



April 13, 2021

National Quality Forum
Prevention and Population Health Endorsement Committee
1099 14th St NW
Suite 500
Washington DC 20005

Dear Prevention and Population Health Endorsement Committee,

On behalf of the Alliance of Wound Care Stakeholders (“Alliance”), I am pleased to submit comments in support of MUC20-0032, the Global Malnutrition Composite Score. The Alliance is a nonprofit multidisciplinary trade association representing physician specialty societies, clinical and patient associations whose mission is to promote evidenced-based quality care and access to products and services for people with chronic wounds. One area that is important to our members is the adoption of wound care related quality measures, which is why we are supportive of this measure.

Many studies demonstrate correlations between malnutrition and elevated needs for continued medical interventions, higher costs of care and increased patient safety risks. For example, malnourished hospitalized patients experience slower wound healing, higher risks of infection and longer LOS.^{1,2} Quality Improvement (QI) associated with a 36% increase in malnutrition diagnosis in targeted service lines (13.5% vs 18.4%, p-value<0.001, with the greatest significant increases observed in the general medical (10.8 vs. 16.25, p-value<0.001) and pulmonology (16.8 vs. 24.0, p-value=0.033) units. As many as 45% of patients identified as at malnutrition risk did not receive an RDN assessment, indicating a gap in patient nutrition care in some service lines.³

Malnutrition is a leading cause of morbidity and mortality, especially among older hospitalized adults. Hospitalized patients who are malnourished have a greater risk of complications, falls, pressure ulcers, infections, and readmissions, and experience 4 to 6 days longer length of stay. The endorsement and inclusion of MUC20-0032, Global Malnutrition Composite Score in the Hospital Inpatient Quality Reporting (IQR) program will ultimately improve patient care outcomes through standardized identification and treatment of malnutrition.

On behalf of the Alliance of Wound Care Stakeholders, we appreciate the opportunity to submit these comments in support of the adoption of MUC20-0032, Global Malnutrition Composite Score. Please contact me if you have any questions regarding our endorsement of this important measure.

Sincerely,

Marcia Nusgart R.Ph.
Executive Director

1. Barker L, Gout B, Crowe T, et al. Hospital malnutrition: prevalence, identification and impact on patients and the healthcare system. *Int J Environ Res Public Health* 2011;8:514–27
2. Pratt KJ, et al. Impact of an interdisciplinary malnutrition quality improvement project at a large metropolitan hospital. *BMJ Open Qual.* 2020;9(1)
3. Improving Malnutrition Diagnosis at an Academic Medical Center: A Nutrition-focused Quality Improvement Program – Society for Medical Decision-Making Annual Conference 2020.