"Feed not Fast": A multidisciplinary systems approach to malnutrition in an acute hospital

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Status: Completed

Clinical redesign methodology was used to engage hospital staff across professions. Multidisciplinary nutrition action teams (working groups) were formed and priority areas identified based on evidence.

The hospital menu was reviewed for adequacy, an increase in protein and energy content and patient choice was implemented.

Evidence based procedures and systems were implemented in line with evidence including reduction of fasting and introduction of carbohydrate loading prior to surgery; fractured NOF nutrition pathway; menu improvement based on patient satisfaction and intake; improved malnutrition screening compliance and automatic High Protein/High Energy diets for those at risk.

Key nutrition indicators were evaluated regularly and reported to wards and the safety and quality unit using a nutrition indicators audit tool.

Results showed improved patient satisfaction with the menu, improved malnutrition screening compliance and improvements in oral intake.

Aims & Goals:

To enhance the nutritional intake, satisfaction and outcomes of our patients through improved multidisciplinary systems.

Evaluation/outcomes:

Aligning the hospital team with a multidisciplinary systems approach to nutrition care can improve malnutrition screening and diagnosis, patient satisfaction with foodservices and nutritional intake.

Clinical redesign and a multidisciplinary approach to developing and evaluating systems can assist in embedding change and implement evidence in acute care.

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