

OC-003

ARE NUTRITION SUPPORT TEAMS USEFUL? RESULTS FROM THE NCEPOD STUDY INTO PARENTERAL NUTRITION

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Introduction Recent emphasis has been placed on the importance of nutrition support teams (NSTs) in good nutritional care and management of patients on parenteral nutrition (PN). Evidence regarding their benefit, however, is surprisingly sparse, with the absence of large trials to evaluate their effectiveness. In 2010, the National Confidential Enquiry into Patient Outcome and Death (NCEPOD) published its report 'A Mixed Bag', which evaluated the care given to patients receiving PN in England, Wales, Northern Ireland and the Channel Islands. It found that only 19% of inpatients received care with respect to their PN that was considered good. Furthermore, there was evidence of inappropriate PN use, prescribing errors, inadequate monitoring and a high rate of avoidable metabolic complications. The aim of this sub-analysis was to evaluate the effectiveness of NSTs in management of this particular cohort of patients.

Methods All patients in England and Wales who received PN between 1 January and 31 March 2008 were identified from pharmacy records. Two patients per consultant were identified. A clinical questionnaire was sent to be completed by the consultant for each patient, and then returned with a copy of the case notes. The questionnaires and case notes were then analysed by the Advisor group consisting of consultants, dieticians and pharmacists.

Results Only 60% of responding hospitals had an NST. Of those teams, only 43% saw PN referrals. 53% of NSTs had complete autonomy in ordering/vetoing PN. Only half the patients within the study had an NST involved in the decision to commence PN, whereas PN composition was determined

by the NST in 80% of cases. Patients who had an NST involved in their nutritional management were almost twice as likely to receive good care as those without NST support (27.4% vs 15.2%). Likelihood of 'less than satisfactory care' with respect to PN management was much lower in those with NST involvement (7% vs 11.5%).

Conclusion These results demonstrate that involvement of a NST substantially improves quality of care with respect to PN management, although even with NST involvement there were still more than 70% cases where nutrition care was considered sub-optimal. There is currently enormous variation in the composition of NSTs, with 9% not having a doctor as part of the team. There is also wide variation in the function of the NST in different regions, which may explain why previous studies have shown conflicting results with respect to the effectiveness of NSTs in improving overall nutrition care. Perhaps standardisation of the composition and role of NSTs would be beneficial in order to truly evaluate their role in improving overall nutrition management.

Competing interests None.

Keywords nutrition support team, parenteral nutrition.

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