

MUST scores on Guiting ward

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Background and Problem

Guiting ward is a 34 bedded surgical ward specialising in vascular. The majority of patients have a chronic disease underlying their acute admission. Chronic disease is one of the high risk groups of patients at risk of malnutrition.

MUST scores should be recorded within 6 hours of their admission to the hospital, this is not being done, not only is good nutrition needed to promote wound healing it can also have an impact on length of stay and the risk of developing a hospital acquired pressure sore.

Aim

The aim of this project is to improve MUST score completion on admission to the ward by 20% by April 2018.

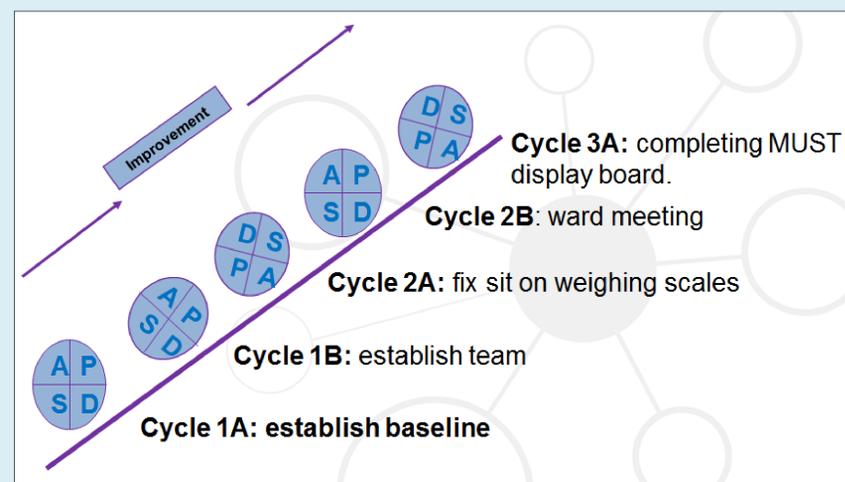
Driver diagram

Aim	Primary Drivers	Secondary Drivers	Change Ideas
Improve MUST completion by 20% by April 2018 on Guiting ward	Time	Staff on duty/priorities	Involve dieticians Information board Staff education – safety brief Involve all staff – safety brief
		Number of pts and time of admission	Establish team Review equipment
		Time taken to complete admission	Staff awareness (where to get help) Pt involvement and education Involve therapists – mobility aids Purchase/repair equipment
	Information/Knowledge	Easy to access	Allocate time to do task – specific team members highlighted daily Make info clear and easy to access
		Simple to use	Share ideas with team and staff – new ideas Early involvement and specific help/advice
		Knowledge of staff	Staff awareness of equipment available Take breaks – stay refreshed
	Equipment	Can pt get to it?	Discuss time management – best time to do a task NICE guideline
		Reliable	
		Available	
	Patient	Mobility	
		Compliance	
		Admission condition	

MUST Documentation (GPP)

Date: DD / MM / YYYY	Weight: kg	Height: m	Body Mass Index: kg/m ²
MUST nutritional assessment – Use with MUST pathway and Score WEEKLY			SCORE
Step one BMI score	BMI greater than 20 (greater than 30 Obese)		0
	BMI between 18.5 – 20		1
	BMI less than 18.5		2
If unable to weigh, use subjective criteria and MUAC measurement to estimate BMI category			
Step two % weight loss score	Unplanned weight loss of less than 5% within last 3-6 months		0
	Unplanned weight loss of 5-10% within last 3-6 months		1
	Unplanned weight loss of more than 10% within last 3-6 months		2
If unable to quantify and weight loss is suspected, use subjective criteria to estimate a score			
Step three Recent intake score	If there has been or is likely to be minimal or no nutritional intake for 5 or more days		2
Enter total score. Refer to pathway and implement plan accordingly			
Follow MUST pathway	Score of 0 – Low risk	Score of 1 – Medium risk	Score of 2 or above – High Risk.
Re-assess subjects identified at risk as they move through care settings. See The 'MUST' Explanatory booklet for further details and The 'MUST' Report for supporting evidence	0 Low Risk Routine clinical care Repeat screening weekly	1 Medium Risk Observe Start and follow nutrition support core care plan Start food record chart Offer Meritene (build up). Drinks if patient is eating less than half of meals Repeat screening weekly	2 or more High Risk Treat Start and follow nutrition support core care plan Start food record chart Offer Meritene (build up). Drinks twice daily between meals Refer to dietitians Repeat screening weekly
All risk categories Treat underlying condition and provide help and advice on food choices, eating and drinking when necessary. Record malnutrition risk category. Record need for special diets and follow local policy.			

Plan Do Study Act Cycles



Measures

Outcome – number of completed MUST scores.

Process – proportion of heights and weight recorded.

Balancing – number of patients on the ward.

Next Steps

Getting MUST display board on ward, continue to audit monthly, plan for discussion with Trakcare to take forward to other areas

Results

