

Manual for Mealtimes – ASLT & Dietetics Care Home Mealtimes Project

Liz Gould – Adult Speech & Language Therapy Bryony Donaldson – Community Nutrition & Dietetics





Introduction:

- Setting the scene for our project
- Gaining the views of care home staff survey results
- Care home focus groups
- Our idea for change Manual for Mealtimes
- Next steps





Why are we doing this project?

- High numbers of referrals around 30-40% of all referrals to our services are for care home residents
- Referrals from care homes are rising year on year
- We are small services eg. there are typically 1 or 2 clinicians per locality covering care homes as <u>part</u> of their caseload
- Kent has very high numbers of care homes we cover around 350 in total
- We can not get round to all care homes to train everyone





The challenges for our services

- Because of the high demand, despite our best efforts and the hard work of our teams, waits can be very long - current longest wait is around 15 weeks in ASLT and up to 12 weeks in Dietetics
- This generates even more work because of queries and re-referrals whilst residents are on the waiting list
- It is stressful for our staff who want to see patients in a timely way and provide a good service





The challenges for our services

When we looked at our data more closely in ASLT:

- 36% of care home referrals are discharged without having a face to face assessment – many would still have received clinical time before d/c eg. telephone call to discuss and give advice, documentation, letter
- 18% are discharged after 1 appointment

This suggests that in total over 50% of care home residents referred to us did not need significant SLT input.

In Dietetics, we rejected approx. 400 inappropriate referrals in a 9 month period in 22/23.





So.....what to do?

- We had already reviewed and adapted our services to try to work as efficiently as possible
- We knew that we needed to find a different way of working with care homes to tackle these challenges in a sustainable way for the long term
- We also knew that we needed to do this in partnership with you as care home staff – we only know one side of the picture and you are the experts in the day to day care of your residents
- Any different way of working for us has to work for you





Care home survey

- 2 surveys sent out to all east and west Kent care homes one about swallowing and SLT, one about nutrition/hydration and Dietetics
- Really good response rate over 100 responses in total
- Good range of homes represented across east and west Kent, both with and without nursing
- We asked about challenges, making referrals, your experience of our two services, CQC and training





Survey feedback - swallowing

We asked what are the biggest challenges for you and your colleagues in caring for residents with swallowing problems?

- Long waiting times for SLT assessment
- 2. Giving medication when the resident has swallowing problems
- Knowing what to do while you wait for the SLT to come out and assess
- Behavioural problems such as refusing or spitting out food, talking when eating, overfilling mouth
- At the very end of life when people can no longer eat & drink as they did





Survey feedback - swallowing

We asked are there residents that you feel able to manage but that you refer to SLT because you think it is necessary eg. for paperwork compliance, CQC etc?

52% of people said yes

When asked about training:

100% of people said that they and their colleagues would benefit from awareness training about swallowing problems





Survey feedback – nutrition and hydration

We asked what are the biggest challenges for you and your colleagues in caring for residents with nutritional problems?

- Uncertainty of how to calculate MUST when you are unable to weigh your patient
- What to do when the patient is refusing food
- 3. What to do when the patient doesn't like the supplements prescribed
- 4. What to do at the end of life when a patient is not wanting to eat and drink





Survey feedback – nutrition and hydration

We asked are there residents that you feel able to manage but that you refer to Dietetics because you think it is necessary e.g. for paperwork compliance, CQC etc?

55% of people said yes

When asked about training:

95% of people said that they and their colleagues would benefit from awareness training about nutrition problems





Care home focus groups

- In Sept/Oct, we held two focus groups for care home staff who responded to the questionnaire, one in East Kent and one in West Kent
- This has given us greater understanding around the answers in the questionnaire and more detail about the issues
- We discussed the challenges identified by care home staff and by our services and explored ways that we could work together to improve care to residents





Our ideas for change

- We have looked across the UK to see what is working well elsewhere and that might work in Kent too
- In NHS Lothian we found the Manual for Mealtimes which was designed by SLTs and care home staff working together
- It is being adopted by other parts of Scotland and is recommended there by the Scottish Care Inspectorate
- We think it is good and could work in Kent (with some changes)





Manual for Mealtimes

- What is the Manual for Mealtimes and how does it work?
- It has clear guidance to take care home staff through the steps of what to do, including when to refer to SLT/Dietetics immediately and when to follow the advice in the manual first
- 3 key sections:
 - Problem chart to be filled in
 - Main part of the manual has all the guidance
 - Trial of changes record to document changes to be tried and then record outcomes
- Training for how to use the manual is in a video format online





What next:

- We've already made some initial changes by adding nutrition advice in to it and also a section on eating & drinking at the end of life
- We have shown it to our focus groups to see what they think initial feedback has been overwhelmingly positive
- Our focus group members have taken copies of the draft manual away to read and send us more feedback
- We have been consulting with other key people too, including the CQC inspection team, pharmacy advisers, care home coordinators





Pilot and beyond

- Once all feedback has been reviewed we will finalise the draft of our Kent Manual for Mealtimes
- We will then pilot it at several homes who have volunteered to try it out
- So, watch this space!





Any Questions?

