
What is Malnutrition?
Malnutrition occurs when we don’t get enough of the nutrients our body needs. Not feeling hungry, strict diets, problems chewing and swallowing, and chronic illnesses can often lead to malnutrition. Those who are unable to purchase or prepare healthy food may also be at risk for malnutrition. Malnutrition can cause older adults to have problems with:
- Weakness and being tired
- Problem healing wounds
- Loss of muscle and strength
- More falls and fractures
- More infections
- Having to be admitted to a hospital
- More medical cost
- Being unable to stay in the home (Hogan, 2019)

Who May Benefit from Malnutrition Screening?
Participants in the Older Americans Act (OAA) Senior Nutrition Programs (SNP), such as congregate meals and home-delivered meals, will benefit from the addition of malnutrition screenings.

Why Does Malnutrition Matter to SNPs?
In the 2020 reauthorization of the OAA: “Reduce malnutrition” was added as an additional purpose of the SNP and malnutrition screening was added to the OAA nutrition screening requirements (Whitmire, 2022). Additionally, individuals aged 60+ are at a higher risk for malnutrition and SNPs are able to effectively identify, prevent, and address malnutrition. Area Agencies on Aging (AAAs) can refer participants to additional community and medical resources.

How Can Malnutrition be Addressed by SNPs?
1. Perform malnutrition screenings.
   There are no federal requirements about how screenings should be performed, providing lots of flexibility (Whitmire, 2022).
   - The Malnutrition Screening Tool (MST) is the chosen tool of the Academy of Nutrition and Dietetics and can be performed by nutrition program staff. The MST consists of the following questions:
     1. Have you lost weight recently without trying?
     2. If so, how much?
   - The participants who are identified as high risk by the required nutrition screening questions should be assessed for malnutrition and referred to appropriate intervention services.
   - Risk for malnutrition can also be assessed by screening for social determinants of health.
   - Additionally, AAA staff and volunteers can identify risk factors and potential signs of malnutrition in participants they serve. Inform staff and volunteers of these risk factors and potential signs for malnutrition, including:
     - Poor appetite
     - Chronic disease
     - Side effects from medications
     - Poor dental health
     - Trouble with chewing or swallowing
     - Social isolation
     - Dementia
     - Low income
     - Changes in participants’ behavior
     - Changes in living situation
     - Medical changes
     - Other changes in conditions
   - Screening can occur as part of the registration process for congregate meals or home-delivered meals.
How Can Malnutrition be Addressed by SNPs? Continued

2. Identify the root cause and create a community care plan including goals and steps to achieve those goals (Hogan et al., 2019).

Provide and document referrals to services that address root causes. Appropriate referrals might include:

- Congregate and home-delivered meal services
- Nutrition education and counseling
- Falls prevention resources
- Assisted living services
- Transportation services
- Help with federal assistance applications (SNAP, Medicaid, etc.)
- Personal care
- Case management
- Social supports
- Food pantries

3. Establish a process for notifying a participant’s medical provider in the event of a positive screening.

The medical provider can then offer services such as:

- Further testing
- Specialist referrals
- Physical therapy
- Medical nutrition therapy

4. Monitor the participant’s progress.

- Establish regular contact with the participant.
- Follow up on a regular basis to check progress, provide encouragement and support, and provide additional referrals if necessary.

*For more information, details, and examples of topics discussed in this resource, see Addressing Malnutrition in Community Living Older Adults: A Toolkit for Area Agencies on Aging.

References

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