MGL. PART 1. TITLE 2. Chapter 19A Section 42:

There shall be with the department a commission on malnutrition prevention among older adults. The commission shall consist of the secretary of elder affairs or a designee, who shall serve as chair, the commissioner of public health or a designee, the commissioner of transitional assistance or a designee, the commissioner of agricultural resources or a designee, the senate and house chairs of the joint committee on elder affairs or their designees and 9 persons to be appointed by the governor, 1 of whom shall be a physician, 1 of whom shall be a university researcher, 1 of whom shall be a community-based registered dietitian or nutritionist working with an Older Americans Act-funded program, 1 of whom shall be a representative of a hospital or integrated health system, 2 of whom shall be nurses working in home care, 1 of whom shall be a registered dietitian or nutritionist working with a long-term care or assisted living facility, 1 of whom shall be a registered dietitian or nutritionist representing the Massachusetts Dietetic Association and 1 of whom shall be a representative from the Massachusetts Association of Councils on Aging, Inc.

The commission shall make an investigation and comprehensive study of the effects of malnutrition on older adults and of the most effective strategies for reducing it. The commission shall monitor the effects that malnutrition has on health care costs and outcomes, quality indicators and quality of life measures on older adults. The commission shall: (i) consider strategies to improve data collection and analysis to identify malnutrition risk, health care cost data and protective factors for older adults; (ii) assess the risk and measure the incidence of malnutrition occurring in various settings across the continuum of care and the impact of care transitions; (iii) identify evidence-based strategies that raise public awareness of older adult malnutrition including, but not limited to, educational materials, social marketing, statewide campaigns and public health events; (iv) identify evidence-based strategies, including community nutrition programs, used to reduce the rate of malnutrition among older adults and reduce the rate of re-hospitalizations and health care acquired infections related to malnutrition; (v) consider strategies to maximize the dissemination of proven, effective malnutrition prevention interventions, including community nutrition programs, medical nutrition therapy and oral nutrition supplements, and identify barriers to those interventions; and (vi) examine the components and key elements of clauses (i) to (v), inclusive, consider their applicability and develop strategies for pilot testing, implementation and evaluation.

The commission shall file a report annually on its activities and on any findings and recommendations to the house and senate chairs of the joint committee on elder affairs and chairs of the senate and house committees on ways and means not later than December 31.
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<th>Representing</th>
<th>Current Appointee</th>
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<tr>
<td>Secretary of Elders Affairs, Designee (Chair)</td>
<td>Carole Malone Co-Chair</td>
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<td>Shirley Chao Co-Chair</td>
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<td>Amy Sheeley Secretary</td>
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<td>Commissioner of Public Health, Designee</td>
<td>Diana M. Hoek</td>
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<td>Commissioner of Transitional Assistance (Designee)</td>
<td>Penny McGuire</td>
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<td>Commissioner of Agricultural Resources (Designee)</td>
<td>Rebecca Davidson</td>
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<td>Member of the House of Representatives (Designee)</td>
<td>Representative Elizabeth Poirier</td>
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<td>Representative Danielle Gregoire</td>
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<td>Member of the Senate (Designee 1)</td>
<td>Mary Giannetti</td>
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<td>Member of the Senate (Designee 2)</td>
<td>Linnea L. Hagberg</td>
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<td>Physician</td>
<td>Dr. Sarah Phillips</td>
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<td>University Researcher</td>
<td>Helen Rasmussen</td>
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<td>Community-based registered Dietitian or Nutritionist Working</td>
<td>Margery Gann</td>
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<td>With Program Funded by Older Americans Act</td>
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<td>Rep. of a Hospital of Integrated Health System</td>
<td>Kris M. Mogensen</td>
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<td>Nurse Working In Home Care 1</td>
<td>Milaina Mainieri</td>
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<td>Nurse Working In Home Care 2</td>
<td>Myclette Theodore</td>
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<td>Registered Dietitian or Nutritionist Working with Long-Term Care</td>
<td>Dalia Cohen</td>
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<td>Registered Dietitian or Nutritionist Representing MA Dietetic Association</td>
<td>Tara Hammers</td>
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<td>Rep. from MA Association of Councils on Aging, Inc.</td>
<td>Pamela Hunt</td>
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In 2019, the Malnutrition Prevention Commission (MPC) accomplished many of the previous year’s recommendations. EOA is grateful to the commission members and statewide Older American Act (OAA) nutrition programs’ nutritionists for their time, energy, dedication and commitment.

2019 ACCOMPLISHMENTS

I. Updated network nutrition intake policy
   a. EOA added the Malnutrition Screening Tool (MST) to the Nutrition Intake Assessment for all new clients. OAA nutrition programs added the tool to their forms used to conduct Medical Nutrition Therapy counseling.

      *(2018 Recommendation: Massachusetts Executive Office of Elder Affairs will require all Area Agencies on Aging (AAA), Aging Service Access Point (ASAP) and nutrition service providers to include the Malnutrition Screening Tool (MST) in their intake process.)*

II. Strengthened data access for transitional care
   a. The Commission introduced PatientPing, a new application which is used widely in Massachusetts to seamlessly provide critical patient data across the continuum of care, to the members and network. This technology can be used to identify patients/consumers with malnutrition or risk factors for malnutrition upon hospital discharge and allow for timely interventions such as meals or medical nutrition therapy in the community. Currently 70 hospitals in Massachusetts (95%), 400 post-acute facilities, 30 provider groups and some ASAPs are also part of the PatientPing network.
(2018 Recommendation: Encourage hospital discharges to flag “malnutrition risk” and refer to nutrition counseling in community organizations (e.g., ASAP) using Academy of Nutrition and Dietetics MQII discharge protocol)

III. Raised public awareness and identified needs through screening

a. In April, Commission members Shirley Chao, Amy Sheeley, Diana Hoek, and Pam Hunt presented and conducted outreach at Representative Elizabeth Poirier’s 2019 Senior Spectacular event held in North Attleboro. Representative Poirier is a Commission member.

b. Promoted Malnutrition Awareness Week during Older Americans month in May. It was included in the Governor’s Older Americans Month Proclamation: “Whereas critical programs such as the Senior Nutrition Program, and the work of the Commission on Malnutrition Prevention Among Older Adults, are key to the Commonwealth’s efforts to prevent malnutrition and improve the health, wellbeing and independence of older adults.”

c. During this week in May 2019, 82 senior nutrition clinics were held statewide, resulting in approximately 800 seniors being screened and almost 3,000 seniors receiving malnutrition awareness education. Commission members Dalia Cohen, Rebecca Davison, Mary Giannetti, Margery Gann, Tara Hammes, Diana Hoek, Milaina Mainieri, Carole Malone, Penny McGuire, Amy Sheeley, and Shirley Chao all attended the clinics with local nutrition program nutritionists.

d. September 23-27th over 200 homebound seniors were screened by the Older Americans Act (OAA) nutrition program nutritionists for the ASPEN Malnutrition Awareness Week™. Commission members Shirley Chao and Amy Sheeley, along with Ethos nutritionist Alexendra Hill, participated in an Abbott Nutrition Health Institute podcast which was broadcast during the week.

(2018 Recommendation: Encourage healthcare stake holders to collaborate on conducting the Malnutrition Awareness Campaign at state legislative gatherings and community health promotion events.)

IV. Delivered presentations to stakeholder groups:

a. In March, Representative Elizabeth Poirier and Shirley Chao spoke at 2019 Massachusetts Academy of Nutrition and Dietetics (MAND) Day on the Hill legislative event about the importance of malnutrition awareness and prevention.

b. In October, Linnea Hagberg and Amy Sheeley presented a session regarding malnutrition awareness and intervention at the Massachusetts Councils on Aging Association’s annual meeting.

c. In October, Massachusetts Meals on Wheels Association presented the 2019 Kit Clark Award to the Commission for its commitment to the seniors of Massachusetts.

V. Publications/Activities:

a. The MA Department of Agriculture included malnutrition education in its “MA Senior Farmers’ Market Nutrition Program” magazine which is published in three languages (English, Spanish and Chinese).

b. MA Councils on Aging (MCOA) published the Commission’s 2018 annual report. https://mcoaonline.com/advocacy/malnutrition/

d. MA Department of Public Health (DPH) printed 30,000 Malnutrition Awareness bookmarks for all OAA nutrition programs’ nutrition education and distribution at nutrition clinics.

e. MA Department of Transitional Assistance (DTA) provided SNAP Nutrition Education (SNAP-Ed) in many senior centers throughout the Commonwealth. DTA have also added more information on physical activity for Seniors on our SNAP-Ed website https://www.mahealthyfoodsinasnap.org/

f. MA Malnutrition Commission’s activities were featured in the national Defeat Malnutrition Today (DMT)’s monthly Newsletter – Malnutrition Connection.
https://www.defeatmalnutrition.today/resources

g. In May, EOEA published a “Malnutrition Awareness Toolkit” on its website and link to all resource materials which can be used to conduct future malnutrition screening awareness clinics (includes photos and press coverage of clinics held across the state May 13th – 20th 2019) https://spark.adobe.com/page/U0Da2N0MOpYgB/

h. In October, MGH intern Jorden Shute worked with commission members Helen Rasmussen, Amy Sheeley and Shirley Chao to submit a manuscript titled “Prevalence of Malnutrition and Frailty in Community-Dwelling Older Adults in the Massachusetts Older Americans Act Nutrition Program” to the Journal of Nutrition in Gerontology and Geriatrics (JNGG). It is currently under review.

i. In November, Perry Smizer, a Simmons University intern worked with Commission members proposed “Adopt a Neighbor – Nutritional Health Awareness” Campaign

(2018 Recommendation: Encourage all member agencies to publish and promote evidence-based malnutrition resources designed for older adults, care providers and professionals via websites, social media and printed materials such as newsletters).

The Commission had three meetings in 2019, the minutes of each meeting are as follows.

Meeting 1:
The MPC met on February 26, 2019 at the Executive Office of Elder Affairs.

Commission members reviewed that the mission statement is appropriate and relevant to its work: “The commission will be on the cutting edge of policy and be able to make a real difference in the lives of older adults who live in Massachusetts. We can also complement the important national work being done around raising awareness about malnutrition and its impact, particularly in older adults.”

Members also reviewed each of the recommendations made in the Commission 2018 Annual report and how they can be accomplished. Specific assignments were given to each commission member present.

Plans for a statewide malnutrition week to be held May 13th-May 17th 2019 were discussed, including clinics and education sessions with opportunities for press attendance. All members were encouraged to hold their own clinics or attend other events.

Discussion of various grants opportunities took place. Mary Giannetti reviewed grants available to non-profit agencies. A Commission member agency would have to apply on behalf of the commission and EOEA General Counsel would review grant details before application.

Commission members were encouraged to attend upcoming events:
• Massachusetts Academy of Nutrition and Dietetics (MAND) Legislative Event in Nurses Hall of the statehouse, March 18, 2019.
• Senior Spectacular hosted by Representative Betty Poirier (Commission member) on April 18, in North Attleboro. A malnutrition presentation and information table will be presented by commission members.
• Malnutrition Week Clinics May 13th-17th, 2019.

Meeting 2:
The MPC met for their second meeting of the year on July 25th, 2019 on the 21st floor of 1 Ashburton Place.

The Secretary of Elder Affairs Elizabeth C. Chen, PhD, MBA, MPH welcomed commission members and emphasized the importance of good nutrition for seniors to be healthy and continue to live in the community. She commended the work that was done during the Malnutrition Week events.

Speaker organized by Helen Rasmussen, Tufts University Research Dietitian, “Nutrition for Aging and the Later Years” was presented by Diane L. McKay, PhD, FACN, Director of the Graduate Certificate Program, and Assistant Professor at the Friedman School of Nutrition Science and Policy at Tufts University. Some key points of the presentation:

• The unique nutrition needs of older adults and the importance of a healthy diet to delay the onset of age-related chronic diseases.
• Four of the top 10 leading causes of death are diet related, however, less than 5% of the population adheres to diet policy recommendations.
• Specific conditions affecting older adults including osteoporosis, organ and immune function decline.
• Other changes impacting seniors include sarcopenia, decreased GI function, appetite, thirst, dental, cognitive decline as well as psychosocial changes.
• Polypharmacy and drug nutrient effects are an important consideration for the nutrition status of older adults.
• Certain dietary patterns can delay conditions common in aging, such as those that are plant-based (including the Mediterranean Diet, DASH, and MIND diets), as evidenced by the lifestyle habits of centenarians living in the “Blue Zones”. Some characteristics of Blue Zones include an environment that promotes sense of purpose, natural movement, strong social networks, and less stress. https://bluezones.com/2016/11/power-9/

ASPEN’s Malnutrition Awareness Week™ was presented by Kris M. Mogensen, MS, RD-AP, LDN, CNSC, Team Leader Dietitian Specialist, Department of Nutrition at Brigham and Women’s Hospital
• It is possible to become an ASPEN ambassador for Malnutrition Awareness Week™
• Events will include webinars by health care professionals including surgeons, dietitians, pharmacists and cover acute, long-term care, and home settings. Topics such as cancer, food insecurity, and multi-disciplinary, case-based interventions will be highlighted.
• Ms. Mogensen distributed buttons promoting the event and encouraged all Commission members to participate in events.

Statewide Malnutrition Screening Clinics Report presented by Jordan Shute, MS, Dietetic Intern at Mass General Hospital.
• 82 clinics were held at local Councils on Aging (COAs), health centers and OAA nutrition sites across the state May 13-20th 2019 and attended by 2,930 individuals
• Clinics included individual MST and Frail Scale screenings, presentations on recognizing and preventing malnutrition, free snack giveaways, recipe demonstrations and tastings, and referrals to additional resources
- Screening data were collected from a unique sample of mobile older adults who sought out nutrition information, many of whom participate in the congregate meals program.
- 82 (10%) of those screened were found at risk for malnutrition per the MST, 15 (18%) of these had been admitted to the hospital in the last 3 months.
- Of those screened with the frail scale, 99 (16%) were frail and 256 (41%) were identified as pre-frail. 23 (6%) of those screening as frail and pre-frail had been admitted to the hospital in the past three months.
- The findings are in line with literature suggesting that malnutrition in the community is 6-30%.
- Findings indicate that malnutrition is a serious issue in the community. The sample can only represent the people who attend nutrition sites and COAs. The Commission needs to raise awareness to the public and contact hard to reach seniors (e.g. rural).
- Findings indicate that it is important to address barriers to adequate nutrition, intervene early, and try to prevent progression of malnutrition and pre-frail from becoming frailty.

Attendees reviewed the new Older Adult Malnutrition Awareness and Prevention Week EOA webpage.

Diana Hoek from DPH announced completion of Malnutrition Awareness bookmarks which will be shipped to all OAA nutrition programs for distribution.

Meeting 3:
The MPC met for their third meeting of 2019 on November 17th 2019 on the 21st floor of One Ashburton Place.

Shirley Chao, PhD, RD, LDN, FAND shared the Massachusetts Meals on Wheels Association’s Kit Clark Award which was presented to the Malnutrition Commission in October.

PatientPing: Connecting Providers to Seamlessly Coordinate Patient Care by-Bobby Fredrickson and PriMalipeddu, Growth Leads from Northeast PatientPing,

Some key points:
- How this technology is being used to connect providers to coordinate patient care
- Currently 70 hospitals in Massachusetts (95%), 400 post-acute facilities, and 30 provider groups are part of the PatientPing network impacting over 2M patients.
- The technology can provide immediate notification of hospital admission and discharge as well as key information such as diagnoses and length of stay.
- This can allow community service providers such as ASAPS to identify and provide services to their consumers at highest risk of malnutrition. Information provided about the client by the ASAP can also be carried forward to the hospital and other participating providers.

Report of ASPEN’s Malnutrition Awareness Week™ Sep 23-27/2019 by Amy Sheeley, PhD, RD, LDN
- Commission members Shirley Chao and Amy Sheeley, along with Ethos nutritionist Alexandra Hill participated in an Abbot Health Care Institute podcast which was broadcast during Malnutrition Awareness Week™. The podcast discussed the work of the Commission as well as Malnutrition Awareness Week clinics which were held in May 2019 throughout Massachusetts.
- Nutritionists at twenty-two of the local nutrition programs screened just over 200 homebound seniors using the MST and FRAIL Assessment. Referrals to services such as MNT and SNAP were provided as appropriate. Over 30% of these homebound seniors were found to be at risk per the MST form compared to 10% identified at the clinic events. In addition, 45% were found to be prefrail compared to 41% at the clinics, and 39% were identified as frail compared to 16% at clinics. Approximately 15% scored at risk by both MST and Pre Frail while 26% scored for both MST and Frail. This suggests that homebound seniors in the community are in fact at a much higher risk of
malnutrition and frailty than those that are more mobile and should be targeted for education and interventions.

“Adopt a Neighbor- Nutritional Health Awareness Campaign” proposal was presented by Perry Smizer, MS, Simmons University Nutrition Intern 2019.

- Literature related to other awareness campaigns were reviewed, including social media campaigns conducted by the CDC targeting tobacco, prescription drugs, and HIV prevention.
- The Campaign goal is to raise awareness to those hard to reach seniors or/and their caregivers through social media connections. The specific goals are: reach 60% of 350 towns and anticipate that 80% of the participants will forward the message to a larger population (e.g. caregivers)
- A nutritional health/malnutrition awareness video and survey tool were presented.
- Pilot results in Stage 1 indicated that the video/survey tool had a response rate of 72% when sent to a sample of 79 nutrition interns and Nutrition Directors/Nutritionists (who forwarded the message to targeted audience). In Stage 2 it was sent to 350 Council on Aging (COA) Directors. To date, 153 responses have been received with 75% of them being COA directors and 11% others who received the forwarded message. The highest proportion of respondents (56%) were aged 51-64 with the next being ages 65-80 (20%). Approximately 36% of those responding had never heard this message before suggesting the importance of this tool and effectiveness of the delivery method.
- Commission members were asked to provide any additional feedback or suggestions regarding the video and survey tool.

Discussion of “Adopt a Neighbor” Campaign kickoff date and Annual Report

- It is expected that the campaign will commence early next year.
- Promotional materials such as a card with a QR code will need to be developed and printed.
- Each commission member will be asked to attend multiple community events to spread the message and distribute materials.
- Commission members will be asked for feedback on information to include in the Commission’s Annual Report before the end of the year.

**COMING YEAR ACTIVITIES (2020)**

- MPC will launch “Adopt a Neighbor” – A nutritional health awareness campaign to raise awareness statewide.
- MPC member will promote “Adopt a Neighbor” campaign at all public events.
- MPC members will encourage healthcare stakeholders to conduct Awareness Campaigns at state legislative gatherings and community events.
- MPC and EOA will continue to explore how PatientPing can be utilized to promote improved transition of nutrition care.
- MPC will encourage member agencies to publish and promote evidence-based malnutrition
- MPC will distribute and present their report to key stakeholders including: Massachusetts Councils on Aging, ASAPS/Nutrition Programs, Health Policy Commission, Massachusetts Academy of Nutrition and Dietetics, and the Massachusetts Hospital Association.

Suggested next steps for member agencies include the following:

**MA Executive Office of Elder Affairs (EOEA):**

- EOA will launch “Adopt a Neighbor” – a nutritional Health Awareness Campaign to raise awareness in all age groups statewide.
- EOA will work with the Governor’s office to designate a week in May of 2020 for “Older Adult Malnutrition Awareness Week”.
• EOEA will further promote and participate in national events such as ASPEN’s Malnutrition Awareness Week™ in September 2020. Materials regarding malnutrition in older adults will be distributed to the entire senior network of consumers and providers.
• EOEA’s website will continue to publish and promote evidence-based malnutrition resources to enhance the likelihood information will reach seniors, healthcare providers and caregivers.
• EOEA will gather available data around malnutrition prevention and treatment. Nutrition Programs will use the Malnutrition Screening Tool (MST) to identify at risk clients and offer MNT and other interventions as appropriate.
• EOEA will explore how best to facilitate collaboration between hospitals and the aging services network in MA regarding the value and role of home delivered meals in reducing hospital readmission.

Massachusetts Department of Public Health (DPH)
• DPH will help to coordinate “Older Adult Malnutrition Awareness Week” and participate in corresponding events.
• DPH will assist the MPC on both data collection and public awareness campaigns.
• DPH will work with the MPC to raise awareness about malnutrition in older adults throughout its bureaus, divisions and programs.
• DPH will disseminate the commission’s studies and findings to appropriate DPH programs to reduce barriers and health care costs as well as improve quality indicators and outcomes.

Massachusetts Department of Transition Assistance (DTA):
• DTA will continue its work to provide low-income individuals food assistance and a path to economic long-term self- sufficiency.
• DTA will continue to partner with EOEA and a working group of advocates to focus on initiatives to help elders access and ensure consumers receive the maximum SNAP benefits for which they are eligible.
• DTA and MCOA will collaborate with the 20 Councils on Aging that became contracted Outreach Partners through a federal reimbursement project, and will work to further expand these partnerships.
• DTA’s Senior Assistance Office will continue to meet the specific needs of the Commonwealth’s elder population with the dedicated phone line for elders that will directly connect them with a live case manager.
• DTA will commit to promote and attend the “Older Adult Malnutrition Awareness Week” events as SNAP benefits can help prevent malnutrition in older adults.
• DTA will include malnutrition information along with its Nutrition Education program (SNAP-Ed) on its website which highlights programming for elders.
• DTA will continue working on the SNAP senior medical deduction and Elderly Simplified Application Project (ESAP).

Massachusetts Department of Agriculture (MDAR):
• MDAR has identified opportunities to incorporate the Commission’s recommendations into existing programs and initiatives. MDAR will continue to collaborate with partner organizations to evaluate how to effectively integrate the recommendations into its programs.
• MDAR has committed to incorporating evidence-based malnutrition awareness information into The Senior Farmers’ Market Nutrition Program (SFMNP), nutrition education magazine. The program will also work with participating market managers to increase awareness of malnutrition and provide information on the resources needed to reduce it.
• MDAR will continue to collaborate with the Massachusetts Department of Transitional Assistance on the Healthy Incentives Program (HIP). The program provides a monthly reimbursement for SNAP
recipients to purchase fruits and vegetables. Approximately 50% of the families who have earned HIP reimbursements have included seniors.

**Aging Services Access Points Agencies (ASAPs) /OAA nutrition programs:**

- ASAP/OAA nutrition programs will promote “Older Adult Malnutrition Awareness Week” and participate in corresponding events.
- ASAP/OAA nutrition programs will support dissemination of materials regarding malnutrition in older adults provided by EOEA.
- ASAP/OAA Nutrition programs will develop and institute internal processes to implement EOEA-mandated MST screening and follow-up.
- ASAP/OAA nutrition programs will establish protocols to address needs of individuals identified as experiencing or being at-risk for malnutrition.
- ASAP/OAA nutrition programs will encourage outreach to local healthcare providers to raise awareness of malnutrition risk and MST screening and availability of ASAP nutrition services to address malnutrition.
- ASAP case managers and intake workers will receive basic training in identifying overt physical manifestations of malnutrition.
- Home Care consumers who are certified as nursing-facility eligible (ECOP and waiver) will be offered an annual nutrition consultation.

**Mass Association of Councils on Aging (MCOA)**

- MCOA will be hiring a “outreach/nutrition” staff member to implement its responsibilities for all initiatives.
- MCOA will make malnutrition one of their “key issues” in 2020 in order to reach a large number of seniors in the community.
- MCOA will attend “Older Adult Malnutrition Awareness Week” and participate in corresponding events.
- MCOA will publish evidence-based malnutrition prevention research on their internal website.
- MCOA will provide educational opportunities for Council on Aging and Senior Center staff to enhance their ability to provide malnutrition prevention information and effective programs to Massachusetts older adults.
- MCOA will include Malnutrition Prevention in their yearly conference that provides training on topics relevant to Councils on Aging, Senior Centers and other providers working with older adults.

**Massachusetts Academy of Dietitians and Nutritionists (MAND):**

- MAND will share the “Adopt a Neighbor” campaign video clip and printed materials raising awareness of inadequate nutrition to families, caregivers, and peers of seniors.
- MAND will encourage healthcare stakeholders to conduct ‘Adopt a Neighbor’ Awareness Campaigns at state legislative gatherings and community events.
- MAND will contribute to the work of MPC by reaching its members throughout the Commonwealth. The malnutrition week and its events will be promoted via the monthly blog and member list. The blog will be the primary channel to raise awareness among and call to action RD/LDNs. The aim is to implement nutrition prevention policies and strategies within their agencies.
- MAND will highlight PatientPing and encourage its use among members where appropriate.
- MAND members will be offered a list of malnutrition resources and website links via blog and at the Annual Nutrition Convention & Exposition (ANCE).
- MAND will highlight and/or distribute a list of evidence-based malnutrition research.
Jean Mayer USDA Human Nutrition Research Center on Aging (HNRCA) /Tufts University (Academic/Research organization)

- HNRCA will attend “Older Adult Malnutrition Awareness Week” and participate in corresponding events.
- HNRCA will work with other academic research organizations and MPC to make dietary policy recommendations, and offer trainings and education which will improve the nutrition status of older adults. These topics from their study results include immune function, vitamin and mineral absorption, physical capacity as well osteoporosis, cardiovascular disease, diabetes, cataracts and macular degeneration.
- HNRCA/ Tufts University will publish evidence-based malnutrition research as it comes available.
- HNRCA will also assist community organizations to conduct MNT outreach to treat malnutrition.

Brigham and Woman Hospital (BWH):
Malnutrition has a negative impact in the acute care setting. BWH is exploring participating in the Malnutrition Quality Improvement Initiative, in accordance with the Academy of Nutrition and Dietetics. A number of studies conducted at BWH have demonstrated how this problem directly affects members of the Commonwealth.

- Use BWH Malnutrition QI initiative as a best practice and encourage other hospitals to participate.
- Request data collection on malnutrition screening from hospitals as a baseline and also analyze to see if there are any disparities among certain groups, location where efforts should be focused. Continued collection of prevalence data can show change over time.

CLOSING
EOEA is grateful to the Legislature for its continued interest in the impact of malnutrition prevention research and education, and for creating the Commission on Malnutrition Prevention Among Older Adults to study methods to prevent and reduce malnutrition in the Commonwealth. With continued growth in the elder population, and the high cost of health care, MPC will continue to serve an important function by working with the Secretary of Elder Affairs to help improve nutrition among elders and reduce rising health care costs.