A Partitioner's Guide to Reducing Malnutrition in Long Term Care Facilities.

UNDERSITY OF NORTH DAKOTA, LEADERS IN ACTION.

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Introduction

- Older Americans are predisposed to becoming malnourished.
- 66.5% of older Americas in long term care facilities are malnourished.
- Approach malnutrition with an individualized nutrition intervention approach
 - Nutrition interventions based on the individual's needs and preferences
 - Improves compliance with the interventions

Objective

- This literature review identified six key themes in which the individualized nutrition intervention approach can be targeted.
- 1. Providing education
- 2. Providing encouragement
- 3. Providing condiments
- 4. Improving food quality and variety
- 5. Increasing social interaction
- 6. Improving the eating environment

Methods

- Published studies were searched in PubMed,
 Science Direct, CINAHL, and Clinical Key from 2013 to 2023.
- Key search terms included malnutrition, undernutrition, long term care, nursing homes, geriatric, older adults, elderly, residents, food fortification, meal interventions, nutrition interventions, food enrichment, cost effectiveness, implementation, and institutional factors.

Resident Interventions

Education

- Assess the resident's readiness to change
- Improve the resident's understanding of an inadequate diet, the nutritional needs of the elderly, and increase awareness of malnutrition and its consequences.

Encouragement

- Increase the resident's compliance and motivation with the interventions.
- Maintain the resident's current eating habits by fortifying food and obtaining preferences.

Menu Interventions

- Condiments and garnishes
- Provide a variety of condiments at the dining table to maintain residents' autonomy
- Increases food and energy intake
- Increases meal enjoyment

Improving food quality and variety

- Increases total energy and meat intake
- Increases meal enjoyment
- Large portions increased intake of vegetables compared to residents chose their own portion sizes
- Two portions of varying vegetables increased meat intake by 32%
- Ensure mechanically altered food textures are visually appealing.

Mealtime Interventions

Social interactions

- Stimulate conversation at mealtimes
- Increases meal enjoyment which indirectly influences food intake
- Involve the resident in conversation with the staff
- Condiments stimulated conversation amongst the residents

Eating environment

Allow flexibility in the dining room seating

Staff Interventions

Education

- Improve the staff's awareness of malnutrition
 - Leads to earlier nutrition referrals.

Training

 Training non-nursing staff to assist with nutrition interventions such as offering supplements between melas and providing snacks.

8-Hour Training Program

- Federal and state dietary regulations with a focus on hand hygiene practices, resident rights and dignity, and feeding assistance during meals and between meals.
- Significantly improved quality improvement scores with feeding assistance.
- Trained non-nursing staff spent an additional 5
 minutes with each resident to promote oral intakes
- 80% of the trained non-nursing staff continued these interventions 6 months after completing the training program.

Quality Improvement Scores with Feeding Assistance

Conclusions

- Incorporate nutritional education for staff and residents
- Improve the understanding and awareness of malnutrition
- Increase the energy and caloric intakes of the residents by:
- Enhancing menu quality and variety
- Increase meal enjoyment through sharing the mealtime experience with the residents
- Ensuring well-trained and adequately staffed personnel

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