

Issue	Actions required or undertaken	Responsibility	Date
Outcome 5: Meeting Nutritional needs			
(1) Red Tray system in place but delays with support for patients who required assistance with meeting their nutritional needs	Red Tray system is in place but the support that this identifies needs to be fully applied on each occasion.	Ward managers	June & ongoing
	Ward managers to assess each day the number of patients who require support and gain evaluation through the handover on any delays and resource issues that may impact on meeting patient's needs in a timely manner.	Ward managers	Daily
	Matrons and ward managers to work together on the Quality rounds to talk to patients and their visitors to evaluate the support and timeliness of support for their nutritional needs as well as the choice provision.	Ward managers and Matrons	Monthly from June '11
(2) One person's care plan identified that they needed encouragement with eating but did not state what or why.	Nutritional assessments on admission need to be backed up with a clear Care plan outlining needs	Ward managers and Matrons	Monthly
	Quality rounds and checks need to include the evidence of a care plan in place for all patients assessed as medium and high risk	Matrons/ Senior Nurses	Monthly
(3)(a) Patient who was vegetarian and had swallowing difficulties was offered meat and an alternative that was not conducive to swallowing difficulties	Ensure that for any patient with nutritional medium and high risks assessed on admission have a comprehensive care plan outlining what support needs to be provided.	Matrons/ Senior Nurses	Monthly

(b) Care plan did not include dietary preferences	Dietary preferences must be included within the plan of care		
(4) Evidence that people were not able to eat their meals without interruption: le Evidence of Drs rounds & medicine rounds during the meal times as well as electricity testing being undertaken.	<p>Working group formed to develop the operational requirements and framework for Protected meal time process to be effectively applied.</p> <p>Pilot process to be applied over a two month period in 4 ward areas (both sites) to refine the operational process and provide audit & feedback to enhance Trust wide roll out.</p> <p>Operational framework to be ratified by Hospital Executive Committee to ensure Centre Chiefs and Executive are providing full endorsement to the Protected meal time requirements across all Depts</p> <p>Protected meal time policy to be ratified within the Trust from the draft currently available.</p> <p>PEAT team to include a prospective audit through the monthly programme which will include patient representatives who can test out this standard</p>	<p>Head of Nursing</p> <p>Head of Nursing</p> <p>Chief Nurse</p> <p>Head of Nursing</p> <p>Facilities manager</p>	<p>June '11</p> <p>End June to end August '11</p> <p>Beg September '11</p> <p>End September '11</p> <p>September '11</p>
Food and Fluid chart completion could	Quality rounds by Ward managers and Matrons	Head of Nursing	In place since

