



Creating Equality
in Nutritional Care

optimal
nutritional care
for all

Begin with the end in mind: Relevant data and end-points for Good Nutritional Practice

Mette Holst | Danish Nutrition Science Centre



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Mette Holst

Professor, PhD

Centre for Nutrition and Intestinal Failure

Aalborg University Hospital og

Department of Clinical Sciences, Aalborg University



AALBORG UNIVERSITETSHOSPITAL
- i gode hænder



AALBORG UNIVERSITET

DANSC

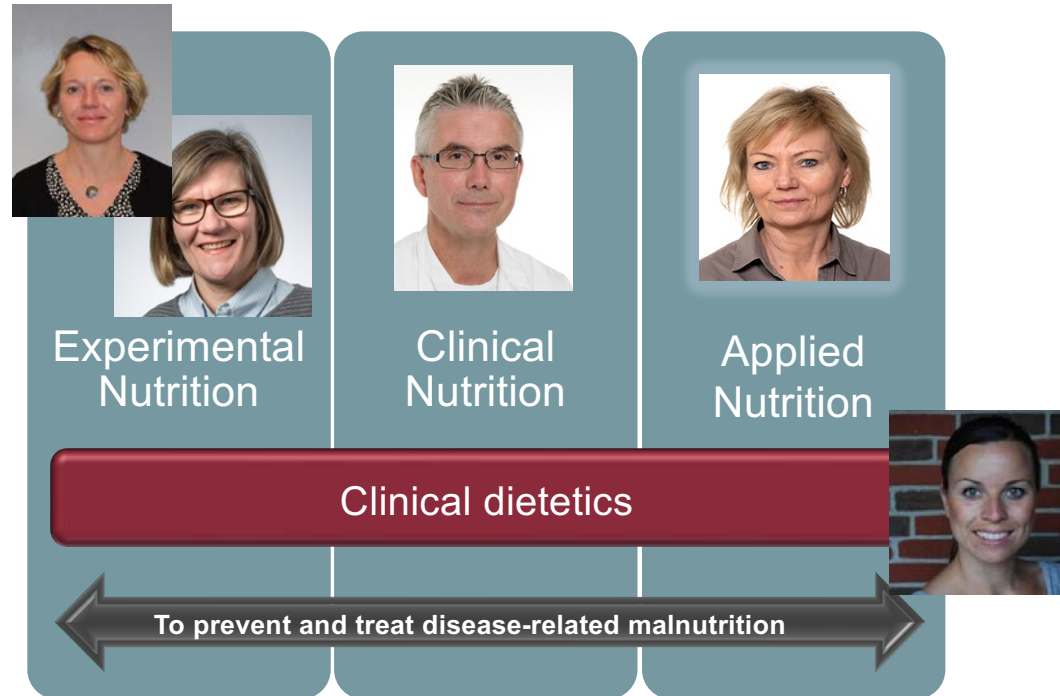
Danish Nutrition Science Center





DANSC

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Clinical endpoints in nutrition





The overall aim for nutritional care

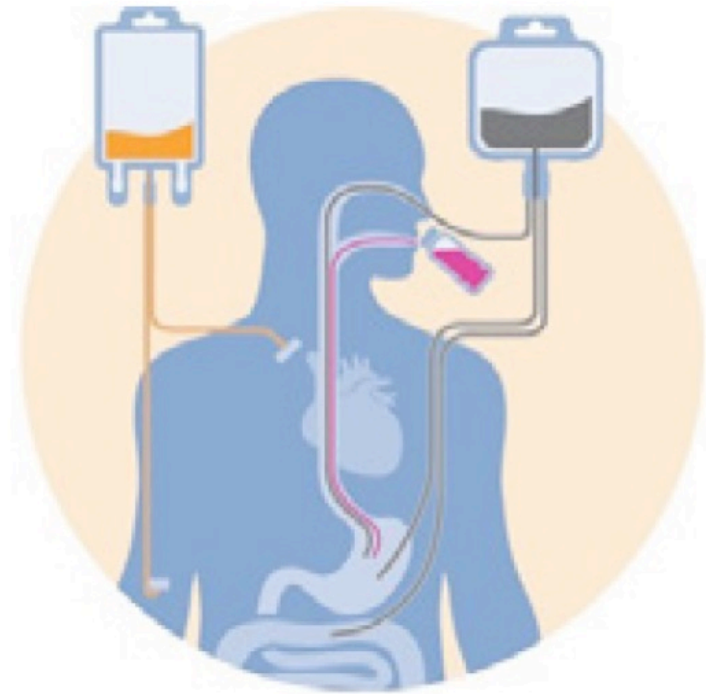
- To reduce the risks related to DRM
 - To secure patients the **best possible outcomes of our care**
 - To secure patients the **best possible transition to the next caregiver**





A safe patient journey calls for

- Sufficient nutrition intake- by all means



<https://www.isikrehaender.dk/indsatsomraader/ernaering/>



Process and result indicators

- Indicators are specific markers that measure the achievement of inputs, outputs, outcomes and impact
- **Result indicators** are quantitative variables that provide simple and reliable means to *reflect changes and measure achievement*
- **Process indicators** describe the important *processes that contribute to the achievement of outcomes*



Process and result indicators in hospital

Process		Result
Nutritional screening		Risk of DRM/ Not at risk
Nutritional assessment (in those at risk)		NIS (pain, nausea, dysphagia, GI implications...) (also specific means of action)
		Nutritonal requirements (Energy/Protein)
		Physical measures and function
Nutrition plan		
Serve adequate meals / nutrition		
Monitor:		
Treatment according to assessment (incl NIS)		
Protein-energy intake		E/P intake vs requirements %
Strict following and revision of plan		
Transition of timely and sufficient information		
		Clinical outcomes, more used in research and audits



Required for outcome achievement

- Organization and structure
 - Firm involvement of relevant stakeholders and leaders with impact
 - Relevant local and specific guidelines and instructions
 - Audits and follow-up on results



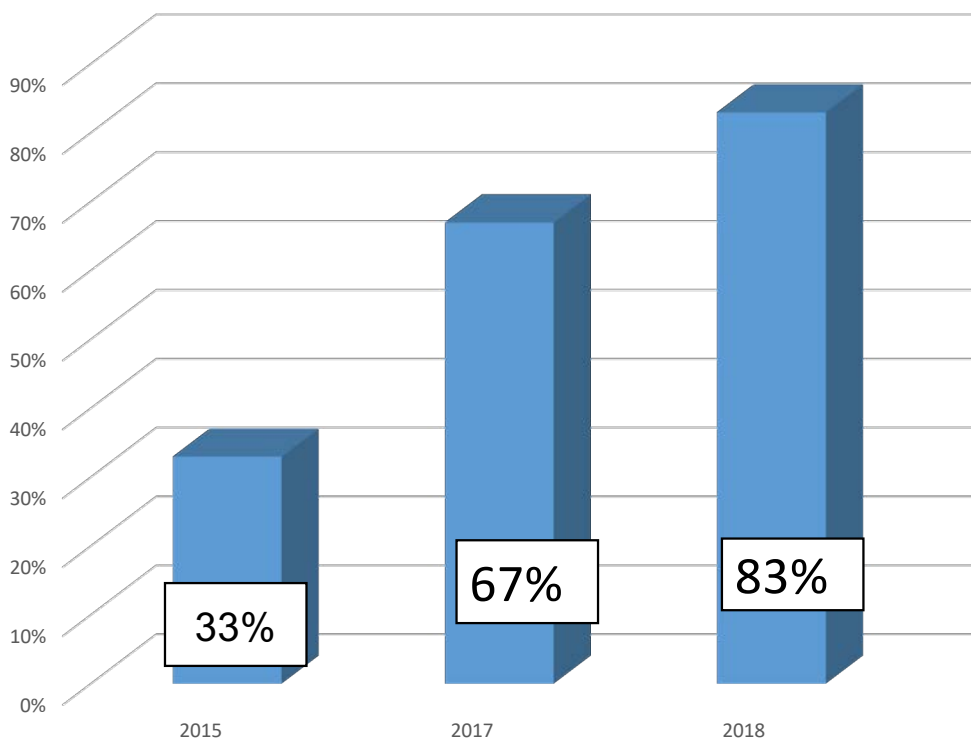
A good organization

- At Aalborg University Hospital we have implemented
 - Regional and hospital nutrition committee
 - Annual unannounced audits and follow-up with..
 - Nutrition support team including leader in all units
 - Development coordinator for nutrition covers all units
 - Dietitian unit covers all departments under the direction of a highly qualified dietitian, PhD
 - Research unit for nutrition (DANSC/ Centre for Nutrition and Intestinal Failure)

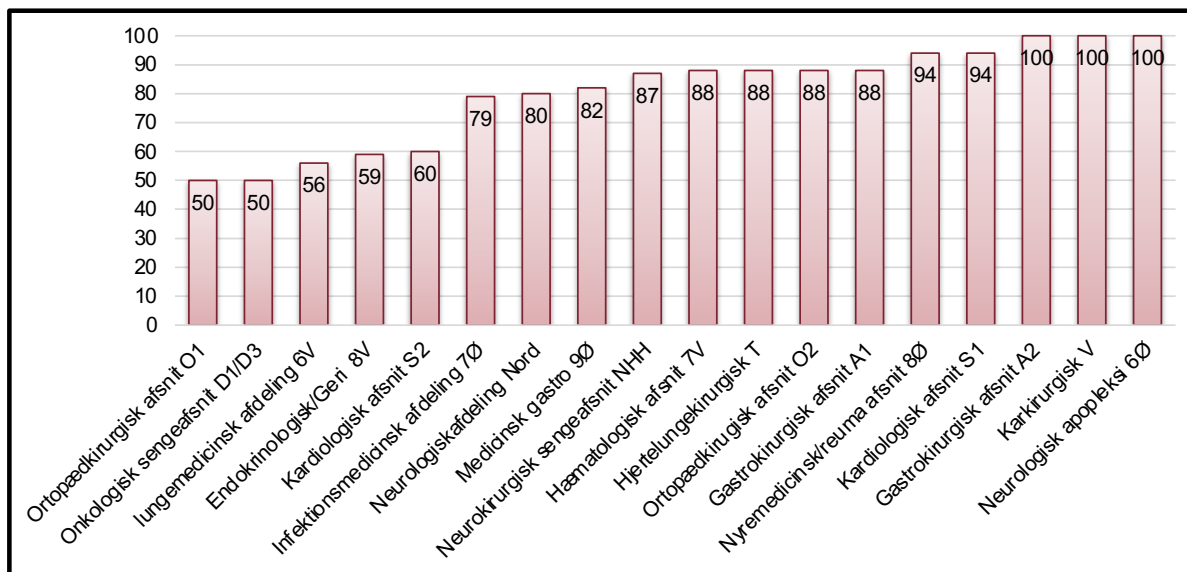


AUDIT 2018

Nutritional screening %



Monitoring nutrition intake in 74% of patients at nutritional risk
54% achieved 75% of energy req. at day 3
55% had 75% of protein req. covered at day 3





But- never turn your back on nutrition!!

- COVID-19
- great shortage of nurses



Alv

Thank you for listening

mette.holst@rn.dk



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