

Lessons learned from a pilot implementation trial of the nutrition support assessment tool

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Abstract

Background: The Centers for Medicare and Medicaid Services has emphasized the critical importance of assessing and addressing Health-Related Social Needs (HRSN), including food insecurity, to improve patient outcomes and quality of life and reduce healthcare disparities. However, existing tools to assess food and nutrition insecurity lack comprehensive consideration of the underlying social and medical drivers of need, thus limiting their ability to identify the “right level” of food and nutrition services appropriate for each patient.

Objective: Pilot test the newly developed Nutrition Support Assessment Tool (NSAT) to assess individual patient’s underlying drivers of nutrition needs to inform most appropriate food and nutrition interventions.

Methods: A pilot implementation trial was conducted to evaluate patient-reported acceptability, appropriateness, and satisfaction with NSAT-identified interventions and collect preliminary outcome data. Study participants included hospitalized patients from a large urban tertiary healthcare system. Participants were enrolled for a four-month period and completed follow-up assessments at one week, four weeks, three months, and four months post hospital discharge.

Results: A total of 92 participants were enrolled in the trial with a mean age of 52 years (range 22-80). Most participants (62%) identified as female and Black/African American (61%) and reported an annual household income of \$49,999 or less (65%). Participants reported challenges with shopping for food (54%), preparing food (53%), and affording food (50%). Most (66%) were referred for medically tailored meals as their recommended food provision intervention. Only 47% of participants had connected with their resource one week post discharge (n=87). At week four, 76% of participants had connected with their resource (n=82) and participants’ average food resource acceptability score was 4.0/5.0, appropriateness was 4.0/5.0 (n=55), and overall satisfaction was 8.0/10.0 (n=54).

Conclusion: Food and nutrition interventions are not one size fits all. The NSAT allows providers to better assess patients’ unique drivers of nutrition need and connect them to the intervention best for them.