

The
Nourish
Resource Pack



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Introduction to the Nourish Resource Pack

This resource pack has been developed as a joint project by health professionals who are passionate about helping care home staff to provide excellent nutrition and hydration for their residents.

The aims of the pack are:

- To promote relevant health messages to care home staff and residents to improve health and wellbeing and support the prevention of ill health and disease
- To provide a range of activities for residents, staff and visitors to enjoy. These activities support relevant health messages and enhance residents' wellbeing.
- To test a new model of prevention provision within our care home population.



Each day of the week has a different health message, with educational content for staff and themed activities for residents to enjoy. The pack can be used in a variety of ways, for example, as a food focussed week, as a rolling weekly programme or as a source of ideas and inspiration for occasional use. It contains information for all care home staff; from managers and care assistants to the catering team and activity co-ordinators.

A checklist to help achieve excellence in nutrition and hydration care is included with suggestions on additional resources.

We hope that this resource pack will inspire all those who read it to celebrate the importance of food and drink. Good food and drink provide pleasure, nourishment and a chance to socialise with all members of the care home family.

'The role of good nutrition and hydration cannot, and should not, be underestimated in relation to maintaining health and well-being and improving the quality of people's lives.'

Caroline Lecko
NHS England Patient Safety Lead and founder
member of Nutrition and Hydration Week

The Nourish Team

Malnutrition Monday

Why is malnutrition important?

Malnutrition or undernutrition is when a person has too little energy, protein and other nutrients that cause negative effects on the body and its function.

Malnutrition affects about **1 in every 3** care home residents.

Some people think that losing weight is a natural part of aging but **this is not true**.

The **consequences of malnutrition can include**, weight loss, poor appetite, swallowing and chewing difficulties, falls, pressure ulcers, constipation, confusion and depression.

There **are many reasons** why a resident in your care home may have become malnourished or may be at risk. Some reasons include swallowing difficulties, pain, constipation, medications, underlying disease such as diabetes and symptoms of dementia (for example not recognising foods, unable to use cutlery, and confusion).

It is very important to identify this early and take action.

What you can do

Accurate nutrition screening, assessing your residents and using 'Food First' throughout your home, will help to **prevent malnutrition**.

Consider the home environment and if anything needs to be improved, for example menu choices, dining room atmosphere, the support and assistance needed to eat and drink.



So what is Food First Advice?

Use fortified milk

Recipe:

Add 4 tbsp. of dried milk powder to each pint of full fat milk

Use on cereals, to make porridge and nourishing drinks.

Nourishing snacks every day

For example tinned fruit and custard or cake with cream, a smoothie or soup.

Fortified meals

Add dried milk powder, cream, butter and cheese to savoury sauces, mashed potato and altered texture meals.

Add syrup, sugar and cream to desserts, fruit and cereals.

For more information see further resources section.

Be sure to check for individual dietary requirements for residents, including swallowing difficulties and the need for modified texture foods, before all events

- **Themed drinks trolley.** Once a month try a theme on the drinks trolley. Examples could include;
 - A coloured theme such as pink, so serve fortified strawberry milkshake, raspberry mousse or ice-cream and have pink icing on cakes.
 - An event such as Easter - so serving fortified hot chocolate and chocolate cake with mini eggs.
 - A food awareness day or week such as British pie week where you can offer sweet and savoury mini pies at afternoon tea.
- **Create a reminiscence food pack.** Familiar original packaging can bring back memories and could be used as an activity, for conversation or a display.
- **Try 'Tea at 3'.** At 3pm every day (or another suitable time), staff take the opportunity to sit with residents and have a drink (and a snack) with them. You could use vintage china crockery. Relatives could be invited as well. This could become protected time every day.



Top Tips for preventing malnutrition;

Always accurately screen residents

Residents should be screened monthly using a validated screening tool (such as MUST). Also look out for subjective measures such as being very thin, clothes or jewellery becoming loose, reduced appetite or swallowing problems and underlying disease or psycho-social/physical disabilities likely to cause weight loss.

Remember to assess why

A nutritional assessment should be completed to identify why someone is losing weight unintentionally.

Good care planning

- Results of the screen and assessment should be documented in a resident's nutrition care plan with with actions to address reversible causes of malnutrition."
- Nutrition care plans should be personalised and include likes and dislikes, details of any positioning requirements, preferred places to eat, any modified texture required or thickened fluids, details of any nutritional products that have been prescribed. This list is not exhaustive.
- Also include nutritional goals and targets and markers for concern, including when to refer to the GP, Speech and Language Therapist, Dietitian or other health professional.

Use a Food First approach throughout your home.

Useful Resources:

- Caroline Walker Trust (www.cwt.org.uk) Eating well: supporting older people and older people with dementia (2011).
- Malnutrition task force has a number of resources for care homes, see www.malnutritiontaskforce.org.uk
- Nestlé have created a reminiscence pack that can be downloaded from their website and printed.



Toothy Tuesday

Good oral health is essential as it enables care home residents to eat, talk, socialise and be free from mouth pain. It also contributes to good overall health.

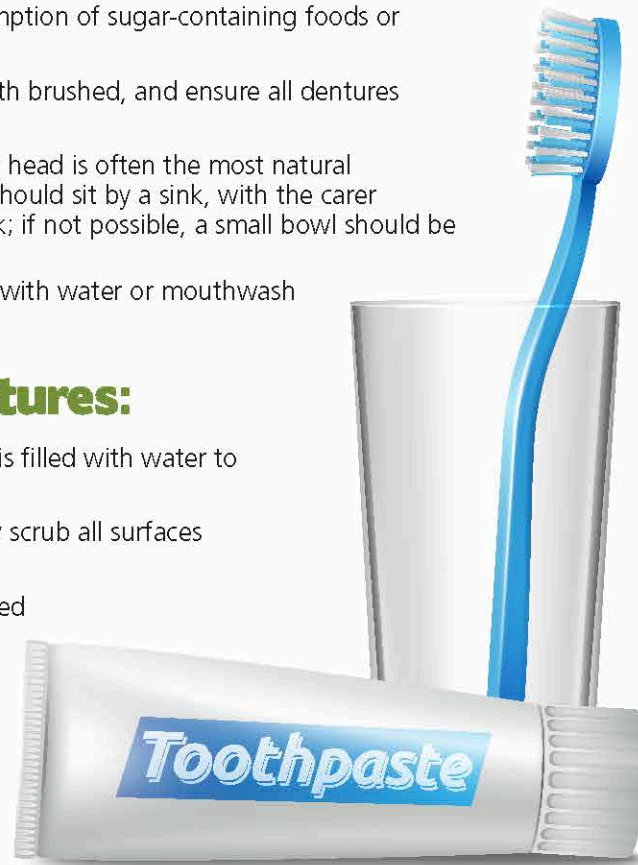
Dental decay is prevented by minimising the frequency of consumption of sugars (considering the resident's overall nutritional requirements) and by frequent application of fluoride to the teeth. Periodontal (gum) disease is prevented by good oral hygiene (frequent effective brushing of the teeth and gums).

Top tips for brushing:

- All adults' teeth should be brushed twice daily with a fluoride containing toothpaste.
- Teeth should be brushed at night time and consumption of sugar-containing foods or drinks should be minimised after this.
- Ask the resident how they prefer to have their teeth brushed, and ensure all dentures are removed before you start.
- Standing next to the resident and supporting their head is often the most natural way to brush their teeth. If possible, the resident should sit by a sink, with the carer standing, so that the resident can spit into the sink; if not possible, a small bowl should be available.
- Toothpaste should be spat out, rinsing the mouth with water or mouthwash should be avoided

Top tips for cleaning dentures:

- It is best to clean dentures over a hand basin that is filled with water to prevent breakage if dropped.
- Use a soft toothbrush or denture brush and gently scrub all surfaces with washing-up liquid or soap then rinse.
- Dentures should be left-out at night time and stored in a labelled denture pot in cool water.
- Denture soaking tablets are available but aren't a substitute for good manual cleaning.
- Buying a denture marking pen and labelling each resident's denture is advised to prevent problems with misplaced dentures.



Good record keeping should not be forgotten.

Residents should have individual oral health needs assessments, along with a daily oral care plan and chart for recording daily incidences of mouth care.

A dental professional should be consulted when there are concerns or if advice is needed, for example:

- Persistent **refusal** from the resident to accept oral hygiene care.
- Non-healing ulcers. **Ulcers** should be recorded and monitored. If they do not heal within two weeks then consult a dentist.
- **Pain**, either reported by the resident or suspected (such as changes in eating/drinking or behaviour).
- **Bad breath**.
- **Bleeding** gums or wobbly teeth, which are signs of gum disease.
- **Poorly fitting dentures**.
- **Dry mouth**, this can be debilitating as it can make the inside of a resident's mouth sore and it makes eating and talking difficult. Advice from a dentist should be sought but encouraging the resident to have frequent sips of water may help, as can the use of dry mouth gels and pastilles. Additionally, the use of sodium lauryl sulphate (SLS) free toothpaste may be of benefit (such as Sensodyne Pronamel or Biõtene Fluoride).

Be sure to check for individual dietary requirements for residents, including swallowing difficulties and the need for modified texture foods, before all events

Toothy Tuesday Quiz

Try this fun quiz to test your dental knowledge and learn some interesting things along the way...let's get those dental juices flowing! Here are some fun facts to start:

Did you know...

In Germany, during the middle ages, people believed that kissing a donkey relieved toothaches!



The ancient Egyptians used toothpaste made from powdered burnt egg shells, oxen hoof ashes and pumice!



Quiz Questions

1. What happens when we don't look after our teeth?

- A. Pain
- B. Difficulty eating
- C. Wobbly teeth
- D. Tooth loss
- E. Falls
- F. Infection
- G. Staining
- H. Bad breath

2. How long should you brush your teeth for and how many times per day?

- A. 2 minutes morning and night
- B. 3 minutes morning and night
- C. 2 minutes at night

3. Should you rinse or spit out toothpaste after tooth brushing?

- A. Rinse
- B. Spit out

4. How should you clean your dentures?

- A. with a brush & washing up liquid
- B. with a brush & soapy water
- C. with a brush & toothpaste
- D. Store in cool water overnight
- E. Store in hot water overnight
- F. Store in denture cleaning solution overnight

5. Is it ok to wear dentures when sleeping?

- A. Yes
- B. No

6. What can cause a dry mouth?

- A. Being dehydrated
- B. Drinking too much
- C. Some medications
- D. Snoring
- E. Some medical conditions e.g. undiagnosed diabetes

7. When should I see a dentist?

- A. When my dentures are rubbing
- B. When I have toothache
- C. When I have an ulcer
- D. When I have an abscess
- E. When I have dry mouth
- F. For my birthday
- G. For regular check-ups even if I don't have any pain or problems

Answers:

- 1. All except E
- 2. A and always a night time
- 3. B –Fluoride in toothpaste protects teeth for longer if teeth are not rinsed
- 4. A, B, D
- 5. B
- 6. All except B
- 7. All except F

Winning Wednesday

Making sure your residents feel engaged with menu planning in your care home is vital.

For many of us, the experience of choosing and anticipating a meal is a key part of the enjoyment of eating! By ensuring your menus are resident led, you will enhance your residents enjoyment of their meals, meet their nutritional needs better, and ensure they feel valued and respected.

The most important aspect in creating a resident led menu is to be led by your residents!

Hold menu tasting events, where residents and their families are able to try different dishes and provide feedback. This can be a fun event, picking their favourite dishes with voting or master chef style commentary! Favourite dishes can then be put on the menu.

Additionally, the catering team should communicate regularly with residents, particularly after meals to get feedback on which dishes were most successful. A recipe request box may further encourage involvement.



Top tips for enhancing resident engagement

- **Communication is key** the catering team should be present at resident committee meetings and meet for regular one to ones with residents.
- **Hold menu tasting events.**
- **Change menu's regularly and be imaginative.**
- **Link food and memories** ask your residents to pick some theme days and provide the corresponding menus and activities, e.g. a seaside theme could involve a fish and chip meal, ice-creams, candy floss and a Punch and Judy show.

Top tips for improving intake

- **Be aware** that food preferences change over time. The progression of diseases such as dementia may impact this further.
- **Offer a snack menu** with nourishing snacks for residents with a poor appetite. Good snacks include cakes, small desserts and cheese and biscuits.
- **Maximise tastes and smells;** as we age our senses of taste and smell can decline, so maximise the flavours of foods with spices, herbs and seasoning.
- **Show residents the dishes at meal times** and allow them to choose the food they like best.
- **Consider the meal environment;** soothing music can enhance the atmosphere. Linking music with the food served at themed meals may trigger memories.
- **Present your plates beautifully;** ensure each plate contains foods of different colours. Bright coloured crockery may make eating more enjoyable.

Be sure to check for individual dietary requirements for residents, including swallowing difficulties and the need for modified texture foods, before all events

A menu tasting event!

Hold a menu taster event in your home for your residents and their families. This should be a fun, enjoyable event for the residents. The catering team may wish to use this as an enjoyable way to launch some new menu offerings, get feedback on future dishes or even to get ideas on how to improve some of those old favourite recipes!

What you will need:

- The expert judging panel of your residents and their families!

Plus:

- Invitations and posters to promote your event
- An agreed voting or scoring system; this can be as formal or informal as you like. You may decide to use a ballot box and score cards to mark dishes out of ten. Alternatively asking for shows of hands to count votes for the winning dishes works well
- A selection of small taster meals and drinks
- Categories of foods for judging, for example:
 - Favourite traditional dish
 - Favourite world cuisine
 - Best pudding or dessert
 - Best savoury snack
 - Tastiest puree meal
 - Yummiest cake
 - Favourite smoothie or alcohol free cocktail



Useful Sources of information

- The National Association of Care Catering
Provide a wealth of useful information and resources for those involved in catering in a care home environment.

Available at: <http://www.thenacc.co.uk/>

Thirsty Thursday

Water makes up two thirds of our body. It is vital to drink enough fluid otherwise you can become dehydrated. It is common that care home residents do not drink enough so can become chronically dehydrated. Providing ready access to fluids throughout the day and helping residents to drink safely helps prevent dehydration.

Why are older people likely to become dehydrated?

Older people are particularly prone to dehydration due to **age related changes particularly affecting the kidneys**. As we age our **awareness of thirst decreases** –particularly in people with Alzheimer’s disease or after a stroke. Older people are often **taking medication** that can affect fluid balance.

Why are older people reluctant to drink enough?

They may **incorrectly believe** that increasing the amount they drink means they will need to go to the toilet more often and are more likely to be incontinent, so they deliberately reduce their fluid intake. However the opposite is true, dehydration increases urinary frequency and incontinence! Older people may have **memory problems** or **physical difficulties** making it difficult to drink independently.

What happens if an older person does not drink enough in the long term?

Long term poor fluid intake **increases the risk** of the following: Poor oral health, urinary tract infections, incontinence, constipation, pressure sores and an increased risk of falls. When older people feel thirsty memory problems become worse and confusion is more likely.

How much should a person drink to provide good hydration?

There is no recommended daily amount as **this is different for everyone**. However a good guide is 2 litres a day for a healthy adult, which is **6-8 glasses of fluid**. In reality this can be **challenging for older people** and your care home residents may need your help and support to achieve the best intake possible.



Top tips:

- Aim to maximise fluid intake, every sip helps!
- A wide variety of drinks should be available at all times
- All fluid counts, (except alcohol), including water, tea, coffee, milk and fruit juice!
- It is often more effective to offer a drink rather than ask if the resident would like one
- If a resident has an alcoholic drink, encourage them to also have a non-alcoholic drink to provide hydration

Remember food can also contribute valuable fluids!

Examples of high fluid content foods include:

- **Fruit:** e.g. apples, blueberries, cranberries, melon, oranges, pears, pineapple, plums, raspberries and watermelon
- **Vegetables:** e.g. cucumber, carrots, celery, tomatoes, lettuce and squash
- **Others:** Soup, ice-cream, jelly, milky puddings, custard, stews and sauces

These suggestions give ideas to educate staff and residents about the importance of good hydration. They also provide the opportunity to have fun and sample a wide variety of drinks and foods with a high fluid content.

- Formal social drinking events for example themed tea parties using china crockery
- Film afternoons with ice creams
- Tasting sessions with different drinks; such as different types of teas, juices, squash, fruit teas or fruit infusions
- Fruit bowl tastings
- Smoothie making, mock-cocktail making and jelly making activities
- Theme the drinks trolley for the day with different coloured cups/ glasses/Jugs or drinks



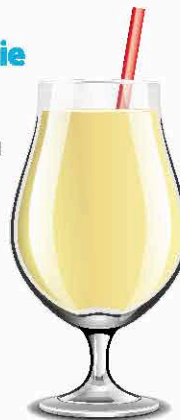
Hold a mock-cocktail making event with your residents!

We have provided you with some recipe ideas to start you off. Involve the residents when making Mocktails and see what ideas they come up with!

Peach passion smoothie

Ingredients: 15oz sliced peaches, 4 scoops of vanilla ice cream, half a cup of orange juice and a small dash of milk

Method: Use a blender and blend until smooth.



Chocolate cocktail

Ingredients: 210ml of milk in a pan, one 150g chocolate bar, 75ml of vanilla syrup and ice

Method: Add the milk and chocolate to the pan and melt through. Allow the chocolate and milk mixture to cool in a bowl in the fridge for 1 hour. Before serving add the vanilla syrup. Serve over ice.



Mulled Apple Juice

Ingredients: 1 litre of apple juice, strips of orange peel, one cinnamon stick and 3 cloves

Method: Simmer ingredients for 5-10 minutes. Sweeten with honey or sugar and serve hot.



Tangy Tomato

Ingredients: 3 cups of tomato juice, 2 tablespoons lemon juice, 2 teaspoons horseradish sauce, 2 teaspoons Worcestershire sauce and ice

Method: Mix the ingredients well and serve over ice. Garnish with celery. If residents would like their drink with a fiery kick, they can add a drop or two of tobacco sauce to heat things up!



Fibre Friday

Top tips to improve digestion:

1) Fill up on Fibre to prevent constipation


Fibre is an important part of a balanced diet. It can help prevent heart disease, diabetes, weight gain and some cancers, and most importantly it **improves digestive health** as it can prevent constipation.

However, many people don't get enough fibre. Most people in the UK only get about half the fibre that they really need.

Fibre is only found in foods that come from **plants**. Foods such as meat, fish and dairy products don't contain any fibre.

There are **two different types of fibre**: soluble and insoluble. Each type of fibre is beneficial and helps your body in different ways, so a normal varied diet should include both types. Examples include oats porridge, fruits, vegetables, legumes, nuts and seeds, wholegrain products and cereals.

2) Drink plenty of fluids to aid digestion

It's important to keep drinking. This can include any non-alcoholic drinks such as water, juice, smoothies, milk, tea and coffee. It encourages the passage of waste through your digestive system and helps soften stools. Fibre acts like a sponge, absorbing water. Without fluid, the fibre can't do its job and residents can become constipated. You should encourage and support all your residents to always aim for 6- 8 glasses of fluid per day. Refer back  to Thirsty Thursday for more top tips.

3) Maintain good toilet habits

Never ignore the urge to go to the toilet, because it can significantly increase your chances of having constipation. When your residents go to the toilet, make sure they have enough time and privacy to pass stools in comfort.

4) Stay active!

Inactivity or long periods in bed may cause constipation. Keeping active and mobile will greatly reduce your risk of getting constipation. Maintain a varied activity programme in your care home, and support and encourage your able residents to take part.

Good digestion equals good health.

Improving your residents digestive health is important and affects how they feel. Our intestines tend to become sluggish with age resulting in three quarters of nursing home residents using laxatives for bowel regulation. Constipation can cause your residents lots of discomfort and may reduce their quality of life, it may also signal more troubling underlying problems.



Be sure to check for individual dietary requirements for residents, including swallowing difficulties and the need for modified texture foods, before all events

Involve the residents when making these recipes.

High Fibre Snack recipe:

Ingredients:

- 3 very ripe bananas
- 1 cup crunchy peanut butter
- ¼ cup honey
- 1 teaspoon cinnamon (optional)
- 1 teaspoon vanilla extract (optional)
- 2 cups oats
- 1 cup chopped nuts and/or seeds



Method:

Combine all ingredients using a mixer, turn out onto a parchment covered baking dish. Press and flatten and bake at 180° for 30 minutes.

High Fibre Smoothie recipe:

Ingredients:

- Pitted prunes, 6 pieces
- Apple juice, 1 cup
- Crushed ice, 1 cup
- Full fat plain yoghurt, 1 cup
- Cinnamon powder, ¼ teaspoon



Method:

Blend to desired consistency. Serve and enjoy!

Fibre Quiz time: Are you eating enough fibre?

Please circle only one number for each question.

How did you score?

12-26

There is room to improve. Look at answers that scored 0 or 1 to help.

0-11

Well done – you are making choices that will help you to achieve a high fibre diet.

If you have a few areas to improve, start with one change at a time.

Aim to score 0 or 1 for most questions.

With thanks to the Department of Health, Tasmania

What kind of bread do you usually eat?	None	3
	White	2
	White and wholemeal	1
	Wholemeal, multigrain, rye	0
If you eat snacks, how often are your snacks vegetables, fruit, nuts, sandwiches, bread or toast?	Rarely or never	3
	Sometimes	2
	Most of the time	1
	Always	0
What type of breakfast do you usually eat?	Cornflakes or Rice Crispies	2
	Cooked breakfast with beans & toast	1
	Muesli, Weetabix, Bran flakes, porridge	0
What type of pasta or rice do you usually eat?	None	3
	White only	2
	White and wholemeal	1
	Wholemeal only	0
How often do you eat legumes, e.g. baked beans, peas, beans, lentils, kidney beans, three or four bean mix?	Rarely or never	3
	Once a fortnight	2
	Once a week	1
	Two or more times per week	0
How often do you eat fruit? (fresh, tinned or dried)	Occasionally	3
	Two to five times per week	2
	About once a day	1
	At least twice per day	0
If you eat dessert, how often would it be made from fruit?	Rarely or never	3
	Sometimes	2
	Most of the time	1
	Always	0
How many different types of vegetables (including potatoes) do you eat each day?	Less than three types	3
	Three types	2
	Four types or more, mostly peeled	1
	Four types or more, mostly unpeeled	0
Where possible, do you leave the skin on your fruit and vegetables? (e.g. apples, potatoes, carrots)	Rarely or never	3
	Sometimes	2
	Most of the time	1
	Always	0

Savoury Saturday

Savoury foods are nourishing too!

When there are worries about a person's eating often lots of the suggested foods to "build them up" are sweet foods. Savoury foods are excellent sources of protein and energy.

As we get older our sense of taste decreases. To help enhance the taste of savoury foods try adding seasoning (herbs, spices, pepper, lemon juice) and make sure sauces and gravy are available with meals.

People who have difficulty chewing often find meat one of the more difficult things to eat. Make sure meat is cooked so it is soft, or offer alternatives, such as fish, eggs or beans. Adding cheese will also increase protein and calories.

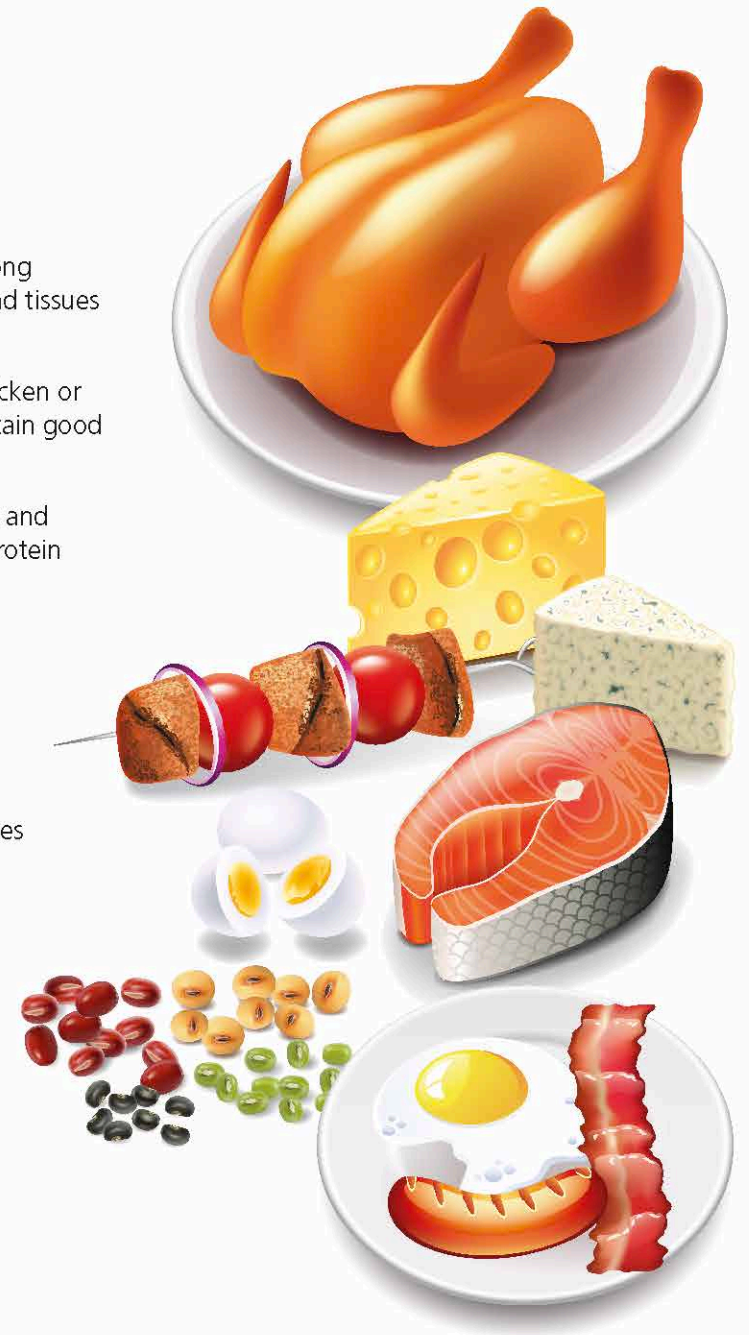
Some people struggle to use cutlery due to physical or cognitive problems. Savoury "finger foods" that people can pick up and eat with their fingers can be helpful to continue to promote independence at meals.

Savoury Facts:

- Protein is very important in our body to build strong muscles and also to help all of our bodies cells and tissues function.
- Protein doesn't just have to come from meat, chicken or fish. Dairy foods, eggs, beans and pulses all contain good quality protein.
- A cooked breakfast of 1 rasher bacon, 1 sausage and 1 fried egg provides around a third of the daily protein needs of a man over 65 years old.

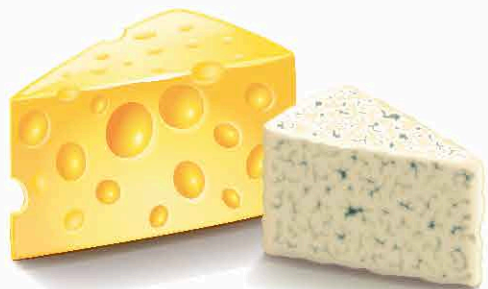
Top Tips:

- Would residents like to have cheese and biscuits as a snack or after their meals sometimes?
- Would any residents prefer savoury snacks to cakes and biscuits?
- What tasting events could you organise? Maybe sausages, fish, breads or fruit and vegetables?
- Why not make a buffet evening a regular event? You could theme your buffet evening to different events and countries. In the summer the buffet could take the form of a garden party or street party.
- In colder weather why not offer soup with toast fingers between meals?



1. Cheese tasting evening.

- Invite friends and relatives to take part in the event
- Ask your residents about their favourite cheeses to give suggestions to taste. Does anyone have strong cheese related memories?
- Aim to choose a variety of cheeses e.g. hard, soft, blue, cheese with fruit. Mix old favourites and more unusual options so there is something for everyone.
- Have a variety of crackers, chutney, salad and fruit to go with the cheese, e.g. cranberry sauce, grapes, apples, celery, tomatoes. What are resident's favourite cheese combinations? Brie and cranberry? Cheddar and apple? Celery and cream cheese?
- Consider giving residents and relatives a score card to rate the cheeses.
- Do you have a local cheese maker who could help with the cheese tasting?
- You could make the event a cheese and wine tasting evening, or maybe write a cheese themed quiz to accompany the tasting.



2. Savoury buffet and board games evening.

Rather than a plated meal served at the table make Saturday evening a finger food buffet night. Serve a variety of finger foods to accompany an evening of board games. You could invite friends and family to join in with the evening.

Food ideas:

Try and have a variety of foods available for all tastes. Your buffet could be all cold foods or a mix of cold and hot. Here are some ideas:

- Sausage rolls
- Cocktail sausages
- Sliced meat e.g. ham, turkey, chicken
- Finger sandwiches with a variety of fillings
- Toast and pâté (meat and/or fish)
- Chopped batons of vegetables (cucumber, carrot, peppers)
- Dips e.g. hummus, sour cream and chive
- Pizza slices
- Quiche slices
- Scotch eggs
- Cheese cubes or cheese and biscuits
- Quartered hard boiled eggs
- Breaded fish goujons
- Mini spring rolls
- Mini samosas
- Potato wedges

Games ideas:

What would your residents like to play? Do you have a Poker master or Bridge genius in your midst? Have a variety of games available for all tastes. Sometimes simple old favourites like snap, rummy, draughts and snakes and ladders can be the most popular and can be enjoyed by all ages. Alternatively team up for a game, maybe Cluedo or Trivial Pursuits.



Sunny Sunday

What is vitamin D?

You make vitamin D under your skin when you are outside in daylight, which is the reason vitamin D is sometimes called the 'sunshine vitamin'.

What does vitamin D do in my body?

Vitamin D helps your body absorb calcium for healthy bones and teeth. Even if you have a calcium-rich diet (for example from eating plenty of dairy foods and green leafy vegetables), without enough vitamin D you cannot absorb the calcium into your bones and cells where it is needed.

Vitamin D may have other important roles in the body, but there isn't enough evidence at the moment to make any recommendations.

When is vitamin D made in skin?

In the UK sun light is only strong enough to make vitamin D on exposed skin (on the hands, face and arms or legs) in the middle of the day (around 11am - 3pm) during April to September. If you go out in the sun two or three times a week for at least 15 minutes (before applying sunscreen) in this period, your body will make enough vitamin D. During winter we get vitamin D from our body's stores and food sources.

Which foods contain vitamin D?

Help your body get more vitamin D by eating plenty of vitamin D rich foods, to include:

- Liver - contains a lot of vitamin D
- Oily fish such as salmon, sardines, pilchards, trout, kippers - contain reasonable amounts of vitamin D
- Eggs, meat and milk - contain small amounts but this varies during the seasons
- Margarine, some breakfast cereals and some yoghurts are 'fortified' with vitamin D (check the labels)

Vitamin D supplements

Current recommendations advocate the use of oral Vitamin D supplements for the high risk groups such as people over 65, people with darker skin and the housebound. Speak to your GP for local policies about vitamin D supplements.

Can I have too much vitamin D?

Taking a vitamin D supplement as well as spending a lot of time outside in sunshine is not a problem as your body only makes as much vitamin D as it needs. However do not take more than one supplement containing vitamin D.



Useful Resources:

- **Physical and social activities for care Home** (Staffordshire public health)
<http://www.carematch.org.uk/downloads/physical-social-activity-in-care-homes.pdf>
- **Outdoor activities for elderly people**
<http://www.elderlyactivities.co.uk/category/outdoor-games-activities>

There is no better place to be on a nice day, than outside, so bring the daily activities to the great outdoors: sitting, reading, doing puzzles/ crosswords, singing, eating, exercising, dancing, knitting, crafts etc.

Involve residents in daily outside maintenance and tasks, which will also help promote independence: Gardening, hanging out and bringing in laundry, cleaning /painting/polishing garden furniture...

Involve family, friends and the community in projects to improve outdoor facilities and environment: bird tables, painting big pebbles to decorate the garden, create a big mosaic picture representing a sun, Easter egg hunt, local petting farm visit...

Facilitate reminiscence: for example about holidays at the seaside, family picnics, street parties, cod liver oil supplements during childhood...



Vitamin D Quiz

- **What is the best part of the day for sunlight exposure?**
 - Ⓐ 9-11
 - Ⓑ 11-3pm
 - Ⓒ 4-6pm
 - **Which type of fish are a good source of vitamin D?**
 - Ⓐ Oily fish
 - Ⓑ White fish
 - Ⓒ Freshwater fish
 - **The sunrays can produce vitamin D even on cloudy days**
 - Ⓐ True
 - Ⓑ False
 - **During which months is sunlight most effective at creating Vitamin D in the skin?**
 - Ⓐ January-April
 - Ⓑ April-September
 - Ⓒ October-December
 - **Which mineral does vitamin D help the body to absorb?**
 - Ⓐ Calcium
 - Ⓑ Iron
 - Ⓒ Zinc
 - **It is impossible for the body to make too much vitamin D**
 - Ⓐ True
 - Ⓑ False
 - **What is the best source of vitamin D?**
 - Ⓐ Sunlight
 - Ⓑ Exercise
 - Ⓒ Protein
 - **Vitamin D is vital for**
 - Ⓐ Shiny hair
 - Ⓑ Healthy skin
 - Ⓒ The immune system
- Answers:** Ⓑ Ⓐ Ⓐ Ⓑ Ⓐ Ⓐ Ⓐ Ⓒ

Your checklist towards excellence in Nutrition and Hydration Care



This checklist provides an easy way of assessing your care home's approach to nutrition and hydration. Use the checklist to identify any areas for work and development.

- Manager(s) promote a strong **culture** of excellence in Nutrition and Hydration care
- Nutrition and Hydration **policy** written and staff are familiar with it
- Care Staff **sit down** with residents at meal time and/or tea time
- Residents' **dignity** is considered at all times (providing the right environment and equipment to promote independence and/or when feeding residents)
- Malnutrition **screening** tool (e.g. MUST) used once a month for all residents
- Malnutrition pathway adapted to reflect **local** level of services
- Individual nutrition and hydration **care plans** are updated monthly following screening/assessment
- Individual nutrition & hydration care plans have **S.M.A.R.T*** objectives
- Residents at risk of malnutrition and/or dehydration **flagged up** at handover
- All** staff aware of residents who are at risk of malnutrition and/or dehydration
- All staff are appropriately **trained** in nutrition and hydration care, including malnutrition screening and dehydration risk assessment
- Chef/catering manager regularly **visit** residents to discuss their individual requirements and preferences
- Residents are **consulted** for menu planning and feedback
- Resident and **family** aware of malnutrition and/or dehydration risk and care plan
- Monthly Audits** of malnutrition screening tool take place to monitor compliance and accuracy
- Yearly Audit** of nutrition and hydration care takes place to ensure policy is followed
- There is effective and **documented** communication of residents' nutrition and hydration needs between managers, nurses, catering, health care assistants, activity coordinators, domestic staff, GPs, and hospitals (if admitted)

* **S.M.A.R.T.** goals = specific, measurable, achievable, realistic and timed goals

- **The Malnutrition Universal Screening Tool (MUST)**

www.bapen.org.uk/screening-and-must/must/introducing-must

MUST[®] is a five-step screening tool to identify adults, who are malnourished, at risk of malnutrition (undernutrition), or obese. It also includes management guidelines which can be used to develop a care plan.

- **The Malnutrition Task Force**

www.malnutritiontaskforce.org.uk

This website provides advice for care homes about identifying and tackling malnutrition.

- **The Malnutrition Pathway**

<http://malnutritionpathway.co.uk/leaflets-patients-and-carers>

The Malnutrition Pathway is a national pathway for the identification and treatment of malnutrition. The pathway includes resources to help people increase their calorie intake through easy ideas.

- **The Caroline Walker Trust**

www.cwt.org.uk/

The work of the CWT is particularly targeted towards vulnerable groups and people who need special help. They produce practical guidelines including advice for catering for people with dementia

- **Nutrition and Hydration Week**

<http://nutritionandhydrationweek.co.uk/>

Nutrition and Hydration Week's mission is to create a global movement that will reinforce and focus, energy, activity and engagement on nutrition and hydration as an important part of quality care, experience and safety improvement in health and social care settings

- **Bournemouth University Eating and Drinking well; supporting people living with dementia**

www.youtube.com/watch?v=dIYPTTibTO8&feature=youtu.be

This video highlights to care home staff how to improve their practice and develop their knowledge and skills to provide better eating and drinking for people living with dementia.

- **Social Care Institute for Excellence: Eating well with Dementia**

www.scie.org.uk/dementia/living-with-dementia/eating-well/

This site provides lots of information, resources and ideas for food related activities

- **National Dysphagia Descriptors**

[www.thenacc.co.uk/assets/downloads/170/Food Descriptors for Industry Final - USE.pdf](http://www.thenacc.co.uk/assets/downloads/170/Food%20Descriptors%20for%20Industry%20Final%20-%20USE.pdf)

These descriptors detail the types and textures of foods needed by individuals who have swallowing difficulties and who are at risk of choking or aspiration (food or liquid going into their airway). The descriptors provide standard terminology to be used by all health professionals and food providers.

- **British Dietetic Association Food Facts**

www.bda.uk.com/foodfacts/home

The BDA Food Fact Sheets are written by dietitians to help advise the best ways to eat and drink to keep your body fit and healthy, including for certain medical conditions. The information is regularly updated to ensure it remains up to date.

- **Nutritional Guidelines and Menu Checklist for Nursing and Residential homes**

www.publichealth.hscni.net/sites/default/files/Nutritional_guidelines_and_menu_checklist_march_2014.pdf

These guidelines are from Northern Ireland and provide a practical guide filled with lots of information and ideas to support catering in care homes including a checklist to make sure menus are balanced.

- **CQC Regulation 14; Meeting Nutrition and Hydration Needs**

www.cqc.org.uk/content/regulation-14-meeting-nutritional-and-hydration-needs#hide5

The CQC website details how care providers can ensure they meet the nutritional and hydration needs of their residents.

- **Food Standards Agency: Safer food, better business supplement for residential care homes.**

www.food.gov.uk

This site provides advice on food safety and includes guidance for care homes and example menus.