Exploring the nutritional needs of older people in a hospital environment: The educational perspective

Research Question

The aim of this study was to investigate the role of healthcare education in promoting interest in and understanding of nutritional care for the older person in a hospital environment and to determine ways in which this might be improved. The study considered the importance of maintaining and raising the quality of nutritional care for the older person in a hospital environment.

Key Findings

Within Northern Ireland:

- The results indicated that the quality of hospital food, assistance with mealtimes, family and professional involvement and overall wellbeing are important factors in the nutritional care of older people in a hospital setting.
- The study found that the amount of healthcare education which focuses directly on the topic of the nutritional care for the older person is limited.
- The study indicated that certain hospital practices concerning the nutritional care of older patients could be adapted to facilitate students learning experience.
- An interprofessional approach emerged throughout the course of the study as an important factor when considering the improvement of medical and nursing training with regard to the nutritional care of older people.

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Methodology

The design of the research is a multivariate qualitative approach. The study was carried out using four separate methods for data collection:

- Interviews/conversations with patients over 65 about their hospital experience of diet and nutrition were conducted with from the Belfast and Western Healthcare and Social Care Trusts.
- Data was collected from the pre and post qualification nursing and medical curriculum documents provided by two of the major Northern Ireland Universities.
- Semi-structured interviews were conducted with a key respondent from medicine and from nursing responsible for curriculum development in an education institution.
- One focus group with medical students and one focus group with nursing students in their final year of study were conducted to discuss their knowledge skills and attitudes with regard to nutrition in care of older people in hospital.

Summary of Relevant Literature

With a growing ageing population (Office of National Statistics, 2007) it is more important than ever to ensure the needs and care of older people are adequately addressed by health services. ‘Nutrition is the bedrock of good care and recovery from illness - older people are at particular risk of malnutrition and will struggle to respond to treatment or recover well if they are malnourished’ (Potter, 2008). Nutritional status has increasingly been associated with a variety of morbid conditions including cancer, heart disease and dementia among persons over the age of 65 (Wells and Dumbrell, 2006.) It has been reported that 40% of older people are malnourished on admission to hospital (ENHA, 2005; Age Concern, 2006; and DHSSPS, 2007;) with six out of ten older people at risk of becoming malnourished, or their situation getting worse whilst in hospital (ENHA, 2005). The ENHA (2005) notes that inadequate professional nutritional training for doctors and nurses is a key issue with malnutrition in general being given little attention in current undergraduate medicine or nursing curricula.

The issue of nutrition in hospital has been given greater impetus in recent years through a number of UK campaigns. In Northern Ireland, the DHSSPS has published its own guidelines: ‘Get your 10 a day! The Nursing Care Standards for Patient Food in Hospital’ in collaboration with the DHSSPS Directorate of Nursing and Midwifery and the Royal College of Nursing. However, guidelines will only be effective if fully embraced by healthcare professionals and educators at all stages of the education continuum.
Summary of Findings

The older patients expressed generally positive views of their hospital stay and the nutritional care provided by nursing and auxiliary staff. They appeared reluctant to complain about any aspect of their nutritional care but socio-cultural attitudes may explain this. Nevertheless a number of comments suggested that portion sizes, choice and taste of drinks, choice and timing of hospital food, availability of special utensils, allowing the patient to retain some independence during mealtimes and consistent monitoring of weight are all aspects which are important in the nutritional care of older people in a hospital setting.

The findings of this study suggest that the current amount of nursing and medical teaching time devoted directly to the topic of the nutritional care of older people in a hospital setting is minimal in Northern Ireland. The results suggest that nursing students are taught about nutrition in general and are expected to be able to apply their knowledge of nutritional care to older people as and when appropriate. Although it was assumed that the nursing students were largely able to do this, there were aspects of pre-registration training which the focus group data indicated could be improved. This included increasing the depth of knowledge of nutrition in relation to older people in the event of a dietician not being available.

The results of the focus group with undergraduate medical students suggested that they were not confident in their knowledge of the nutritional care of older people. There are two possible reasons for this. First there was a lack of clarity as far as the students were concerned about the scope of their responsibilities in relation to nutritional aspects of care. This may be a reflection of both limited practical experience and limited compulsory teaching time in relation to the nutritional care of older patients. Second, the medical students believed it to be unlikely that the topic of nutrition would be assessed in an examination at undergraduate level. As a result they felt that many medical students may perceive nutrition as a ‘soft subject’ or something which can be understood using ‘common sense’. Although medical and nursing students learn about various aspects of nutrition throughout their degree they indicated that they would prefer a greater focus on nutrition and older people in the curriculum using an interprofessional approach across a wide range of disciplines.

The study also indicated that certain hospital practices concerning the nutritional care of older patients could be adapted to facilitate students’ learning experience. Students encountered a number of problems when transferring their knowledge of nutrition to older people in a hospital setting. For nursing students, these included catering procedures, lack of time to ensure patients were eating, conflict of nutritional care with other responsibilities, a medical rather than nutritional approach to health problems and a low priority for nutrition on the wards. For the medical students, these difficulties included interprofessional barriers, conflict with other responsibilities on the wards and uncertainty in their role for nutritional care.
Recommendations

- Hospital staff should continue to encourage and progress practices which promote a positive eating experience such as increased monitoring of weight, greater inter-professional communication, notation of food consumed and discussions with family members/carers in addition to listening to older patients.

- The depth and breadth of teaching and practical time devoted to nutrition and older people in the medical and nursing curriculum should be increased.

- Nutrition and the older person should be taught using an interprofessional approach across a wide range of relevant disciplines.

- The role of assessment in promoting learning in medical and nursing curricula is important and educators cannot ignore the direction in which their choice of assessment drives students. If nutritional care of patients and older patients in particular is to be taken seriously then it needs a place in the curriculum and in practical skills assessments.

- Hospital practices concerning the nutritional care of older patients should be adapted to facilitate students learning experience.

- Development of services, support groups, and community outreach specifically suited to the needs and desires of older women who experience domestic violence is vital. Professionals in all service sectors must more fully understand the help-seeking barriers that older victims face. The research community is challenged to replace myths and stereotypes about the nature and prevalence of DV among older people with research-based knowledge.

For further information:

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A full copy of this research is available on the CAP website, www.changingageing.org.