

THE IMPORTANCE OF NUTRITION AND HYDRATION

Every year hundreds of nutrition and dietetics departments across the country come up with innovative and engaging ideas to promote nutrition and hydration awareness within their care setting. Running since 2012, Nutrition and Hydration Week this year falls on 11th-17th March and aims to 'highlight, promote and celebrate improvements in the provision of nutrition and hydration locally'.

The importance of tailored and adequate nutrition and hydration for the prevention of malnutrition, promoting optimum recovery from illness and to support the health of workers within healthcare institutions is essential. After all, uneaten food provides no nutritional value, leads to vulnerable patients being unable to meet their nutritional needs and creates waste and financial loss for organisations. It is, therefore, imperative that awareness remains at the forefront in providing nutrition and hydration provisions that are appropriate for all service users.

WHY DO WE NEED NUTRITION AND HYDRATION AWARENESS?

In the UK, malnutrition remains a significant issue. The reasons that people develop malnutrition are numerous but an ageing population and the current cost of living crisis are all, no doubt, influencing factors. In the UK, 11 million people (19%) are over the age of 65 years¹ and more than two million (one in five) older people in the UK live in poverty, with an income below 60% of the median household income.² Of this figure, 1.1 million UK pensioners are

considered to be in severe poverty, with an income less than the 50% threshold of contemporary median income.³

With these statistics it is unsurprising that malnutrition rates in the UK remain high with three million people at risk. The latest published malnutrition screening survey by BAPEN in 2021 found that 30% of patients within their own homes, 38% of those admitted to hospital and 60% of patients admitted to care homes were at risk of malnutrition.⁴

The consequences of malnutrition are abundant. Increased GP visits,⁶ increased hospital stays, reduced quality of life and increased risk of developing complications and other diseases are just some of many.⁷ With 15% of the total public expenditure of the health and social care budget at a staggering £19.6 billion per year recorded in 2011-2012,⁸ raising awareness for the need of good nutrition and hydration practices remains paramount.

Another key aspect of nutrition and hydration awareness is the promotion of not just food but also fluid intake awareness. Hydration is a recognised



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REFERENCES

Please visit:
www.NHDMag.co.uk/article-references.html

Table 1: The National Institute for Health and Care Excellence (NICE) definition of malnutrition⁵

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| • A body mass index (BMI) of less than 18.5kg/m ² |
| • Unintentional weight loss greater than 10% within the past 3-6 months |
| • A BMI of less than 20kg/m ² and unintentional weight loss greater than 5% within the past 3-6 months |

Figure 1: Statistics and complications of malnutrition⁹

determinant of health status for all population groups,¹⁰ with the risk of mortality in those who are acutely unwell strongly linked with dehydration.¹¹ The focus on hydration can sometimes be lost in favour of focusing on food intake, with the *Commissioning Excellent Nutrition and Hydration 2015-2018* guide highlighting a major gap in information related to dehydration.¹²

The awareness of fluid intake is a particular area of importance with many cross-sectional studies showing that in a general population only 51% of adults meet the European Food Safety Authority (EFSA) recommendations for adequate intake of fluid:¹³ 2.5 litres for men and 2.0 litres for women.¹⁴ In the long term, this can lead to a number of urinary system diseases.¹⁵ In the UK, the Eatwell Guide recommends a minimum daily water intake of 1.2 to 2.0 litres (six to eight glasses).¹⁶ However, vulnerable patients in the community, hospitals and care homes can struggle to meet these recommendations and be at increased risk of developing dehydration, which is an often forgotten component of malnutrition.

In order to help promote hydration in UK hospitals, the National Patient Safety Agency (NPSA) developed a toolkit aimed at guiding healthcare staff on how to reduce the risk of malnutrition.¹⁷ Despite

guidance, issues remain around patients not always having access to water by their bedside and staff not always able to assist with drinking.¹⁸ This was something highlighted by the Francis Report back in 2013, which found, due to physical weakness or the simple factor of not being able to reach a drink, dehydration was increased.¹⁹ As a result of such issues, 45% of patients will become dehydrated during a hospital admission.²⁰ This figure prompts the need for continued awareness and promotion of the need for optimum hydration.

In addition to patients, it is vital to remember that other service users are also impacted by the nutrition and hydration provisions available within healthcare institutions. With over 700,000 NHS employees falling into an obese category and with estimates by Public Health England that the annual cost to the NHS of staff absence due to poor health is £2.4bn, it is increasingly appropriate to prioritise the health and well-being of its workers, who, along with visitors, are the consumers of more than half the food sold within NHS hospitals.⁹ Because of this, the Commissioning for Quality and Innovation (CQUIN) framework that supports improvements in the quality of services and the creation of new improved patterns of care,²¹ introduced a new health and well-being national

Table 2: The 10 key characteristics of nutritional care.²⁶

1	Screen all patients and service users to identify malnourishment or risk of malnourishment and ensure actions are progressed and monitored.
2	Together with each patient or service user, create a personal care/support plan enabling them to have choice and control over their own nutritional care and fluid needs.
3	Care providers should include specific guidance on food and beverage services and other nutritional and hydration care in their service delivery and accountability arrangements.
4	People using care services are involved in the planning and monitoring arrangements for food service and drinks provision.
5	Food and drinks should be provided alone or with assistance in an environment conducive to patients being able to consume their food (protected mealtimes).
6	All healthcare professionals and volunteers receive regular training to ensure they have the skills, qualifications and competencies needed to meet the nutritional and fluid requirements of people using their services.
7	Facilities and services providing nutrition and hydration are designed to be flexible and centred on the needs of the people using them, 24 hours a day, every day.
8	All care providers should have a nutrition and hydration policy centred on the needs of users, and are performance managed in line with local governance, national standards and regulatory frameworks.
9	Food, drinks and other nutritional care are delivered safely.
10	Care providers should take a multidisciplinary approach to nutrition and hydrational care, valuing the contribution of all staff, people using the service, carers and volunteers working in partnership.

CQUIN. This, in part, is related to the provision of food for staff and visitors. The ultimate goal of this CQUIN is to improve support available to NHS staff to help promote and maintain their health and well-being.⁹

NUTRITION AND HYDRATION (N&H) WEEK

As food provision is critical for the treatment and prevention of malnutrition and for promoting the health of workers, N&H Week is a key awareness campaign that is reaching global heights. It allows for the sharing of ideas and the celebration of new developments and improvements in the field.

11-17th March 2024 marks this year's national N&H Week. Since its debut in 2012, the event aims to promote the following:²³

- The 10 key characteristics for good nutritional care
- Protected mealtimes
- Nutrition advocates for each health or social care setting
- The minimum standards for good nutrition in the respective settings
- Highlighting good nutrition and hydration practices
- Continued education for professionals on good nutrition and hydration

As well as raising awareness, N&H Week, which is not exclusive just to NHS settings, but for all the wider community, can help support people to make changes for a healthier lifestyle, a factor that could help prevent health complications in later life. It's also an ideal time to promote nutrition champions within healthcare settings. A nutrition champion, who could be a registered nurse or clinical support worker, works with all staff to advocate for the improvement of nutrition and hydration care of patients and can act as a liaison between clinical and catering staff. Advocates are invaluable in ensuring that nutrition and hydration remain at the forefront of patient care and that nutritional care goals are shared, understood and actioned.²⁴

In addition to N&H Week, BAPEN and the Malnutrition Task Force (MTF) founded Malnutrition Awareness Week in 2018, which this year takes place between the 14th and 20th of October. This event aims to raise both awareness and understanding of the preventable risks of malnutrition across different sectors and settings, in local communities and with the general public and health and social care professionals.²⁵

N&H Week's published mission is to 'create a global movement that will focus energy, activity and engagement on nutrition and hydration as a fundamental element of maintaining the health and well-being of our global community'.²²

THE 10 KEY CHARACTERISTICS OF NUTRITIONAL CARE

One of the main promotional messages of N&H Week within healthcare settings is for the 10 key characteristics of nutritional care. These characteristics are a requirement of Hospital Food Standards SC19 within the NHS contract for hospitals. Reviewed by NHS England in 2015, the updated 10 key characteristics are shown in Table 2 on the previous page.²⁶

In addition to the 10 key characteristics, other legally binding standards have been set out in the NHS Standard Contract. These aim to provide the foundations for raising awareness and delivering high-quality and nutritionally optimum food to NHS patients, staff and visitors.²⁷ These standards include:

- The BDA's *Nutrition and Hydration Digest*, which provides support and expert knowledge for all aspects of food and drink service provisions in healthcare. The *Digest* also influences the standard of food and drink offered to patients across England ensuring that there is safe access to nutritious and appropriate options that meet their dietary requirements.⁹
- The Malnutrition Universal Screening Tool ('MUST') or equivalent, which should be used to identify those at nutritional risk on first contact with healthcare professionals or admittance into hospitals and care homes.²⁸
- Healthier and More Sustainable Catering – Nutrition Principles, which are used for developing nutrient-based standards in order to plan nutritionally balanced menus.²⁹
- Government Buying Standards for Food and Catering Services, which are a set of minimum mandatory standards for inclusion in tender specifications and contract performance conditions. These

also include some best practice standards which, whilst not mandatory, are recommended.³⁰

HOW ARE THESE CHARACTERISTICS PUT INTO PRACTICE?

In order to meet standards, healthcare organisations are required to have systems in place to ensure:⁹

- service users have a choice of suitable nutritious food and hydration provided in sufficient quantities to meet their nutritional needs;
- religious and cultural requirements of service users through food and hydration are considered and met;
- adequate finance is available to provide food and drink;
- oral nutritional supplements and artificial nutrition, such as intravenous fluids, are available when appropriate;
- people are provided with help to eat and drink should they need it.

The importance of regular audits and service-user feedback are essential to maintaining these standards and to allow for continual development and improvement of nutrition and hydration provision.

CONCLUSION

With such a large proportion of NHS and health and social care budgets linked to the consequences of malnutrition and poor health of its workers, continued awareness of the importance of optimum and tailored nutrition and hydration for all remains a critical area of focus for organisations. N&H Week provides an excellent opportunity for promoting awareness and driving development and innovation to meet standards related to nutrition and hydration.