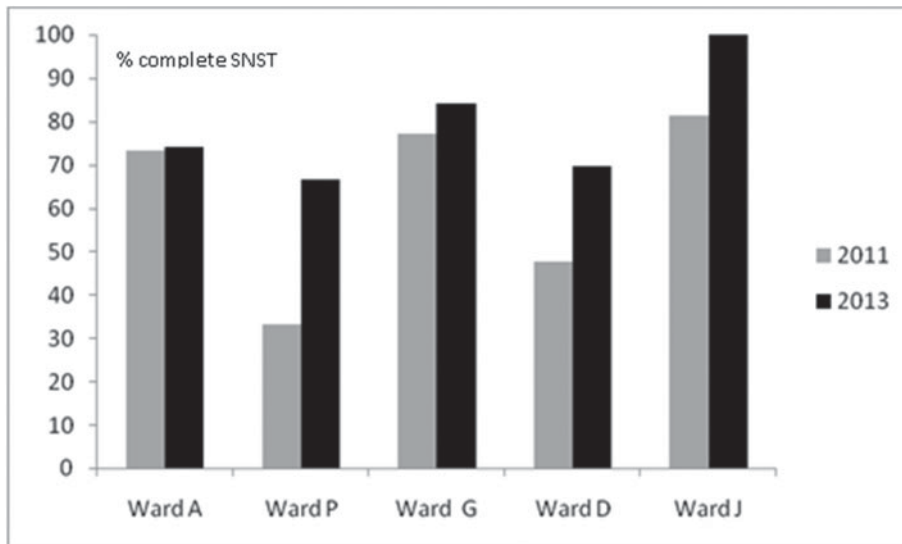


A re-audit to evaluate the use of nutrition screening tool in the National Spinal Injuries Centre (NSIC) at Stoke Mandeville Hospital

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Malnutrition is common in patients with spinal cord injuries (SCI)⁽¹⁾. National guidelines⁽²⁾ have set recommend standards for nutrition screening in patients with SCI. Previous audit was carried out in 2011 to assess the use of nutrition screening tool: Spinal Nutrition Screening Tool (SNST) and found that the use was improving⁽³⁾. The present audit aimed to assess (1) the use of SNST and; (2) if there is any improvement since the last audit. 103 adults (mean age: 49.8 years, SD: 17.3, 17.4% female) with SCI (53.4% tetraplegia; 61.2% complete SCI) were audited in during December 2012 to March 2013, on 5 in-patient wards. Data was collected by two trained professionals (nurse and dietitian) from individual patient notes using a standardised questionnaire. Eighty-three (80.5%) sets of notes have a SNST form. Seventy-five (72.8%) had their weight measured on admission, 72 (69.9%) had their height recorded and 77 (74.8%) had their SNST fully completed. At the time of audit, 50.6% (39/77) of patients were found at risk of undernutrition, 11.5% of patients had a body mass index less than 20 Kg/m², and 19.4% of patients were found to have eaten less than half of their meal. Only 42 (40.7%) of patients had repeated nutrition screening as per national standard. 25/39 patients at undernutrition-risk were referred to dietitians. The current audit showed the use of NST has improved significantly in both wards [2011 v. 2013: ward 1(A): 73.3% v. 74.1 (20/27); ward 2(P): 33.3% v. 66.7 (12/18)%; ward 3 (G): 77.3% v. 84.2 (16/19)%; ward 4 (D): 47.6% v. 69.6 (16/23); ward 5 (J): 81.3% v. 100 (16/16)%; and in the NSIC [2009 v. 2011 v.2013: 24% v. 63.4%, 80.5%, *p* < 0.001]. The present study identified the uptake of nutrition screening appeared to have shown improvement in the NSIC but with much still to be achieved. A nutrition steering group has been set up to monitor and evaluate the implementation of nutrition policy in SCIC on a continuing basis.



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