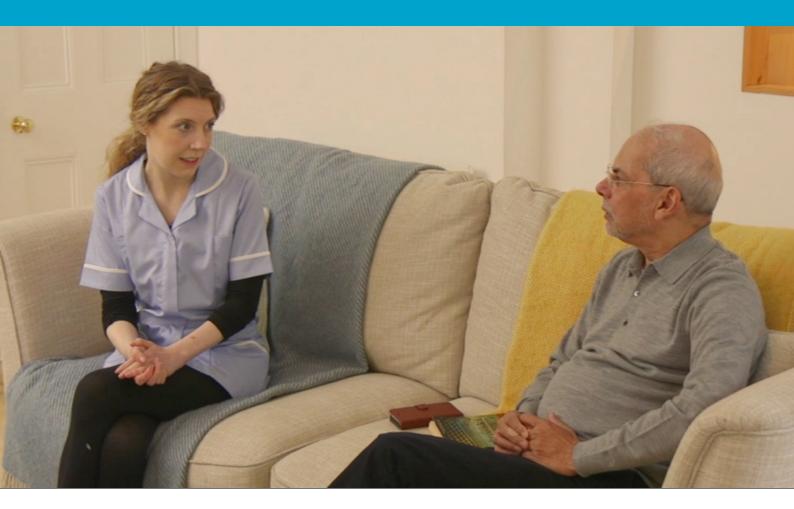
# MALNUTRITION TRAINING WORKBOOK













# How to use this workbook

This workbook has been designed to be used after all the videos have been watched.

Please use the questions and case studies to suit your own service, they have been designed so that you can pick and choose.

They will work well in group settings and can therefore be used over time as part of continuous training and for team meeting discussions.

Answers have been provided.

# **Questions**

1. Please list beside the headings below some factors that you think can impact on an older person's ability to access nutritious food and eat well.

Physical	
Social	
Mental Health	
Financial	
Medical	

idernou	e three examples.	
ase giv	e tillee examples.	
How do	you think the loss of a partner might affect an older pers or eating habits?	ion:
	e three suggestions.	
J		
Why do	you think older people are more at risk of malnutrition?	

5. G	Give four examples of potential health issues older people may face ause they are not eating enough
1	
2	
_	
3	
1	
W	hat suggestions could you make if someone has lost their appetite

7. Give an example of how you could fortify:
1. A Breakfast Dish
2. A Lunch Dish
3. A Dinner Dish
8. Meals services deliver meals to older people. Name three benefits meal services.
1
3
9. Does tea or coffee count towards your daily fluid intake?

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11. Why are	older neon	la mora lil	kalv to he	scome de	hvdratod	7	
Tr. Writy are	—————	ie more iii	kely to be	come de	riyurateu	:	
12. Outline v	what vou cc	ould do if s	someone	in vour c	are is stru	uggling to	dri
enough and						00 0	

# Make your Own Milk Shake or Nourishing Drink

### **Scenario 1**

Betty is 86 years old and has recently been discharged from hospital after having a hip replacement. During her admission she had her weight checked and reported a gradual weight loss over the past 2-3 months due to poor appetite. She was seen by a Dietitian who suggested making some simple changes to her diet.

Betty loves drinking milk but normally buys semi-skimmed milk. She was delighted to hear that drinking regular milky drinks can help prevent further weight loss and is happy to switch to full-fat options.

Her daughter lives nearby and visits Betty regularly to help with shopping. Betty's daughter has read the food first advice and is now going to increase her visits to help with the cooking and to make sure Betty is eating and drinking little and often.



- 1. Can you create a milkshake for Betty using the ingredients from the list provided below? Please write the recipe
- 2. What is the calorie and protein content of the milkshake using the ingredients guide?
- 3. Work out how many more calories Betty would drink if she had your milkshake instead of a 200ml glass of semi-skimmed milk which contains 100kcal

# **Scenario 2**

Roy is 75 years old and is aware he has been losing weight over the past 6 months. He lost his wife at the start of the year and she did all the cooking at home.

Roy has been surviving off sandwiches and biscuits for most meals. He also usually only drinks water or black tea/coffee because he is lactose-intolerant and cannot drink cow's milk.

He was seen by a Dietitian who suggested some dairy-free alternatives for his diet (e.g. soya, oat, rice, coconut and almond milk). He would really like to put on more weight and is looking forward to trying dairy-free alternatives.

He does not have family nearby but is able to get out regularly to the shops and to socialise. After reading the food first advice he is aware of little changes he can make to his diet. He is going to try making some milkshakes and eating little and often. He has also signed up to a local Men's Shed which is offering some cooking classes for beginners.



- 1. Can you create a dairy-free milkshake for Roy using the ingredients list provided below? Please write the recipe
- 2. What is the calorie and protein content of the milkshake using the ingredients guide?
- 3. Work out how many more calories Roy would drink if he had your milkshake instead of a 200ml mug of black coffee which only provides 2kcal?

# **Ingredients List**

Ingredient	Volume	Calories	Protein
Full Fat milk*	100mls	66kcal	3.5g
Semi-skimmed milk*	100mls	50kcal	3.6g
Soya Milk	100mls	39kcal	3.0g
Coconut Milk	100mls	20kcal	0.1g
Almond Milk	100mls	22kcal	0.4g
Rice Milk	100mls	47kcal	0.1g
Oat Milk	100mls	44kcal	0.3g
Greek yoghurt*	100mls	124kcal	4.2g
Strawberry yoghurt*	100mls	98kcal	4.5g
Strawberry soya yoghurt	100mls	75kcal	3.6g
Honey	1 tablespoon (15mls)	49kcal	<0.1g
Raspberries	1 tablespoon (15g)	5kcal	0.2g
Strawberries	1 tablespoon (15g)	5kcal	0.1g
Condensed milk*	1 tablespoon (15ml)	48kcal	1.1g
Dried milk powder*	1 tablespoon (15g)	30kcal	3.3g
Nesquik powder	1 tablespoon (15g)	29kcal	0.4g
Smooth peanut butter	1 tablespoon (15g)	95kcal	3.6g
Banana	1 (approx. 120g)	108kcal	1.4g
Icing/white sugar	1 teaspoon (5g)	20kcal	-
Seedless raspberry jam	1 tablespoon (15g)	39kcal	<0.1g
Double cream*	1 tablespoon (15g)	70kcal	0.2g
Single Cream*	1 tablespoon (15g)	29kcal	0.5g

Contains milk

# **General Scenarios**

# **Tips for Answering Scenario Questions**

Think about and explore the following areas when looking at each situation:

- What are the main problems in the scenario and what barriers are there?
- What advice would you give to help improve the person's food and fluid intake?
- Is there any practical help that you could offer?
- Are there any organisations that could help with the situation?
- Do you need to think about involving a health professional?

#### Scenario 1

A person you care for has started to lose weight. They have dementia and have recently had to stop using a cooker and microwave due to them setting fire to the kitchen and fire services needing to attend.

They do not have any family to help but do have a neighbour who brings food over. They have a slow cooker, they used to go out and shop for themselves but stopped this due to a recent illness, although is feeling a little better now. They find it difficult to chew and swallow.

What steps would you take to ensure they didn't lose any further weight?

#### Scenario 2



Mr P is a person who has recently started to receive care. You have spoken to his daughter who feels her father is losing weight.

Mr P is deaf and blind and has all his meals delivered through the meals service, but his daughter starting to find that he is throwing the meals away. Mr P seems to be better at drinking than eating.

What advice could you provide to his daughter and what other steps might you take to ensure Mr P does not lose any more weight?

#### **Scenario 3**

You are caring for a person who has Parkinson's disease and their partner recently went into hospital.

Their daughter has noticed that her dad has started to lose weight being at home alone. You feel that this could be because the partner used to cook for them both. They have 2 daughters who are helping with the shopping. You have noticed that they may not drink a lot of fluids.

What steps would you take to ensure they were able to get enough to eat and prevent any further weight loss?

#### **Scenario 4**



You are caring for a person who has dementia. Their son thinks that there has been a steady decline in weight over the past few years and especially after the loss of her husband.

They also lost their sense of taste 10 years ago and eating is no longer a pleasure. A meals service delivers twice a day, but sometimes dinner is delivered at 3.45pm which is too early for them to eat and they will forget that it is there. This person receives care 4 times per day.

What solutions and advice can you give to support this person to maintain weight?

# **Answers**

Accept reasonable answers in line with the answers given below. Please note that these answers are suggestions and other answers may be correct as well.

# **Question 1**

Physical  Public Transport / Access to Shops Difficulties shopping in very large supermarkets Ability to prepare, cook and eat meals Problems with dentition  Loneliness Social Isolation Bereavement Family moved away Lack of Cooking Skills			
Financial	<ul> <li>Poverty can affect food choice and diversity</li> <li>Healthy foods such as fruit, veg and fish may be perceived as luxury or may carry a price premium</li> <li>Kitchen facilities may be limited</li> </ul>		
Medical	<ul> <li>Illnesses such as cancer can have an impact on appetite and ability to shop and prepare food</li> <li>Medications and polypharmacy can have an impact on appetite</li> <li>Problems with incontinence may stop normal eating and drinking</li> </ul>		

# **Question 2**

- Loss of interest in cooking and/or eating
- Poor or reduced appetite
- Not eating proper meals
- Unintentional weight loss
- Lack of energy and interest in everyday things
- Clothes and rings becoming loose
- Concern from family or friends

- Lose interest in cooking eating or shopping due to grief
- Find eating alone is unenjoyable
- May lack cooking skills if their partner did the cooking
- Difficulty accessing shops if their partner was the only driver
- Do not want to visit restaurants alone
- Reduction in pension income

#### **Question 4**

Older people are more at risk of diseases which could cause malnutrition such as:

- Memory and cognitive problems like dementia
- Physical and mobility issues which makes it harder to access shops and spend time in the kitchen cooking
- Dental issues and swallowing problems

Older people are also more susceptible to experiencing loneliness and social isolation can have a negative effect on mood which can influence appetite.

# **Question 5**

- Malnutrition
- Increased risk of falling
- Longer and more frequent hospital admissions
- More visits to the GP
- Weaker immune system
- Inability to recover from illness or injury
- Bones and muscles more easily damaged and take longer to heal
- Death

- Eating in company can be very helpful, especially if the person spends much of their time on their own.
  - Are there any lunch clubs or day centres in the area?
  - Friend or family member could come over for lunch or dinner.
- Getting some exercise can increase the appetite
- Is there anything available locally that can be accessed either in person or virtually?
  - Are there any seated exercise groups?
  - Access to a garden?
  - Get out for a walk with a friend or family member?
- Keeping hydrated is important however drinking too much fluid before a meal can affect the appetite so have drinks afterwards
- Smoking can suppress appetite, so it is advisable to leave a gap of 30 minutes before eating
- Encourage foods that are enjoyed by the person

## Question 7 (1)

- Scrambled egg with added cream and cheese
- Toast with a thick spread of butter and jam / marmalade
- Toast with peanut butter and chopped banana
- Porridge made with fortified milk and topped with honey dried fruit and chopped nuts
- Cereal with fortified milk

# Question 7 (2)

- Beans on buttered toast with cheddar cheese grated on top
- Tomato Soup with some cream added and topped with croutons
- Sandwich filled with cheese, cold meat tinned fish or egg, made with butter spread and mayonnaise
- ·Slice of Quiche with spoonful of potato salad and/or coleslaw
- ·Sausage roll, scotch egg, pork pie, samosa or pastry parcel

# Question 7 (3)

- Cottage Pie with buttery creamy mash
- Macaroni cheese made with fortified milk / or ready made with extra cheese and cream added
- Chicken and mushroom casserole with added cream served with boiled new potatoes with butter
- Any type of pie served with creamy mash or chips (store bought or homemade)
- Cauliflower cheese made with fortified milk and extra butter served with a slice of garlic bread

### **Question 8**

- Ensures the person receives at least one hot meal per day
- Provides nutritious food
- Promotes social interaction and maybe their only visitor
- Helps people to remain living independently in their own home
- Provides reassurance to families
- Ensures the person is checked on regularly

#### **Question 9**

Yes, all fluids including tea, coffee, juice, milk, squash and water will count also try and include water rich foods in your diet if struggling to drink enough.

- Feeling tired or drowsy
- Headaches and dizziness
- Dry mouth, lips and tongue and sunken eyes
- Constipation
- Blood pressure may drop leading to dizziness, confusion, feeling sick and fainting
- Changes in behaviour such as low concentration, and memory problems
- Increased risk of falls,
- Increased risk of urinary tract infections

Keep in mind we can't rely on just one of these symptoms to tell if someone is becoming dehydrated. Knowing what someone is normally like and seeing some of these changes may indicate that someone is becoming dehydrated.

#### **Question 11**

Older people's bodies may change as they age:

- Kidneys may not work as well as before,
- Thirst sensation becomes reduced
- Older bodies hold less water in reserve
- People with swallowing difficulties or changes in swallowing may need support or referral to speech and language therapy
- Mobility may affect ability to hold or cups/glasses, they may need help to access fluids
- Incontinence can influence decisions to drink or not

- Try and have a respectful conversation with them to understand any concerns they might have such as worries about incontinence and accidents or problems making drinks themselves.
- Find out what the person prefers to drink and when.
- Always make sure that drinks are easily accessible and give help to drink if needed.
- Be encouraging and prompt when necessary. It is easier to say "here's a nice a cup of tea" rather than asking if they want one
- Encourage family and friends to help by offering drinks while visiting
- If dementia is an issue, you can try post its and use alarms to remind people to drink

# **Example of a nourishing drink**

Amount	Ingredient	Calories (kcals)	Protein (g)
200mls	Full Fat Milk	132	7
105g	Raspberries	35	1.4
1 tablespoon	Skimmed Milk Powder	30	3.3
100mls	Yogurt Berry Flavour	98	4.5
1 tablespoon	Honey	49	0
Total		344kcals	16.2g

#### **General Scenarios**

Below are some suggestions that may be helpful for discussing the scenarios

#### **Scenario 1**

- Start using post it notes for reminders
- Include extra snacks that are easy to prepare and keep in accessible areas
- Suggest the neighbour buys food for the slow cooker
- Give information around fortifying foods and drinks
- Suggest softer foods
- Suggest meal delivery services

#### Scenario 2

- Suggest Mr P eat in a more social setting such as sometimes with family members or maybe joining a suitable day centre or lunch / dinner club
- Give daughter advice around making nourishing drinks if her dad is managing to drink more
- Give advice around fortifying foods
- Give advice around more snacks that are accessible to Mr P
- During visits check that food and drinks are accessible for Mr P

#### Scenario 3

- Suggest that the daughters buy ready meals and make sure that their dad knows how to heat them up and is able to.
- Suggest that more drinks are made available and if there are problems with shaking hands include straws in shopping along with encouraging the person to drink when you are visiting
- Give food first advice to daughters so that they can keep this in mind while doing the shopping
- Check that there aren't any issues with holding cutlery and ability to eat alone
- Include easy to prepare and eat snacks in the shopping and make sure that they are accessible for the person
- Arrange for more social contact with perhaps a visit to a lunch / dinner club or family visits that are around mealtimes or arranging for outings with friends

#### Scenario 4

- Check if meal delivery time can be changed
- Swap to have main meal at lunch time with a smaller meal at teatime that perhaps doesn't need to be eaten hot so can be left and eaten later
- It might be better to arrange for ready meals to be delivered that can be heated during care visits rather than using the evening meal delivery service
- Use post its to remind the person to eat
- Give food first advice to the son
- Suggest that snacks are made available and are accessible for the person
- Suggest the person attend a day centre for people with dementia that serves food