

Jack J Bell

List of Publications by Year in descending order

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Version: 2024-02-01

54
papers

1,046
citations

430874

18
h-index

434195

31
g-index

55
all docs

55
docs citations

55
times ranked

1012
citing authors

#	ARTICLE	IF	CITATIONS
1	Impact of room service on nutritional intake, plate and production waste, meal quality and patient satisfaction and meal costs: A single site pre&post evaluation. <i>Nutrition and Dietetics</i> , 2022, 79, 187-196.	1.8	14
2	Barriers and Enablers to Delegating Malnutrition Care Activities to Dietitian Assistants. <i>Nutrients</i> , 2022, 14, 1037.	4.1	2
3	Qualitative analysis of the implementation of a hospital room service in a large metropolitan hospital: foundations for transformation. <i>International Journal of Evidence-Based Healthcare</i> , 2022, 20, 199-208.	0.5	1
4	Diagnosis of overweight or obese malnutrition spells DOOM for hip fracture patients: A prospective audit. <i>Clinical Nutrition</i> , 2021, 40, 1905-1910.	5.0	12
5	More-2-Eat implementation demonstrates that screening, assessment and treatment of malnourished patients can be spread and sustained in acute care; a multi-site, pretest post-test time series study. <i>Clinical Nutrition</i> , 2021, 40, 2100-2108.	5.0	17
6	Restrictive diets in older malnourished cardiac inpatients: A cross§ional study. <i>Nutrition and Dietetics</i> , 2021, 78, 121-127.	1.8	5
7	Nutrition Support in Older Adults. <i>Perspectives in Nursing Management and Care for Older Adults</i> , 2021, , 65-77.	0.1	1
8	How to Sustain and Spread Nutritional Care Improvements. <i>Perspectives in Nursing Management and Care for Older Adults</i> , 2021, , 147-157.	0.1	1
9	Dietitian assistant opportunities within the nutrition care process for patients with or at risk of malnutrition: a systematic review. <i>Nutrition and Dietetics</i> , 2021, 78, 69-85.	1.8	8
10	Patient and hospital factors influencing discharge destination following hip fracture. <i>Australasian Journal on Ageing</i> , 2021, 40, e234-e243.	0.9	3
11	Supporting Nutrition Care in Older Adults: An Essential Component of "Best Practice"™ Nursing. <i>Perspectives in Nursing Management and Care for Older Adults</i> , 2021, , 79-85.	0.1	0
12	Overview of Nutrition Care in Geriatrics and Orthogeriatrics. <i>Perspectives in Nursing Management and Care for Older Adults</i> , 2021, , 3-18.	0.1	2
13	Untangling Malnutrition, Physical Dysfunction, Sarcopenia, Frailty and Cachexia in Ageing. <i>Perspectives in Nursing Management and Care for Older Adults</i> , 2021, , 99-113.	0.1	3
14	Why Don&t We Tube Feed Hip Fracture Patients? Findings from the Implementation of an Enteral Tube Feeding Decision Support Tool. <i>Geriatrics (Switzerland)</i> , 2021, 6, 12.	1.7	3
15	Delegation Opportunities for Malnutrition Care Activities to Dietitian Assistants" Findings of a Multi-Site Survey. <i>Healthcare (Switzerland)</i> , 2021, 9, 446.	2.0	3
16	<scp>Systematised, Interdisciplinary Malnutrition Program for impLementation and Evaluation</scp> delivers improved hospital nutrition care processes and patient reported experiences " An implementation study. <i>Nutrition and Dietetics</i> , 2021, 78, 466-475.	1.8	15
17	Identifying Low Value Malnutrition Care Activities for De-Implementation and Systematised, Interdisciplinary Alternatives" A Multi-Site, Nominal Group Technique Approach. <i>Nutrients</i> , 2021, 13, 2063.	4.1	4
18	The role of trained champions in sustaining and spreading nutrition care improvements in hospital: qualitative interviews following an implementation study. <i>BMJ Nutrition, Prevention and Health</i> , 2021, 4, e000281.	3.7	1

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19	Multidisciplinary Nutrition Care: Benefitting Patients with Malnutrition Across Healthcare Sectors. Perspectives in Nursing Management and Care for Older Adults, 2021, , 177-188.	0.1	3
20	Nutritional Care of the Older Patient with Fragility Fracture: Opportunities for Systematised, Interdisciplinary Approaches Across Acute Care, Rehabilitation and Secondary Prevention Settings. Practical Issues in Geriatrics, 2021, , 311-329.	0.8	8
21	The association of malnutrition with falls and harm from falls in hospital inpatients: Findings from a 5-year observational study. Journal of Clinical Nursing, 2020, 29, 429-436.	3.0	20
22	Carbohydrate counting accuracy in adults with cystic fibrosis related diabetes. Nutrition and Dietetics, 2020, 77, 508-514.	1.8	2
23	Interventions to prevent and treat malnutrition in older adults to be carried out by nurses: A systematic review. Journal of Clinical Nursing, 2020, 29, 1883-1902.	3.0	18
24	Comparison of the Charlson Comorbidity Index with the ASA score for predicting 12-month mortality in acute hip fracture. Injury, 2020, 51, 1004-1010.	1.7	34
25	Implementation of a very low calorie diet program into the pre-operative model of care for obese general elective surgery patients: Outcomes of a feasibility randomised control trial. Nutrition and Dietetics, 2020, 77, 490-498.	1.8	13
26	Clinicians as novice facilitators: a SIMPLE case study. Journal of Health Organization and Management, 2019, 33, 78-92.	1.3	9
27	“œl Wouldn’t Ever Want It” A Qualitative Evaluation of Patient and Caregiver Perceptions Toward Enteral Tube Feeding in Hip Fracture Inpatients. Journal of Parenteral and Enteral Nutrition, 2019, 43, 526-533.	2.6	9
28	Evaluating the concurrent validity of body mass index (BMI) in the identification of malnutrition in older hospital inpatients. Clinical Nutrition, 2019, 38, 2417-2422.	5.0	33
29	Impact of Facilitated Behavior Change Strategies on Food Intake Monitoring and Body Weight Measurements in Acute Care: Case Examples From the More-2-Eat Study. Nutrition in Clinical Practice, 2019, 34, 459-474.	2.4	5
30	Multi-site implementation of nutrition screening and diagnosis in medical care units: Success of the More-2-Eat project. Clinical Nutrition, 2019, 38, 897-905.	5.0	27
31	Nutrition Screening and Assessment in Hip Fracture. , 2019, , 723-744.		0
32	Even preoperative carbohydrate loading is too hard? Why RCTs should not be considered the gold standard for nutrition research in acute hip fracture: results of a feasibility study. International Journal of Clinical Trials, 2019, 6, 89.	0.2	0
33	Rationale and developmental methodology for the SIMPLE approach: A Systematised, Interdisciplinary Malnutrition Pathway for Implementation and Evaluation in hospitals. Nutrition and Dietetics, 2018, 75, 226-234.	1.8	36
34	The pressures of obesity: The relationship between obesity, malnutrition and pressure injuries in hospital inpatients. Clinical Nutrition, 2018, 37, 1569-1574.	5.0	64
35	The Sustain and Spread Framework: strategies for sustaining and spreading nutrition care improvements in acute care based on thematic analysis from the More-2-Eat study. BMC Health Services Research, 2018, 18, 930.	2.2	18
36	Improving the standard of nutrition care in hospital: Mealtime barriers reduced with implementation of the Integrated Nutrition Pathway for Acute Care. Clinical Nutrition ESPEN, 2018, 28, 74-79.	1.2	14

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37	Development of an "Enteral tube feeding decision support tool"™ for hip fracture patients: A modified Delphi approach. <i>Australasian Journal on Ageing</i> , 2018, 37, 217-223.	0.9	5
38	Malnutrition is independently associated with skin tears in hospital inpatient setting" Findings of a 6-year point prevalence audit. <i>International Wound Journal</i> , 2018, 15, 527-533.	2.9	21
39	Nutrition Care after Discharge from Hospital: An Exploratory Analysis from the More-2-Eat Study. <i>Healthcare (Switzerland)</i> , 2018, 6, 9.	2.0	11
40	Update on the Integrated Nutrition Pathway for Acute Care (INPAC): post implementation tailoring and toolkit to support practice improvements. <i>Nutrition Journal</i> , 2018, 17, 2.	3.4	23
41	More-2-Eat: evaluation protocol of a multi-site implementation of the Integrated Nutrition Pathway for Acute Care. <i>BMC Nutrition</i> , 2017, 3, .	1.6	21
42	Changing nutrition care practices in hospital: a thematic analysis of hospital staff perspectives. <i>BMC Health Services Research</i> , 2017, 17, 498.	2.2	44
43	Nutrition Screening and Assessment in Hip Fracture. , 2017, , 1-22.		1
44	Impact of malnutrition on 12-month mortality following acute hip fracture. <i>ANZ Journal of Surgery</i> , 2016, 86, 157-161.	0.7	48
45	General versus spinal anaesthesia and postoperative delirium in an orthogeriatric population. <i>Australasian Journal on Ageing</i> , 2016, 35, 42-47.	0.9	24
46	Effects of Anticoagulants on Outcome of Femoral Neck Fracture Surgery. <i>Journal of Orthopaedic Surgery</i> , 2015, 23, 29-32.	1.0	24
47	Concurrent and predictive evaluation of malnutrition diagnostic measures in hip fracture inpatients: a diagnostic accuracy study. <i>European Journal of Clinical Nutrition</i> , 2014, 68, 358-362.	2.9	43
48	Quick and Easy Is Not without Cost: Implications of Poorly Performing Nutrition Screening Tools in Hip Fracture. <i>Journal of the American Geriatrics Society</i> , 2014, 62, 237-243.	2.6	39
49	Multidisciplinary, multi-modal nutritional care in acute hip fracture inpatients " Results of a pragmatic intervention. <i>Clinical Nutrition</i> , 2014, 33, 1101-1107.	5.0	74
50	Developing and evaluating interventions that are applicable and relevant to inpatients and those who care for them; a multiphase, pragmatic action research approach. <i>BMC Medical Research Methodology</i> , 2014, 14, 98.	3.1	18
51	The Malnutrition Screening Tool versus objective measures to detect malnutrition in hip fracture. <i>Journal of Human Nutrition and Dietetics</i> , 2013, 26, 519-526.	2.5	24
52	Dedicated hip fracture service: implementing a novel model of care. <i>ANZ Journal of Surgery</i> , 2013, 83, 559-563.	0.7	27
53	Barriers to nutritional intake in patients with acute hip fracture: time to treat malnutrition as a disease and food as a medicine?. <i>Canadian Journal of Physiology and Pharmacology</i> , 2013, 91, 489-495.	1.4	62
54	Recurrent readmissions in medical patients: A prospective study. <i>Journal of Hospital Medicine</i> , 2011, 6, 61-67.	1.4	128