

# Serving Up a New Recipe for Nursing and Nutrition Services collaborate to



Under the old system, delivery of meal trays to patient rooms was often delayed because nurses and clinical associates were juggling tray delivery with other patient needs. Typically, it might take a clinical associate up to 30 minutes to deliver six trays. Hosts and Hostesses now deliver meals to about 60 percent of patients, shaving around 25 minutes off the previous average delivery times.

“We work in teams of two to pass trays, and it’s our job to be efficient and to provide good customer service,” Matousek explained. “We’re able to answer questions about the food, help patients use the Skylight ordering system, fix problems more quickly, and we can help people understand special diets ordered by their doctor.”

Nurses and clinical associates still deliver meals to patients with certain medical requirements, such as those with swallowing problems who require thickened liquids and those who need mealtime insulin. A magnet system was developed for nurses to clearly communicate meal delivery duty: a green magnet on a patient’s door signals that the tray can be delivered by Nutrition Services, while a red magnet means meal delivery needs to be handled by nursing staff. Nurses and clinical associates also pick up trays after meals and record the amount of food consumed.

The new system was piloted on the Orthopedics unit in February and was rolled out to the other units over the following two months. In addition to providing more efficient meal delivery, one of the biggest benefits of the new

Geoff Matousek had worked behind the scenes in the Nutrition Services department at Shawnee Mission Medical Center for five years when he was tapped to try something new. Starting in February, he and several of his coworkers took on a challenging but rewarding new role as Hosts and Hostesses, delivering meals directly to patients.

Matousek’s new role is part of a partnership between the Nursing Department and Nutrition Services that is focused on improving meal delivery while freeing up nursing staff to spend more time on patient care.

“Food can be comforting and familiar in an uncertain environment,” said Susan Larcom, MBA, RD, Director of Nutrition Services. “Our goal is for meals to be delivered in a timely manner, so that the food is hot and fresh and patients aren’t waiting longer than necessary.”

# Patient Satisfaction

## improve meal delivery

system is improved service recovery, which is the ability to respond to problems and special requests at mealtime, whether it's providing a requested condiment or replacing an entire meal. Host and Hostesses are also able to contact a dietician if they encounter questions or have concerns about a patient's diet.

"Our Hosts and Hostesses know how to fix small problems that can really improve patient experience," Larcom said. "In fact, some patients will ask a Host or Hostess about an issue with their meal that they might not mention to a nurse, which gives us a chance to make patients happier."

Hosts and Hostesses were selected from existing staff and went through comprehensive training that stressed the importance of their new role while covering a wide range of topics, including how to present meals in a positive manner, how to help patients order meals through the Skylight system, and how to respond to comments and questions. Training also covered topics unique to serving food in a hospital setting, such as infection control, special diets and HIPAA rules about patient confidentiality.

"Trainees took two hours of classroom instruction, followed by hands-on training in the Zamierowski Simulation Center," explained Kevin Briggs, MHSA, BSN, RN, Professional Development Specialist. "We had them

deliver meals to three patient rooms in a series of scenarios developed to test classroom knowledge, from easy to challenging."

Some of the training scenarios purposely created conflicts to ensure that the Hosts and Hostesses were alert to potential conflicts and safety issues, such as encountering a green magnet on the door of a patient receiving thickened liquids. The simulations were as realistic as possible, including using real food and volunteer nurses and dieticians who posed as patients.

"This is a great example of disciplines working together to meet patient needs," said Sheri Hawkins, RN, MS, MBA, Vice President and Chief Nursing Officer. "Developing this new system required some big changes, but it's been worth the effort. Patients really like the friendly, professional meal service provided by our Hosts and Hostesses, and nurses have more time to focus on patient care."



## Teaming up to tackle hypoglycemia

Last summer, the Diabetes Center at SMMC launched a Hypoglycemia Initiative focused on improving mealtime insulin delivery.

"If insulin delivery and food consumption aren't timed correctly in patients with diabetes and some other conditions, they can suffer from hypoglycemia, which is when the blood sugar drops too low," explained Sandie Anderson, ARNP-BC, CNS-BC, Manager of the Diabetes Center. "Our goal is to effectively manage each patient's blood glucose to avoid low blood sugar, which can be stressful and dangerous."

The recent creation of the Host/Hostess role has further bolstered this ongoing effort to reduce incidences of hypoglycemia. About 60 percent of meals are now delivered by the Nutrition Services staff, allowing nurses and clinical associates to focus on meal delivery to patients with special medical requirements.

"We've reduced the incidence of low blood sugar associated with insulin delivery by 50 percent," Anderson said. "This is a direct result of better coordination and communication between nurses, clinical associates and Nutrition Services staff."