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PRACTICE TIPS: Addressing Food and Nutrition Insecurity
STEPS to Identify and Address Food Insecurity and Malnutrition

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Background:

Food insecurity and malnutrition are widespread and worsening issues in the United States. Both food insecurity and malnutrition are associated with negative health outcomes and higher spending on health care. Adults who are malnourished at the time of hospitalization or surgery are more likely to have worse hospitalization, surgery, and recovery outcomes.[1] Registered dietitian nutritionists (RDNs) have a responsibility to identify and address nutrition and food insecurity.[2] The following five steps outline a path for RDNs to seize the opportunity to be at the forefront of the identification and interventions for food insecurity and malnutrition.

[1] Malnutrition Quality Improvement Initiative. Briefing: The value of quality malnutrition care. https://malnutritionquality.org/wp-content/uploads/briefing-the-value-of-quality-malnutrition-care.pdf. Published 2018. Accessed August 3, 2023.

[2] Quality Management Committee. Academy of Nutrition and Dietetics Revised 2017 Scope of Practice for the Registered Dietitian Nutritionist. *J Acad Nutr Diet*. 2018; 118(1): 141-165.

Step 1: Review definitions of food and nutrition insecurity and other relevant terms from the Definition of Terms List (DoT) (not all inclusive).

Term	Definition/Description
Food Insecurity	Food Insecurity is defined as a lack of consistent access to enough food for every person in a household to live an active, healthy life.[1] This may include reports of reduced quality, variety, or desirability, in addition to indications of disrupted eating patterns and reduced food intake.[2] This can be a temporary situation for a household or can last a long time.[1] References: [1]What is food insecurity? Feeding America. Accessed August 3, 2023. https://www.feedingamerica.org/hunger-in-america/food-insecurity. [2]Definitions of Food Security. USDA. Accessed August 3, 2023. https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/definitions-of-food-security.aspx.

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Term	Definition/Description
Nutritional security	Nutritional security is defined as "a situation that exists when all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food that meets their dietary needs and food preferences for an active and healthy life." Reference: Nutritional Security Through Sustainable Agriculture. USDA. Accessed August 3, 2023. https://www.usda.gov/media/blog/2016/05/27/nutritional-security-through-sustainable-agriculture.
Culturally Appropriate Care	Culturally appropriate care is care that responds to the needs of diverse individuals, families and caregivers. Providers must ensure they have adequate and ongoing training in cultural competence to provide culturally appropriate care. Health care organizations and health caregivers need to provide effective, equitable, understandable, and respectful services that are responsive to diverse cultural beliefs and practices, preferred languages, health literacy and other communication needs. Reference: Academy/CDR Definition of Terms List. Commission on Dietetic Registration. Accessed August 3, 2023. https://www.cdrnet.org/definitions.
Health Disparities	Health disparities are preventable differences in health status linked with inequitable distribution of social, political, economic, educational, medical, and environmental resources which negatively impact health outcomes and are experienced by socially disadvantaged populations. Reference: Academy/CDR Definition of Terms List. Commission on Dietetic Registration. Accessed August 3, 2023. https://www.cdrnet.org/definitions.
Health Equity	"Equity is the absence of avoidable, unfair, or remediable differences among groups of people, whether those groups are defined socially, economically, demographically or geographically or by other means of stratification." Health equity" or "equity in health" implies that ideally everyone should have a fair opportunity to attain their full health potential and that no one should be disadvantaged from achieving this potential." Reference: Academy/CDR Definition of Terms List. Commission on Dietetic Registration. Accessed August 3, 2023. https://www.cdrnet.org/definitions.
Social Determinants of Health	Social determinants of health (SDOH) are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

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Term	Definition/Description
	Reference: Academy/CDR Definition of Terms List. Commission on Dietetic Registration. Accessed August 3, 2023. https://www.cdrnet.org/definitions.

Step 2: Understand Academy/CDR and other resources to strengthen knowledge and individual competence related to addressing populations with food insecurity.

The Academy's Strategic Plan has a focus area dedicated to the topic of food insecurity- Nutrition Security and Food Safety. Within that focus area, there are impact goals:
- Advocate for equitable access to safe and nutritious food and water
- Advance sustainable nutrition and resilient food system

https://www.eatrightpro.org/leadership/strategic-plan/vision-mission-and-principles

Food Insecurity Resource	Link
Practice Applications	
Academy/CDR Definition of Terms List	https://www.cdrnet.org/definitions
Code of Ethics	https://www.cdrnet.org/code-of-ethics
Focus Area Standards for RDNs	https://www.cdrnet.org/scope
Food Insecurity/Food Banking Supervised Practice Concentration	https://www.eatrightfoundation.org/resources/future-of-food/food-insecurity-food-banking-concentration
Food Security for Everyone: An Academy Priority	https://jandonline.org/article/S2212-2672(18)32303-7/fulltext
Nutrition Security is More than Food Security	https://www.nature.com/articles/s43016-019-0002-4
Revised 2017 Scope of Practice for the NDTR	https://www.cdrnet.org/scope
Revised 2017 Scope of Practice for the RDN	https://www.cdrnet.org/scope
Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for NDTRs	https://www.cdrnet.org/scope
Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for RDNs	https://www.cdrnet.org/scope
Clinical Screening	
Addressing Food Insecurity in Health Care Settings	https://hungerandhealth.feedingamerica.org/explore-our-work/community-health-care-partnerships/addressing-food-insecurity-in-health-care-settings/
Development and Validity of a 2-Item Screen to Identify Families at Risk for Food Insecurity: Pediatrics	https://childrenshealthwatch.org/wp-content/uploads/EH_Pediatrics_2010.pdf

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Food Insecurity Resource	Link
Health Care Provider Training: Screening for and Addressing Food Insecurity in Clinical Settings	https://hungerandhealth.feedingamerica.org/wp-content/uploads/2014/05/FA_Clinical-Training_2017.pdf
Hunger Vital Sign	https://childrenshealthwatch.org/public-policy/hunger-vital-sign/
U.S. Household Food Security Survey Tools	https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-us/survey-tools.aspx#household
Barriers to Accessing Healthy Food and Food Assistance During the COVID-19 Pandemic and Racial Justice Uprisings: A Mixed-Methods Investigation of Emerging Adults' Experiences	https://jandonline.org/article/S2212-2672(21)00343-9/fulltext
Cultural Competency for Nutrition Professionals (eBook)	https://www.eatrightstore.org/product-type/ebooks/cultural-competency-for-nutrition-professionals-ebook?_ga=2.15977781.208330406.1629203829-933437306.1629203829
Cultural Competence Practice Tips	https://www.cdrnet.org/tips
Diversity and Inclusion Webpage	https://www.eatrightpro.org/advocacy/public-policy-priorities/diversity-and-inclusion
Ethics in Practice: Social Determinants of Health: Enhancing Health Equity	https://www.jandonline.org/article/S2212-2672(21)00152-0/pdf
Food Insecurity, Dietary Quality, and Health Care Utilization in Lower-Income Adults: A Cross-Sectional Study	https://jandonline.org/article/S2212-2672(21)00380-4/fulltext
Malnutrition Roundtable Proceedings	https://www.eatrightpro.org/practice/dietetics-resources/clinical-malnutrition/mqii-initiative
Quality Strategies and Health Equity Guide	https://www.cdrnet.org/Quality
Climate Change and Global Food Systems: Potential Impacts on Food Security and Undernutrition	https://www.annualreviews.org/doi/10.1146/annurev-publhealth-031816-044356
Cultivating Sustainable, Resilient, and Healthy Food and Water Systems: A Nutrition-Focused Framework for Action	https://jandonline.org/article/S2212-2672(20)30202-1/fulltext
Food Security and Sustainability	https://www.eatrightpro.org/practice/dietetics-resources/food-security-and-sustainability
Hunger and Environmental Nutrition Dietetic Practice Group	https://www.hendpg.org/home
Sustainable Food Systems Certificate of Training Module 4 - Community Food Security and Hunger	https://www.eatrightfoundation.org/videos/sustainable-food-systems-primer-module-4

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Food Insecurity Resource	Link
Sustainable, Resilient, and Healthy Food and Water Systems: A Curriculum and Implementation Guide for Dietetics Programs	https://www.eatrightfoundation.org/why-it-matters/public-education/future-of-food/sfs/?1,_2018_EZine
Food Assistance Programs	https://www.nutrition.gov/topics/food-assistance-programs
Food Security and Nutrition Building A Global Narrative Towards 2030	https://www.fao.org/3/ca9731en/ca9731en.pdf
Overcoming Food Insecurity to Maximize Quality Care and Patient Outcomes	https://community.eatrightpro.org/events/event-description?CalendarEventKey=7b727140-55e2-4aa6-a823-ba9bd46a37d8&CommunityKey=4e86f48a-91f8-4996-bfa2-9449a090f149
Prioritizing Food Security Solutions	https://www.eatrightfoundation.org/why-it-matters/public-education/food-security-solutions/

Step 3: Determine if patient/client is food insecure by conducting a food insecurity screening.

- Utilize a **Validated Food Insecurity Screening Tool –** The purpose of a food insecurity screen is to quickly identify households at risk for food insecurity, allowing providers to target services and interventions that address the health and developmental consequences of food insecurity. The two-item food insecurity screen below is based on Questions 1 & 2 of the U.S. Household Food Security Survey and has been validated for use as a screening tool in the health care setting.

I'm going to read you two statements that people have made about their food situation. For each statement, please tell me whether the statement was **often true, sometimes true** or **never true** for your household in the last 12 months.

1. "We worried whether our food would run out before we got money to buy more." Was that **often** true, **sometimes** true or **never** true for your household in the last 12 months?

2. "The food that we bought just didn't last, and we didn't have money to get more." Was that **often**, **sometimes** or **never** true for your household in the last 12 months?

A response of "often true" or "sometimes true" to either question = positive screen for FI.

Hager et al. Development and validity of a 2-item screen to identify families at risk for food insecurity. *Pediatrics*, 2010; 126: e26-e32.

Other Considerations - When screening for food insecurity, it is important to consider additional factors that may contribute to food insecurity when implementing a treatment plan such as:

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- o Access/food deserts
- o Mobility/transportation
- o Intellectual and Developmental Disabilities
- o Food storage/equipment
- o Financial resources

The Academy's electronic Nutrition Care Process and Terminology (eNCPT) (https://www.ncpro.org/) has codes to support validated assessment by RDNs indicating food insecurity in addition to codes for food insecurity screening.

- ICD-10-CM code Z659: food insecurity screen has been completed.
- ICD-10-CM code Z59.4: positive screen for food insecurity. Individuals and families who are food insecure may need immediate help with food resources as well as assistance connecting with federal nutrition programs to support ongoing access to healthy food.

The Academy is involved with the GRAVITY project which represents social determinants of health data, and plays a key role in the development and submission of food insecurity concepts in the external health terminologies of LOINC, SNOMED CT, and ICD-10.

The Centers for Medicare and Medicaid (CMS) has introduced a Food Insecurity and Nutrition Risk Identification Improvement Activity for RDNs practicing in the outpatient setting who participate in MIPS.

For RDNs practicing in the outpatient setting, are you eligible to participate in MIPS? If you are currently billing outpatient Medicare Part B, you may be able to utilize the CMS approved Improvement Activity - **Implement Food Insecurity and Nutrition Risk Identification and Treatment Protocols**.

Learn more about MIPS eligibility at https://qpp.cms.gov/mips/how-eligibility-is-determined.

Step 4: Identify if additional RDN follow-up is needed and determine nutrition intervention/plan of care.

The Nutrition Care Process (NCP) provides a framework and discrete terms for the RDN to asses, diagnose, intervene, and monitor care. The NCP considers the individual/population needs and values and uses the best evidence available to make decisions. Screening and referral and outcomes management are also components of the model. The electronic Nutrition Care Process and Terminology provides up-to date standardized terminology for documentation of malnutrition diagnoses, supporting evidence and nutrition interventions. https://www.ncpro.org//default.cfm

- **Malnutrition/Nutrition Screening** Validated Tools
  - o Malnutrition Screening Tool (MST)

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- o Malnutrition Universal Screening Tool (MUST)
- o Mini Nutrition Assessment – Short Form (MNA-SF)
- o Short Nutritional Assessment Questionnaire (SNAQ)
- o Mini Nutrition Assessment-Short Form-Body Mass Index (MNA-SF-BMI)
- o Nutrition Risk Screening (NRS-2002)
- o Screening Tool for the Assessment of Malnutrition in Pediatrics (STAMP)

[Academy of Nutrition and Dietetics Position Paper on Malnutrition Screening Tools](): Provides evidence of specificity and sensitivity for malnutrition screening tools for adults, demonstrating validity and evidence grade for validated screening tools used predominantly in the United States.

"Screening tools are a first-line detection of malnutrition. Only a Registered Dietitian Nutritionist (RDN) is qualified for performing Medical Nutrition Therapy (MNT) inclusive of conducting a Nutrition-Focused Physical Exam (NFPE), determining a nutrition diagnosis, and authorizing appropriate intervention for malnourished individuals." ([https://avalere.com/wp-content/uploads/2018/07/MQC_Malnutrition-Transitions-of-Care-Dialogue-Process-v23_singlepages.pdf]())

- **Nutrition Assessment and Reassessment** – The RDN collects and documents evidence such as food or nutrition-related history; biochemical data, medical tests and procedures; anthropometric measurements, nutrition-focused physical findings and client history. Problems may be identified during a nutrition assessment which are outside of the RDN scope of practice leading to referrals to other professionals such as a social worker.

  Academy resources that address Nutrition Assessment as it relates to food insecurity and include applicable indicators are:
  - o Nutrition Care Process Terminology contains validated food insecurity assessment terms ([https://www.ncpro.org/]())
  - o Standards of Practice in Nutrition Care (SOP) in Nutrition Care and Standards of Professional Performance (SOPP) for RDNs article ([https://www.cdrnet.org/scope]())
    - ▪ SOP 1.5 Food and nutrition-related history assessment (ie, dietary assessment): Evaluates:
      - • SOP 1.5E Food security defined as factors affecting access to a sufficient quantity of safe, healthful food and water, as well as food/nutrition-related supplies
  - o Sustainable, Resilient and Healthy Food and Water Systems SOPP for RDNs focus area article ([https://jandonline.org/article/S2212-2672(20)30459-7/fulltext]()) or ([https://www.cdrnet.org/scope]()):
    - ▪ SOPP 1.6E1 Screens customers for food insecurity and takes action per protocol

  The NFPE is a tool RDNs use to accurately identify and provide a nutrition diagnosis of malnutrition for patients/clients.
  - • ([https://www.eatrightpro.org/career/continuing-professional-education/face-to-face-learning/nutrition-focused-physical-exam-hands-on-training-workshop]();

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- https://www.eatrightstore.org/product-type/pocket-guides/nutrition-focused-physical-exam-pocket-guide-third-edition)

- **Nutrition Diagnosis -** Data collected during the nutrition assessment guides the RDN in determining the appropriate nutrition diagnosis or problem that the RDN is responsible for treating. A physician's medical diagnosis describes a disease or pathology of organs or body systems. The nutrition diagnosis may assist in guiding the physician in making a medical diagnosis. The nutrition diagnosis resolves with nutrition intervention.

- **Nutrition Intervention -** The RDN then selects the nutrition intervention(s) with the patient/client/family, when possible, that will be directed to the root cause (or etiology) of the nutrition problem(s) and/or aimed at alleviating the signs and symptoms of each nutrition diagnosis.
    - As part of the nutrition intervention, RDNs provide nutrition education to individuals and the community through in-person or virtual sessions, programs, health fairs, handout materials or other resources.

        The following are resources for RDNs to use in nutrition intervention:
        - Established Clinical Guidelines (EAL, Consensus)
            a. EAL - from 2011 on Food Insecurity- https://www.andeal.org/topic.cfm?menu=3956&cat=4571
            b. Nutrition Care Manual (NCM) addresses under Food and Nutrition-Related History: Factors Affecting Access to Food and Food/Nutrition-Related Supplies (FH-6)- https://www.nutritioncaremanual.org/topic.cfm?ncm_toc_id=272416
                i. Food insecurity issues
                ii. Eligibility for government programs (FH-6.1.1)
                iii. Participation in government programs (FH-6.1.2)
                iv. Eligibility for community programs (FH-6.1.3)
                v. Participation in community programs (FH-6.1.4)
                vi. Safe food/meal availability (FH-6.2)
                vii. Safe water availability (FH-6.3)
        - Academy Malnutrition resources
            a. Nutrition Care Manual (https://www.nutritioncaremanual.org/)
                The Adult, Pediatric, and Sports Nutrition Care Manuals are professional practice resources consisting of the largest client education library and current evidence-based nutrition recommendations for adults, infants and children, and athletes. The Nutrition Care Manuals are updated annually and in 2019 the Adult Nutrition Care Manual included a section with all-inclusive guidance for providing malnutrition care.
            b. Nutrition Care Process and Terminology (www.ncpro.org)
                The electronic Nutrition Care Process and Terminology provides up-to-date standardized terminology for documentation of malnutrition diagnoses, supporting evidence and nutrition interventions. The 2015 edition added etiology-based malnutrition diagnosis terms to mirror the *Consensus Statement: Academy of Nutrition and Dietetics and American Society for*

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Parenteral and Enteral Nutrition (https://aspenjournals.onlinelibrary.wiley.com/doi/full/10.1177/0148607112440285) and all eNCPT malnutrition terms are mapped to SNOMED-CT for full compatibility with clinical information systems.

   c. Nutrition Focused Physical Exam Hands-on Training Workshop (https://www.eatrightpro.org/career/continuing-professional-education/face-to-face-learning/nutrition-focused-physical-exam-hands-on-training-workshop). The Academy offers training for RDNs to accurately identify adult or pediatric patients with, or at risk for, malnutrition, and determine a nutrition diagnosis. While a NFPE is only one component of the nutrition assessment, it can provide necessary supportive data. Pocket guides for both pediatric and adult nutrition-focused physical exams are available in eatrightSTORE (https://www.eatrightstore.org/)

   d. *Journal of the Academy of Nutrition and Dietetics* (https://jandonline.org/) The *Journal* publishes a multitude of malnutrition-related content, organized within the following collections:
- Malnutrition (https://jandonline.org/content/malnutrition)
- Pediatric Malnutrition (https://jandonline.org/pediatric_malnutrition)
- Adult/Senior Malnutrition (https://jandonline.org/adult_senior_malnutrition)
- Special Population Malnutrition (https://jandonline.org/special_malnutrition)

- Malnutrition Quality Improvement Initiative (MQii) (https://malnutritionquality.org/) The MQii is a project of the Academy of Nutrition and Dietetics, Avalere Health, and other stakeholders who collaborate to provide guidance and expertise for clinical malnutrition.
  - a. Dialogue Proceedings (www.cdrnet.org/malnutrition)
  - b. MQii Toolkit (https://malnutritionquality.org/mqii-toolkit/)
  - c. Electronic Clinical Quality Measures (eQCMs) (www.cdrnet.org/malnutrition)

- Other association resources
  - a. American Society for Parenteral and Enteral Nutrition (ASPEN) Malnutrition Solution Center (https://www.nutritioncare.org/Malnutrition/) Health care professionals can access malnutrition definitions, a nutrition care algorithm, screening and assessment tools, publications and more via ASPEN's Malnutrition Toolkit. Malnutrition-related online educational opportunities also are available.
  - b. Defeat Malnutrition Today (https://defeatmalnutrition.today/) A coalition including the Academy and many other organizations, Defeat Malnutrition Today emphasizes malnutrition screening and intervention. The website features infographics, articles, studies and the National Blueprint: Achieving Quality Malnutrition Care for Older Adults.

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- **Nutrition Monitoring/Evaluation -** The final step of the NCP is monitoring and evaluation, which the RDN uses to determine if the client has achieved, or is making progress toward, the planned nutrition goals. In 2018 the Academy, Avalere Health and the Defeat Malnutrition Coalition engaged in multi-stakeholder dialogue focused on malnutrition quality improvement surrounding care transitions.
  - National Blueprint: Achieving Quality Malnutrition Care for Older Adults, 2020 Update- https://defeatmalnutrition.today/blueprint
  - 2018 Dialogue Proceedings / Advancing Patient-Centered Malnutrition Care- https://avalere.com/wp-content/uploads/2018/07/MQC_Malnutrition-Transitions-of-Care-Dialogue-Process-v23_singlepages.pdf
  - A multi-stakeholder group of health and community leaders and advocates came together in a national Dialogue, "Advancing Patient-Centered Malnutrition Care Transitions," to focus on developing real-world solutions to better integrate nutrition risk identification and care into existing care transition pathways and accountable care models. (https://academic.oup.com/innovateage/article/2/suppl_1/328/5168876)

Step 5: Direct Coordination of Care by RDN.

RDNs working in health care settings, e.g., hospitals, long-term care, residential care, or free-standing dialysis facilities need to actively address discharge planning needs directly or in collaboration with a social worker or care coordinator to achieve improved outcomes for patients/clients and the organization, e.g., avoid hospital readmission. Knowledge of community resources including eligibility requirements when applicable would enable dialogue with patients/clients/families to identify the resources that would best meet their needs.

In addition to RDNs working in health care settings, RDNs in community nutrition or population health may need to conduct population health management to achieve improved clinical health outcomes of the community/population. These concepts are supported by multiple focus area Standards of Practice (SOP) and Standards of Professional Performance (SOPP) indicators:

Management of Food and Nutrition Systems SOPP- https://jandonline.org/article/S2212-2672(21)00100-3/pdf
- 5.7B Contributes food and nutrition systems management expertise to community-based organizations, advisory boards or coalitions, nonprofit organizations addressing food system issues (eg, local food system, community health initiatives, food insecurity, equity, sustainability)

Public Health Community Nutrition- SOP SOPP in Nutrition Intervention section- https://www.jandonline.org/article/S2212-2672(22)00201-5/fulltext
- SOP 3.10B Collaborates within and across agencies and organizations, including other governmental sectors, nonprofits, community partners, business/insurance companies, industry and coalitions that work on addressing population health issues (eg, disparities in access to food, nutritional intake)

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RDNs in population health management follow the NCP at a population level:

- Assess food and nutrition issues,
- Develop a population health plan,
- Implement the plan to obtain desired outcomes, and
- Evaluate and modify the population health plan to enhance health and prevent nutrition-related diseases.
- During this process the RDN coordinates and involves referrals to:
  - Federal Nutrition Programs and Emergency Food Referral Chart for Older Adults: https://frac.org/wp-content/uploads/Federal-Nutrition-Programs-and-Emergency-Food-Referral-Chart-for-Older-Adults.pdf
    - o Evidence indicates that patients can benefit by increasing enrollment in the Supplemental Nutrition Assistance Program (SNAP) (https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program), which is associated with reduced food insecurity or connecting their patients to other community resources.
    - o A Quick Guide to SNAP Eligibility and Benefits: https://www.cbpp.org/research/food-assistance/a-quick-guide-to-snap-eligibility-and-benefits
  - Expanded Food and Nutrition Education Program: https://nifa.usda.gov/program/expanded-food-and-nutrition-education-program-efnep
  - Food assistance programs (i.e., Special Supplemental Nutrition Program for Women, Infants, and Children [WIC], Supplemental Nutrition Assistance Program [SNAP])
  - Food banks
  - Community-based programs
  - Congregate meals or home-delivered meals programs
  - Lyft Grocery Access Program: https://www.lyft.com/lyftup/grocery-access
  - Instacart Senior Support Service: https://www.instacart.com/help/section/360007797972/360052851231
  - Appropriate practitioner/provider
    - o Social Worker
    - o Case Manager
    - o HUD (Housing and Urban Development)
    - o RDN to organize their community resource contact list
    - o Community programs providing direct services

> *In this Practice Tips, the CDR has chosen to use the term RDN to refer to both registered dietitians (RD) and registered dietitian nutritionists (RDN) and to use the term NDTR to refer to both dietetic technician, registered (DTR) and nutrition and dietetics technician, registered (NDTR).*

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