

**Supportive and palliative care research and audit conference**

**Wednesday 30 November 2016**

**Oral and poster abstract submission template**

Abstracts must conform to the following requirements:

- Include a short title (up to 20 words) and the author's names (asterisk the presenting author)
- Maximum length: 250 words
- Structure: background/objectives, methods, results, implications
- Include presenting author's contact details (including name, job title, institution and email address).

Abstracts should be submitted to [samantha.wilkinson@srft.nhs.uk](mailto:samantha.wilkinson@srft.nhs.uk) by 5pm on Friday 30 September 2016.

**Title:** Weighing Patients in a Hospice Setting

**Authors**

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**Background**

Standard practice at our hospice did not encourage routine weighing of patients on admission, which potentially limited ability to meet best practice standards for medicine management and nutritional assessment.

This project measured if patients were weighed at or soon after admission. Many were prescribed medication where dose was dependent on weight. The opinions of staff and patients towards routine weighing was investigated.

**Method**

An audit of 40 patients measured if patients were weighed on admission or a reason for not doing so recorded and whether weight dependent doses were in line with the British National Formulary or other specialist advice.

A staff questionnaire gained the opinions of 79 clinical staff towards weighing patients, their understanding of the reason for weighing, and the rationale for their opinions.

A patient questionnaire gained the opinions of 38 patients on being weighed and their understanding of the reason for being weighed.

## **Results**

97% of patients did not find being weighed distressing. However, 51% of staff members were opposed to routine weighing.

13% of patients had a weight recorded. 13% were prescribed low molecular weight heparin, 80% of these patients were weighed and 60% were on the correct dose.

## **Implications**

Routine weighing has been introduced for all patients where appropriate. Clinical staff now receive training that demonstrates the inaccuracy of estimating body weight. An alert sticker is now attached to the medicine chart, for patients prescribed weight dependant medication and a prompt on the shelves where the medication is stored acts as a reminder to check body weight.

## **Presenting Author contact details:**

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