

The Role Of Good Nutrition In Managing Falls and Fractures In Care Homes

Eating a balanced diet, rich in calcium, reduces the risk of falls and fractures; especially as we get older. To stay healthy we need a diet that includes the correct balance of the following:

CARBOHYDRATES

These provide most of the energy that we need. As we get older activity levels tend to reduce and we require less energy(calories) ,however for some residents these increase as a result of certain medical conditions such as Parkinson's and dementia . Examples of carbohydrates are bread, potatoes, rice or pasta.

PROTEIN

This is important for the body's cells and tissues to be repaired and replaced. Adequate amounts of protein are needed to maintain muscle mass. You will find protein in milk products but also in meat, fish, eggs, pulses, nut sand fortified breakfast cereals.

VITAMINS

These support many different functions, including blood clotting, maintaining an effective immune system, and allowing the body to absorb energy from foods. Fruit and vegetables are good sources of vitamins.

Vitamin D- this is important for good bone health. The best source of Vitamin D is sunlight. Dietary sources include oily fish, eggs, full fat milk and fortified breakfast cereals

MINERALS

Calcium helps to build strong bones and a lack of this can cause osteoporosis which may cause broken bones in older people. Milk and dairy products are good providers of calcium. Other sources include eggs, pulses and nuts.

FIBRE

This promotes a healthy bowel and helps to remove waste products from the body. Fruit, vegetables, wholemeal bread, nuts and seeds are high in fibre.

A diet that does not include the right balance of everything we need can lead to illness and ill-health. A healthy, balanced diet will give an individual the nutrients their body needs to function properly.

FLUID

An adequate fluid intake will help keep residents hydrated and therefore help to reduce the incidence of constipation, urinary tract infections, headaches, confusion, dizziness and irritability.

To stay hydrated it is recommended that residents drink at least six to eight cups of liquid every day – a minimum of 1500mls. These should include water, fruit juice, milk, tea and coffee.

Getting the balance right

It may be hard to track the nutrient intake for individuals as some foods will provide more than one benefit. The eatwell guide is the model supported by Food Standards Scotland and is used widely in the UK to illustrate a healthy diet and is suitable for most groups of people, having been adapted from the eatwell plate.

It shows the five main food groups and the proportions of each food group recommended as part of a healthy diet. The 'eatwell' guide illustrates how much of each food group we should eat in order to have a healthy balanced diet. It is divided into segments to symbolise each food group, and the general proportion of our plate each should take up. We don't have to follow this with every single meal – it can be achieved over a day or even several days. The important thing is to get the balance right by eating more from the larger four food groups and less food from the smaller ones.

Eatwell Guide

Check the label on packaged foods

Each serving contains:

Energy (kcal)	Fat (g)	Saturated fat (g)	Sugars (g)	Salt (g)
225kcal	7g	1.3g	24g	0.9g
100kcal	3g	0.5g	10g	0.4g

of an adult's reference intake
Typical values (as sold) per 100g/100ml/100kcal

Choose foods lower in fat, salt and sugars

Use the Eatwell Guide to help you get a balance of healthier and more sustainable food. It shows how much of what you eat overall should come from each food group.



Water, lower fat milk, sugar-free drinks including tea and coffee all count.

Limit fruit juice and/or smoothies to a total of 150ml a day.



Eat less often and in small amounts

Per day 2000kcal 2500kcal = ALL FOOD + ALL DRINKS

Source: Public Health England in association with the Welsh government, Food Standards Scotland and the Food Standards Agency in Northern Ireland

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Use the **eatwell guide**
to help you get
the balance right

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Note, healthy eating messages do not
apply to over underweight elderly people

Signs and Symptoms of Poor Nutrition:

Statistics suggest that around a third of people admitted to hospital or care in the UK are **malnourished** or at risk of becoming so.



Malnourished

The term malnourished means that an individual's diet does not contain the right balance of nutrients it needs to function properly. This could include under nutrition, when a person does not get enough nutrients or over nutrition, when a person has more nutrients than they need.

Signs and symptoms that a person is not having the correct balance of **nutrients** include:

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| ✗ Muscle weakness | ✗ Depression |
| ✗ Feeling tired all the time or lacking energy | ✗ Poor/delayed wound healing |
| ✗ Increased infections or taking a long time to recover | ✗ Poor concentration |
| ✗ Dizziness and or more falls | ✗ Difficulty keeping warm |
| ✗ Constipation or diarrhoea | ✗ Dehydration |
| ✗ Losing weight | ✗ Reducing muscle |
| ✗ Changes in behaviour | ✗ |

If adults lose 5-10% or more of their body weight within three to six months and they're not trying to lose weight, it could be a sign that they are at risk of malnourishment. Sometimes, weight loss isn't obvious because it occurs slowly, over time. You may notice individuals' clothes; belts and jewellery gradually feel looser.

Food provided should be in accordance with an individual's care plan and ensure that cultural preference, health conditions and allergen advice is followed. Food safety principles need to be applied when storing, preparing and handling food. If the care plan states that they need encouragement, or help and support with eating, this needs to be provided. Food needs to be served at the right temperature and within easy reach. If an individual needs specific utensils to eat independently, these need to be available too. As with concerns about fluid intake, any worries about an individual's food or nutrition should be shared with a senior member of staff, the individual's carer or their family.

Useful information such as portion size, approach and support needed for individuals should be recorded within the care/support plan and daily fluid and food intake should be recorded within the Daily Case Notes so nutrition and hydration can be reviewed and needs identified as early as possible

MUST: Malnutrition Universal Screening Tool

One of the tools available to care staff specifically in support of nutrition is the Malnutrition Universal Screening Tool known as MUST. The MUST tool is a validated nutrition screening tool developed by charitable association BAPEN and is available along with guidance from: <http://www.bapen.org.uk/screening-and-must/must/must-toolkit>

The 'MUST' is a five-step screening tool to identify adults, who are malnourished, at risk of malnutrition or obese. People assessed as high risk should be investigated further for possible reasons for weight loss/poor appetite and these should be resolved where possible e.g. low mood, recent illness, observed new difficulties with eating, drinking and swallowing – a referral should be made with a Speech & Language Therapist if swallowing is noted to be a problem.

NHS Forth Valley first line advice is to maximise dietary intake for 4 weeks per the current **Guidelines and Pathway for Oral Nutritional Supplements in Care Homes** and if there is no weight stabilisation or gain after this period of time a referral should then be made to the dietitian.



TAKE NOTE

If you have concerns that an individual is not eating or drinking enough despite being encouraged and supported, use the MUST tool as well as any other fluid or food recording tools in place to monitor and assess the individuals needs and discuss your concerns with your manager who may seek advice from a specialist such as a dietitian per the pathway guidelines above.

Food Fortification

Sometimes, it is just not possible to meet nutritional requirements simply from food and GPs may prescribe nutritional supplements such as vitamins or specially fortified drinks.

However, one way care staff can help people with weight stabilisation and gain is to add nutritional value to residents' favourite and most accepted foods. A fortified (higher calorie) diet requires meal/ dishes to be adapted by adding small quantities of everyday foods to increase the calorie value. The goal is to power pack each mouthful of food and drink for those who cannot or do not want to consume large volumes.



What is food fortification?

Adding ordinary, household ingredients to normal food to increase its nutritional content, without increasing the amount of food which needs to be eaten

What is the aim of food fortification?

Together with 2 – 3 small, between-meal snacks and milky drinks, to increase nutritional intake by 500 calories per day

Is fortified food suitable for everyone?

No – it should only be provided for those at medium or high risk of malnutrition according to MUST. Remember - nutritional care must always be person-centred.

The following table from NHS Forth Valley Dietetics shows how the effect of some of the ingredients used to fortify (add calorific value) to meals and or snacks and can easily be copied, cut out, laminated and placed in kitchens as a simple reminder:

Food Fortification List

e.g. 1 pint of full fat milk (375kcal) + 4 tablespoons of dried milk powder (+160kcal) = 535kcal

Butter	Pat (10g)	75	0
Single Cream	1 tablespoon	30	0.25
Double Cream	1 tablespoon	70	0.25
Mayonnaise	1 tablespoon	100	0
Chocolate Spread	1 tablespoon	80	1
Smooth Peanut Butter	1 tablespoon	100	4
Evaporated Milk	1 tablespoon	20	1.3
Milk Powder	1 tablespoon	40	3.3
Cheese	Matchbox (30g)	125	7.5
Sugar	1 teaspoon	20	0
Honey/Jam	1 teaspoon	50	0
Thick & Creamy Yoghurt	150g pot	180+	6

Remember to fortify each individual snack/meal to ensure full value of the calories.