# An Integrated approach to implementing nutrition training for care home staff within East Ayrshire HSCP



Gillian Haughey, Dietitian

Dietetic Health Promotion Team, North West Area Centre, Western Road Kilmarnock, KA3 1NQ

## Introduction

#### **Background:**

Malnutrition can be a cause or consequence of disease. It can lead to worse health and clinical outcomes in all social and NHS care settings<sup>1</sup>.

Malnutrition affects 35 per cent of people recently admitted to care homes<sup>2</sup>.

Screening and early intervention have been shown to be cost effective in the prevention and treatment of malnutrition<sup>3</sup>.

"The Quality Framework for care homes" recommends staff have the right competence and development to support residents and have a clear structure of training within individual home.

Previous work supported by the Dietetic service focused on nutrition awareness level training which had variable uptake and proved unsustainable.

### **Aim**

To reduce malnutrition in care homes through a capacity building model of sustainable education, tailored to needs of the workforce over the medium to long term.

#### It will:

- Develop the care home workforce and enable them to identify improvements to nutrition processes specific to their home and residents.
- Support care sector to meet requirements of health and social care standards and contribute to implementing the Food, Fluid and Nutritional Care Standards.
- Support prevention, screening and early intervention for malnutrition.

# Method

A needs assessment in partnership with service officer for care homes

- assessed content of nutrition training at induction.
- current level nutrition training.
- identified training needs.

## Results

Networking with specialist dietitians in other NHS boards highlighted models of good practice in relation to care home nutrition training and resources and informed the process.

Results of needs assessment:

Level nutrition training variable within and between care homes

14/15 reported access

competencies for staff

participated

to nutrition training resources would be useful

9/15 care homes have no formal nutrition content in induction

**Short locally delivered** sessions preferred

training methods

13/15 have no nutrition

15/18 care homes

Releasing staff to external study days a barrier

"I feel confident

"Food first more natural and tasty than

supplement

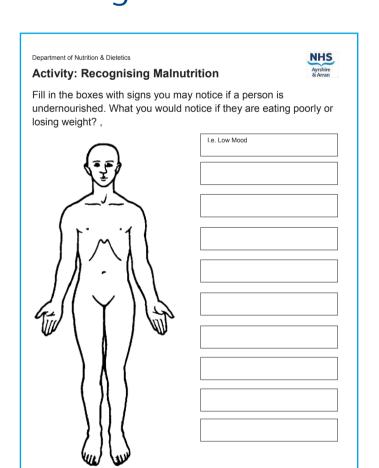
drinks"

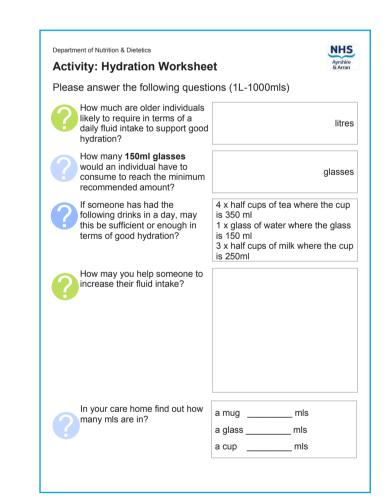
I could train

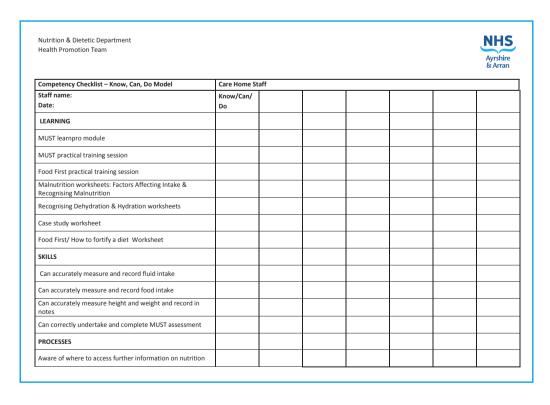
others"

# **Outcomes** Nutrition champion role was defined and 2-day nutrition champion training pilot designed, conducted and evaluated. • Initial training pilot with three care homes up-skilled eight staff to become nutrition champions • 2 Day Nutrition course included: Day 2 Day 1 MUST workshop What makes a good facilitator **Food First** Introduction to Eating well for older nutrition resources people **Nutrition worksheets** Introduction to and learning care home nutrition materials projects Update on champion nutrition projects

Nutrition competencies for care home staff, nutrition induction workbook and supporting learning activities/resources developed and are being trialled.

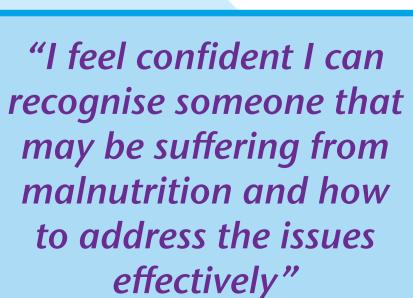




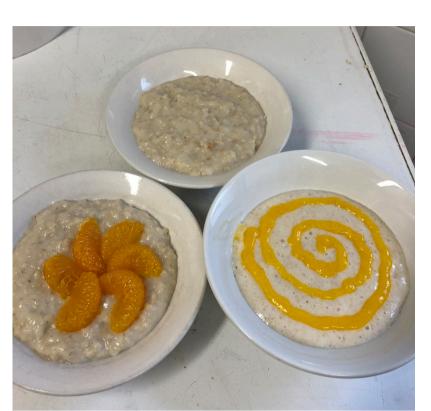


## What people said:

"I felt inspired and ready to come up with some ideas of snacks and ways to improve the dining experience"



# **Individual Nutrition Projects**



## **Glebe Care Home**

- Menu colour coding for food first New snacks available between
- meals
- Dining environment improvements
- Exploring self-service breakfast

## **Doonbank Care Home**

- Dining audit conducted
- Improvement include: Table covers, new dishes, flowers on table, tea lights at evening meal.





### **Burnfoot Care Home**

- Snack baskets available
- Residents can help themselves Range of items provided including
- healthy and energy dense options Milkshakes/Smoothies

## **Conclusion**

The nutrition champion training has up-skilled 8 care home staff to date. It has enabled them to identify improvements to nutrition processes specific to their home and residents, with support from services.

They will now take forward the role of supporting nutrition induction for new staff using locally agreed competencies framework and resources.

# **Next Steps**

Continue to work in partnership with nutrition champions to support nutrition induction for new staff. Evaluate resources and roll out nutrition champion model throughout all East Ayrshire care homes. Work together to develop the nutrition champion role.

## Acknowledgements

Burnfoot, Doonbank and Glebe care homes for participating in pilot. Scottish Dietitians in care homes group for sharing ideas and resources. Val Allen, Service Officer, Care homes for Older People, East Ayrshire HSCP.

# References

Scotland. 2014.

- 1. Managing Adult malnutrition in the community: Including a pathway for the appropriate use of Oral Nutritional Supplements (ONS). Produced by a multi-professional consensus panel. 2nd Edition:2017
- 2. The Management of malnourished Adults in All Community and All Health and Care Settings: Policy Statement. BDA. July 2017.
- 3. The management of malnourished Adults in all community and all health and care settings: Policy Statement. BDA. July 2017 4. A quality framework for care homes for older people. Care Inspectorate.
- 5. Standards for Food, Fluid and Nutritional Care. Health Improvement

Our values Caring Safe Respectful





Follow us on Twitter @NHSaaa

Find us on Facebook at www.facebook.com/nhsaaa

NC19-00140