Post Discharge Nutrition Care for High Malnutrition Risk Patient (Pilot Program)

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Introduction
Malnutrition is a common consequence of disease in elderly patients. Both in hospital setting and in community setting, nutrition support has proven to be effective. However, it is unlikely that patients' nutritional status will have significant improvement during the short period of hospitalization. Therefore, malnutrition is becoming a common post-discharge problem. The aim of this pilot program is to provide continuous nutritional support in malnourished elderly patients after discharged.

Objectives
To provide post discharge nutrition care for malnourished elderly patients
Aims: 1) Reduce malnutrition complications. 2) Facilitate recovery after discharged. 3) Improve nutrition knowledge of patient/care-giver. 4) Improve communications and liaise with Community Outreach Services Team (COST) to recognize those high malnutrition risk patients in the community.

Methodology
Patients with Malnutrition Screening Tool (MST) score >= 3, from units of Medical & Geriatric, Surgical of Shatin Hospital, except terminally ill cases. Intervention: 1. Advised energy and protein enriched diet and recommended oral nutritional supplement during hospitalization. 2. Provided nutritional counselling for patients/caregivers/old age home (OAH) staff before or upon discharge. 3. Patients discharged home were referred to PWH-Dietetic outpatient for follow up. 4. Patients discharged to OAH were referred to PWH-COST for follow up. 5. Dietitians would communicate with PWH-COST to follow up OAH patients according to the “Post Discharge Nutrition Care Pathway- pilot program”.

Result
From 1 April 2014 to 31 March 2015, 6 patients attended follow up appointment at PWH-Dietetic outpatient. All of them showed improvement in appetite, 4 showed weight gain, and 2 showed weight loss due to disease conditions. From 1 Oct 2014 to
31 March 2015, 4 patients were followed up by PWH-COST. 3 of them showed weight gain and improvement in appetite. Dietitians and Community Outreach Services Team found that the “Post Discharge Nutrition Care Pathway- pilot program” to follow up malnutrition cases at OAH was beneficial and practical. Base on this pilot program findings and positive feedback, Shatin Hospital-Dietetic finalized the protocol on “Post Discharge Nutrition Care for High Malnutrition Risk Patient” and it was implemented in Feb 2015.