

## Exemplars of evidence-based care in practice

### Implementation of an innovative model of nutrition care in patients with head and neck cancer

<p><b>WHAT</b> did the initiative involve?</p>	<p><i>This study aimed to implement and evaluate the integration of a patient-centred, best-practice dietetic model of care into a head and neck cancer (HNC) MDT to minimise the detrimental sequelae of malnutrition. Patients were identified via the weekly MDT meeting lists. Key interventions included:</i></p> <ul style="list-style-type: none"> <li>• <i>A supportive care-led pre-treatment clinic providing targeted pre-treatment assessment, intervention, education and counselling to patients and caregivers.</i></li> <li>• <i>A nutrition care dashboard served to highlight nutrition care processes and clinical outcomes and was integrated into the existing HNC Radiation Oncology list for discussion at weekly MDT meetings</i></li> </ul>
<p><b>WHO</b> was involved in the initiative?</p>	<p><i>Medical (radiation/medical oncologists, surgeons), nursing and allied health professionals (dietitians, speech pathologists, psychologists and radiation therapists)</i></p>
<p><b>WHERE</b> did the initiative occur?</p>	<p><i>Radiotherapy outpatient setting and HNC MDT meeting Royal Prince Alfred Hospital and Chris O'Brien Lifehouse</i></p>
<p><b>WHO</b> was the target of the initiative?</p>	<p><i>Adult patients (≥18 years) undergoing radiotherapy +/- other treatment modality of curative intent for HNC</i></p>
<p><b>WHEN</b> was the initiative performed?</p>	<p><i>Pre-treatment and during treatment</i></p>
<p><b>HOW</b> was the initiative undertaken?</p>	<p><i>The 24-month project was funded by a research grant and consisted of three phases covering pre-implementation (ten months), implementation (eight months) and analysis (six months).</i></p>
<p><b>OUTCOMES</b></p>	<p><i>Post-implementation data demonstrated improved process and clinical outcomes: pre-treatment dietitian assessment; use of a validated nutrition assessment tool before, during and after treatment. Patients receiving the new model of care were significantly more likely to complete prescribed radiotherapy and systemic therapy. At the system level, the new model of care avoided 3.92 unplanned admissions and related costs of \$AUD121K per annum.</i></p>
<p><b>REFERENCE</b></p>	<p><i>Findlay M, et al. Best Evidence to Best Practice: Implementing an Innovative Model of Nutrition Care for Patients with Head and Neck Cancer Improves Outcomes. Nutrients. 2020 May 19;12(5):1465.</i></p>