



Quality Improvement Project

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Background

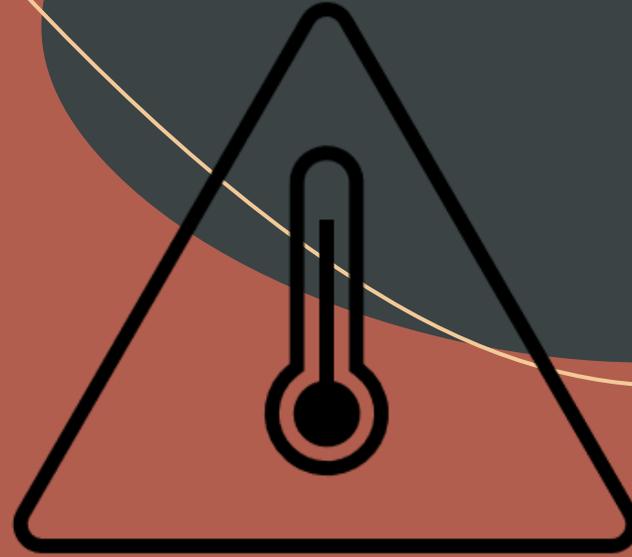
Freeman West

Joplin, Missouri

600 patients daily –
room service

Problem (plan)

- Discussion with preceptor, patient services employees, patients themselves, and dietitians concluded that the **main problem is patient dissatisfaction with the temperature and timing of meals.**



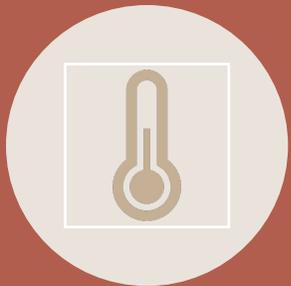
Objectives (plan)



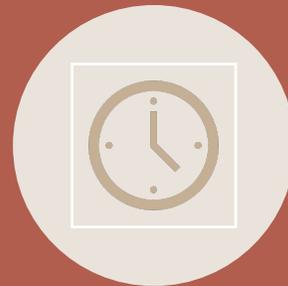
To determine what is causing patient dissatisfaction with the temperature of meals.



To determine what is causing patient dissatisfaction with the timing of meals.



How to improve temperature of meals to patients.



How to improve timeliness of meals to patients.

Methods (plan)

- 3 different methods of research
 1. Observation of patient services (patient ambassador, runner, call operator) 
 2. Patient interviews 
 3. Test tray 

Findings (plan)

Observation

- Ambassador – takes orders and selects mealtime for patients; 5 to 6 patients are given same mealtime every 30 minutes
- Runner – delivers trays to patients; must run down to floor for every new cart of food = adds unnecessary time

Patient interviews

- 4 patients interviewed; 3 of 4 reported meals come at inconvenient times when therapy or a procedure is ongoing; food sits in room and gets cold

Findings Cont. (plan)

3. Test tray

	Plate Temps (Fahrenheit) Cold: <41 Hot: >155	Point of Service Temps (Fahrenheit) Cold: <41 Hot >155
Pineapple	40.6	48.7
Iced Tea	35.2	33.4
Lasagna	161.2	145.4
Green Beans	165	141.8

Time tray was built:	11:20 am
Time cart left kitchen:	11:34 am
Time cart arrived on unit:	11:37 am
Time last tray was passed:	11:49 am
Scheduled arrival time:	11:30 am

Intervention (do)

1. To address the inconvenient timing of patient meals, mealtimes will be scheduled around each patient's therapy schedule for the day.

2. To address the inadequate temperature of patient food, an extra cart runner will be scheduled to run carts to the floor.

Action Plan (do)

Action Plan	Patient Therapy Mealtimes	Extra Cart Runner
WHEN	Ambassador will print out patient therapy schedule for the day for assigned floors prior to rounding on meal orders.	An extra cart runner will be available during mealtimes. B: 6:30 am to 10:00 am; L: 11:00 am to 1:30 pm; D: 5:00 pm to 7:00 pm.
HOW	Once patient orders, ambassador will select a mealtime that does not interfere with therapy schedule.	Cart runner will wait in kitchen for when full carts are ready to be sent. Once carts are ready, runner will take carts up to floor. Floor runners will stay on floor and continue to deliver trays.
WHO	Ambassador is responsible.	Mealtime cart runner will be responsible.
WHAT	Use patient therapy schedule to select patient mealtimes.	Use an extra cart runner to reduce delivery time of meals.
BUDGET	N/A	\$15/hr x 8 hr/shift = \$120 a shift
CONTIGENCY	If therapy schedules are unavailable, ambassador will ask patient for preferred mealtime.	If an extra cart runner is unavailable, floor cart runners will deliver trays and grab carts from kitchen as in the past.

Results (check)

- Mealtimes around patient therapy
 - Patients with dialysis are the hardest to deliver meals at a good time
 - Asked patients what time dialysis was for that day; selected mealtime based off dialysis time
 - Patients reported they were much happier with the timing of their meals; food was hot and didn't sit and get cold

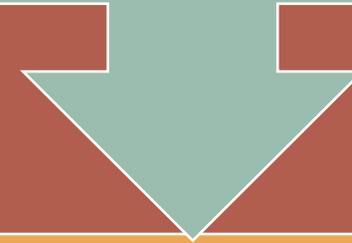
Results Cont. (check)

- Extra cart runner
 - Staffing was very limited, so no employees were able to participate
 - I acted as a mock extra cart runner and timed accordingly
 - An extra cart runner reduced the time the tray was built to the last tray being delivered by 13 minutes thus reducing the amount of time to let food drop in temperature.

Time tray was built:	11:15 am
Time tray left kitchen:	11: 21 am
Time tray arrived on unit:	11: 23 am
Time last tray was passed:	11: 31 am
Scheduled arrival time:	11: 30 am

Conclusion (act)

In conclusion, there are improvements that can be made to improve patient satisfaction with meal temperature and mealtimes.



Scheduling patient mealtimes around their therapy schedules will increase efficiency and convenience for patients. Their meals will be delivered at an appropriate time thus decreasing the chance of their food to sit and get cold. This is a big task, so beginning this intervention with floors that have more therapies during the day is the starting point.

Conclusion Cont. (act)

- Staffing an extra cart runner, in theory, does increase patient satisfaction with the temperatures of their meals. An extra cart runner decreases the amount of time it takes the tray to be delivered to the patient. However, staffing is already an issue. At this time, an extra cart runner may not be feasible. Once Freeman West foodservice department is adequately staffed, this intervention would be an improvement.

Questions
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