Standardization of Nutritional Care in Elderly Homes – Educational program

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Background

Malnutrition of elderly is a serious problem. Elders' nutritional status is negatively influenced by many factors: physiological and social changes connected with ageing, chronic diseases, chronic medication and reduced mobility.

Malnutrition has a significant impact on elderly's health status which is linked with bad prognosis. It worsens mobility, muscle weakness, instability with collapses, lassitude and other symptoms of geriatric frailty. It triggers a process which leads to disability, loss of self-sufficiency, frequent permanent bed-rest and even death in many cases.

While malnutrition of elders living permanently at home does not occur frequently, there are 15-60 % malnourished clients among institutionalized elders according to foreign studies. Therefore, it is really important that employees, who look after elders, are able to identify the nutritionally compromised clients and are able to ensure a qualified nutritional care to prevent a deterioration of clients' health status.

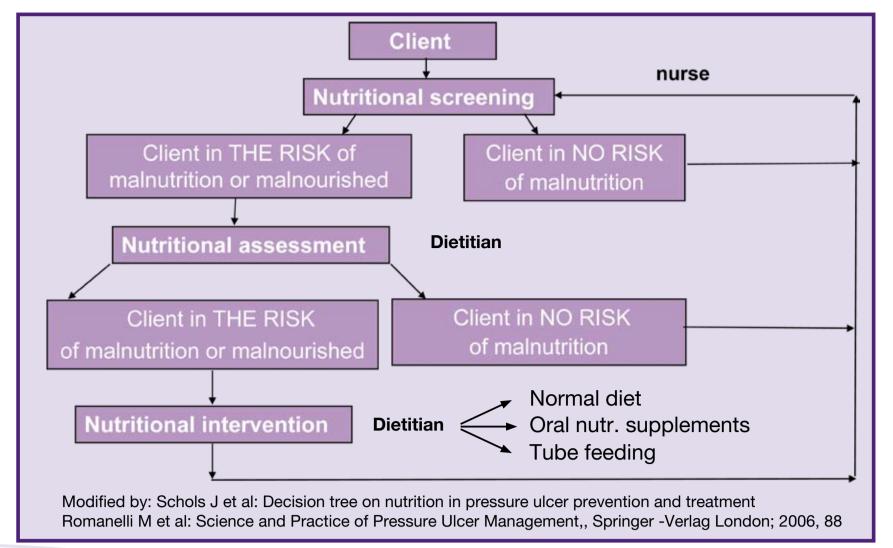
There were nearly 600 Elderly Homes registered in the Czech Republic in 2006. However, the nutritional status was not evaluated systematically in any of them and only a small proportion of clients were provided with an appropriate nutritional care. The unsatisfactory situation was recognized by Mr. Edward Kaplan, Director of Elderly Home Zahradni Mesto, Prague. He asked Nutricia Company to propose a solution which would help to improve clients' health status and quality of life in Elderly Homes on the basis of a qualified nutritional care.

Nutricia's objective was to develop and verify the educational program effectiveness. Also, they wanted to prove that the program is an appropriate tool for standardized nutritional care implementation.

Material and Methods

"Standardization of nutritional care" training program in Elderly Homes was created and tested by Nutricia in cooperation with Czech leading experts in the field of clinical nutrition and in the field of evaluation and assessment of quality of care and services in health and Elderly Homes. Program implementation and verification of its efficiency was conducted in nine Elderly Homes in the Czech Republic in 2006-2008.

Figure 1 - The algorithm of standardized nutritional care



Education program description

Professional referee of the project implementation created the gradual implementation of standardized nutritional care in Elderly Homes.

- **1.** Solution
- 2. Catering and artificial nutritional
- **3.** Food serving and monitoring of food intake

Each module consists from 3 parts:

- 4. Compilation of Nutritional care standard
- 5. Complex use and evaluation of Nutritional care standard
- 6. Education in nutrition and diets
- a) Education = 1 day of implementation team training in each Elderly Home about module content and specific steps need to be done for correct use in Elderly Home practice. Educations were managed by head of education methods specialist with her team.
- **b)** Implementation = 4 weeks of implementation of module into Elderly Home practice. Implementation was managed by Elderly Home staff led by head of implementation team.
- c) Evaluation of correct and effectiveness of implementation = 1 day controlling of correct implementation of module in care home practice. Evaluation was executed in each Elderly Home by 2 edu
 - cation methods specialists with dietetics and general nursing qualification. In the case of no mistakes could Elderly Home undergo
 - next module. Otherwise, the implementation team has 2 weeks to solve specified mistakes.

After successful completion of all 6 modules there follow the evaluation of the effectiveness of standardization in each Elderly Home

Staffing of project

Sponsorship Nutricia Company, Project manager – Anna Janakova

Professional team

Professional referee and head of education methods specialist - Tamara Starnovska, vice-chairman of Czech Nurses Association Education methods specialists - dietitians – Marie Liskova, Lucie Ruzickova, Vera Stejskalova, Dagmar Kovaru

Education methods specialist - nurse - Jarmila Veverkova

Profession consultant - Prof. Lubos Sobotka, CSc., chairman of Society for Clinical Nutrition and Intensive Metabolic Care Profession consultant for external quality appraisal - Frantisek VIcek, deputy headmaster of Czech National Accreditation Committee

Implementation teams of each Care Home Implementation team manager Institute director Dietitian

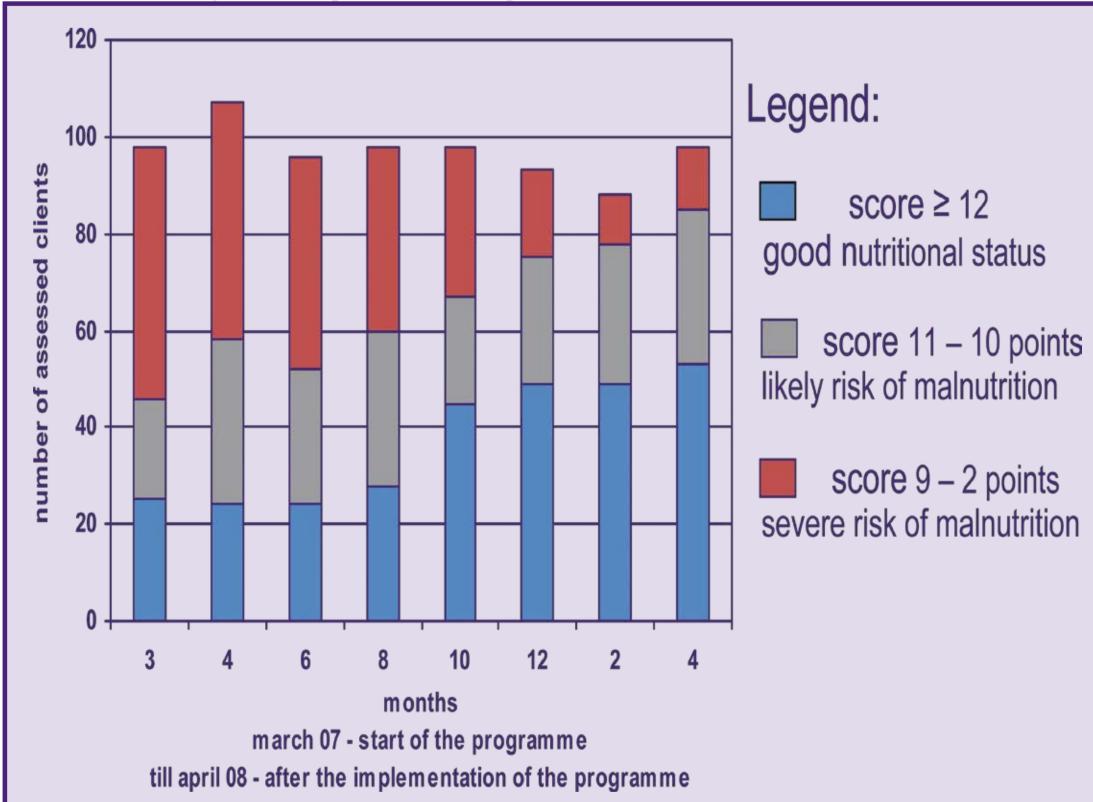
Project Timeline

2005	2005 – 2006	Pilot		mentation and evaluation of effe-
Project manager choosing		 Implementation of educational pro- 		ctiveness of educational project
Building of the professional team		gram in practice (3 Elderly Homes)	2007 – 2008	Program use in practice
Building of the implementation plan and team of education methods		- Evaluation of educational program (3		- Implementation of educational
specialists		Elderly Homes)		project (6 Elderly Homes)
Training of education methods specialists in standard of education and	2006 – July	Evaluation of Pilot		- Evaluation of effectiveness of edu-
evaluation in Elderly Homes	2006 – Septemb	er Conference – educational project pre-		cational project (6 Elderly Homes)
Choosing Elderly Homes for implementation and evaluation of effective-		sentation to other Elderly Homes	2008 – Septemb	per Conference – educational project
ness of educational project	2006 – Novembe	er Choosing of Elderly Homes for imple-		presentation to other Elderly Homes

Results

Educational program successfully finished by 8 from 9 Elderly Homes (89%). Elderly Home that have finished program and successfully implemented nutritional care standards into their daily practice, evaluated the project as highly effective not only in terms of quality improvement and safety of nutritional care (see chart 1) but in other fields as well.

Chart 1: Clients nutritional status evaluation according the Mini Nutritional Assessment © Elderly Home Kamenec, Bohumínská 71, 710 00 Ostrava 2, Czech Republic



Practical case of one from Elderly Home shows the effectiveness of quality improvement and safety of nutritional care.

us	 Project benefits in other fields: Benefits for Elderly Home clients Guarantee of quality and qualified nutritional care Less risks of illnesses and complication, less hospitalization Reduce of drugs costs Maintain or increase of self-sufficiency 	 Benefits for Elderly Home clients' families and friends Guarantee of quality and qualified care of their famil member or friend Possibility to be involve in the care Less guilty for "suspending" their family member in Elderly Home 	
points	- Individual approach of staff to the clients	Benefits for Elderly Home management	
tion ints trition	 Benefits for Elderly Home staff Qualification improvement Building of better professional self-esteem 	 Institute prestige Guarantee of legal protection Tool for evaluation and quality development of services 	
	 Unification of process = higher work effectivene- 	- Better use of professional potential of Elderly Home	

- SS
- Higher level of communication between staff and better information transfer
- Positive feedback to their work with clients
- Better relationships between staff and clients
- use of professional potential of Liberty frome staff
- Developing of communication with family members and friends of Elderly Home clients
- Better confidence in Elderly Home staff

4 from 8 Elderly Homes agreed they allow 1-2 days of practice placement to staff form other institutions and they will share their new experiences, knowledge, threats and benefits of project.

Conclusion

Standardization of nutritional care – educational program is now well evaluated in practice and represent effective tool for quality and safety improvement of care in Elderly Homes and it is possible to implement it in other institutions. Because of high interest from Elderly Homes provides Nutricia implementation of the project in other Elderly Homes.



