

## Section 1

### 1:2 THE ROLE OF HEALTH CARE WORKERS IN NUTRITIONAL CARE

#### Role of the Senior Charge Nurse (SCN)

As the guardian of clinical standards and quality of care for patients the Senior Charge Nurse (SCN) has overall responsibility for the provision of safe and effective nutritional care in their clinical area. Combining strong leadership with the continuous review of nutritional care, the SCN will inspire and empower the ward team to meet both the Healthcare Improvement Scotland (2014) Clinical Food Fluid and Nutritional Care Standards and the Healthcare Improvement Scotland (2015) Complex Nutritional Care Standards through the use of the Food, Fluid and Nutrition Clinical Quality indicator, audit, patient feedback and reflection on practice. The creation of this quality culture by the SCN leads to significant and measurable improvements in the quality, safety, efficiency and experience of nutritional care with improved patient outcomes NHS Education for Scotland (2009).

#### Role of the Ward Nutrition Link Nurse

The key purpose of this role is to support the SCN in the implementation and maintenance of standards for good nutritional care at ward level. The SCN retains the overall responsibility for all care standards within the ward. (It is recognised that not all ward areas have a Nutrition Link Nurse and therefore the remit below would be the responsibility of the SCN).

Remit:

- Keeping up to date by accessing and utilizing quality resources and evidence about nutrition and hydration through continuous professional development
- Disseminating any local information regarding any nutritional care issues to ward staff
- Supporting staff to use the Nutrition Profile & the Malnutrition Universal Screening Tool ('MUST') (See Section 3)
- Ensuring that ward protocol for Right Patient Right Meal Right Time (RPRMRT) is applied in the ward and updated as appropriate (See Section 2) and the role of the mealtime coordinator is adhered to
- Ensuring staff are fully aware of the clinical risk associated with swallowing difficulties and the need for these patients to be provided with safe modified food and fluids in conjunction with the recommendations from the speech and language therapist
- Supporting staff in the implementation of Supported Mealtimes and the role of the Mealtime coordinator is utilised
- Maintaining and updating the ward Nutritional documentation
- Being proactive to ensure nutrition or menu concerns are escalated and communicated to appropriate staff
- Acting as a key contact and liaising with the local Home Enteral Nutrition team, Dietetics, Speech and Language Therapy and Catering services.
- Acting as a role model by adhering to practices that promote good nutritional

care by attending regular Food, Fluid and Nutritional local care groups ensuring Food, Fluid and Nutritional wider agendas are taken forward

- Ensuring staff are familiar with ward systems e.g. weighing scales and appropriate calibration of each ward scales twice yearly, meal/snack ordering
- Undertaking any other duties required to support the SCN e.g. audit, local teaching/training sessions as guided by the Mental Health Professional Nurse Advisors / Mental Health Practice Development Nurses / FFN Practice Development Nurse

### Role of the Ward Nurse

Nurses provide holistic patient centred care, and closely co-operate with the rest of the patient's clinical team by:

- Routine nutritional assessment and screening using 'Malnutrition Universal Screening Tool (MUST)
- Supporting patients to make appropriate food and drink choices for their clinical need, taking into account their cultural and religious needs and recording this in their clinical notes (e.g. therapeutic and texture modified diets)
- Optimising patient's food and fluid intake via food first approach if appropriate and assisting with eating and drinking as appropriate
- Ensuring that appropriate checks are carried out with regards to the suitability of Texture modified diets for individual patients as required
- Adhering to Supported Mealtimes at ward level
- Ensuring every in-patient has a completed and current nutrition profile
- Monitoring and documenting food and fluid intake when necessary
- Liaising with the local catering manager and also catering staff supporting ward based meals provision and meal time coordinator role
- Referring patients who are found to be at nutritional risk (i.e. 'MUST' of 2 or more or at risk of Refeeding Syndrome) are referred to the Dietitian
- Providing safe and effective artificial nutrition support as recommended /prescribed
- Completing the NHSGGC Mental Health recommended Screening Tool for Swallowing difficulties if a patient has any eating and drinking difficulties and refer to the NHSGGC Mental Health Speech and Language Therapy Dysphagia Pathway and if appropriate refer onto the NHSGGC Mental Health Speech and Language Therapy as appropriate
- Ensuring all dependant patients mouths are assessed and adhere to the oral care policy
- Liaising with patient and patient's relatives regarding nutritional care
- Employing timely discharge planning and liaising with the community regarding forward nutritional care planning
- Adhering to NHSGGC Nutritional Policies including the NHSGGC (2018) Physical Healthcare Policy

## Role of Medical Staff

Medical staff have a responsibility to monitor food intake and fluid balance, review blood results and weights in conjunction with nursing and other ward staff. If artificial nutrition support, intravenous or subcutaneous fluids are needed to supplement intake then they will be initiated, recorded and reassessed in a timely manner according to the NHSGGC (2018) Physical Healthcare Policy within mental health. All multidisciplinary staff should have an awareness of supported mealtimes and where possible adhere to it and be aware of the mealtime coordinator role within mental health in patient wards.

## Role of Health Care Support Worker (HCSW)

It is recommended that all HCSW's undertake the Nutritional Learn Pro module "A MUST for Healthcare" to increase their knowledge of MUST and nutrition. HCSW's must be competent to accurately provide, assist and record appropriate food and fluid intake for patients on a fluid balance or food chart and accurately weigh patients and take part in Nutritional care / MUST assessments regularly reporting back to registered Nursing Staff information about a patient's food or fluid intake, so that this can be monitored and reviewed regularly.

The HCSW will support the nurse to achieve some of the duties listed above.

### Role of Domestic/ Catering Staff

In some wards areas within NHSGGC domestic and catering staff are responsible for providing patients with meals, clean fresh drinking water is always available as required. Catering beverages are also offered as part of their daily routine. When responsible for delivering meals, these staff groups should ensure food and drinks are within reach of the patient and presented in an attractive and appealing manner. Care should be taken to communicate effectively with ward staff, as some patients may have special food and fluid requirements, or have swallowing difficulties

## Role of the NHSGGC Community Partnership Enteral Nutritional Team

If you require any assistance with enteral nutritional issues please contact the **Mental Health Dietitian** within the in patient service you work within or the **NHSGGC Community Partnership Enteral Nutritional Team ( specialist nurses and dietitians)** based at Pollok Health Centre **telephone number 0151 531 6858**

## Role of the Dietitian

The Dietitian will actively support nursing staff in implementing ward based initiatives that improve the quality of a patient's nutritional care. Whilst working in partnership with Nursing, Medical and other Allied Health Professional (AHP) staff the Dietitian has a duty of care to -

Liaise with Catering Services to ensure the food offered to patients is nutritionally balanced.

- Undertake a full nutritional assessment on patients found to be at nutritional 'risk' (i.e. MUST 2)
- Develop appropriate nutritional care plans for nutritionally at risk patients.
- Monitor and adapt care plans and patient notes to meet the changing needs of patients under the care of the Dietitian.
- Advise nursing and medical staff on nutritional interventions that may be employed to support patients who cannot achieve an adequate nutritional intake from hospital food i.e. Food, first approach if required, Oral Nutritional Supplements and Enteral Nutrition Support.
- Work in partnership with Nursing, Medical and AHP staff to develop, plan and implement appropriate nutrition education.
- Encourage consumption of food and fluids where clinically appropriate whilst working with patients

### Role of Speech and Language Therapists (SLT)

Speech and Language Therapists have a duty of care to support ward staff assessing patients with presumed oropharyngeal swallowing difficulties. On the basis of assessment, modifications to food and fluid consistency and/or strategies and postures to enhance safety and efficiency of swallowing may be identified. Specialized equipment to assist in achieving food and fluid requirements may be recommended.

Whilst working with patients SLT should encourage consumption of food and fluids where clinically appropriate. Ward staff are encouraged to make a referral where appropriate for patients with any eating and drinking difficulties to the Mental Health SLT via the Mental Health Speech & Language Therapy Dysphagia Pathway

### Role of the Occupational Therapist (OT)

Following receipt of an appropriate referral for patients who have a functional limitation which prevents them from independently eating which may compromise their nutritional status, the Occupational Therapist will assess, and provide appropriate adaptive feeding equipment to facilitate independence and support adequate nutrition. In the event of such equipment not being available from Occupational Therapy, the Occupational Therapist will advise nursing staff and/ or patient, relative or carer of the most appropriate course of action. This may involve the purchase of equipment by ward staff or the patient themselves if required following discharge.

During the assessment and rehabilitation of inpatients, Occupational Therapists will encourage good nutrition and routinely discuss nutrition / cooking skills as part of patient's overall lifestyle management. Whilst working with patients they should encourage consumption of food and fluids where clinically appropriate.

## Role of Families, Carers and Visitors

Families, carers and visitors have a vital role in supporting patients to make food and fluid choices appropriate to their individual needs. It is important that staff give patients and their relatives' information about food and fluid in hospital by disseminating the Information about Food and Health in Hospitals leaflet. This gives information on suitable foods that can be brought into hospital. Communication between staff, families, carers and visitors is vital so that they feel involved and can advocate for the patients food and fluid needs if they feel these are not being met. (Standard 5 Food, Fluid and Nutritional Care Standard- patient information and Communication)

Person Centred visiting within the NHS is a key improvement in the Programme for Government 2018-19. Highlighted in the NHSGGC Healthcare Quality Strategy (2019) as a key deliverable, work would be undertaken to ensure patients can be with the important people in their lives while in hospital for example a relative or carer.