

Nutritional screening



St Joseph's
Hospice



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Aim for this session

- What is nutritional screening?
- Why do nutritional screening?
- Nutritional Screening tools
- After nutrition screening – what next?



Nutritional screening

- Nutritional screening in palliative care is an important aspect of holistic care (Shaw and Eldridge 2015).
- Organisations have a duty to safeguard service users from malnutrition and dehydration, to identify poor nutrition and dehydration with nutrition screening and to take action to treat it (DOH 2008).
- Monitored by CQC



CQC Key Lines of Enquiry

Extract from:
Assessment
framework for
healthcare services
2017 – CQC

https://www.cqc.org.uk/sites/default/files/20170609_Healthcare-services-KLOEs-prompts-and-characteristics-FINAL.pdf

EFFECTIVE - By effective, we mean that people's care, treatment and support achieves good outcomes, promotes a good quality of life and is based on the best available evidence.

E1 Are people's needs assessed and care and treatment delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes?

E1.5 How are people's nutrition and hydration needs (including those related to culture and religion) identified, monitored and met? Where relevant, what access is there to dietary and nutritional specialists to assist in this?



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CQC Key Lines of Enquiry – Ratings Characteristics

OUTSTANDING:

There is a truly holistic approach to assessing, planning and delivering care and treatment to all people who use services. This includes addressing, where relevant, their nutrition, hydration and pain relief needs.

GOOD

..... People have comprehensive assessments of their needs, which include consideration of clinical needs (including pain relief), mental health, physical health and wellbeing, and nutrition and hydration needs ...



What is the purpose of Nutritional Screening?

To identify malnutrition which results in:

- increased risk of illness and infection

- Slower wound healing

- Increased risks of falls

- Difficulty in keeping warm

- Low mood

- Reduced energy levels

- Reduced muscle strength



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Malnutrition in Hospice Patients

Many of our patients will be undernourished due to:

- their disease
- effects of treatment
- low in mood
- generalised poor appetite for long periods of time
- cachexia



Who's responsibility is it to
recognise and treat malnutrition?

Everyone's responsibility



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Nutritional Screening

The basics:

- ✓ Weight
- ✓ Height
- ✓ Body Mass Index (BMI)
- ✓ Weight Change



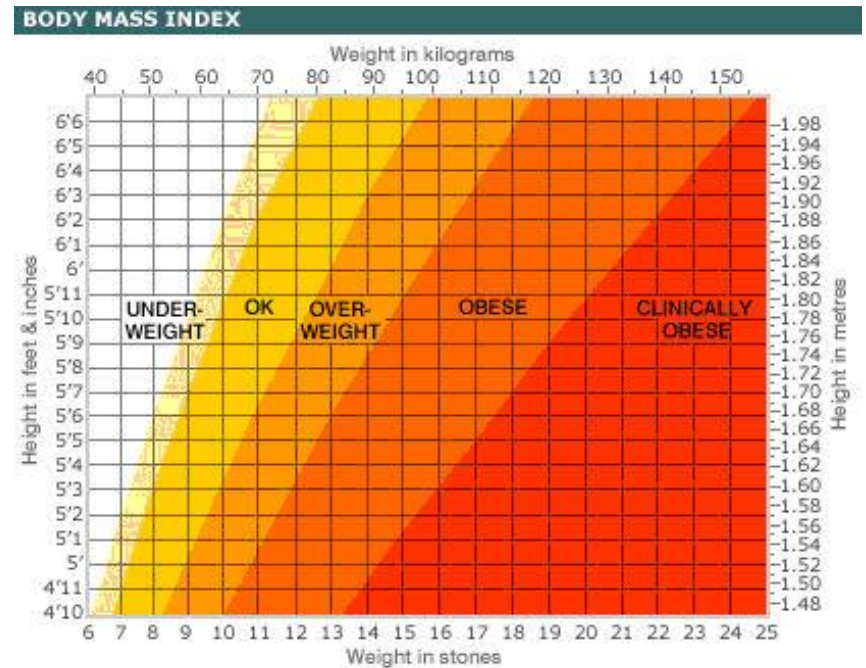
Body Mass Index

Body mass index (BMI)
is the ratio of weight to
height squared (kg/m²)

BMI 19 -25 Indicates
healthy weight

BMI of 18 or under
indicates underweight

BMI over 25 indicates
over weight



Nutritional Screening

Do you have any concerns about weighing patients?

What do patients think about being weighed?



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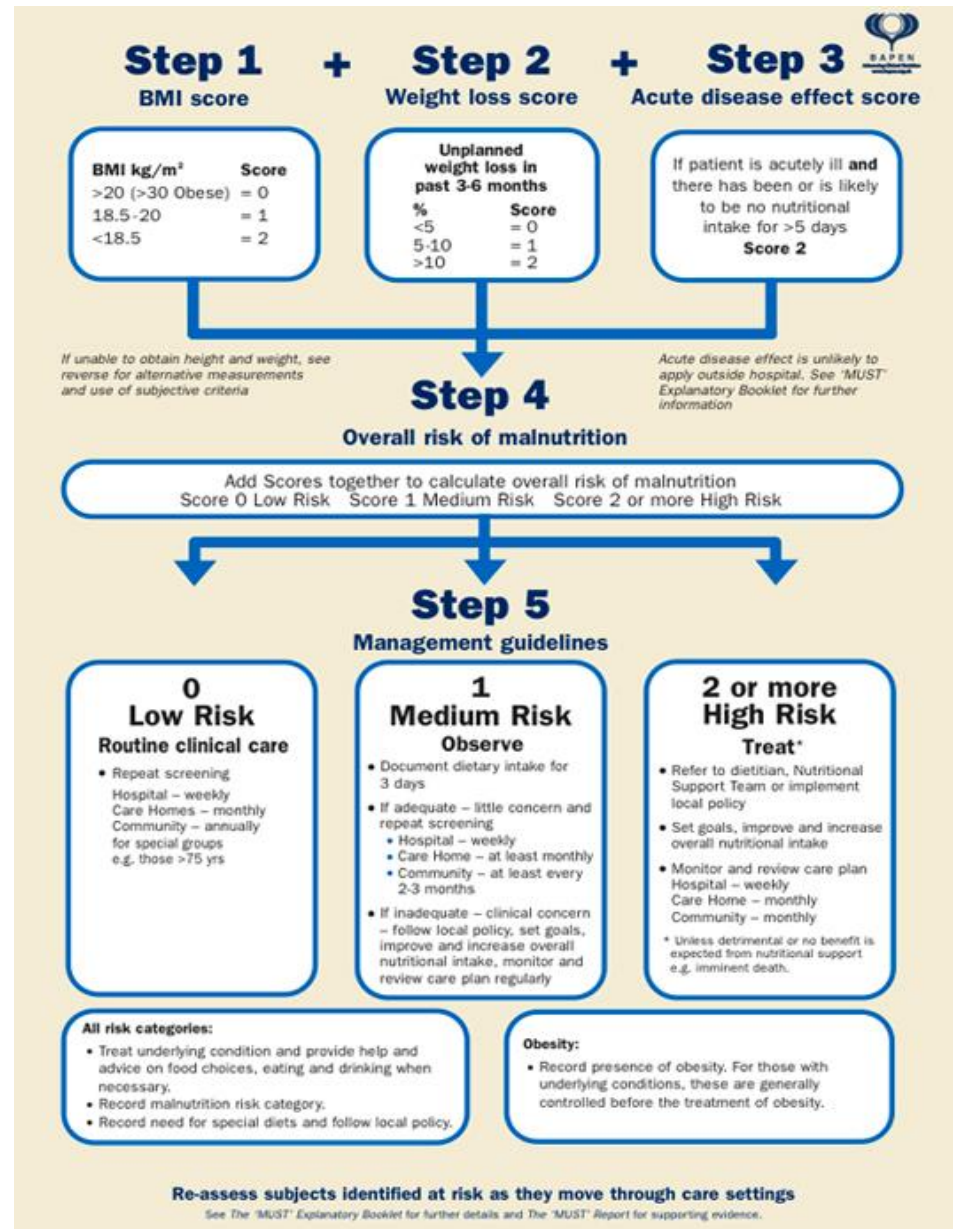
Nutritional Screening

What if you can't weigh the patient?

- Have they have been weighed recently, eg: at a clinic
- Look at the fit of clothes
- Loose rings
- Belts tightened
- Dentures loose



Malnutrition Universal Screening Tool MUST



Nutritional screening

St Joseph's Hospice Nutrition Screening Tool:- a local screening tool (Not validated)

- Weight/height/BMI
- Assess *weight change* in past 3-6 months
- Change in appetite
- Need for texture modification
- Use of nutritional supplements
- Artificial nutrition and hydration
- Co-morbidities
- Psychosocial impact of poor appetite.



**** Version 2.03. First Visit IPU Created x /01/2017 ****

First Visit Form - Please Remember to confirm the following

- Next of Kin Details, Ethnicity, Occupation

Consent to sharing
Information (STJH CMC)

- ☐ YES
☐ NO
☒ Not Assessed

04/05/2017

Nutritional Assessment

Nutritional Assessment
Completed:

☐

20/05/2016

Weight:

20/05/2016

Height:

31/12/2015

BMI:

20/05/2016

If BMI is less then 18, Please refer to dietician

Weight change in the past 3
months:

- ☐ Stable
☐ Up
☐ Down
☒ Not Assessed

07/02/2016

Are you enjoying your food at
the moment:

- ☐ YES
☐ NO
☒ Not Assessed

11/05/2016

If NO, can you explain why:

<<none>>

Patient on a Special Diet:

<<none>>

Special diet - Other:

<<none>>

Symptoms affecting appetite:

<<none>>

Symptoms affecting appetite -
Other:

<<none>>

Do you need to refer this patient to Dietetics or SALT? If Yes please do Internal Referral and add to caseload

Waterlow Pressure Ulcer

Encounter type:

Service:

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Nutritional Assessment
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Are you enjoying your food at
the moment:

- ☐ YES
☐ NO
☒ Not Assessed

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<<none>>

Patient on a Special Diet:

<<none>>

Special diet - Other:

<<none>>

Symptoms affecting appetite:

<<none>>

Symptoms affecting appetite -
Other:

<<none>>

Do you need to refer this patient to Dietetics or SALT? If Yes please do Internal Referral and add to caseload

Waterlow Pressure Ulcer

Options

	Options
1	Nausea or Vomiting (MED)
2	Constipation (MED)
3	Diarrhoea (MED)
4	Low Mood (MED)
5	Taste Changes (MED)
6	Sore Mouth (MED)
7	Dental Problems (MED)
8	Pain on Swallowing (MED)
9	Difficult to swallow (MED,SLT)
10	Coughing (SLT)
11	Short of breath (MED,SLT,DIET)
12	Recent chest infection (SLT)
13	Other

OK

Cancel

Search...

IPOS completed: ☐ 13/12/2016

Outcome Measure Location: 19/05/2017

IPOS completed by: 13/12/2016

Q1

What have been your main problems or concerns over the past week?

Problem or concern - 1 13/12/2016

Problem or concern - 2 13/12/2016

Problem or concern - 3 13/12/2016

Q2

Below is a list of symptoms, which you may or may not have experienced over the past week

For each symptom, please select a number between 0 and 4 to indicate how it has affected you over the past week

Where 0 = Not at all, 1 = Slightly, 2 = Moderately, 3 = Severely and 4 =Overwhelmingly

Pain (IPOS) 21/04/2017

Shortness of breath: 21/04/2017

Weakness or lack of energy: 13/12/2016

Nausea: 13/12/2016

Vomiting: 21/04/2017

Poor appetite: 21/04/2017

Constipation: 21/04/2017

Sore or dry mouth: 13/12/2016

After nutritional screening – what next?

What do you do if you identify a patient is malnourished?

When should you refer on?



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References

Care Quality Commission Key Lines of enquiry

www.cqc.org.uk/sites/default/files/20160422_ASC_hospice_provider_handbook_April%202016_update.pdf last accessed 12 October 2016

DOH 2008, Regulation 14 of the Health and Social Care Act 2008.

Shaw C and Eldridge L (2015). Nutritional considerations for the palliative care patient. International journal of Palliative Nursing vol 21, no 1 p 7-15.



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