Nutritional Supplementation to Reduce the Risk of Malnutrition in the DSU

BACKGROUND
- Up to 50% of patients are malnourished at hospital admission, with more developing malnutrition during inpatient stay
- Malnutrition is associated with increases in LOS, deconditioning, readmission, and mortality
- Protein deficiency is further related to impaired skin integrity and delayed wound healing
- Nutritional supplements provided to patients can increase protein and caloric intake

LOCAL CONTEXT
- At project initiation some patients were receiving protein supplements with meals
- Overall poor intake of supplements at meal time

PURPOSE
- Identify patients who are malnourished or at risk of malnutrition on arrival and during hospitalization
- Provide nurse-initiated supplementation between meals to this population during DSU stay with a goal of reducing deconditioning and HAPI

METHODS
- Design: Evidence-based Quality Improvement
- Setting/Sample: DSU patients who are malnourished or at high risk of malnourishment (N=44)
- Procedure:
  - Meetings with key stakeholders (NPs, dieticians)
  - Education to RNs regarding protein supplementation, order supplements, administering during medication administration or at meals
  - At risk patients:
    - Braden Score of 18 or less
    - Admission malnutrition screen of 2 or greater
    - Patients with less than 50% intake of meals
- Chart audits to determine compliance

RESULTS
- 77% of patients had a Braden Score of 18 or less
- 75% of patients with a Braden Score of 18 or less had nutritional intake of <50%
- 17% of sample was identified as malnourished by admission screening - 100% received supplementation
- 77% of patients who had intake of 50% received supplementation
- 75% of patients who had a Braden Score of 18 or less, received supplementation
- 6% of patients (N=3) developed a HAPI - Braden Scores ranged from 12-15

DISCUSSION
- Charting changed related to COVID and EPIC, during COVID peak nutrition/malnutrition screening assessment held
- Change in practice and audits hindered during COVID peak
- Staff and key stakeholders required additional information on Pro-Stat which can provide additional protein with less volume

CONCLUSIONS
- Nutritional supplementation can be easily added to patient care
- Results demonstrate higher initiation of supplemental feedings for at risk patients, however additional improvement should be sought

REFERENCES
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