

NUTRITION AND HYDRATION SUPPORT PRACTICE

PLEASE NOTE: Some content in these examples may be out of date. The purchased products are up to date.

PURPOSE

To provide staff guidance in the support of the consumer's nutrition and hydration.

SCOPE

Home and Residential Care

Note: The extent to which the Home Care service can manage nutrition and hydration is limited due to service delivery hours. If there are concerns regarding nutrition and hydration for home care consumers, the Registered Nurse conducts an assessment, implements a support plan and refers to the medical practitioner or other health professional as necessary.

RESPONSIBILITIES

The Registered Nurses are responsible for:

- Assessing nutrition and hydration needs of consumers and developing support plans to meet their needs
- Monitoring the nutritional and hydration status of consumers (through evaluating weights) and referring to health professionals (dietitian/speech pathologist) as required and implementing recommendations into the support plan
- Monitoring the implementation of support plans and making changes as necessary
- Ensuring the adequate supply and administration of nutritional supplements
- Reporting through clinical indicators, audits and meeting forums, the organisation's performance in supporting adequate consumer nutrition and hydration.

The Support Workers are responsible for:

- Following the support plans and supporting consumers to maintain nutrition and hydration needs
- Being alert to the risks of nutritional status decline, monitoring and recording consumer intake as necessary and referring concerns to the Registered Nurse
- Participating in training to ensure appropriate skills in the provision of meals and hydration, and the preparation and provision of modified meals and drinks.

RISK IDENTIFICATION

If referral information identifies the consumer has dietary allergies, a swallowing deficit or the need for restricted fluids, the Registered Nurse develops a support plan on admission to address these issues immediately. An initial swallowing screen is conducted by the Registered Nurse if there are dysphagia concerns and a referral is made to the Speech Pathologist.

Staff are advised of these risks via Handover and an alert is placed on the support plan.

Residential care

Only the Registered Nurse can alter the modified texture/fluids level provided to the catering service; this is done through a documented form, signed by the Registered Nurse. Details of consumer's modified dietary and fluid requirements are available to staff providing food and fluids.

ASSESSMENT

Assessment (using relevant documentation) includes interviewing the consumer/representative and seeking previous assessment and referral information to understand: consumer likes and

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dislikes, preferred location for meals, current nutritional status, past medical history, risk factors, functional impairments that may impact on the ability to eat and drink, swallowing status and the need for modified diet or fluids, oral and dental status, skin integrity status, cognitive impairment, weight, cultural or religious requirements, medications, allergies and any other relevant information.

Home care

Home care consumers are not afforded a full nutrition and hydration assessment unless there are indications from referral or assessment that this is necessary.

Residential care

Each consumer has a food and fluid intake chart completed for three days within the first two weeks of admission to ascertain 'usual' dietary and fluid intake. The results of this is discussed with the consumer and contributes to the support plan.

See also Assessment and Support Planning Practice.

SUPPORT PLANNING

The support plan is developed with the consumer giving consideration to the abovementioned.

Home care

Consumers who require nutrition and hydration support are assessed by the Registered Nurse and referred to their medical practitioner for referral to a Dietitian or Speech Pathologist who will provide information to the Registered Nurse to include in the support plan.

Residential care

Consumers are weighed monthly (or more often if identified as at risk of weight loss) unless contraindicated (eg palliative care). Weights are documented and monitored/evaluated by the Registered Nurse who reviews the support plan should there be evidence of weight loss/gain.

CARE PROVISION

Staff support consumers to access food and fluids by:

- Providing consumers, the opportunity to make food and fluid choices
- Providing mobility support and appropriate, safe positioning to eat and drink
- Ensuring they support the consumer to consume their meals by sitting beside them and pacing the meal to suit the consumer's needs
- Ensuring fluids are available and accessible for all consumers with consideration to fluid modification
- Providing additional fluids during hot weather with consideration to consumers' fluid restriction requirements
- Providing nutritional supplements as prescribed
- Recording intake and reporting meals and drinks that are not consumed to the Registered Nurse/Supervisor.

Weight loss or gain is monitored and reported by staff as per the flow chart below and appropriate actions taken to support consumers.

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Dietary and fluid modification

Residential care

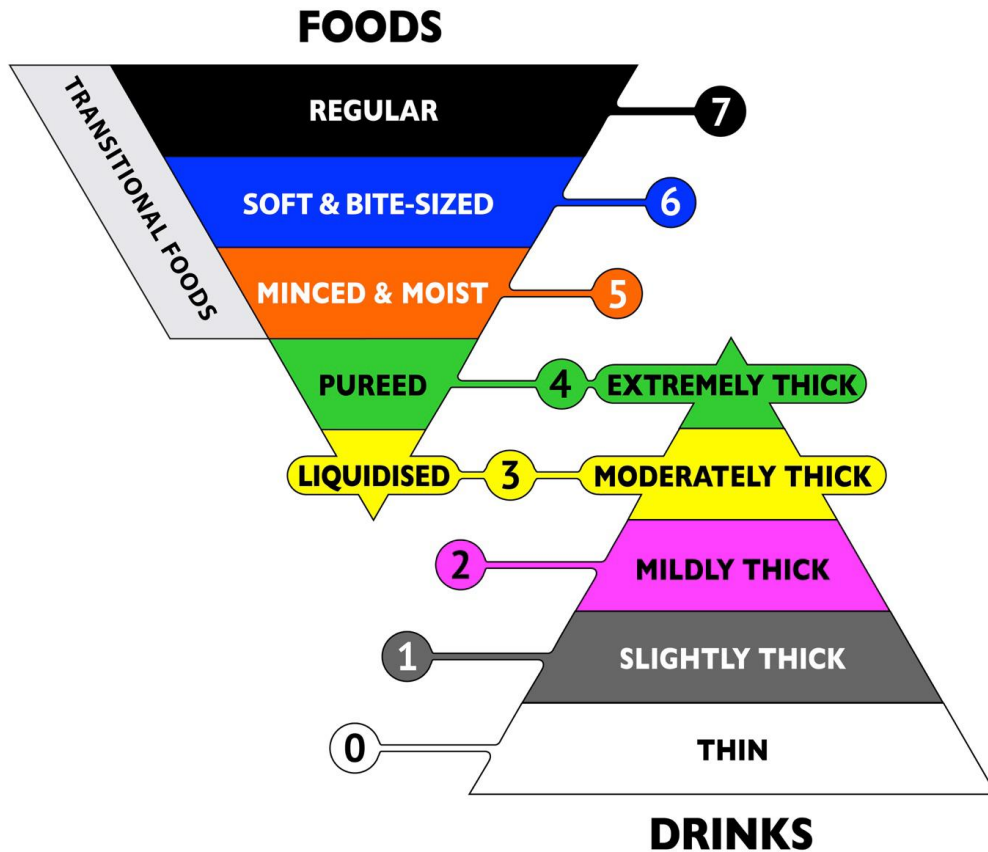
Only the Registered Nurse can alter the modified texture/fluids level provided to the catering service; this is done through a documented form, signed by the Registered Nurse.

Consumers who have swallowing impairment are assessed by the Speech Pathologist and a safe swallowing plan is developed and implemented in consultation with the consumer. Modified food and fluid textures are provided as per the International Dysphagia Diet Standardisation Initiative¹ and as per the specific care plan outlining the type of modification required and thickening requirements to meet the dysphagia guidelines.

Relevant staff are provided with training in the preparation and provision of modified diets and fluids and in supporting people with dysphagia to consume their meals and drinks. Staff are also trained in the management of choking: Refer to Managing Life Threatening Events Practice for information on managing choking. See the Resources file for more information on the IDDSI Framework guidelines.

¹ The International Dysphagia Diet Standardisation Initiative 2016 <https://iddsi.org/framework/>

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Residential care menu choices

The Dietitian consults on all menus and ensures appropriate nutritional content. Menus are provided to consumers to make their food choices with consideration to their assessed requirements, cultural preferences, likes and dislikes and diet and fluid modification. Consumers are provided with breakfast, lunch, dinner, morning and afternoon tea and supper.

Fresh fruit and fluids are available to all consumers (with consideration to their modified diet/fluid requirements). All consumers have choice regarding their food and fluid options. Consumers living with dementia are supported to express their views and choices regarding menu choices even if they may not be able to remember their choices.

Nutritional supplements and alternative options are provided to ensure consumers are supported to maintain their nutritional and hydration status in line with their health.

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REFERRAL

The Registered Nurse discusses the need for referral to a Dietitian or Speech Pathologist with the consumer/representative. If the consumer has a preference for a practitioner, the Registered Nurse will refer to them, otherwise the organisation's practitioners will be used. Once the consumer has been assessed, the practitioner documents the consultation and feedback to be included in the support plan.

ESCALATION

Refer to Registered Nurse/supervisor if any concerns regarding the nutrition and hydration of consumers. The Registered Nurse/supervisor escalates to the appropriate health professional for advice and support.

Refer to Managing Life Threatening Events Practice for information on managing choking.

REPORTING

Monthly reporting of weight loss is conducted to ensure quality care and inform the National Aged Care Quality Indicator Program (see 8.9.9 Key Result Areas/clinical indicator performance). Data is reviewed at clinical meetings and reported to the Clinical Care Committee.

The Weight Management Flow Chart below details actions to support consumers with weight loss or gain.

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WEIGHT LOSS/GAIN MANAGEMENT FLOW CHART

