with less than 3 staff members in a practice nurse or GP role, all staff in that role are required to attend the training.
- To display promotional materials related to the project until June 2018.
- To incorporate the provided electronic copy of the MNA-SF into current Care Plan and 75+ Health Assessment forms within practice software, for ease of use.
- To provide eligible patients with consent forms, and store completed forms onsite.
- Staff will register participating patients on electronic tablet, enter MNA-SF score, and encourage patients to complete post-screening survey.
- Maintain spreadsheet of participant names and numbers.
- Utilise provided resource kit and referral pathway to assist with care coordination for patients.
- Participate in evaluation of the project conducted by GPH staff, which may include individual staff interviews and completion of written surveys.

Roles and Responsibilities of Grand Pacific Health

- Provide technical assistance to each practice to support their participation in the project.
- Provide adequate training opportunities for Practice Nurses and GPs on malnutrition screening to support the implementation of routine malnutrition screening of patients over the age of 65.
- Provide ongoing support to practices following the initial training
 - o At least quarterly face to face contact at the practice.
 - o Follow up phone and email support between practice visits as needed.
- Provide each practice with a resource kit to supplement the referral pathway, which can be used to assist in screening and care coordination for patients screened as 'at risk' or 'malnourished'.
- Provide training and program resources as well as necessary updated clinical equipment (e.g. scales) and financial reimbursement for staff time up to \$1000 per practice.
- Conduct an evaluation of the project with practice staff, ensuring secure storage of all data collected.
- Collate project results and provide feedback to participating practices.

Implemented by Grand Pacific Health Limited on

____/____/____

Signature of GPH Manager

Name of GPH Manager

Implemented by _____

Practice name

on ____/____/____

Signature of Authorised Delegate

Name of Authorised Delegate