

# Patient Safety Inspiring a Team Approach to Nutrition Education

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<p><b><u>Background</u></b>          Nutrition is an integral part of a multi-disciplinary approach to patient care. Patients have complex nutritional needs, and creating standardized processes to provide appropriate nutrition has proven difficult. Residents and nurses do not often receive formal education on breast milk or formula fortification or preparation and errors in nutrition can cause significant harm to patients.</p>	<p><b><u>Goals of the Curriculum</u></b></p> <ol style="list-style-type: none"> <li>1. Prevent errors in nutrition ordering and preparation from reaching patients.</li> <li>2. Improve foundational nutrition education for residents and nurses.</li> <li>3. Increase awareness of currently available nutritional resources.</li> </ol>	<p><b><u>Program Objectives</u></b></p> <ol style="list-style-type: none"> <li>1. Encourage open communication between multiple disciplines (nurses, dietitians, physicians, patients, families).</li> <li>2. Improve patient safety through standardization of fortified breast milk and formula ordering and preparation.</li> <li>3. Identify other potential opportunities to improve both patient safety and staff education.</li> </ol>
<p><b><u>Resident/Fellow Learning Objectives</u></b></p> <ol style="list-style-type: none"> <li>1. Recognize the complex work flow involved in patient nutrition.</li> <li>2. Recognize the variety of resources available to assist with complex nutritional decision-making.</li> <li>3. Understand the role of the pediatric trainee in providing complex nutritional care in a team setting.</li> <li>4. Understand indications for deviation from standardized protocols.</li> <li>5. Demonstrate knowledge by ordering fortified breast milk and formula through newly standardized electronic order set.</li> </ol>	<p><b><u>Educational Strategies/Activities</u></b></p> <ol style="list-style-type: none"> <li>1. Presentations.</li> <li>2. Multidisciplinary work groups.</li> <li>3. Nutritional references created for distribution.</li> <li>4. Process improvements and standardization.</li> </ol>	<p><b><u>Learner Assessment</u></b></p> <ol style="list-style-type: none"> <li>1. Resident surveys of confidence levels before and after educational sessions.</li> <li>2. Observation of ordering with real time mentoring following introduction of new electronic order set.</li> <li>3. Review of placed orders following introduction of new electronic order set.</li> <li>4. Tracking safety events and precursor safety events through hospital error reporting system.</li> </ol>
<p><b><u>Program Evaluation</u></b></p> <ol style="list-style-type: none"> <li>1. Resident feedback from survey results.</li> <li>2. Tracking of patient safety events and precursor safety events over time.</li> </ol>	<p><b><u>Implementation</u></b></p> <p>Collaborators were comprised of stakeholders involved in patient nutrition (nurses, dietitians, physicians, hospital administrators, &amp; safety officers).</p> <p>One standardized order set was created to attempt to meet nutritional needs for all hospitalized patients ranging from preterm infants to young adults with enteral feeding tubes, without disrupting successful elements of pre-existing order sets.</p> <p>Presentations were created to teach residents basics of nutrition, fortification, and ordering through newly standardized order set. Educational resources were created for continued reference.</p>	<p><b><u>Lessons Learned</u></b></p> <p>Fortification of formula and breast milk can be confusing, but with appropriate resources and stakeholders present, ultimately an approachable problem.</p> <p>It is important to identify appropriate stakeholders for improvement and allow all voices to be heard.</p> <p>To err is human, and there is a role for changing the system to minimize the occurrence of errors reaching patients.</p> <p>Residents have the capability to make dramatic changes in a hospital system when appropriately supported and encouraged.</p>