

**Recipient of the
Workforce Development
Innovation Fund 2015/16**



learn
from others

Staffordshire County Council in partnership with Stafford and Stoke on Trent Partnership NHS

Nutrition champions

This project addressed the following priorities:

1. Projects that test approaches to skills development which support prevention and early intervention with a focus on the integration of services (health, housing, social care and other). Projects should make use of and build upon the 'Principles of Workforce Integration'.
2. Projects that model approaches to developing a workforce with the skills necessary to provide improved person-centred care and support through multi-disciplinary working.

This NHS partnership and local authority overcame multiple challenges to deliver a successful and sustainable project improving nutrition for people in residential care homes. The team involved dietitians, chefs, speech and language therapists, nurses, care workers and care managers working together to ensure early identification of risk of malnutrition, and a consistent approach to nutritional care across Staffordshire.

Staffordshire County Council provides support to more than 600 independent care providers around the county.

The Stafford and Stoke on Trent NHS Partnership Trust (SSOTP) has a small team of dietitians and dietetic assistants who were receiving a high number of referrals from care providers because people in their care weren't eating enough, were losing weight, and were at risk of disease-related malnutrition.

The dietetics team identified the need for improved training for care workers and catering staff in how to follow the Staffordshire Nutritional Support Guidelines and use best practice set out by BAPEN (formerly the British Association of Parenteral and Enteral Nutrition), particularly the Malnutrition Universal Screening Tool (MUST). This is a five-step process for identifying adults who are malnourished, at risk of malnutrition or obese. It includes management guidelines for developing care plans. MUST was designed for use by all care workers.

A training needs analysis conducted on a sample of the social care workforce revealed a lack of understanding and knowledge about good nutrition, and a lack of skill in identifying the early signs of malnutrition. Also poor nutrition was identified as being a contributory factor in adult protection referrals to the local authority.

This project was designed to promote early interventions for better health, contribute to keeping people in their own homes or in residential care for longer, and to help provide a better quality of life for the people receiving care and support.

What we wanted to achieve

The specific aims of the project were to:

- improve knowledge about malnutrition issues for care workers and qualified nurses in nursing homes
- ensure early identification of malnutrition and reduce unnecessary referrals to GPs, dietetics services and hospitals
- promote the food first approach (best practice states nutritional supplements should not be used as first line treatment, rather everyday meals and snacks should be fortified to increase calories and protein)
- reduce the use of nutritional supplements – as a direct consequence of the improvement in implementing the food first approach
- increase understanding and application of the Staffordshire Nutritional Support Guidelines
- increase and/ or improve the use of fluid or hydration charts and the use of the Malnutrition Universal Screening Tool
- work with chefs and catering leads to devise specific menus and snacks to address the specific issues identified for individuals
- improve communication between teams
- contribute to a reduction in adult protection referrals linked to nutrition.

We wanted to achieve a more standardised, and consistent approach to nutrition screening and food fortification by delivering half day training sessions for care workers and staff across the whole of Staffordshire. In addition, we wanted to train 'Nutrition Champions' from 13 care services. These champions would be the link for dietetics professionals, and the lead on nutrition within their care provider.

Ultimately we wanted to empower care workers and catering staff to improve nutrition for the people who need their care and support.

What we did

Working in partnership a team from Staffordshire County Council, and from Stafford and Stoke on

Trent Partnership Trust organised and delivered training eight sessions to 285 care workers, volunteer and ancillary staff, and nursing and residential home nurses from 85 different care providers.

We used a standard training package on nutrition issues to teach how to identify early signs of malnutrition, and how to put into practice the Staffordshire Nutrition Support Guidelines.

We further developed an intensive training package for 25 nutrition champions from 12 organisations, which focussed on malnutrition, screening, and food fortification and was linked to the Level 3 Unit: Promote Nutrition and Hydration in Health and Social Care settings.

As part of the course, the champions developed their own nutrition projects for the people who need their care and support. The 12 projects included:

- Introduction of a trolley of high protein/ high calorie snacks and milkshakes for residents in care homes who are identified by the screening tool as being at risk of malnutrition. And provision of regular training to staff on malnutrition and use of the screening tool.
- Joint-work with catering staff to produce menus including fortified soups, custard, porridge, and to consistently cook and serve fortified recipes

The champions' projects were overseen by the dietetics team, who looked at supplement use, number of inappropriate referrals and use of the MUST. Knowledge of the wider care staff was assessed before the champions' projects began, and then after to assess the impact.

The dietetics team supported the champions by:

- Meeting with care home/ care agency managers to ensure they were supportive of the planned projects.
- Offering in-house training to care homes involved in the overall nutrition project. The aim was to support those care-workers who wanted to deliver training themselves and also to promote the nutrition champions' roles and their specific projects.
- Analysing recipes and offering advice and support on fortifying meals.

- Encouraging people involved to put processes in place to ensure the longevity of the project, for example daily use of the new recipes, and more effective communication between kitchen and care staff.
- Liaising with speech and language therapists to include guidance on the impact of food texture.

What we achieved

From the nutrition champions' pilot of the 12 original projects, nine were implemented. Two of these projects were in homes for adults with learning disabilities and were focussed on improving communication about the nutritional needs of people who needed care and support, rather than malnutrition.

From the seven projects in care homes there was an overall 16 per cent reduction in the use of supplements and a 20 per cent improvement in staff knowledge post implementation of the champions' projects. The numbers of inappropriate referrals to the dietetics teams dropped by 71 per cent.

Our snack trolley is up and running, the residents love the food and have been saying how nice it all is. I did not really want to do the course to start with but I'm glad I did - to see what impact it's had with me now being able to tell all the other staff how important nutrition is.

Sophie Bailey, Chef, Manor House

Examples of individual project outcomes included:

Residential care home with a team of two nutrition champions: a chef and a nurse

- A trolley of high protein/ calorie snacks and drinks is now available to residents. The chef created food fortification recipes.
- The kitchen is made aware of any patients who are losing weight and their MUST scores. Reports from dieticians, and speech

and language therapists are also given to the kitchen.

- The nurse working on the floor devised a system to avoid wastage by communicating specifically which snacks and drinks residents required.
- The nurse, with start-up support from the dietetic team began training staff on malnutrition and screening. (Quotes and photos available)

Residential care home with one nutrition champion: a nurse

- Implemented the use of the Malnutrition Universal Screening Tool and trained the wider care staff in-house

Residential care home with two champions: one care worker and one chef

- The aim was to consistently cook and serve fortified recipes that people wanted to eat. Their recipes included soups, porridge, custard, mashed potato. This care provider had the biggest reduction in use of supplements by the end of the project.

What we learnt

We overcame numerous challenges to achieve success in the overall project. The first challenge was that a number of nutrition champions dropped out because they moved jobs. This really highlighted the impact of high staff turnover within the care sector, and how important it is to deliver ongoing training and to have succession plans in place so work is carried on when a key staff member leaves.

Another barrier was effective relationship-building and communication between kitchen staff, and care staff. For example in one particular setting, where two care workers were the nutrition champions, there was resistance to the project from the chef. To overcome this we included the chef and the care manager in planning meeting discussions and decisions to improve their understanding of the aims of the project.

From this we learned that the ideal programme delivery would involve chefs and kitchen staff from the start, and the optimum nutrition champion partnership would be one care worker,

and one chef or kitchen worker.

It is also key to secure the care manager's support from the outset, to support the aims of the project and the wider training. The most effective approach would be to include nutrition awareness and use of the Malnutrition Universal Screening Tool in the induction programme. We also learned it wasn't possible to obtain the adult protection referral data we had anticipated. This was because the safeguarding team logs nutrition issues as a contributory factor rather than a main cause of a referral, therefore the data would not have supported the assessment of impact of the training on reducing the adult protection referrals.

For more information please email:

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Skills for Care recommends

Food nutrition and hydration remains a key area of focus for many care services, including those regulated by the CQC. Skills for Care can help employers to develop their staff skills further.

Care Certificate

For those joining the sector, these induction standards provide essential learning. Standard 8 focuses on fluids and nutrition.

www.skillsforcare.org.uk/carecertificate

Endorsed learning providers

Skills for Care recommends these quality learning providers offering a wide range of courses, including those related to food and nutrition.

www.skillsforcare.org.uk/endorsement

Learning and Development

From initial induction through to continuing professional development, this section helps understand what is available.

www.skillsforcare.org.uk/learning

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