Older People’s Essential Nutrition (OPEN): an integrated approach for malnutrition screening awareness, identification and care planning

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Aim

To evaluate the implementation of a new approach involving collaborative working across health, social care and the voluntary sector in Eastleigh, Hampshire and to determine whether this led to reduced numbers of older people at risk of malnutrition

Methods

April 2014
Engagement, scoping, identification of project site, meetings with key teams & stakeholders.
Establishment of ‘Steering Group’

December 2014 – February 2015
Development of training materials, awareness resources & nutrition care pathways, via multi-disciplinary input

February – September 2015
Pre-implementation surveys conducted to determine knowledge & current practice

March 2015 – January 2016
Delivery of training to GPs, practice nurses, social care, community nursing, a local authority care home, two community pharmacies, voluntary sector workers

May 2015 – April 2016
Malnutrition screening data (using ‘MUST’) collected for 12 months by health and social care teams. Support offered and provided to teams

April 2016
Finalising & publishing training toolkit, awareness resources, generic nutrition care pathways, evaluation toolkit, including endorsement by the BDA

May 2016

July 2016

Training

Sessions were 2-hour face-to-face led by a dietitian (shorter sessions for GPs). Mix of formal learning, group work, case studies & practical work. ‘MUST’ training included for nurses, social care and care home

Training results

190 staff were trained from health (n=48), social care (n=48), care home (n=50), voluntary sector (n=44)

Over 80% of the health and social care workforce in the pilot area trained

Increased knowledge and awareness was evident across all staff groups from analysis of pre- and post-session knowledge assessments and follow up surveys

Increased awareness when working with clients has led to formal and informal adjustments to practice

Several screenings done by social care and practice nurses, who were not screening before the programme

Screening results

• 375 people screened at least once
• 61 people screened more than once, of which 51% (n=31) had improved nutritional status reflected by decreased ‘MUST’ score and/or increased weight

<table>
<thead>
<tr>
<th>Team</th>
<th>No. people screened at least once</th>
<th>No. and percentage at risk of malnutrition at initial screening (% at medium and high risk)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community nursing</td>
<td>270</td>
<td>48 (17.6%: 6.6% medium risk; 17% high risk)</td>
</tr>
<tr>
<td>Care home</td>
<td>71</td>
<td>23 (32%: 15% medium risk; 17% high risk)</td>
</tr>
<tr>
<td>Social care</td>
<td>29</td>
<td>2 (8.3%: all high risk)</td>
</tr>
<tr>
<td>GPs / Practice nurses</td>
<td>5</td>
<td>2 (40%: 20% medium risk; 20% high risk)</td>
</tr>
</tbody>
</table>

Conclusions

• A range of health and social care staff engaged with this approach, by starting to use ‘MUST’ and identifying older people at risk of malnutrition, and implementing care pathways.
• Those already using ‘MUST’ were supported to carry this out more effectively than before.
• Whilst further research is needed to understand how to overcome the barriers to ‘MUST’ screening & implementation of care pathways, the programme shows the potential for using an integrated approach to screen and provide care plans for a wider population of older people.

Key challenges

• Demonstrating a true integrated approach
• Staff adapting and accepting new roles
• Difficult to provide on-going care to clients to ensure nutritional change is achieved
• Sharing information between teams
• Other clinical priorities & pressures taking precedence

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