

Quality Account midyear progress report for Quality & Safety Group

Name of group	<i>Improving Nutritional Assessment</i>
Monitoring/meetings held.	1 and further planned Discussed as part of other routine meetings
Chair	Kiran Shukla. Service Lead Nutrition and dietetics
Summary of key outcome measures	<ul style="list-style-type: none"> • <i>Training needs identified for staff</i> • <i>Audit in progress to determine use of MUST in the community hospitals</i> • <i>Care Quality Commissioning outcome 5 compliance</i>
Key outcome measure results / progress made where data is not yet available	<ul style="list-style-type: none"> • MUST tool training which has been given to staff formally and informally • 2 days training for all nursing staff on Nutrition in September 2011 • Numbers of incidents relating to nutrition – 0 • Numbers of complaints & concerns relating to nutrition –0 • Compliance with key criteria from audit of nutrition policy (to be decided by group) – audit in planning
Actions outstanding/delayed	<ul style="list-style-type: none"> • To have one template on assessment which can be used for all patients on admission • Care plans to incorporate MUST scores • Care pathway for nutritional status of all patients • Promote Nutrition policy via training on specific sections • Quarterly newsletter will be produced by dietetic service for all staff