

The importance of eating and drinking for people living in care homes



Aims of the training

- What is malnutrition
- Reasons for malnutrition
- Consequences of malnutrition and dehydration
- Food First and food fortification
- Dysphagia

What is malnutrition?

- Wasting condition
- Deficient in energy (calories)
- Protein deficiency
- Deficient in micronutrients (Vitamins and Minerals)

‘As people get older and frailer it is fairly easy for them to become malnourished. The condition is caused by an improper balance between what an individual eats and what they require to maintain health. Malnutrition can cause ill health and be a consequence of ill health’.

Age UK (Nutrition, Malnutrition and Hydration; date unknown)



Cost Impact of Malnutrition to NHS

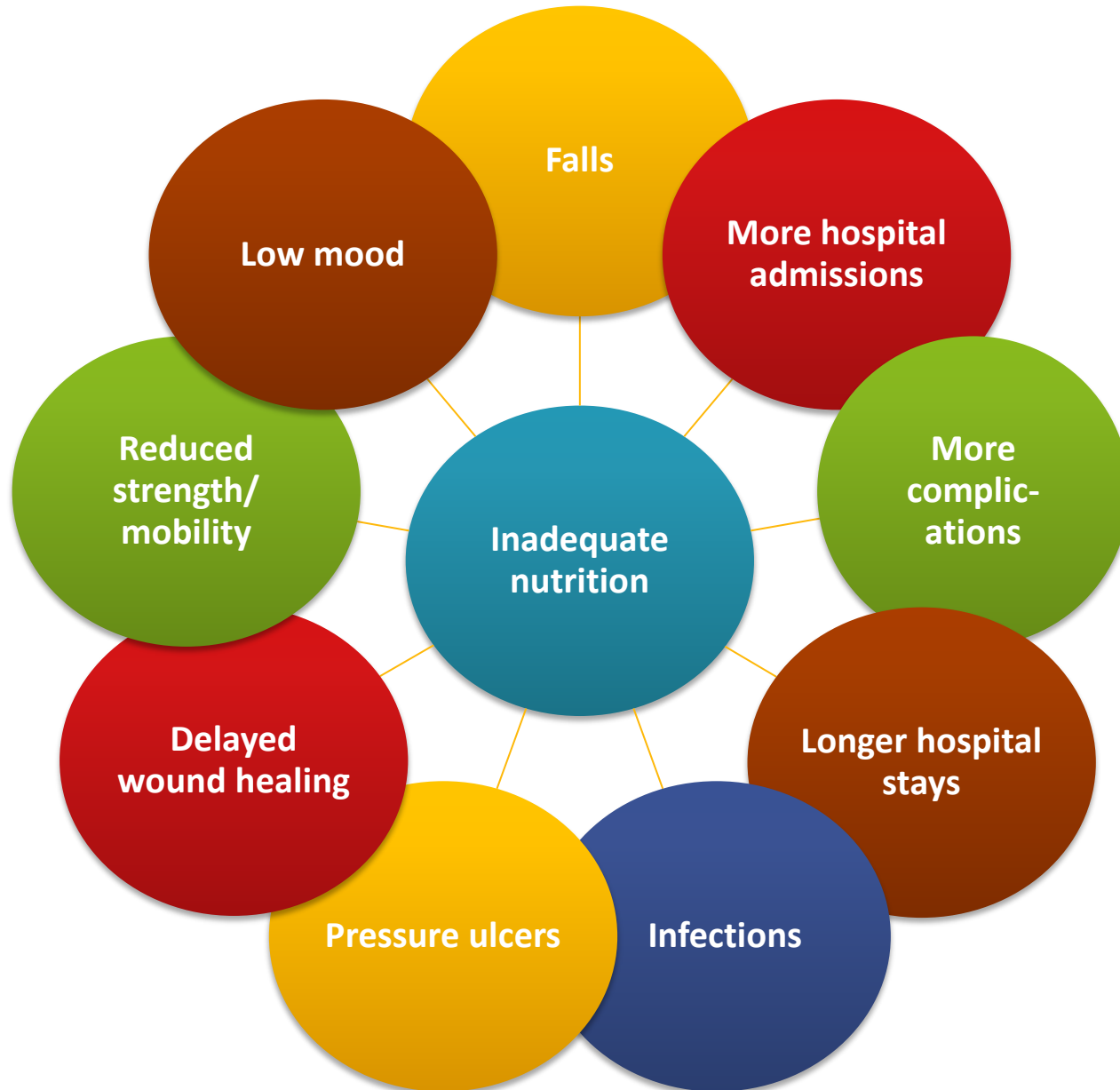
In 2011 – 2012 the estimated cost of malnutrition in the UK annually was £19.6 billion (BAPEN, 2015)

It is the second most preventable cause of admission to hospital

Patients who are malnourished are more likely to:

- need more frequent GP visits
- require more prescriptions
- to be admitted to hospital
- have a longer hospital stay

Why is good nutrition so important?

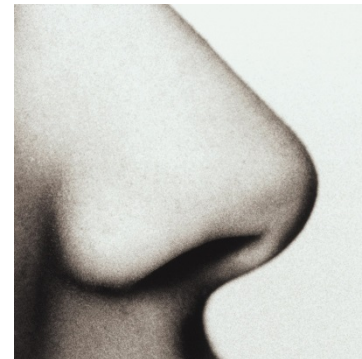


Possible signs of malnutrition

- Look emaciated and have lost weight - Clothes, jewellery or dentures may become loose
- Weakness, tiredness, lack of energy, low muscle strength
- Unable to control their body temperature – feel cold
- Suffer from depression, apathy, self neglect
- Have reduced respiratory muscle function
- Delayed wound healing/fragile skin
- Suffer more infections
- Slow recovery from illness
- Pressure damage

Malnutrition: Individual Risk Factors

- Poor communication skills
- Impaired speech, vision or hearing
- Chewing, swallowing problems
- Substance misuse
- Loss of appetite
- Confusion, dementia
- Dentition problems
- Reduced sense of smell
- Constipation



Malnutrition: Individual Risk Factors

- Poor dexterity
- Pain
- Increased requirements e.g. cancers, pressure ulcers, COPD
- Malabsorption
- Side effects of medication
- Depression, social isolation
- Poor posture and mobility



Malnutrition: Organisational Risk Factors

- Monotony of menu
- Unfamiliar foods
- Culturally inappropriate
- Poor presentation
- Inflexible meal times
- Timing of meals
- Inappropriate temperature of food
- Insufficient skilled staff
- Long gap between evening meal and breakfast



Malnutrition: Organisational Risk Factors



MUST

- Lack of snacks /nourishing drinks
- No choice of portion sizes
- Inadequate provision of drinks
- Frequency of convenience food of poor nutritional content
- No use of screening tool (MUST)
- Not following Food First principles



Ways To Improve Nutrition



Lack of appetite - what's the cause? Can you treat it?

- Encouragement and assistance at meal times
- Little and often - small meals and energy dense snacks
- Small portions on small plates
- Menu planning
- Eating environment - smells/ company/ social
- Increasing appetite - alcohol/ exercise/ fresh air
- Feeding aids and support
- Flexible meal times



Food fortification



- Adding in extra nutrition to make every mouthful count
- Adding milk powder, cheese, butter, double cream, mayonnaise, syrup are all good ways to add nutrients - without increasing the volume



Food fortification

2 scrambled eggs with 2 tbsp semi-skimmed milk = 190 Kcal and 17g protein

Add 2 tbsp DOUBLE CREAM = 350Kcal
17g protein (+84%)



2 scoops of Mash = 90kcal and 1.1g protein

Add a knob of BUTTER and 1 tbsp MILK POWDER
= 177kcal (+97%) and 6.1g protein (+454%)



Food fortification



Shepherd's Pie (240g) = 350 Kcal and 16g protein

Add 15g GRATED CHEESE = 412Kcal (+18%) and 19.6g protein (+23%)

Tinned Peaches in Juice = 100kcal and 0.6g protein

USE peaches in SYRUP and add 1 tbsp DOUBLE CREAM = 212kcal (+112%) and 0.6g protein





Regular Diet

Fortified Diet

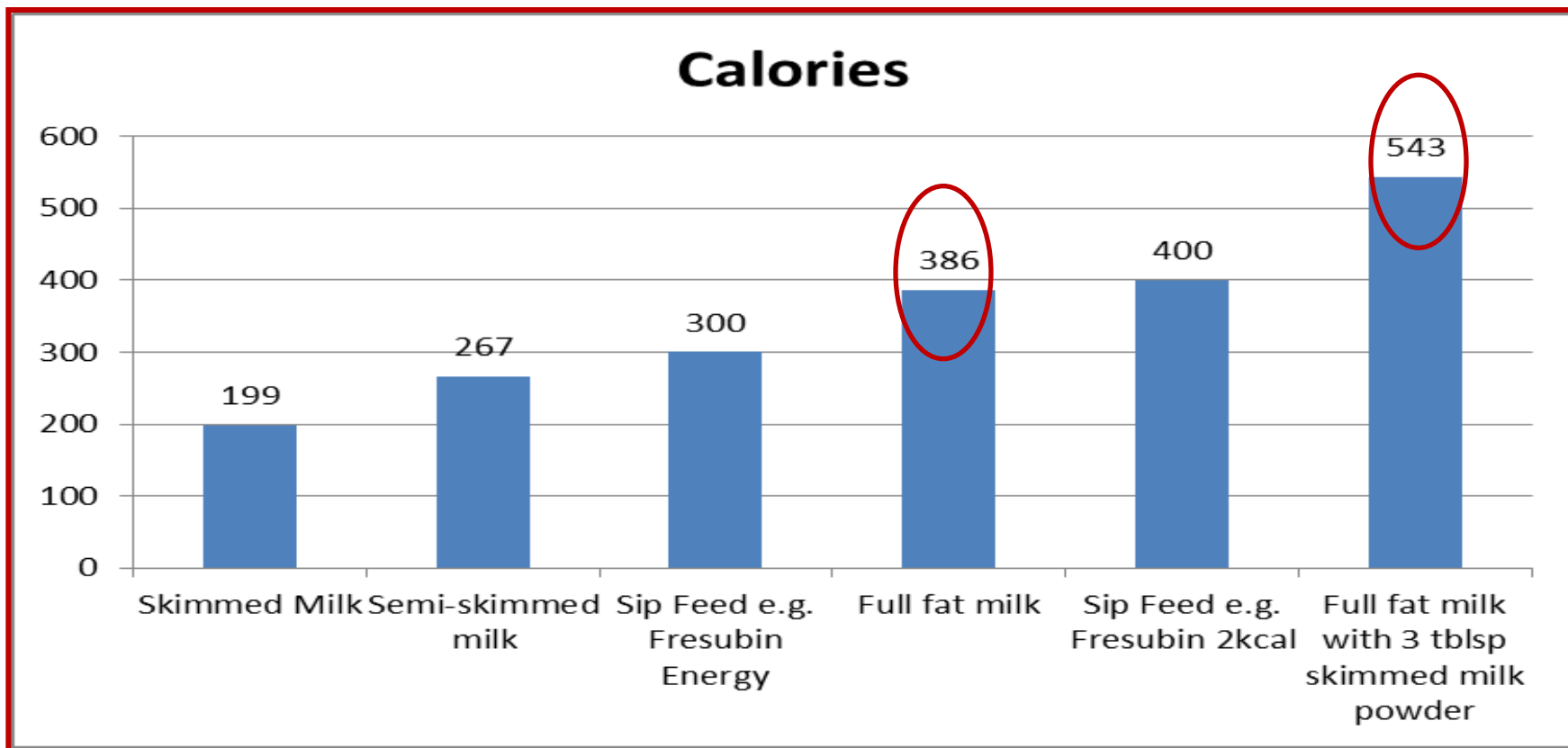
	Calories
Porridge	120
½ slice toast	75
Digestive	70
Mince	230
Carrots	1
Boiled potato	50
Tinned peaches	55
Sponge	90
Soup	150
Scramble egg	150
Custard cream	50
2/3 Full-cream milk	250

	Calories
Sugar	20
Cream	60
Butter	40
Marmalade	20
Butter	40
Cheese	40
Butter	40
Evaporated milk	75
Jam	20
Cream	60
Cheese	40
30g Milk Powder	150

Total calories unfortified 1366

Fortified 1971

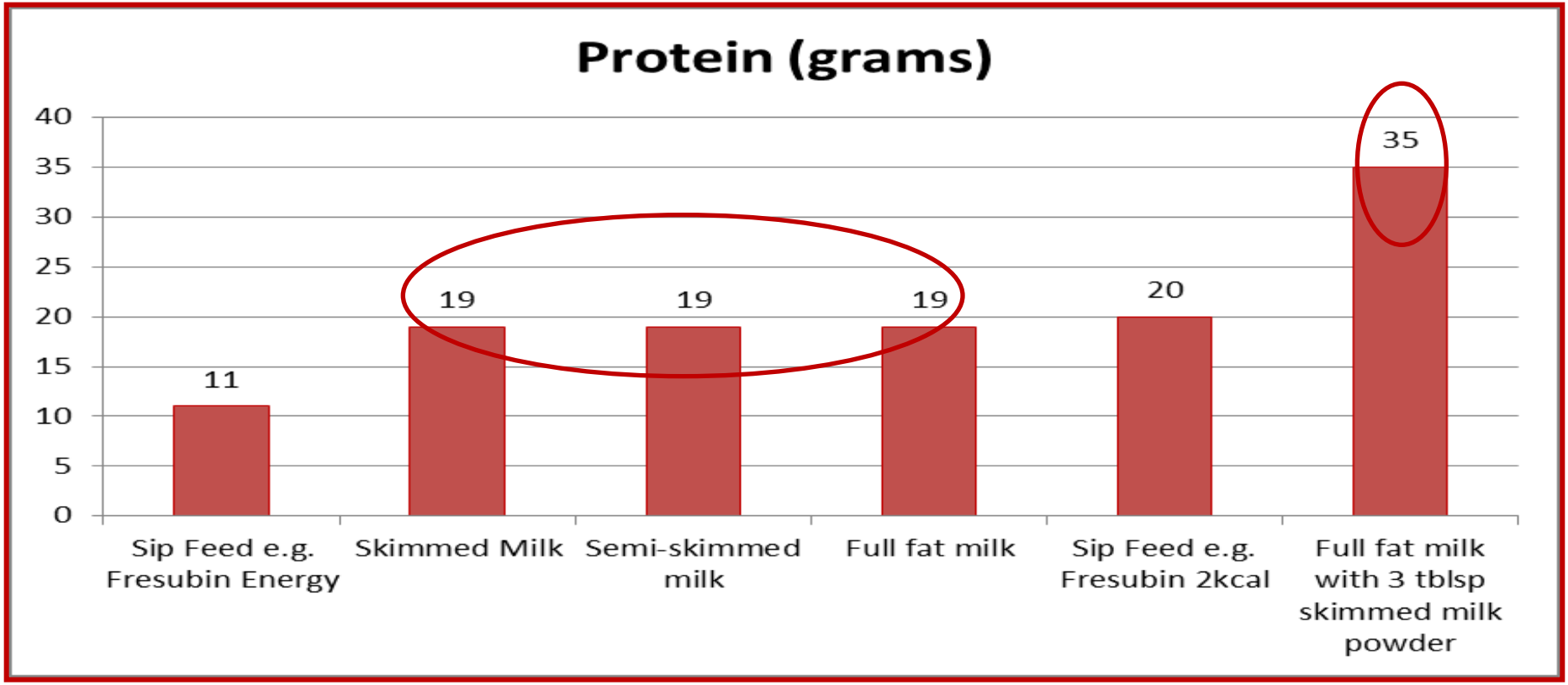
Enriching a pint of milk



+



Enriching a pint of milk

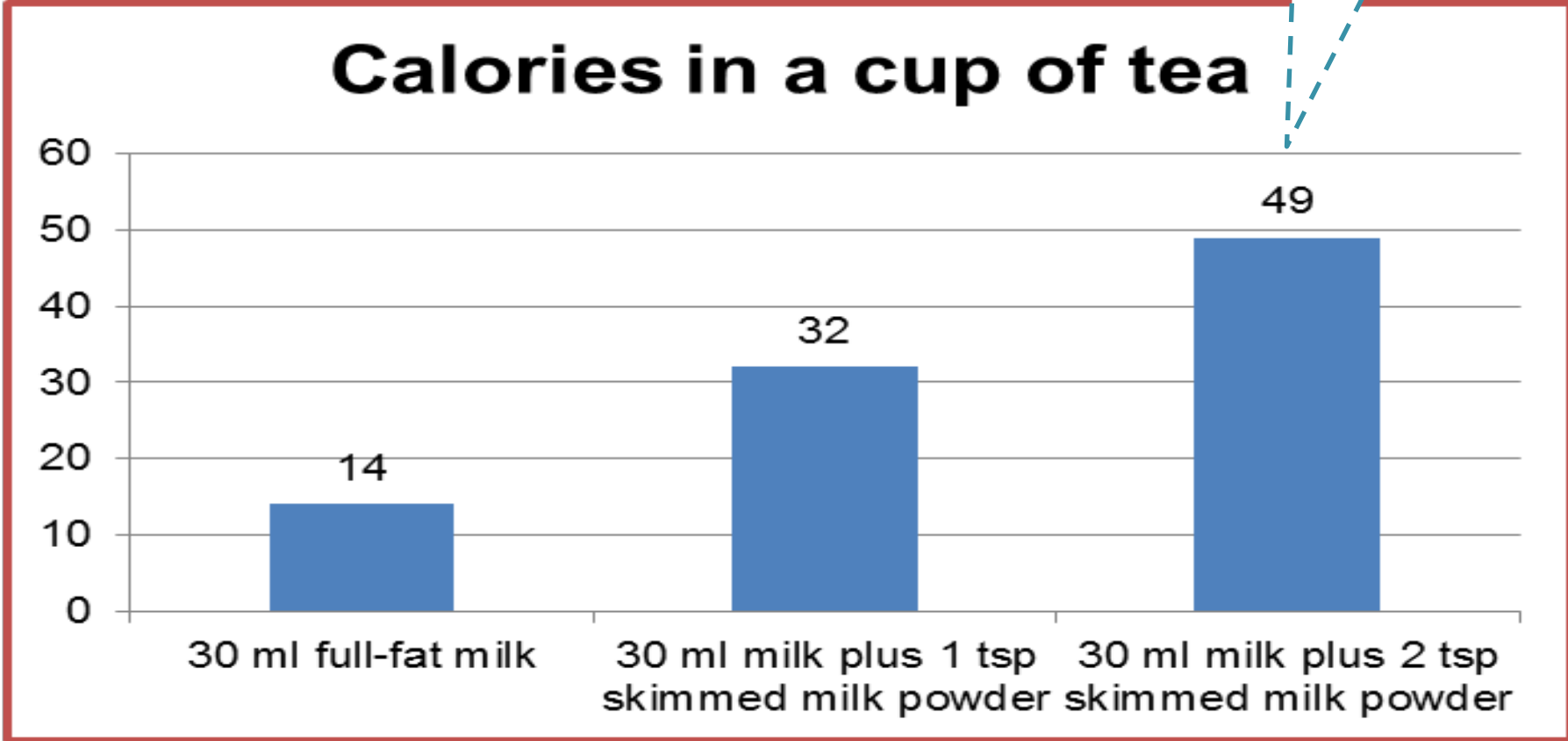


+



Enriching a cuppa

6 cups = 294 kcal



+

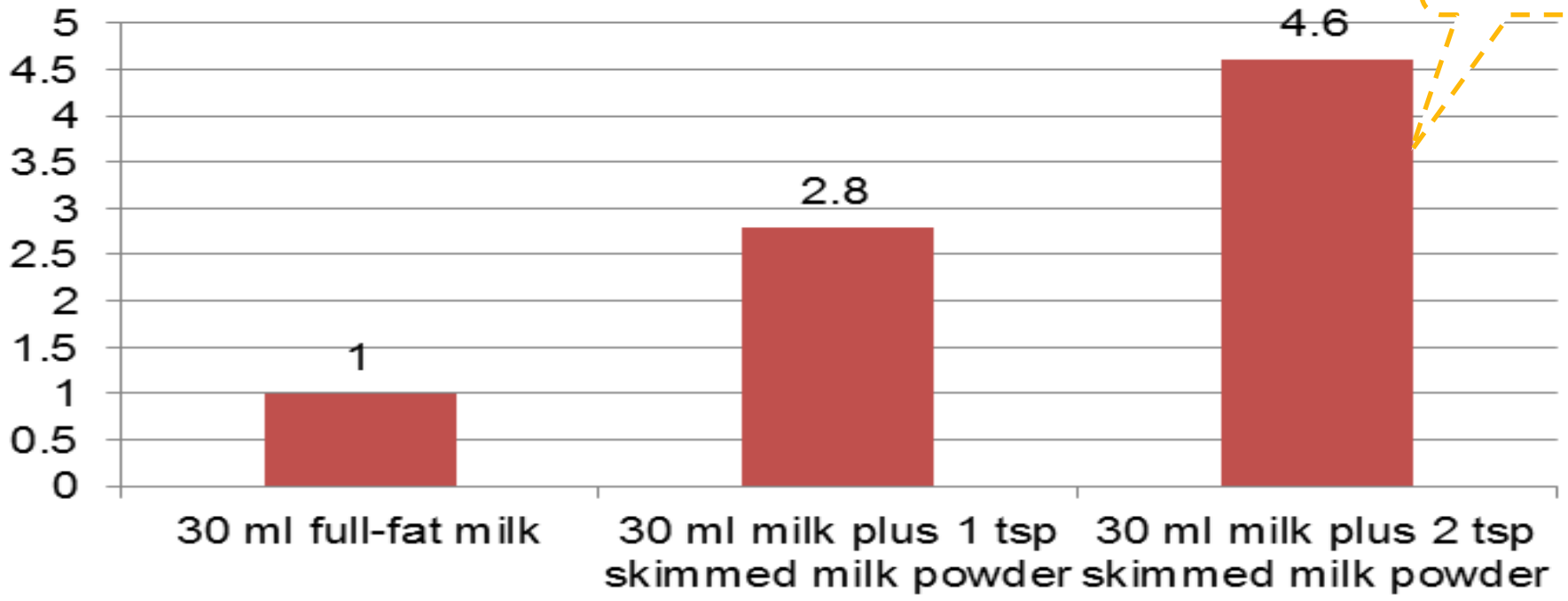


+



Enriching a cuppa

Protein (grams) in a cup of tea



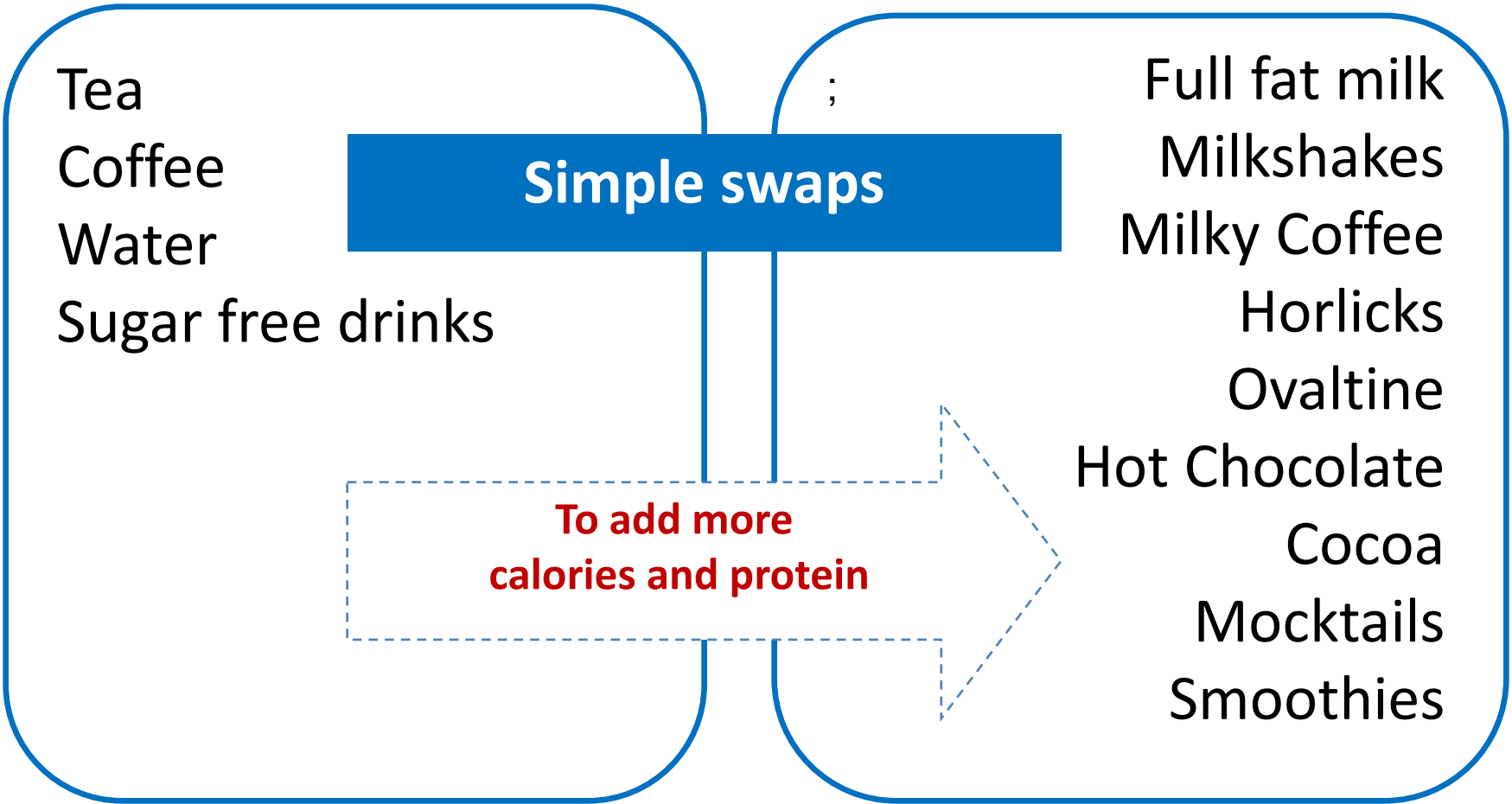
+



+



Nourishing Drinks



Nourishing drink recipe sheets available

Energy Dense Snacks

	Energy (Kcal)	Protein
5 Jelly Babies	100	1.5
1 Chocolate Digestive	74	1
Small Sausage roll	171	3
Crisps	132	1.6
Cake	123	2
2 biscuits and Cheese	244	8



Food Record Charts

Ideal Way	Breakfast	Mid-morning	Lunch	Mid-afternoon	Evening meal	Supper
	½ bowl Porridge Full cup of Orange juice	All nutritional supplement All tea and 2 biscuits	All Soup ½ portion Mince and Potatoes Glass of full fat milk	¼ nutritional supplement Refused tea and biscuit	Refused main meal Ate all high protein custard ¾ glass of full fat milk	1 cup of tea 1 slice toast and butter

Wrong way	Breakfast	Mid-morning	Lunch	Mid-afternoon	Evening meal	Supper
	Some porridge	biscuit	Soup and Main meal		Custard	Tea and toast

Resources Available

A Training folder is available for each home with this training and will include information on:

- MUST
- Food Fortification
- Home made supplements
- Food Record Charts

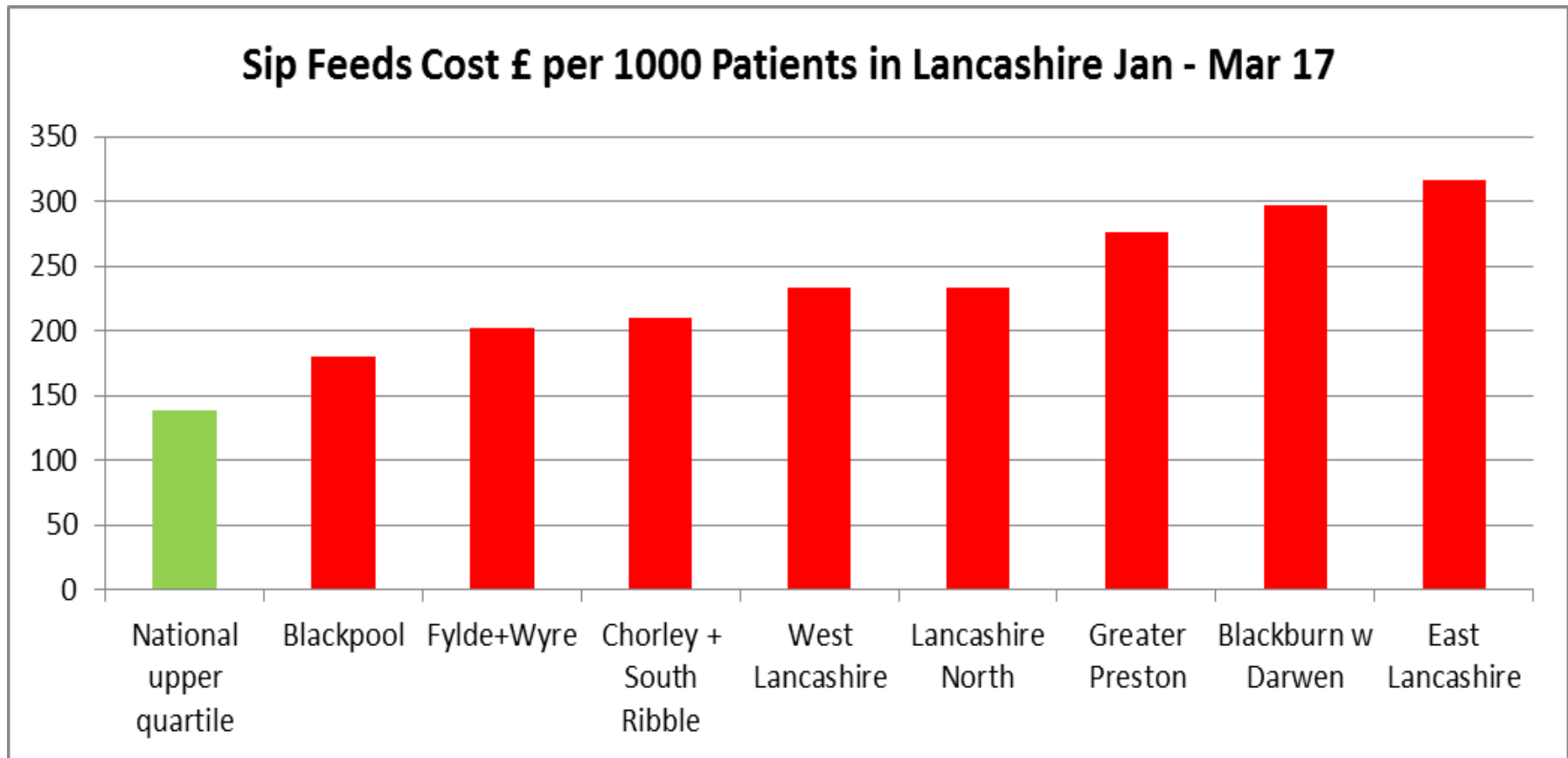
Sip Feeds

- Often not needed.
- A standard sip feed only provides 300 kcals
- Usually should try at least 4 weeks of *food fortification* before considering sip feeds
- Intended for a short period of time, e.g. up to 3 months
- Residents on long term sip feeds must be under active dietetic review
- Sometimes helpful in dementia

Sip feeds

Locally there is a heavy reliance on sip feeds rather than following food first principles.

Fortifying the diet can be as nutritious but taste better.



Food First

East Lancashire Health Economy
Medicines Management Board
www.elhmb.nhs.uk

Fortified lemon cream (not suitable for patients with diabetes)
Makes 3 portions

The lemon or chocolate caramel creams are suitable for those with very small appetites who would not manage 2 x 220ml supplements per day. These have an identical nutritional profile to 120ml (3 x 40ml) ProCal Shot® / Calogen®/Calogen Extra® [1 portion needed per day]

Ingredients


- 300ml double cream
- 70g caster sugar
- Juice of 1 – 1½ lemons
- 30g skimmed milk powder

Directions
Put cream and milk powder in a small saucepan. Gently heat until milk powder has dissolved. Add sugar. Bring to the boil and boil for 3 minutes.

East Lancashire Health Economy
Medicines Management Board
www.elhmb.nhs.uk

Snacks – a variety of snacks can be provided to boost calorie and protein intake

1 portion = 100ml



Fortified chocolate caramel cream
Makes 3 portions

Ingredients

- 150ml double cream
- 30g skimmed milk powder
- 30ml full fat milk
- 2 x standard size (approx. 50g) Mars Bars or similar nougat-caramel chocolate bars

East Lancashire Health Economy
Medicines Management Board
www.elhmb.nhs.uk

Prescribing of oral nutrition supplements for residents in care and nursing homes
Patient Information Leaflet

Changes to sip feed prescribing?

East Lancashire Medicines Management Board (ELMMB) has supported the decision that, as of 3rd April 2017, GPs should no longer prescribe oral nutritional supplements (sip feeds) for the majority of residents in catered care and nursing homes. This policy does NOT include residents fed via a percutaneous endoscopic gastrostomy tube (PEG tube).

Why have these recommendations been made?

Care and nursing homes are responsible for the provision of suitable food and drink for their residents; all homes are able to provide residents with appropriate meals and snacks. The homes will continue to weigh residents regularly. Any resident thought to be at risk of malnutrition will be offered options to increase their calorie and protein intake and their progress will be followed. The provision of sip feeds is not the best way to provide the extra calories and protein needed.

What are the alternatives to sip feeds?

Residents who are considered to be at risk of malnutrition will have their meals fortified. This involves adding extra ingredients to meals to increase the energy and protein content, without increasing the volume. This could include adding milk powder, grated cheese, butter, cream or sugar to recipes. Homes can also provide high calorie snacks and drinks for use between meals, as well as liquidised diets for residents with swallowing difficulties.

How are homes being supported?

Written information and documents including suggestions for meal fortification and examples of high calorie drinks and snacks have been produced. Recipes for high calorie homemade supplements are also available. Care staff have access to this information and are able to refer to dietitians for guidance and advice.

Lam updated: May 2017

Snack	Amount
1	1
1	1
1	1
1/2 slice bread + thick spreading pate	1
1 cream cracker + small chunk cheese	1
1	1
1 small packet	1
1 dessert spoon	1
1 square	1
1	1
1	1
1	1
1 small tub	1
1 individually wrapped	1
1 small tub	1
1 slice	1
1/2 scone	1
1	1
1/2	1
1 small tub	1
Small piece	1
1 pot	1
1 small	1
content	1
per to increase energy and p	1
re 330kcal and 13.0g protein	1
(200ml whole milk) contains 2	1

East Lancashire Hospitals **NHS**
NHS Trust

Malnutrition in the Elderly Training

FREE training available for Nursing and Residential Homes in East Lancashire

Training includes:-

- Importance of nutrition
- Reasons for malnutrition
- Ways to recognise malnutrition
- Use of MUST tool (nursing staff and senior carers only)
- Food fortification


Training offered to:

- Nursing Staff and Senior Carers (approx. 2 hours)
- Carers and kitchen Staff (approx. 1 hour)

For more information, or to book a training date, please contact Andra Lock/Sanam Taj on 01282 602452 or email andra.lock@elht.nhs.uk or sanam.taj@elht.nhs.uk



Food First


 East Lancashire Health Economy Medicines Management Board
 www.elnmb.nhs.uk NHS

Prescribing Oral Nutrition Supplements (Sip Feeds) for care home residents

Key Points

- Regulation 14 of the Care Quality Commission (CQC) Guidance for Providers is very clear that homes are responsible for prescribing and making the arrangements for the provision of suitable meals and drinks.
- All care and nursing staff should be responsible for ensuring energy snacks where care home residents with swallowing difficulties are prescribed.
- Prescribing of Oral Nutrition Supplements for care home residents should be done in consultation with the dietitian.
- There is also the option of using commercially available oral nutrition supplements.

Nutritional status

Resident's nutritional status should be identified. Where a patient is identified to be malnourished, this means content without increasing the two or three snacks or milky drinks to around 500 kilocalories per day.

Residents currently having two energy snacks or homemade energy snacks are not getting information on providing snack options are available on the website.


Circumstances where ONS are prescribed in exceptional cases where ONS that such patients are under active review. Examples where the prescribing of ONS is appropriate:

- patients with motor neuron disease
- patients with head / neck cancer
- patients receiving sip feeds
- patients with pressure ulcers

Patients should not be discharged from care without active dietetic care.

Queries may be directed to the dietitian.

Acknowledgement: This document is an adaptation of the Food First document.



 East Lancashire Health Economy Medicines Management Board
 www.elnmb.nhs.uk NHS

Food First - Homemade supplements

Fortified milkshake

Makes 1 portion

These options are almost identical in nutritional value to 1 milkshake type sip feed e.g. Complan Shake*, Aymes Shake*, Ensure Plus* and are the most nutritionally complete option.


Ingredients <ul style="list-style-type: none"> 180ml full fat milk 30g skimmed milk powder 20g vitamin fortified milkshake powder (e.g. Nesquik* or Tesco Milkshake Mix) 	Directions Mix milk powder and milkshake powder together in a glass. Gradually mix in milk and stir well. Serve 2 portions per day	
--	--	---

1 portion = 220ml	1 portion contains:	1 portion costs:
Over the counter cost comparison: 1 sachet Complan + 200ml full fat milk (230ml) = £0.87	<ul style="list-style-type: none"> 305 calories (kcal) 17g protein 44g carbohydrate 7.5g fat 	£0.26

Fortified fruit juice (not suitable for patients with diabetes)


Makes 1 portion

These offer similar nutritional value to juice style sip feeds e.g. Resource fruit, Ensure Plus Juice*, Fresubin Jucy* Drink, FortiJuice* and are suitable for those who do not like milky drinks but are not suitable for patients with diabetes.

Ingredients <ul style="list-style-type: none"> 180ml fruit juice (flavour ideas below) 40ml undiluted high juice squash or cordial (add sugar free/ diet/ no added sugar) 10g (2 x 5g sachets) egg white powder* 	Directions Mix undiluted cordial or squash into egg white powder (do not whisk). Gradually mix in fruit juice. Serve 2 portions per day	
--	--	--

*This can be found in the home-baking section of most supermarkets or larger, better value packs can be purchased online

1 portion = 220ml	1 portion contains:	1 portion costs:
Try:	<ul style="list-style-type: none"> 212 calories (kcal) 8.4g protein 42.4g carbohydrate 0g fat 	£0.80
<ul style="list-style-type: none"> high juice blackcurrant squash + cranberry juice 	<ul style="list-style-type: none"> 205 calories (kcal) 8.4g protein 38g carbohydrate 0g fat 	£0.74
<ul style="list-style-type: none"> high juice orange squash + pineapple juice 	<ul style="list-style-type: none"> 238/250 calories (kcal) 8.6g protein 46.0/52g carbohydrate 0g fat 	£0.88/ £0.93
<ul style="list-style-type: none"> elderflower cordial (e.g. Belvoir or Bottlegreen) + apple juice 	<ul style="list-style-type: none"> 182 calories (kcal) 9.4g protein 34.2g carbohydrate 0g fat 	£0.76



 East Lancashire Health Economy Medicines Management Board
 www.elnmb.nhs.uk NHS

Food fortification – examples of extra energy and protein that can be added to fortify meals using everyday food items

	Amount **	Added to	Additional calories (kcal)	Protein Content (grams)
Savoury				
*Mayonnaise or salad cream	1tbsp	Sandwiches, mashed potato, as a condiment to meats	100	0
*Grated cheese				
Sweet				
Sugar				
*Ice-cream				
Honey				
Chocolate, grated or melted				
Jam				
Desiccated coconut				
Chopped dried fruit				
Dairy				
*Double cream				
*Butter or margarine				
Dried skimmed milk powder				
*Greek yoghurt				
Milkshake powder				

**Use fullfat varieties – not low fat
*1tbsp. = tablespoon (15ml)
1 carton Ensure Plus* 220ml of 1 carton Aymes Shake* (made)

Last updated: May 2017



 East Lancashire Health Economy Medicines Management Board
 www.elnmb.nhs.uk NHS

Fortified lemon cream (not suitable for patients with diabetes)

Makes 3 portions

The lemon or chocolate caramel creams are suitable for those with very small appetites who would not manage 2 x 220ml supplements per day. These have an identical nutritional profile to 120ml (3 x 40ml) ProCal Shot*/ Calogen*/Calogen Extra* [1 portion needed per day]


Ingredients <ul style="list-style-type: none"> 300ml double cream 70g caster sugar Juice of 1 – 1½ lemons 30g skimmed milk powder 	Directions Put cream and milk powder in a small saucepan. Gently heat until milk powder has dissolved. Add sugar. Bring to the boil and boil for 3 minutes. Thoroughly mix in lemon juice to taste. Pour into 3 small dessert bowls and chill. Serve 1 portion per day only Will keep (covered) in fridge for 3 days.	
--	--	--

1 portion = 100ml	1 portion contains:	1 portion costs:
	<ul style="list-style-type: none"> 618 calories (kcal) 5g protein 31.6g carbohydrate 53g fat 	£0.46 – 0.53

Fortified chocolate caramel cream (not suitable for patients with diabetes)

Makes 3 portions

Ingredients <ul style="list-style-type: none"> 150ml double cream 30g skimmed milk powder 30ml full fat milk 2 x standard size (approx. 50g) Mars Bars or similar nougat-caramel chocolate bars 	Directions Put cream, milk and milk powder in a small saucepan. Gently heat until milk powder has dissolved. Add finely chopped Mars Bars. Heat gently, stirring all the time, until Mars Bars have completely melted. Pour into 3 small dessert bowls and chill. Serve 1 portion per day only Will keep (covered) in fridge for 3 days.	
--	---	--

1 portion = 80ml	1 portion contains:	1 portion costs:
	<ul style="list-style-type: none"> 440 calories (kcal) 6g protein 30.1g carbohydrate 32.8g fat 	£0.58

All costs calculated from major supermarket prices on 20/10/15.
For food allergen information please refer to the manufacturer's label on each individual ingredient.

Last updated: May 2017
Acknowledgement: Oxford CCG Medicines Optimisation team.

Changes to sip feed prescribing?

In April 2017 - East Lancashire and Blackburn with Darwen CCG's agreed a policy which recommends:

- GPs should no longer prescribe oral nutritional supplements (sip feeds) for the majority of residents in catered care and nursing homes
- A food fortification approach should be encouraged
- This does not include residents on tube feeds or when appropriate prescription requests made by Dietitians.

The CCGs agreed this policy because:

- Care Homes are responsible for the provision of suitable food and drink for their residents and should be able to provide residents with appropriate meals and snacks.
- All residents should be regularly MUST screened and any resident at risk of malnutrition should be offered food options to increase their calorie and protein intake through food.
- Their progress should be regularly monitored.
- The provision of sip feeds is not the only way to provide the extra calories and protein needed.



Hydration

Dehydration can cause...

Urine
infections

Falls

Constipation

Kidney
stones

Pressure
ulcers

Confusion

Reduced
appetite

Drowsiness

Possible signs of Dehydration

- Dry mouth and nose
- Tongue furrowing and dryness
- Coated tongue
- Absence of saliva
- Lethargy, tiredness
- Confusion
- Constipation
- Small volume of concentrated urine

Improving Fluid Intake

- You can achieve a 50% decrease in falls by:
 - making water more accessible and visible
 - reminding residents to drink

All drinks count

- Prompt and encourage
- Encourage “wet” foods
- Use a familiar or coloured glass/beaker/cup
- Know the volume of regularly used cups and ensure recording of intake

Bristol Stool Chart








Use the Bristol Stool Chart to help determine your patients intestinal health.

The consistency of stools depends on how long it has spent in the colon. The longer it spends 'in transit', the more liquid is absorbed by the colon.

The chart overleaf is a general guide.

- Types 1 and 2 indicate constipation.
- Types 3 and 4 are the easiest to pass.
- Types 5 and 6 may indicate diarrhoea.
- Type 7 may be a sign of illness, for example food poisoning.

THE BRISTOL STOOL FORM SCALE

<i>Type 1</i>		Separate hard lumps, like nuts (hard to pass)
<i>Type 2</i>		Sausage-shaped but lumpy
<i>Type 3</i>		Like a sausage but with cracks on its surface
<i>Type 4</i>		Like a sausage or snake, smooth and soft
<i>Type 5</i>		Soft blobs with clear-cut edges (passed easily)
<i>Type 6</i>		Fluffy pieces with ragged edges, a mushy stool
<i>Type 7</i>		Watery, no solid pieces ENTIRELY LIQUID

Dysphagia

- Dysphagia is the medical term used for eating, drinking and swallowing difficulties
- Some people have difficulties swallowing certain foods, liquids or have no swallow at all
- Symptoms can be distressing and cause psychological burden and stress to residents and their families

Aspiration

- **Aspiration** is the medical term used for when fluids or food go in the wrong place and enter the airway
- Food/ fluid/ saliva can make their way into the airway below the level of the vocal cords
- This may cause harmful bacteria to grow in the lungs causing a serious infection called aspiration pneumonia.

Signs of Dysphagia

- Coughing or choking before, during or shortly after eating and/or drinking
- Shortness of breath/distress during eating and drinking
- Food loss from the mouth or food sticking in the throat
- Throat clearing and frequent, repetitive swallows
- Effortful swallowing
- Wet / gurgly voice
- Recurrent chest infections





Conditions often associated with dysphagia

- Stroke
- Parkinson's Disease
- Multiple Sclerosis
- Alzheimer's/dementia
- Huntington's disease
- Motor Neurone Disease
- Head Injury/Brain Tumour
- Respiratory Conditions
- Mental Health Conditions - Anxiety, Depression
- Clinical deterioration – UTI's etc
- Head and Neck Cancer where residents may have had radiotherapy/chemotherapy

How to thicken fluids

1. Make drink

Always add sugar and milk to hot drinks before thickening.



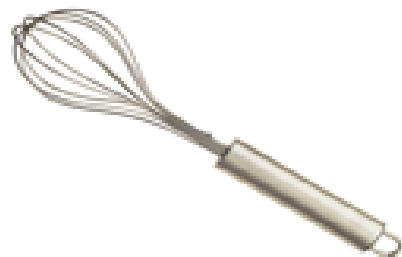
2. Measure

- Measure out the required quantity of thickener using the scoop provided in the Nutilis tin.
- Do not allow moisture into the tin.



3. Add & Stir

Stir the drink and sprinkle in the thickener gradually, mixing well with a whisk or fork.



4. Stand

Leave to stand for one minute (Cold drinks can take longer to thicken than hot drinks)





Stage 1 – Slightly Thick Fluid



- Can be drunk through a straw (if advised)
- Can be drunk from a cup
- Leaves a thin coat on the back of a spoon
- Syrup consistency

Stage 2 – Thick fluids



- Cannot be drunk through a straw
- Can be drunk from a cup
- Leaves a thick coat on the back of a spoon
- A teaspoon will fall to the side of the glass if placed in the drink
- Custard consistency

Stage 3 – Very Thick



- Cannot be drunk through a straw
- Cannot be drunk from a cup
- Needs to be taken with a spoon
- A teaspoon will stand up unaided if placed in the drink
- Pudding consistency

Want to find out more?

MUST training is available from Dietetics

Enhanced Nutrition and Swallow training is also available from Dietetics and Speech Therapy

Also available

[PrescQIPP for Care Homes](#) and log in using the code
pqcarehomes1medsonly

Questions?