



Measuring the Quality of the Nutritional Care in your organisation

How good is your Trust or Care Home?

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BAPEN



Why has BAPEN developed a new measurement tool?

Background

- 30% of patients admitted to UK hospitals are malnourished¹ or at risk
- Patients who are malnourished have poorer clinical outcomes which improve markedly if proper nutritional care is given², yet nutritional care continues to be fragmented
- In part, this may reflect the lack to date of any means of measuring the quality of nutritional care, despite NICE issuing Guidance² and Quality Standards³ for Nutritional Support in Adults



“I understand first-hand the impact nutritional care has on many other areas of an individual’s health care. By implementing an effective monitoring process it will potentially have a positive impact on the patient’s journey throughout the whole healthcare system which is surely a good thing!”

Steve Brown, Secretary of PINNT

Problems identified in current approaches

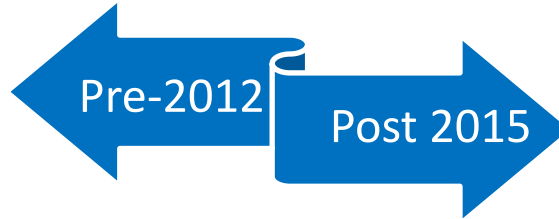
- 'Tick box' exercise
- Measurement lags behind other areas e.g. Cancer, VTE
- Heavy reliance of measuring nutritional screening using retrospective audits
- Little if any focus on
 - Accuracy of screening
 - Quality of the nutritional care plan developed
 - Monitoring of the implementation of the care plan (beyond poorly completed food record charts and fluid balance charts)
 - Lack of focus on re-screening
 - Poor measurement of patient experience of nutritional care
 - Even poorer measurement of nutritional outcomes
 - Poor understanding of the barriers (e.g. lack of equipment/nursing time)



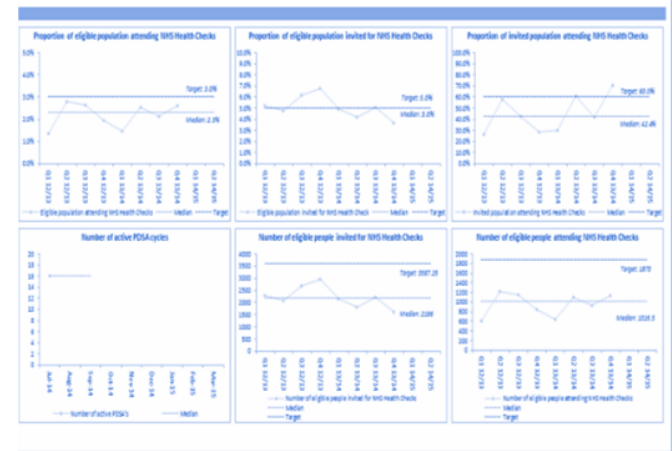
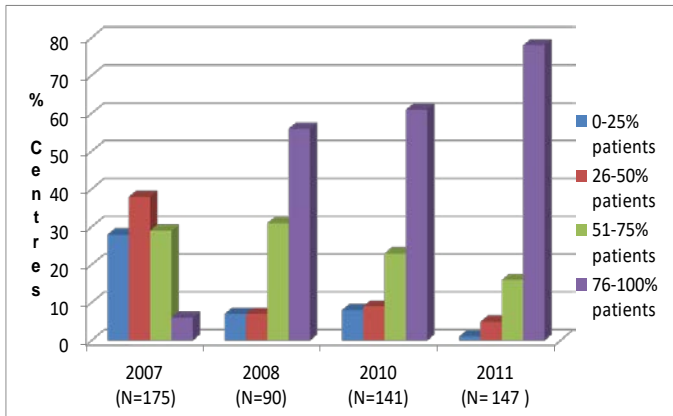
Why has BAPEN developed a new measurement tool?

The focus in healthcare is shifting from standalone audits to quality improvement informed by audits

- Data collection was paper based
- One week per year selected for national nutrition screening audit
- Transfer of data to electronic database by hand
- Analysis and written report time consuming



- Data collection via a web platform
- Opportunity for frequent data collection
- Scope for extensive analytics with a nutrition dashboard
- Instant charting and tracking of data over time using funnel plots, pareto charts and run charts



What does the new tool measure?

Organisational details	<ul style="list-style-type: none"> •Organisation name •Ward/unit •Speciality •Date of collection •Professional group undertaking the survey
Demographics	<ul style="list-style-type: none"> •Age group •Feeding route •Setting •Diagnosis
Nutritional care	<ul style="list-style-type: none"> •Screening (including score on admission) • Re-screening •Nutritional care plan – documented and implemented •Current weight •Unplanned weight loss •Height •Acute illness AND has there been, or likely to be, no nutritional intake for more than 5 days •Subjective criteria •Barriers to nutritional screening
Patient Experience questions	<ul style="list-style-type: none"> •Have you received all the food and drink or nutritional care you have needed? •Have you received assistance to eat and drink when you have needed help?

What are the benefits of using the new tool in your practice?

The first tool nationally available that will enable you to measure the quality of nutritional care delivered to your patients and to track improvements over time

Provision of robust assurance to your trust board, through the nutritional care dashboard

Point of care measures – facilitate delivering improvements whilst the patient is still in your care

It is free to all NHS and Social Care Organisations in the UK

Completely voluntary – you decide the frequency and scale of use

If used across an organisation will highlight areas of excellent practice and areas where improvements are needed

Contains patient experience questions, as well as screening, care planning and outcomes

Online e-learning modules to help interpret the data collected

Focus areas- the core dashboard

1. Proportion of surveyed patients able to answer who have received all the food and drink and/or nutritional care they have needed (Patient experience question 1)
2. Proportion of surveyed patients able to answer who have received all assistance to eat and drink they have needed (Patient experience question 2)
3. Proportion of surveyed patients screened on entry to the care setting ('MUST' on admission)
4. Proportion of surveyed patients re-screened at an appropriate interval ('MUST' rescreening)
5. Proportion of surveyed patients identified as being at risk of malnutrition on entry to the care setting (Patients at risk of malnutrition)
6. Proportion of surveyed patients who have lost more than 5% of admission weight whilst in care (Patients with >5% weight loss)

Nutritional Care national data collection weeks

- Week commencing 12th December 2016
- Week commencing 13th March 2017
- Week commencing 12th June 2017
- Week commencing 11th September 2017

Go to this afternoon's workshop