

## Advanced Care Practices

Some patients need more than standard care to recover. Malnourished patients need strategies that provide enhanced nutrition, more frequently and in a manner that is easy for the patient to tolerate. Advanced care practices are a variety of strategies with the common goal of intensifying the 'dose' of energy, protein and micronutrients for malnourished patients who often feel too ill to eat.

Many hospitals have processes for promoting energy and protein dense food intake (e.g. prescribed diets, nourishments) to treat protein-energy malnutrition. Consider liberalizing malnourished patients' therapeutic diets as a means of optimizing intake. Medication pass (medpass) of supplements (small amount of oral nutritional supplement provided by nursing, typically at medication administration times) is not as commonly used, but can be a vital mechanism for improving intake while also limiting waste of larger portions of the products. It is important to note that systems or processes to implement medpass may need to be worked out with each unit.

For many SGA Level B patients, these advanced care strategies can be instituted as first order treatment to start the process of improving nutritional status.

### *Tips to implement medpass in your hospital*

- Learn from other units/hospitals in your region if they have already implemented medpass.
- Work with the dietitian on the unit and the nurse manager/ practitioners/ pharmacist/educators to plan how to roll it out on the unit.
- Don't forget about the budget. Consider prioritizing and standardizing supplement delivery options (i.e., make medpass the first choice if the patient requires a supplement; then, if the patient does not like or tolerate medpass, provide supplements with snacks or meals etc.).
- Create criteria for indications/contraindications and guidelines for ordering /discontinuing, processes for delivery of supplement to unit, storage, consideration of shelf-life of opened product, etc.
- Determine the process for discontinuing medpass promptly when it is determined to no longer be safe due to intolerance of the viscosity (i.e. patient requires thickened fluids) or patient refusal.
- Put medpass on the Medicine Administration Record (MAR). This can take time. Work with existing processes and as part of a team that includes pharmacy, food services, and other unit/hospital members to achieve this goal.

- A paper or pseudo MAR may be suitable if unable to get medpass on the electronic MAR.
- Work with the suppliers of the product to set up a process for procuring it, as well the equipment that will support use (cups, lids, fridges etc.). Contact the supplier to see if they can provide any of the required supplies or training.
- Provide training about what is medpass, why is it important, when it should be provided, and allow staff to sample the product.
- Training may need to be tailored to the specific needs of a unit.
- Continue to provide training, as the process becomes a routine job function. Use creative reminders.
- Track and monitor adherence to, and intake of the product; report this back to the staff.
- Track wastage (from expired/opened product); report this back to the staff. Identify any challenges they experience with administering the product to patients, work as team to solve the problems.
- Database systems (e.g. CBORD) can be used to track/print reports of patients receiving medpass. This is helpful to dietitians to ensure timely follow-up and for Food Services for establishing and monitoring stock levels.

*"Patients are more compliant with  
[nutritional supplement] shots than  
giving them the whole bottle."*

- Nurse