Nutrition in Older People Programme

Executive Summary

Click here for the full Nutrition in Older People report

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Introduction

Around 1 in 10 older people are malnourished (undernourished) or at increased risk of undernutrition, which equates to 61,000 people in the Wessex region. The majority of undernourished older people are living in their own homes in the community. Whilst the majority (68%) of the national spend on undernutrition occurs within secondary care, many people are admitted to hospital from the community already undernourished. Being undernourished has serious consequences for health, independence, morbidity and mortality:

- Increased onset of frailty - 4 times more likely if undernourished (Lorenzo-Lopez et al, 2017; Boulos et al, 2016)
- Reduced recovery & body function (BAPEN, 2010)
- More frequent nurse and GP visits (BAPEN, 2010)
- More frequent hospital admissions & increased length of stay (BAPEN, 2010)
- Decreased independence (BAPEN, 2010)
- Huge cost implications (Elia, 2015)

Estimated health & social care costs associated with undernutrition in 2018*

£30b
in the UK

£1.4b
in Wessex

Estimated health & social care costs associated with undernutrition by 2043*

£70b
in the UK

£1.4b
in Wessex

*Health and social care costs associated with undernutrition are estimated to be 3 times greater for a malnourished patient than a non-malnourished patient. These figures take the cost analysis work by Elia, 2015, with added estimation for inflation & population growth. Wessex data from 2016 Local Authority District population data and extrapolating from 2015 estimates.

By putting into place more effective simple methods of identifying people at risk, the potential impact can be far reaching.

Key achievements of the programme

1. Nutritional screening and care planning by integrated teams (health and social care) in the community.

- We focussed on improving screening and care of those most at most at risk and causing the greatest cost – i.e. people living in the community receiving community health & social care
- Support and advice offered to people following screening included identification of reason(s) for undernutrition, establishing goals, provision of dietary advice (e.g. nourishing drinks and snacks, food fortification), signposting to other services (e.g. lunch clubs, befriending services), referral to specialist services and timely follow up
- Our work has demonstrated the huge potential for cost avoidance. One of our initial projects was in Purbeck (Dorset), piloting the implementation of nutritional care pathways for health and social care along with an electronic data collection form. Data from this project showed that of the 561 people screened, 27% (n=154) were at increased risk of undernutrition and 60 of these improved their nutritional status through advice and follow up. This represents an annual cost avoidance of £51,545.
In total, 7,020 people were screened by the programme.

Programme integrated health and social care for nutrition for screening and care.

50% of people were screened by professionals, carers and volunteers (e.g. social care, fire service) not previously screening or trained to screen.

22% of people screened were undernourished (or at increased risk) and given advice.

Quotes from staff and patients:

“Normally I wouldn’t have discussed diet in much detail, but nutrition was more on my mind following training. I discussed weight and diet with him and carried out a mid upper arm circumference to find that he was at risk of malnutrition. He’s now received appropriate advice and is doing well”
Nurse, Southern Health

“I think it’s great that your team is doing ‘MUST’ visits. I have often thought that we could be missing loads of potential malnutrition cases”
Mrs R, Community Nurse, Ferndown

“I knew that my husband had lost some weight but I didn’t realise how much. The carer gave me a leaflet which helped me put some weight back on him”
Mrs M, Ferndown

“I knew I was letting myself go. I knew I wasn’t eating properly. Thanks for taking the time with me and helping me get back to normal”
Mr H, West Moors
Developed and tested innovative approaches for increasing the identification of people at risk of undernutrition by a range of roles including volunteers and carers.

The programme has worked with voluntary sector organisations (e.g. Age UK and Age Concern) to explore simpler methods for identifying undernutrition and providing associated advice and signposting. The programme worked in partnership with the Patients Association and Bournemouth University to develop the Patients Association Nutrition Checklist, a simple tool with two sections. Section A comprises 4 key questions to help identify potential risk of undernutrition and Section B provides guidance on appropriate and advice and signposting for those thought to be at risk. Research was undertaken to show that the 4 questions in the Patients Association Nutrition Checklist has moderate agreement with the ‘MUST’ screening tool, picking up people ‘at risk’. The Patients Association Nutrition Checklist could therefore be used to identify ‘clinical concern’, which in turn could trigger formal screening, e.g. using ‘MUST’ (NICE guidelines CG32).

The Nutrition Wheel is an interactive version of Patients Association Nutrition Checklist specifically for volunteers

Resource development.

To improve awareness and training around undernutrition and address the training gap cited in national guidelines and recommendations, the programme has trained 1074 people (including professionals, volunteers and carers).

Our OPEN toolkit has been published to minimise duplication of effort by organisations. The toolkit includes training packages for several different roles, comprising presentation slides, session plans, case studies and evaluation resources.

Summary of Projects

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<th>Project</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
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<td>Dorset Malnutrition Programme</td>
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<td>OPEN Eastleigh</td>
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<td>Southern Health &amp; INSCCOPe</td>
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<td>PaperWeight armband pilot</td>
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<td>Volunteers in GP practice</td>
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<td>Community Pharmacies</td>
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<td>OPEN Toolkit</td>
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<tr>
<td>Nutrition Checklist</td>
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<td>Nutrition Wheel</td>
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<td>Food is a MUST</td>
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<td>Coloured glasses</td>
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<td>Programme conference</td>
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Key:

- Red: Creation of materials and approach
- Black: Pilot/Research project
- Grey: Implementation and spread
- Light grey: Analysis
- White: Conference

Click here for your free OPEN toolkit
Our vision

To influence a national call for action to increase uptake of nutritional screening to identify undernutrition early amongst older people living in the community and provide appropriate care to those identified, to help reduce their risk through:

- Improved integration between services and sectors
- Spread and wider use of the OPEN toolkit
- Launch and increased uptake of the Nutrition Wheel and Patients Association Nutrition Checklist

Adaptation of national guidance, including malnutrition pathways to:

- Incorporate the Nutrition Wheel and Nutrition Checklist - which have the ability to highlight ‘clinical concern’ which could then act as a prompt to formal screening using ‘MUST’ (NICE guidelines CG32)
- Include other groups (e.g. volunteers and carers) in the identification and care of people at risk – these groups can have a role in early identification (pre-healthcare contact) and can signpost and advise around the many social factors contributing to undernutrition

How we are moving things forward

1. Integrated nutritional screening and care in the community leads to improved nutritional status, health, wellbeing & independence (shown through the OPEN Eastleigh project, Dorset Malnutrition Programme, and piloting the implementation of a new screening and care procedure within Southern Health NHS Foundation Trust, the research of which is funded by the Burdett Trust for Nursing).

   - Communicating success & learning from these integrated projects, to facilitate improved identification and care of older people at risk of being undernourished in other areas and settings
   - Completion of final phase of research into piloting the implementation of a new screening and care procedure with Southern Health NHS Foundation Trust including the dissemination of materials / toolkit
   - We are partners for the James Lind Alliance PSP for Nutritional Screening and Malnutrition to raise awareness and identify questions for future research

2. Appropriate tools & approaches can be used by people not traditionally screening to raise awareness and identify people at risk early and provide signposting and advice.

   - Launch of the Patients Association Nutrition Checklist & Nutrition Wheel in partnership with the Patients Association and the Malnutrition Task Force
   - Influence a national call to action through membership of the Malnutrition Task Force and BAPEN Malnutrition Action Group, including review of national malnutrition pathway to consider innovative approaches for identifying people who are at risk of being undernourished and providing relevant signposting

3. Tried and tested resources produced to enable others to implement these approaches, which have been adopted across Wessex and wider.

   - Further spread of the OPEN toolkit
   - Improving hydration for older people in care homes and those receiving domiciliary care, as part of the Healthy Ageing programme, along with the creation of a hydration toolkit
Your call to action

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<th>STPs</th>
<th>Endorse and enforce the importance of system-wide nutritional screening for people at risk of undernutrition and provision of appropriate care and advice</th>
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<tr>
<td>Commissioners</td>
<td>Commission integrated nutritional care within the community, including by non-healthcare roles and the third sector</td>
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<td>Providers</td>
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<td>Acute</td>
<td>Improved communication with community services around nutritional care on discharge</td>
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<td>Community healthcare and care homes</td>
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<tr>
<td>• Increased uptake of training around undernutrition awareness, screening and care planning</td>
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<td>• Improved integrated nutritional care within and between community teams</td>
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<td>• Early identification through use of the Patients Association Nutrition Checklist</td>
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<td>• Widespread use of awareness materials, e.g. OPEN undernutrition leaflet</td>
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Acknowledgements

We would like to thank the Wessex AHSN Nutrition in Older People Programme team, Nutrition Steering Group Membership, Awareness & Training Task Group and Nutrition Outcomes Task Groups, all project teams and our voluntary sector partners for their support in making our programme a success.

Awards:

• HSJ Value Awards 2018 – Highly Commended in the category ‘improving value in the care of frail older patients’
• 2018 Complete Nutrition Awards – Shortlisted in the category ‘community nutrition professional of the year’
• OPEN toolkit was the Training & Education category poster winner at Patient Safety Congress (2017)