Fighting the malnutrition battle:
THE POWER OF PARTNERSHIPS

To build a compelling case for a national strategy to fight malnutrition
N Rice, J Dowsett, C O’Hanlon
Background

- Debt increased from to >100% GDP
- Unemployment increased by > 350%
- Healthcare Budget Cuts to front line services

**CUTS OF €3.3BILLION IN 3 YEARS (22%)**
Clinical nutrition targeted for savings

Irish Medical Times

Sip feeds waste millions

HSE to target nutritional products in cost saving measure

New group established to secure savings of €64m in state’s drug bill

HSE managers warned of risks to patients from funding cuts and understaffing

Health Minister warns of greater HSE cuts for 2012

€750m in healthcare cuts to hit the most vulnerable
Malnutrition not on the radar
Focus on preserving front line services
Nutrition seen as ‘nice to have’
IrSPEN launched December 2010

New group established to combat malnutrition

Founding partners

- Abbott Nutrition
- Nutricia Medical
- Fresenius Kabi
The challenge - how to change the agenda (urgently)

Mission
Integrate good nutritional care into medicine and healthcare

Build evidence base
Shape policy & practice
Educate doctors
Drive awareness/change minds

Partnership for effective advocacy
From strategy to action...(delivering solutions)

1. Build Evidence for compelling business case
   - Local prevalence data

2. Awareness for action
   - Build support for your case with important others

3. Change minds and attitudes - focus on outcomes
   - Deliver training solutions

4. Access to high quality care
   - Secure reimbursement

5. Nutrition Screening
   - Establish value of screening

   - Campaign for and develop improved care models
   - Remove barriers and DRIVE implementation

Plug into media and Government engagement to influence nutrition agenda and strengthen advocacy efforts.
Step 1: Build evidence base (with help from friends)

1. Build Evidence for compelling business case
2. Establish local prevalence data
3. Establish local ‘burden of disease’ data

- Economic modelling by Elia and Stratton

INDI conducted screening, C Russell of BAPEN support invaluable
Step 2: Drive awareness and generate news (using new data)

- Drive awareness and build support
- Build support for your case with important others
- Plug all activities into consumer and medical media
- Focus on economic backdrop to generate news / drive agenda

Key Opinion Leaders
Professional bodies
Policy advisors
Patient Advocacy groups
Health Writers
Step 3: Focus on educating doctors and developing future champions

Educate to change minds and practice

Nutrition course developed and run with RCPI - first one 10 days before IrSPEN launch

Two IRSPEN major conferences with themes and speakers to attract medics

Alastair Forbes announcing start of LLL in Ireland 2013
IrSPEN 2013 Conference & Policy Seminar March 5<sup>th</sup>/6th

- Internationally renowned speakers attracting wider audiences
- Developing new KOLs within IrSPEN
- Education: Launch of LLL
- Policy & Health Economics: Commitment to support ‘call to action’
- Making connections: collaborations on future projects
- Metabolism/obesity: broadening interest for clinicians
Step 4: **Shaping policy** for equal access to high quality nutritional care

- **Access to high quality care**
- **ONS reimbursement support activities**
- **Focus on areas of risk with expert reports and guidelines**
- **Launch of major report later this year in conjunction with cost report**

Active Engagement with Minister’s office and HSE and submissions to expert advisors.
Step 5: **Nutrition Screening** as key to effective nutritional care model

- **Nutritional Screening**
- Economic modelling developed / presented March 2013 IrSPEN conference
- Savings demonstrated – meetings with Junior Health Minister and advisors April 2013
- Joint Call to Action under EU presidency May 2013

Net savings of **€19 million** per year and over **28,600 inpatient bed days** per year (1.5%) based on adapted NICE model
Results – From Evidence-base to business case

- **ONS reimbursement decision reversed** - review system agreed November 2012
Results – Advocacy efforts amplified through partnerships

Joint meeting with ENHA, EGAN and local partners under Irish EU Presidency – May 24th

- Established ‘Malnutrition Alliance’ with patient organisations and INDI
- Launched ‘call to action’ with alliance support at collaborative meeting

Launch of key initiatives

- Agreement ‘in principle’ by DoH chiefs to extend mandatory screening to hospitals
- Active engagement with policy makers and influencers
Result - **Driving Awareness** and changing the agenda (2013 coverage)

- National TV, radio and press coverage of IrSPEN policy seminar March and May call to action.
- **3,690,244 opportunities to view/ see / hear**
Malnutrition partners now echoing messages
Results: Nutrition Education now mandatory for key groups

1. 4 training courses delivered for SpR programme and NHCDs.
2. Nutrition training now compulsory for Gastro SpRs – to be extended
3. Formal agreement signed (2013) with RCSI for collaboration on nutrition training in post graduate medical education
4. Discussions opened with Royal college of Surgeons (RCSI) with significant interest.
5. LLL launched at IrSPEN 2013 conference – live module late this year.
What have we learned?

Power of partnership
What have we learned
..it’s people that make the difference