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Audits of nutrition screening tool completion rates on general medical and elderly care inpatients (2000 to 2007)

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A validated nutrition screening tool (NST) was launched on the general medical and elderly care wards of an acute hospital Trust in March 2000. Recently the Trust Nutrition Steering Committee made completion of the NST mandatory, to comply with NICE guidelines. Since October 2005, all nurses and health care assistants recruited to the Trust attend a mandatory induction programme which includes training by dietitians on NST completion. Furthermore, dietitians provide regular ward-based training sessions. All patients referred to the dietitian for nutritional support require a completed NST. The aim of this study was to determine if these training initiatives resulted in improved NST completion rates.

Audits were conducted on the general medical and elderly care wards in May 2000 (Audit 1), February 2003 (Audit 2) and June 2007 (Audit 3). During the audits, each ward was audited for one week. The end-of-bed charts of all patients were reviewed and the number of NST completed was recorded:

	Audit 1 (May 2000)	Audit 2 (February 2003)	Audit 3 (June 2007)	<i>P</i>
Number of wards	11	9	8	–
Number of patients	485	216	128	–
NST completed	184 (38%)	78 (36%)	41 (32%)	0.461*

* X² test.

The number of wards audited decreased over time due to bed-redistribution within the Trust, secondary to changes in length of stay. In all three audits the NST completion rate was similar, with considerable variation on different wards (Audit 1, 15–60%; Audit 2, 6–65%; Audit 3, 0–66%). However, one acute medical admissions ward consistently had the highest NST completion rate and one elderly care ward consistently had the lowest.

A questionnaire conducted in this Trust on thirty-four nurses⁽¹⁾ highlighted lack of knowledge as the major reason for poor NST completion rates and twenty-one (65%) nurses requested more education and training. Despite the Trust’s training initiatives, nutrition screening still appears to have a low priority with ward staff in this Trust. This study suggests that relevant training alone is insufficient to improve NST completion rates.

1. Carter L, Chowdhury S, Weekes CE & Emery PW (2005) *Proc Nutr Soc* **64**, 12A.