

# Transforming the Nutrition Care Model for Infants with Cystic Fibrosis: a qualitative study of clinicians' perspectives

Thida Ong<sup>1</sup>, Sarah Bell<sup>2</sup>, Maria Britto<sup>3</sup>, Breck Gamel<sup>4</sup>, Sharon McNamara<sup>2</sup>, Bonnie Ramsey<sup>1</sup>, and Krysta S. Barton<sup>5</sup>

<sup>1</sup>University of Washington Department of Pediatrics

<sup>2</sup>Seattle Children's Hospital

<sup>3</sup>Cincinnati Children's Hospital Medical Center James M Anderson Center for Health Systems Excellence

<sup>4</sup>Children's Health Children's Medical Center Dallas

<sup>5</sup>Seattle Children's Research Institute

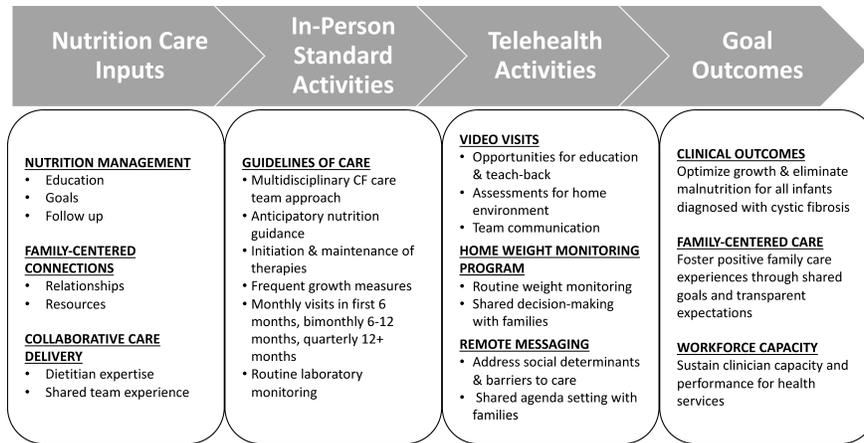
September 6, 2022

## Abstract

Clinician perspectives may inform health service strategies to meet optimal nutrition needs for infants with cystic fibrosis (CF). We conducted a qualitative study with CF-specialized dietitians (RDs) and physicians between July to December 2020 to characterize the current state of infant nutrition care delivery and organize input into a conceptual model to inform CF care program strategies. Among 42 participants, 36 completed survey responses and 6 completed interviews; 93% were RDs. Three global themes emerged in the current care model: nutrition management, family-centered connections, and collaborative care delivery. Within nutrition management clinicians emphasized providing education, setting goals, and maintaining adequate follow-up with families. Under family-centered connections clinicians expressed the need to foster relationships with families and link families to resources for assistance to social stressors such as food insecurity. Collaborative care delivery for clinicians interviewed was defined by sharing expertise from across the interdisciplinary team. Based on the timing of this study, clinicians reported compelling examples for various modes of telehealth and home weight monitoring to facilitate and support these domains of nutrition care, including potential advantages for education, supporting family needs, and communication. We integrate these themes to propose a conceptual model for integration of in-person and telehealth activities to enhance quality infant CF nutrition care delivery. Future implementation can refine this model through testing of practical telehealth interventions to optimize nutrition outcomes for infants with CF.

## Hosted file

9\_2\_22\_InfantNutritionCareModel\_submit.docx available at <https://authorea.com/users/506030/articles/584928-transforming-the-nutrition-care-model-for-infants-with-cystic-fibrosis-a-qualitative-study-of-clinicians-perspectives>



### Hosted file

Table 1.docx available at <https://authorea.com/users/506030/articles/584928-transforming-the-nutrition-care-model-for-infants-with-cystic-fibrosis-a-qualitative-study-of-clinicians-perspectives>

### Hosted file

Table 2.docx available at <https://authorea.com/users/506030/articles/584928-transforming-the-nutrition-care-model-for-infants-with-cystic-fibrosis-a-qualitative-study-of-clinicians-perspectives>

### Hosted file

Table 3.docx available at <https://authorea.com/users/506030/articles/584928-transforming-the-nutrition-care-model-for-infants-with-cystic-fibrosis-a-qualitative-study-of-clinicians-perspectives>