

## NDI SERVICE IMPROVEMENT PROJECT

2.12.2018

Intern Abby Walker – Facility Triboro Nursing and Rehabilitation Center

Steps – what need to be done	Actions – what did you do
<p><b>Identify the problem</b></p> <ul style="list-style-type: none"> <li>• Difficulty monitoring monthly changes in residents' body weights for gain and loss. (Significant Unplanned weight change).</li> </ul>	<ol style="list-style-type: none"> <li>1. Review weight report from Point Click Care. Select 50 residents with significant weight change x 1 month.</li> <li>2. Check clinicians weight reports for possible reasons for weight change example non-adherence to diet, decrease appetite, illness and hospitalization.</li> </ol>
<p><b>Collect data</b></p> <ul style="list-style-type: none"> <li>• Residents weights</li> <li>• Residents compliance</li> <li>• Weight Contributing factors</li> </ul>	<ol style="list-style-type: none"> <li>1. Collect resident's weights and medical history from point click care.</li> <li>2. Collect information on resident's compliance from PCC.</li> </ol>
<p><b>Analyze data</b></p> <ul style="list-style-type: none"> <li>• 28 Unplanned Significant weight change.</li> <li>• Day 1 compliance 94%</li> <li>• Day 2 compliance 44%</li> <li>• Day 3 compliance 53%</li> <li>• Second week compliance 53%</li> <li>• Third week compliance 53%</li> <li>• Fourth week compliance 64%</li> <li>• <b>Unplanned significant weight loss x 1 month - 12</b></li> <li>• <b>Unplanned significant weight loss x 6 months - 9</b></li> <li>• <b>Unplanned significant weight gain x 1 month - 5</b></li> <li>• <b>Unplanned significant weight gain x 6 month - 2</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Determined the number of residents with unplanned weight change.</li> <li>2. Calculate the percentages of compliance x 1 month.</li> <li>3. Calculate unplanned weight change x 1 month and x 6 months.</li> <li>4. Determine number of residents with weight change due to illness.</li> <li>5. Determine number of residents with unplanned weight change due to excessive intake.</li> </ol>
<p><b>Identify solutions / alternative</b></p> <ul style="list-style-type: none"> <li>• Improve oral intake and retard weight loss.</li> <li>• Increase in staff attention during meals.</li> </ul>	<ol style="list-style-type: none"> <li>1. Conduct In-service with nursing staff and direct care staff.</li> <li>2. Educate staff on identifying poor oral intake.</li> <li>3. Risk factors for weight gain and weight loss.</li> </ol>


<ul style="list-style-type: none"> <li>• Provide resident with additional food and fluids between meals.</li> <li>• Nursing staff should be retrained in the operation of the facility scale(s) and the importance of using a standardized procedure to ensure accurate weight values.</li> <li>• Nursing supervisor should observe staff while s/he is conducting residents' weights to ensure that standardized procedures are being followed consistently and weight values are being recorded accurately.</li> <li>• Resident weights must be entered in PCC individually to be able to make comparison with previous weights.</li> </ul>	<ol style="list-style-type: none"> <li>4. Stress communication among clinicians and nursing staff.</li> <li>5. Recommend engineering department to calibrate scale on a regular basis.</li> <li>6. Conduct annual weight refresher.</li> </ol>
<p><b>Develop a plan</b></p> <ul style="list-style-type: none"> <li>• A standardized weighing protocol should be used to assess residents' body weight monthly.</li> <li>• Residents should be routinely weighed on the same type of scale.</li> <li>• Residents should be routinely weighed at the same time of day each month.</li> <li>• Residents should be routinely weighed in their bed clothes to ensure accurate body weight or avoid heavy clothing.</li> </ul>	<ol style="list-style-type: none"> <li>1. Post weight policy in nursing station on each floor.</li> <li>2. Ensure that staff follow the standard weight protocol each time residents are weighed.</li> <li>3. Post reminder at weighing station to remove additional clothing such as socks, hats and shoes before weighing.</li> <li>4. Recommend staff to pour supplements in cups so staff have a good idea of how much supplement residents are consuming.</li> </ol>
<p><b>Conduct the plan/ changed need</b></p> <ul style="list-style-type: none"> <li>• Weigh resident 3 times consecutively.</li> <li>• Day 1, 2 and 3 and once each month.</li> </ul>	<ol style="list-style-type: none"> <li>1. Review weight procedure monthly or quarterly.</li> <li>2. Encourage staff to review weight procedure on a regular basis.</li> <li>3. Provide education and counseling on significant weight change.</li> <li>4. Monitor residents closely that have significant weight change.</li> </ol>
<p><b>Evaluate the Outcomes</b></p> <ul style="list-style-type: none"> <li>• Determine how many time residents weight change significantly by 5-10% in a month.</li> </ul>	<ol style="list-style-type: none"> <li>1. Make weight comparison, compare weights pre- and post-service improvement.</li> </ol>

**TRIBORO CENTER  
DEPARTMENT  
SIGNIFICANT/UNPLANNED WEIGHT  
GAIN/LOSS REPORT  
January 2018**

Unplanned Significant weight loss 1 month	12
Unplanned Significant weight loss 6 months	9
Unplanned Significant weight gain 1 month	5
Unplanned Significant weight gain 6 months	2

Jan-18		Significant change Monthly Weight Report 2018			
Resident Name	Date onset	Significant weight loss/gain	% age change	time frame: 30day, 90day or 180days	
10	[REDACTED]	loss	28.8	180	
	[REDACTED]	loss	15.4	30	
	[REDACTED]	loss	16.1	180	
	[REDACTED]	loss	11.9	180	
11	[REDACTED]	loss			
	[REDACTED]	gain	18.5	180	
	[REDACTED]	gain	55.1	30	
	[REDACTED]	loss	22.3	180	
	[REDACTED]	loss	8.6	30	
12	[REDACTED]	loss	14.6	30	
5	[REDACTED]	loss	16.1	180	
	[REDACTED]	loss	16.1	30	
	[REDACTED]	gain	18.8	30	
6	[REDACTED]	gain	10.1	180	
	[REDACTED]	loss	9.7	30	
	[REDACTED]	loss	9.4	30	
7	[REDACTED]	gain			
	[REDACTED]	loss	9.7	30	
	[REDACTED]	loss	9.4	30	
	[REDACTED]	loss	5.7	180	
	[REDACTED]	loss	5.1	30	
8	[REDACTED]	loss	14.4	30	



Center		 <b>Intervention</b>	
Contributing factors	Weekly weights initiated	If No Why?	change
hospice/ comfort care		Hospice	Supplement initiated
hemodialysis	yes		Other:
diuretic therapy	yes		Other:
Cancer	yes		Supplement initiated
hospice/ comfort care		Hospice	Supplement initiated
excessive intake			counsel
excessive intake			counsel
Cancer	yes		Supplement initiated
progression of disease	yes		Supplement initiated
Inadequate intake	yes		Supplement initiated
progression of disease	yes		Supplement initiated
hemodialysis	yes		Supplement initiated
diuretic therapy	yes		counsel
hemodialysis	yes		Supplement initiated
hemodialysis	yes		Supplement initiated
excessive intake			counsel
Cancer	yes		Supplement initiated
Inadequate intake	yes		Supplement initiated
Cancer	yes		Supplement initiated
Inadequate intake	yes		Supplement initiated
Inadequate intake	yes		Supplement initiated

