Enhancing malnutrition screening performance at North District Hospital through series of quality improvement initiatives

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Introduction
In 2013, NDH introduced protocol nutrition management care according to NTEC nutrition policy and ACHS EQuiP5 1.5.7 to ensure the nutritional needs of consumers / patients are met during their journey. During the annual evaluation on malnutrition screening compliance in 2014, we identified a significant dropped in the screening compliance compare to the previous year. According to ACHS recommendation on EQuiP5 1.5.7 and NTEC nutrition care policy, stakeholders from Multidisciplinary should collaborate to monitor the effectiveness of the nutrition care process and regularly conduct improvement initiatives to ensure nutrition care can be properly delivered to our patients during their hospital journey.

Objectives
Studies have proven staff engagement, education, and leadership are useful measures to improve malnutrition screening performance. Enhancements were introduced to improve the malnutrition screening compliance in a Multidisciplinary approach to improve the malnutrition service.

Methodology
The Dietetics Dept., Central Nursing Division, and Quality and Safety Dept. of North District Hospital introduced enhancements for the malnutrition screening service in the second quarter of 2015. Another audit of 150 inpatients was carried out in Nov 2015 to evaluate the effectiveness of the improvement initiatives. Enhancement initiatives introduced: 1. Communication of compliance performance to hospital staff at different levels. 2. Engagement of Multidiscipline stakeholders to improve malnutrition screening and care process. 3. Education session and refresher training to the frontline professional staff in a flexible approach (via e-learning and road show). 4. Monitor and evaluation of effectiveness of the enhancement measures.
Result
Enhanced service accessibility and safety through Improving malnutrition screening compliance from 83% to 91%: Malnutrition screening audit of 199 inpatients in 2014 identified that the compliance of completing Malnutrition Screening Tool screening within 48 hours upon admission was 83%, a 10% dropped comparing to the previous year performance. After introducing the improvement initiatives from Jun to Oct 2015, the screening compliance went up from 83% to 91% in Nov 2015 audit. Staff Communication and engagement, training to the frontline staff, and continue monitoring are effect measure for improving malnutrition compliance in hospital.