

Basic Elements							
Patient ID	Race	Ethnicity	Gender	Payer	Preferred Language	Age upon admission (YEARS) [e.g. for 12.5 year old, years = 12]	Age upon admission (MONTHS) [e.g. for 12.5 year old, months = 6]
1	White	Non-Hispanic	Female	Medicaid	English	12	3
2	Black	Non-hispanic	Male	Medicaid	English	5	0
3	White	Hispanic	Male	Private	Spanish	8	12
4	Asian Pacific Island	Non-Hispanic	Male	Private	Chinese	10	0
5							
6							
7							
8							

Initial Baseline Screen of Nutritional Status for Every Patient Within 24 Hours of P

Denominator				Numerator	
PICU Admission Date (mm/dd/yyyy)	PICU Admission Time (hh:mm, military)	PICU Discharge or Transfer Date (mm/dd/yyyy)	PICU Discharge or Transfer Time (hh:mm, military)	Evidence of standardized nutrition screening tool (Yes -1/No -2)	Date standardized nutrition screening tool administered following admission (mm/dd/yyyy)
12/12/2011	13:01	12/14/2011	12:30	1	12/13/2011
3/3/2012	0:15	3/7/2012	8:10	2	-
1/17/2012	23:59	1/18/2012	22:10	2	-
5/6/2012	10:45	5/6/2012	23:30	1	5/6/2012

PICU Admission

	Exclusion	
Time standardized nutrition screening tool administered following admission (hh:mm, military)	Date standardized nutrition screening tool administered prior to admission (mm/dd/yyyy)	Time standardized nutrition screening tool prior to admission (hh:mm, military)

22:15

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11:00

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eMeasure Title	Initial Baseline Screen of Nutritional Status for Every Patient Within 24 Hours of PICU Admission		
eMeasure Identifier (Measure Authoring Tool)	385	eMeasure Version number	0.0.006
NQF Number	None	GUID	9857aadf-b8f6-459f-8f1d-7a6e0ab12481
Measurement Period	January 1, 20XX through December 31, 20XX		
Measure Steward			
Measure Developer			
Endorsed By	None		
Description	The measure will be a chart review performed to determine the frequency of conducting an initial nutritional status screening. The screening is to be performed within the first 24 hours of admission to the pediatric intensive care unit (PICU) with the use of a standardized nutrition screening tool. The results of the screening must be documented in the patient's chart upon completion.		
Copyright	TBD		
Disclaimer	<p>These performance Measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications.</p> <p>THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.</p>		
Measure Scoring	Proportion		
Measure Type	Process		
Stratification			
Risk Adjustment	None		
Rate Aggregation	State, geographic region, health plan, practice, provider, Medicaid/CHIP		
Rationale	<p>Relationship to desired outcome:</p> <p>The desired outcome is delivery of nutrition therapy that is appropriate for the individual patient's current nutritional state and clinical condition and that will facilitate the healing process. An initial baseline screen of nutritional status for every patient increases awareness of a patient's nutritional state, specifically identifies the subset of PICU patients who are at risk of malnutrition, and allows providers to adjust nutrition therapy to meet the individual patient's needs.</p> <p>There is no single, validated screening tool that is considered appropriate for critically ill and injured children, but those available (including institution-derived nutrition screening tools) typically take about five minutes to administer, can be done at the bedside, and do not generally require a dietitian.</p> <p>IOM Domains of Health Care Quality Addressed:</p> <ul style="list-style-type: none"> * Safe * Effective * Patient-centered * Timely * Efficient * Equitable <p>Harmonization with Existing Measures:</p> <p>This measure strives to harmonize to the extent possible with all other existing pediatric measures such that the process of care expected of healthcare providers does not contradict what may be expected of them across the full spectrum of patient care in a Pediatric Intensive Care Unit (PICU).</p>		
Clinical Recommendation Statement	<p>The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:</p> <p>A.S.P.E.N. recommends the following: 1A) Children admitted with critical illnesses should undergo nutrition screening to identify those with existing malnutrition and those who are nutritionally-at-risk.</p> <p>Reference: Mehta NM, Compher C, and A.S.P.E.N. Board of Directors: A.S.P.E.N. Clinical Guidelines: Nutrition Support of the Critically Ill Child. JPEN J Parenter Enteral Nutr 2009; 33:260-276</p> <p>The Joint Commission recommends the following regarding nutrition:</p> <p>Introduction to Standard PC.01.02.01 The goal of assessment is to determine the care, treatment, and services that will meet the patient's initial and continuing needs. Patient needs must be reassessed throughout the course of care, treatment, and services.</p>		

Identifying and delivering the right care, treatment, and services depends on the following three processes:

1. Collecting information about the patient's health history as well as physical, functional, and psychosocial status
2. Analyzing the information in order to understand the patient's needs for care, treatment, and services
3. Making care, treatment, and services decisions based on the analysis of information collected

The depth and frequency of assessment depends on a number of factors, including the patient's needs, program goals, and the care, treatment, and services provided. Assessment activities may vary between settings, as defined by the hospital's leaders.

Information gathered at the patient's first contact may indicate the need for more data or a more intensive assessment. At a minimum, the need for further assessment is determined by the care, treatment, and services sought; the patient's presenting condition(s); and whether the patient agrees to the recommended care, treatment, and services.

The hospital defines, in writing, the scope and content of screening, assessment, and reassessment information it collects. (See also RC.02.01.01, EP 2)

Note 1: In defining the scope and content of the information it collects, the organization may want to consider information that it can obtain, with the patient's consent, from the patient's family and the patient's other care providers, as well as information conveyed on any medical jewelry.

Note 2: Assessment and reassessment information includes the patient's perception of the effectiveness of, and any side effects related to, his or her medication(s). The hospital defines, in writing, criteria that identify when additional, specialized, or more in-depth assessments are performed. (See also PC.01.02.07, EP 1; PC.01.02.03 EPs 7 and 8)

Note: Examples of criteria could include those that identify when a nutritional, functional, or pain assessment should be performed for patients who are at risk.

The hospital defines, in writing, criteria that identify when additional, specialized, or more in-depth assessments are performed. (See also PC.01.02.07, EP 1; PC.01.02.03 Eps 7 and 8)

Note: Examples of criteria could include those that identify when a nutritional, functional, or pain assessment should be performed for patients who are at risk

3 The hospital has defined criteria that identify when nutritional plans are developed. (See also PC.01.02.03, EP 7)

4 Based on the patient's condition, information gathered in the initial assessment includes the following:

- Physical, psychological, and social assessment
 - Nutrition and hydration status
 - Functional status
 - For patients who are receiving end-of-life care, the social, spiritual, and cultural variables that influence the patient's and family members' perception of grief
- (See also RC.02.01.01, EP 2)

23 During patient assessments and reassessments, the hospital gathers the data and information it requires. (See also PC.01.01.01, EP 24)

PC.01.02.03 The hospital assesses and reassesses the patient and his or her condition according to defined time frames.

The hospital completes a nutritional screening (when warranted by the patient's needs or condition) within 24 hours after inpatient admission. (See also PC.01.02.01, Eps 2 and 3; RC.02.01.01, EP 2)

Reference: <http://www.jointcommission.org/>

Improvement Notation

Reference

Wong S, Graham A, Hirani SP, Grimble G, Forbes A: Validation of the Screening Tool for the Assessment of Malnutrition in Paediatrics (STAMP) in patients with spinal cord injuries (SCIs). *Spinal Cord* 2013; 51: 424-9.

Reference

Konstantinos G, Macleod I, Maclean A, Buchanan E, McGrogan P, Swinbank I, McAuley M, Wright CM, Flynn DM: Performance of the novel Paediatric Yorkhill Malnutrition Score (PYMS) in hospital practice. *Clinical Nutrition* 2011; 30:430-5.

Definition

Standardized nutrition screening tool: Screening tool should be applied in a standardized manner to each patient admitted to the PICU and should be based on a nutrition screening tool which has been validated for the majority of the institutions' PICU patients.

Examples of this would include STAMP and the Paediatric Yorkhill Malnutrition Score, and potentially institution-derived nutrition screening tools.

Guidance

None

Transmission Format

TBD

Initial Population

All patients discharged from the PICU during the reporting period.

Denominator

All patients admitted to the PICU for at least 24 hours during a monthly or quarterly reporting period.

Denominator Exclusions

Patients who have already had a documented nutrition screening or assessment in the previous 48 hours.

Numerator

Number of PICU patients for whom a screening of nutritional status was documented with use of a standardized

Numerator	Number of ICU patients for whom a screening of nutritional status was documented with use of a standardized nutrition screening tool within 24 hours of admission.
Numerator Exclusions	None
Denominator Exceptions	None
Measure Population	Not applicable
Measure Population Exclusions	Not applicable
Measure Observations	Not applicable
Supplemental Data Elements	For every patient evaluated by this measure also identify payer, race, ethnicity and gender.

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Population criteria

- **Initial Population =**
 - # All patients discharged from the PICU during the reporting period.
 - o AND: Intersection of:
 - "Encounter, Performed: PICU Admission or Transfer (Occurrence A)" <= 24 hour(s) during "Measurement Period"
 - "Encounter, Performed: PICU Admission or Transfer (Occurrence A) (admission datetime)"
 - "Encounter, Performed: PICU Admission or Transfer (Occurrence A) (discharge datetime)"
- **Denominator =**
 - o AND: Initial Population
 - # Same as initial population
 - o AND: Intersection of:
 - "Encounter, Performed: PICU Admission or Transfer (Occurrence A)" <= 24 hour(s) during "Measurement Period"
 - "Encounter, Performed: PICU Admission or Transfer (Occurrence A) (admission datetime)"
 - "Encounter, Performed: PICU Admission or Transfer (Occurrence A) (discharge datetime)"
- **Denominator Exclusions =**
 - # Patients who have already had a documented nutrition screening or assessment in the previous 48 hours.
 - o OR: Union of:
 - "Occurrence of Diagnostic Study, Performed: an administration of a nutritional status screening tool that is standardized within the institution (Occurrence C)" <= 48 hour(s) during "Encounter, Performed: PICU Admission or Transfer (Occurrence A)"
- **Numerator =**
 - # Number of PICU patients for whom a screening of nutritional status was documented with use of a standardized nutrition screening tool within 24 hours of admission.
 - o AND: Intersection of:
 - "Occurrence of Diagnostic Study, Performed: an administration of a nutritional status screening tool that is standardized within the institution (Occurrence C)"
 - "Occurrence of Diagnostic Study, Performed: an administration of a nutritional status screening tool that is standardized within the institution (Occurrence C) (start datetime)"
- **Numerator Exclusions =**
 - o None
- **Denominator Exceptions =**
 - o None
- **Stratification =**
 - o None

Data Criteria (QDM Variables)

- None
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- "Diagnostic Study, Performed: Occurrence of an administration of a nutritional status screening tool that is standardized within the institution (Occurrence C)" using "Occurrence of an administration of a nutritional status screening tool that is standardized within the institution (Occurrence C) User Defined QDM Value Set (1.1.1.1)"

- "Encounter, Performed: PICU Admission or Transfer (Occurrence A)" using "PICU Admission or Transfer (Occurrence A) User Defined QDM Value Set (1.1.1.1)"

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- "Patient Characteristic Ethnicity: Ethnicity" using "Ethnicity CDCREC Value Set (2.16.840.1.114222.4.11.837)"
 - "Patient Characteristic Payer: Payer" using "Payer SOP Value Set (2.16.840.1.114222.4.11.3591)"
 - "Patient Characteristic Race: Race" using "Race CDCREC Value Set (2.16.840.1.114222.4.11.836)"
 - "Patient Characteristic Sex: ONC Administrative Sex" using "ONC Administrative Sex AdministrativeSex Value Set (2.16.840.1.113762.1.4.1)"

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- None

Measure Set	Not applicable
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