Student nurses’ training and attitudes towards the use of the Malnutrition Universal Screening Tool

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In the UK, national guidelines require that all patients be screened for the risk of malnutrition\(^1,2\). Despite this, malnutrition continues to be under-recognised and undertreated\(^3\). Research suggests training of staff in nutritional care, including screening, may improve nutritional screening rates\(^4,5\). In NHS Scotland the Malnutrition Universal Screening Tool (MUST) is predominantly used for screening adults\(^3\). This study aimed to determine final-year student nurses’ training and experience in relation to malnutrition and the use of the MUST, to explore attitudes towards nutritional screening, and to determine if training experiences influence these attitudes.

An e-mail invited all final-year student nurses in adult nursing and mental health nursing at one Scottish university to take part (n 203). Thirty-seven students fully completed the on-line questionnaire used to collect data. Results indicated that the majority of student nurses reported having been given some university teaching on disease-related malnutrition as follows: the incidence of malnutrition in NHS patients (n 21), the consequences of malnutrition for patients (n 31), the importance of nutritional screening (n 33), and how to use the MUST (n 21). However, a minority of students reported being taught about the cost of malnutrition to the NHS (n 10), and about the NHS Quality Improvement Scotland Standards for Food Fluid and Nutritional Care (n 17). Twelve students reported that they had had formal teaching during clinical placement.

Most students held positive attitudes towards nutritional screening; attitude scores did not differ between students given teaching during clinical placement (n 12) and those that had no placement teaching (n 25), nor did teaching in how to use the MUST affect perceptions of its ease-of-use. In this study frequent opportunity to use the MUST in a clinical setting was positively associated with perceived ease of use (r 0.571; P = 0.001) and ease of use was associated with positive attitudes (r 0.374; P<0.05), suggesting that opportunity to use the tool with patients might be more important in developing positive attitudes than formal training and knowledge. Areas of difficulty in calculating the MUST for some students related to calculation of weight loss and the acute disease score.

Further research is needed to examine if positive attitudes developed during undergraduate nurse training translate to greater compliance with guidelines for nutritional screening of patients.