Care Home **Greater Glasgow** and Clyde Collaborative Newsletter August 2023

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Intergenerational Project

The summer is well underway now and we were delighted to be invited to Braehead Primary School in West Dunbartonshire to attend the last day before the summer holidays. Children involved in the Intergenerational Project with Crosslet Care Home got to say cheerio to the residents they had made friends with at the care home.

Children and residents recalled activities they had done together over the past year with smiles and laughter. The school and care home have developed a sustainable model that everyone benefits from. Great example of Intergenerational Relationships.



Issue 3



9am - 4.30pm **Holy Rosary Thursday 24th August** Book your place now via our website

SSKINS Study Day

Join us at Holy Rosary Care Home in Inverclyde for a free education event open to all care home nurses, carers and activity staff on Thursday 24th August.

Programme:

- Skin Inspection Risk assessment, Skin inspection, What is a Pressure Ulcer? Skin Care
- Surface Assessment for and care of different types of pressure relieving equipment
- Keep moving Repositioning, importance of physical activity
- Incontinence and Moisture Management
- Nutrition and Hydration
- Self-Management

World Continence Week 2023 19 - 23 June 2023

This year's theme was "Commitment to Collaboration in Continence Care." Joanne Miller, Continence Nurse Specialist, NHSGGC Sphere Bladder and Bowel Service, ran 4 workshops with colleagues in care homes across Greater Glasgow and Clyde. The CHC team supported Joanne at Queens Quay House in West Dunbartonshire. There were various sessions including dispelling myths and misconceptions and demonstrations with practical tips that generated good discussion and learning. Stuart Wilson, HCSW, finished off the afternoon with information on the importance of nutrition and hydration in relation to bladder and bowel health.

Three new workshops have been scheduled and can be booked below using the links.

12th September, <u>Inverclyde Royal Hospital</u>
24th October, <u>Vale of Leven Hospital</u>
21st November, <u>Montrose Day Centre, Paisley</u>



Meet our team... In this issue we introduce Gillian and Stephen



Hello, I am Gillian, Advanced Practice Care Home Dietitian at the Care Home Collaborative. I have been a Dietitian for 20 years and worked across acute and community settings. For 7 years I have specialised in care homes as I really enjoy working with care home staff and residents to support projects that promote nutritional care and enjoyable mealtimes.

Gillian Mackay, Advanced Practice Care Home Dietitian Working within the CHC has given me the opportunity to work collaboratively with colleagues across health and social care. In partnership with Care Home Dietetic Team we have developed key projects including; Project Milkshake, testing out standardised nutritional recipes to support the management of nutritional risks in residents, and currently testing out the newly developed Mealtime Champions Training and Observation Tools to enhance the mealtime experience. There is a variety of training now available on the website including, digital resources from our IDDSI and MUST videos and testing the use of webinar training to support access for all homes across GGC.

Hello, I'm Stephen, Project Manager for the Care Home Collaborative (CHC). All my working life has been spent in the NHS, where I have worked on a wide range of different projects, including mental health, children's health and care of the elderly, and everything in between. I joined the CHC in September 2021 and I am excited to be part of this new service.

As a Project Manager most of my work is behind the scenes and supports the whole team. However, I can safely say that I have never worked with a more dedicated and passionate team of people than the members of the CHC. The commitment and enthusiasm from the care home staff I've worked alongside over the last two years has also been incredible. We've started a number of joint projects in care homes, and I'm really looking forward to seeing how these projects make a difference to residents in the future.



Stephen French, Project Manager

Focus on food, fluid and nutrition

New Resources

The Care Home Dietitians developed training and resources for new staff in one of the care homes on key topics of food, fluid and nutrition as part of a robust induction programme.

Following on from the training sessions, the care home staff and dietitians created these training posters as an additional teaching resource for staff, and have proved to be very popular. We will be using and sharing this resource at the Care Home Collaborative training sessions.

There are three digital posters available on the Care Home Collaborative website under Resources.

- Food Fortification
- Mealtime Experience
- <u>Hydration</u>

Please feel free to use and share.

We welcome all feedback and want to hear from you on how we can improve and create resources that support training and awareness of food, fluid and nutrition in care homes.



NHS FOOD FORTIFICATION Care Home Collaborative Key points to support a food first approach for residents who require it

What is fortification?

Food fortification, also known as food first means adding additional calories, protein and micronutrients to food to increase the nutritional value in the same or a similar portion. Food 0 fortification is a useful tool for those at risk of malnutrition. losing weight or have a generally poor appetite.

Why do we fortify?

- To increase the nutritional value of MICLA a residents diet
- Provides extra nourishment using familiar foods
- To avoid having to ask the person Q to eat more
 - Way of offering extra nourishment with less food
- 00 Improves the flavour of foods

Fortifiers

- Protein: 30g skimmed milk powder = 100kcals and 10g protein
- · 1 pint fortified milk (using whole milk) = 600kcals and 40g protein
- · 3 dessertspoons evaporated milk = 75kcals and 3g protein
- · 2 tablespoons nut butter = 200kcals and
- 8a protein
- 30g cheese = 125kcal and 8g protein

Which fluids count?

Eat your water!

Gravy

Tips to support fluid

Jelly

intake:

aids etc

Water, tea, coffee, squash, juices, fizzy drinks and milk all count as fluid. Milky drinks e.g hot chocolate and milkshakes are best as they contain protein and calories too.

NB: Alcohol does not c

Here are some high water content foods hat can count towards fluid intake:

Clear soup

Ice Cream

Yoghurt

High water content fruit and veg such as: strawberries, melon, oranges, cucumber, mushrooms, and lettuce

Consider sensory needs: glasses, hearing

Understand why your resident may be

Understand why your resident may be relucant to drink Encourage visitors to support fluid intake Socialise with resident and make it fun Support residents to decide which drink they would like Provide sufficient opportunities to drink Does worr resident like a particular cru2.

Does your resident like a particular cup?
Does your resident need assistance?

HYDRATION ood hydration for residents

Key points for de

Care Home

Key Hydration Points Dehydration happens when the am of fluids taken are not enough to

- replace the fluids lost. 1 in 5 people living in long term care are dehydrated
- Drinks provide 70-80% of water needs
 20-30% of water needs comes from food General recommendation is 6 to 8
- General recommendation is 6 to 8 glasses per day
 30ml/kg is more individualised: Aim minimum 1500mls/day







Signs of dehydration:

- Thirst Infrequent passing / passing small amounts of urine Darker urine colour Muscle cramps Confusion
- Constipation Urinary Tract Infections (UTIs) Modd Change Mobility Changes Increased falls Dry/ inelastic skin Headache Dry met
- Dry mouth
 Feeling tired and fatigued



Offer familiar foods Make meals attractive

- Use suitable portion sizes, offer second helpings
- Ensure meals, snacks and drinks are 6 high in calories and protein
- Use feeding aids and utensils

Food first strategies

- Allow sufficient time between meals
- Ensure resident comfortable and Å prepared for meal
- Remember fresh air and exercise promotes good appetite
- Who would benefit?

All residents on a MUST step 5 should be given a fortified diet. You may also find that fortification needs to be continued after the MUST step 5 is stopped, to support weight maintenance. If somebody continues to gain weight and is reaching a higher BMI, discontinue fortification.

Carbohydrates:

- 1 teaspoon of sugar = 20kcals
- 1 teaspoon jam or honey = 40kcals
- 1 heaped teaspoon of hazeInut chocolate spread = 80kcals

Fats:

60kcals

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NHS

- A 9g butter pat = 75kcals
- · 3 dessertspoons of single cream =

- Before the Mealtime

- smells

During the mealtime

- Offer positive encouragement Minimise distractions Offer plated visual options to allo
- choice Regular encouragement of fluids Provide assistance if required Staff are focused on the mealtime Ensure residents in rooms get same
- experience If something is declined offer options
- The position of a person when eating and drinking is key to ensure safety at a comfortable eating experience

After the Mealtime

- Observe what residents have had to eat and drink Obtain resident feedback about
- meals Where appropriate complete food
- and fluid chart ideally once the
- meal has ended Ensure good oral hygiene after
- eating
 Review of waste- feedback to kitchen to support menu revie
 Offer residents hand wipes

MILK

- Ensure the following: Upright posture Food within reach Keep person sitting up after their meal for at least 30 minutes Head position should be straight, with the chei lower
- the chin level
- for a head tilt

- Focus on the person you are helping
- Sit at eye level and make good eye Look for cues when the person is ready
- to eat some more
- Offer sips of fluid between mouthfuls
 Discourage the person from talking with food in their mouth
- Assist gently
 Stay with the person you are assisting throughout their meal
 Use verbal prompts e.g. talking clearly
- about the food you are offering

- Key points for de vering a go Mealtime coordinator Consider music, lighting and table Staff involved in meals should know who Requires support, assistance, supervision and/or monitoring during mealtimes Requires a particular diet e.g. texture modified/fortified Consider music, lighting and table / set up
 Encourage residents to go to toilet and wash hands before meals
 Ensure there is a calm environment
 Appealing food: consider sights and Has chosen to eat in their own room Requires adapted cutlery/crockery/aids Has new/changing needs with their food, fluid and nutritional intake Positioning

to a dining chair

Practical tips

- · Shallow cups can help reduce the need
 - Residents in wheelchairs ideally moved

Care Home Awards 2023

Scottish Care has announced nominations for the 2023 National Care Home Awards are officially open!

There are thirteen categories that recognise innovation and developments. This is an opportunity for us to celebrate and recognise the outstanding work of colleagues in Independent and Third Sector Care Homes across GGC - <u>click the link to nominate now</u>





Website Feedback

The team has been developing the Care Home webpages on the NHSGGC website.

Our website is packed with training specifically for care homes.

We need your feedback to make it even better email us and tell us what you'd like to see <u>ggc.chccontact@ggc.scot.nhs.uk</u>



Learning opportunities

- Essentials in Psychological Care Dementia Training 19th September
- SSKINS 24th August, 5th October and 16th November
- SPHERE Continence Training Programme 12th September, 24th October and 21st November



Click here or scan the QR code for further details of all our learning opportunities and to book one of our sessions

How to get involved

There are many ways to get involved and the team welcomes your input.

- · Sign-up for our newsletter and updates
- Share your stories of person centred care and good practice.
- · Join our groups and inform our work

Contact us for support, information and enquiries.

Contact us

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- 🕓 0141 427 8254
- www.nhsggc.scot/carehomecollaborative
 - Follow us on Twitter @nhsggcchc



