

# Identifying the signs of malnutrition in people with dementia at home: TOMATO Project

nuTritiOn and deMentia AT hOme: TOMATO

*UKMAW2023 Learning Event*



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**TOMATO Project Team**  
<http://www.bournemouth.ac.uk/tomato>

## Overview

- Nutrition-related issues and risk of malnutrition in people living with dementia
- Approaches to spot the signs of malnutrition and improve eating and drinking
- **TOMATO** project: nu**T**riti**O**n and de**M**entia **AT** h**O**me
- Q&A



# Eating and drinking problems



Other challenges of eating and drinking for people with dementia?



As dementia progresses, eating and drinking can become more challenging.

## Nutrition and Dementia

- **Two-thirds** of people with dementia live at home and rely on family or friends to support with eating and drinking.
- As dementia progresses, ensuring people eat and drink well can be difficult.

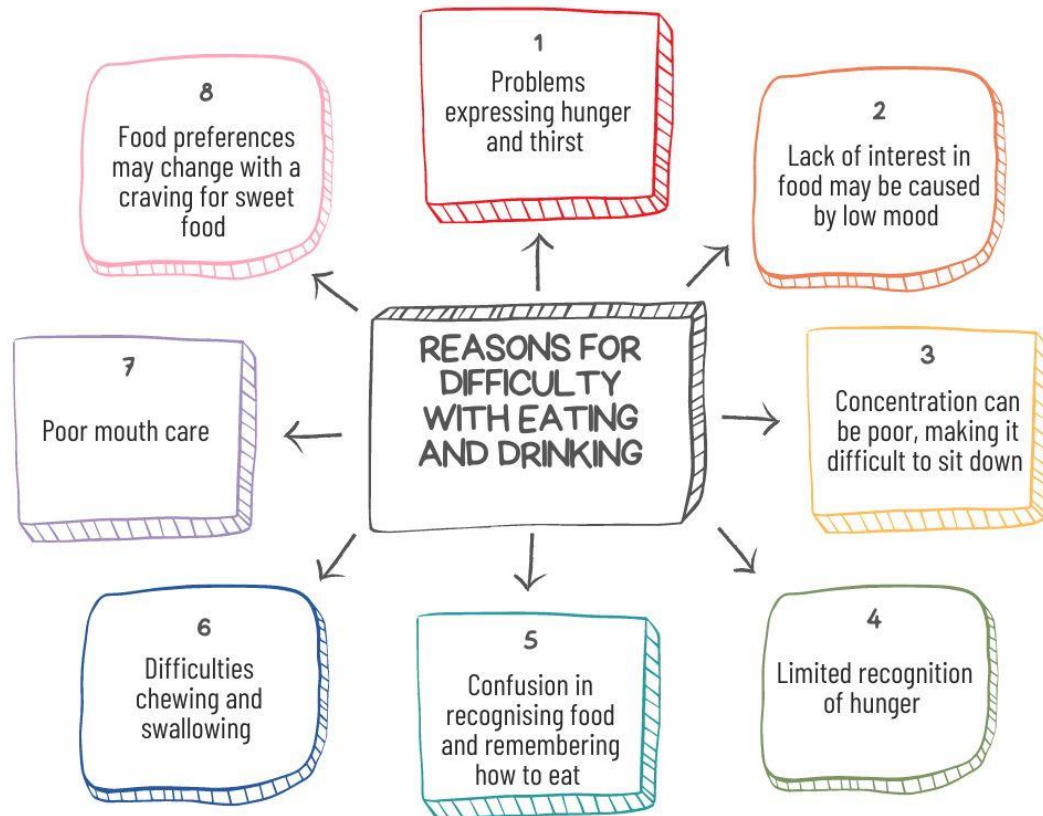


<https://dementiastatistics.org/statistics/numbers-of-people-in-the-uk-2/>



# Eating and drinking problems

Eating and drinking can become increasingly difficult due to various reasons:



More...

- Loss of ability to feed oneself and reduced coordination
- Storing food in the mouth, spitting food out or completely refusing to eat
- Reduced thirst sensation
- Paranoia surrounding food

# ***'Losing weight is not an inevitable part of ageing'***

## **Signs of poor nutrition & hydration**



- **Unplanned weight loss**
- **Other 'warning signs'**
  - **Poor appetite**
  - **Loss of interest in food**
  - **Loss of interest in activities / routines**
  - **Absence at clubs / activities**
  - **Irritability**
  - **Pressure sores / poorly healing wounds**
  - **Urinary infections**
  - **Poor concentration**
  - **Unwell more or for longer than usual**

# New tools to identify malnutrition through a conversation (early identification and signposting)

## Patients Association Nutrition Checklist

## Nutrition Wheel

**the patients association**  
**nutrition checklist**

**Section A: Initial assessment**  
Tick the relevant box to indicate the person's answers, then refer to the actions section below

1. Are you or your family concerned that you may be underweight or need nutritional advice?  
Yes  No  Don't know

2. Have you lost a lot of weight unintentionally in the past three - six months?  
Yes  Do you know why?  No  Don't know

3. Have you noticed that your clothes or rings have become loose recently?  
Yes  No  Don't know

4. Have you recently found that you have lost your appetite and/or interest in eating?  
Yes  No  Don't know

Is the person at increased risk of undernutrition?  
(tick 'Yes' if the person answered 'yes' or 'don't know' to one or more questions)

YES  NO

Further assessment and signposting/advice needed. Go to Section B of the Patients Association Nutrition Checklist or make appropriate referral locally

No further action needed

**Section B: Needs and advice**  
Use this section for everyone who was identified as being at increased risk of undernutrition in Section A of the Patients Association Nutrition Checklist

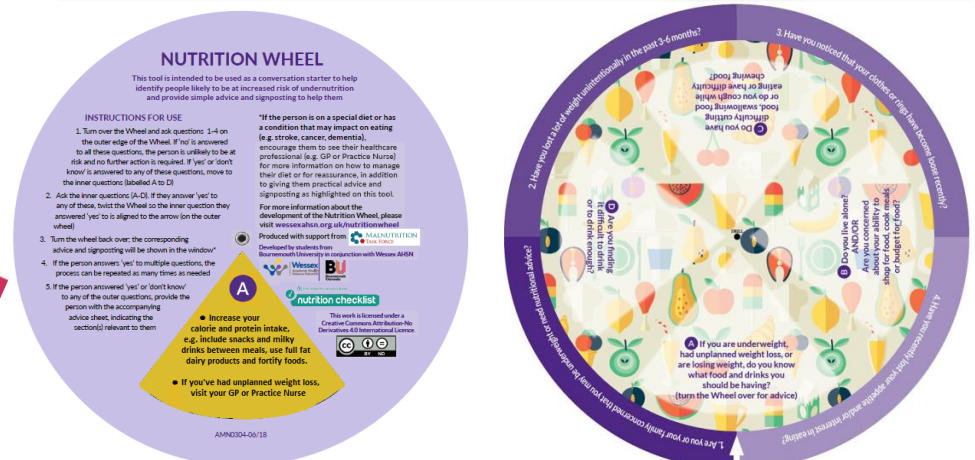
Maintaining a healthy body weight is important for all adults, and especially in older age. If the person you are supporting has lost weight unintentionally, or is underweight, they may feel weak and tired and unable to do the everyday activities they enjoy.

Give the advice in Section B1 about food and eating to everyone. In Sections B2, B3 and B4 use the first part to indicate the person's situation and needs and the second part to note the person's actions/signposting/advice given. In the needs section tick  when the person answers 'Yes'. In the advice section, indicate  for any advice/signposting you offer.

**Section B1: Advice for food and eating**  
Suggest the following to help the person eat well and gain energy

- Small frequent meals and snacks
- Milky drinks between meals and snacks
- Full fat dairy products, e.g. whole milk, full fat yoghurts and cheese. If they don't eat dairy products, suggest almond, oat or coconut milk
- Fortify foods with extra fat, protein and sugar (e.g., add cheese, butter and cream to mashed potato; add cream, skimmed milk powder or ground nuts to porridge; add four tablespoons skimmed milk powder to a pint of usual milk)
- Nutritional supplement drinks from supermarket or chemist, to help add protein, vitamins and calories
- Average intake of favourite drinks from supermarket or chemist, to help add protein, vitamins and calories
- Quick and easy nutritious meals and snacks, e.g. beans on toast with cheese, cheese cake or terracini rice, microwave meals, meal delivery services if the person is feeling weak, tired and fatigued (please write this down)

Undernutrition is of paramount importance. If a person is at risk of losing weight, advice (e.g., low fat) may be needed.





# USING TOOLS TO START CONVERSATIONS ABOUT EATING WELL IN LATER LIFE



**Malnutrition Task Force**

*Eating and drinking well in later life*



<https://www.youtube.com/watch?v=rNzbRYzF5hg>

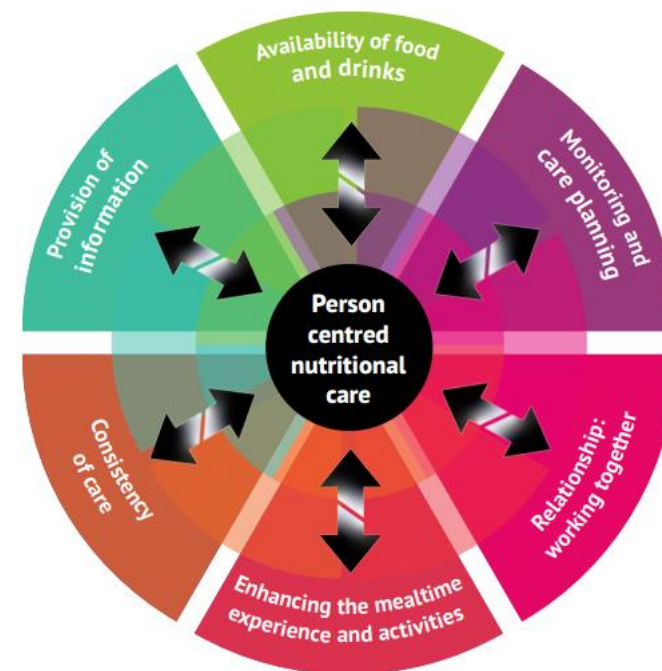


# Eating and drinking well at home



What can we do to improve eating and drinking?

## Model to Deliver Person-Centred Nutritional Care in Dementia



*Murphy et al (2017) Nutrition and dementia care: developing an evidence-based model for nutritional care in nursing homes BMC Geriatrics 17:55*

# Our Existing Research-Informed Resources

## Eating and Drinking Well with Dementia



- ✓ Workbook
- ✓ Video
- ✓ Guides for staff and family carers, and resources and leaflets

<https://www.bournemouth.ac.uk/research/projects/optimising-food-nutritional-care-people-dementia>



## About Project **TOMATO** (November 2022 to August 2024)

- **Aim:** To work together with home care staff, people with dementia and family carers to provide nutritional care for people living with dementia at home.
- **Location:** Home care organisations across England
- **Method:** Mixed-methods study
- **Two Phases**



**TOMATO Project Website:** <http://www.bournemouth.ac.uk/tomato>

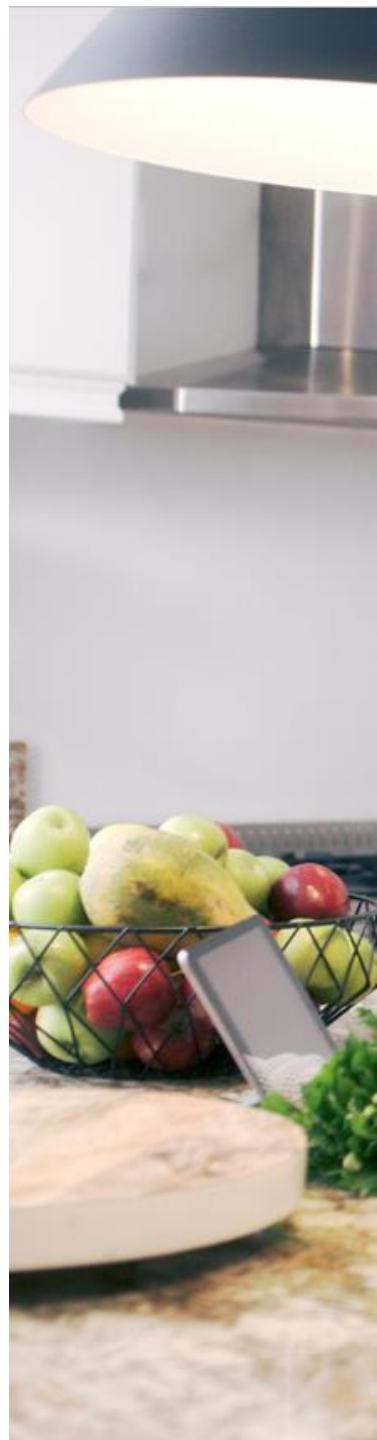
## Phase 1: Adapting Intervention to Home Care

### *What have we done so far?*

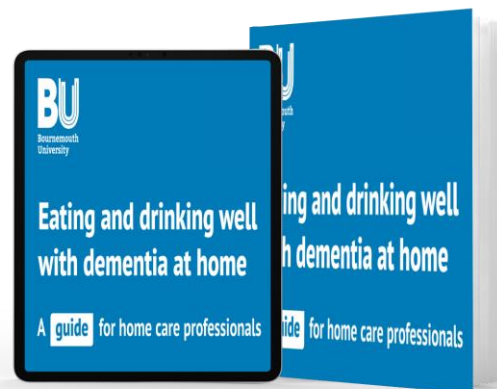
- Research Ethics approval
- Patient and Public Involvement (**PPI**) Group and Project Steering Group (**PSG**)
- TOMATO project multidisciplinary expert team
- We have worked together with people living with dementia, their family carer(s), homecare staff and nutrition experts to adapt the existing intervention for home care

### ***Participants | Semi-structured interviews (individually or in pairs)***

- *People with dementia / carer dyads*
- *Home care workers*



# Home care Resource | *Coming Soon!*








## Phase 2: Intervention Testing

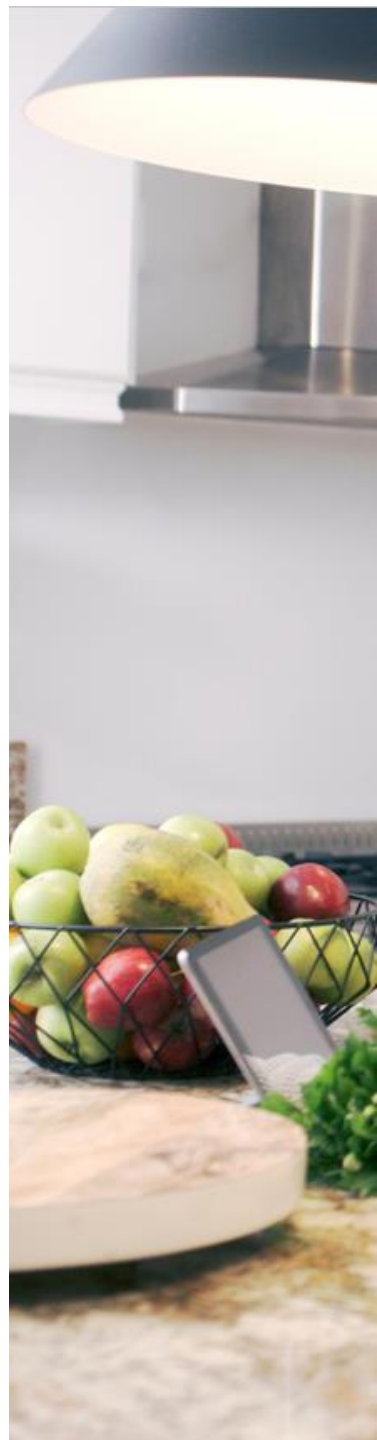
To test acceptability and feasibility of the intervention for people with dementia and family carers receiving care at home.

### Approach

- ✓ Home care workers training to deliver the adapted approach.
- ✓ Baseline and follow up data
- Existing care plans, screening data (food intake, weight).
- Costs of the approach 
- Semi-structured interviews 
- Focus groups 

### Participants

- *People with dementia /carer dyads who receive home care*
- *Home care workers, home care managers, clinical expertise for nutrition*




# Spotting the signs of poor nutrition

## Monitoring to spot the signs of poor nutrition

Home care professionals play an important role in supporting people living with dementia at home.

Useful **conversational** tool such as the **Patients Association Nutrition Checklist** can help with spotting the signs of poor nutrition to identify potential risk of undernutrition by asking **4 simple questions**.

- A potential risk of undernutrition due to not eating and drinking sufficiently may be identified **if the client answers yes or don't know to one or more questions** as stated on the checklist.

| <br><b>nutrition checklist</b>   |  |     |   |            |                  |
|---|--|-----|---|------------|------------------|
| <b>Section A: Initial assessment</b><br>4 simple validated questions to encourage conversation  |  |     |   |            |                  |
| Start: Tick the relevant box to indicate the person's answers, then refer to the actions section below  |  |     |   |            |                  |
| No.   | Questions  | Yes | No                                      | Don't know |                  |
|   |  |     |   |            | Do you know why? |
| 1   | Have you recently found that you have lost your appetite and/or interest in eating?      |     |   |            |                  |
| 2   | Have you noticed that your clothes or rings have become loose recently?                  |     |   |            |                  |
| 3   | Have you lost a lot of weight unintentionally in the past three – six months?            |     |   |            |                  |
| 4   | Are you or your family concerned that you may be underweight or need nutritional advice? |     |   |            |                  |
| <b>Is the person at increased risk of undernutrition?</b><br>Tick 'Yes' if the person answered 'yes' or 'don't know' to one or more questions                             |  |     |   |            |                  |
| YES   |  |     | NO<br><i>(if 'No' to all questions)</i> |            |                  |
| <b>Further assessment and signposting/ advice needed.</b><br>Go to <b>Section B</b> of the Patients Association Nutrition Checklist or make appropriate referral locally. |  |     | <b>No further action needed</b>         |            |                  |

Adapted from: The Patients Association and Health Innovation Wessex  
 Visit: [www.bournemouth.ac.uk/TomatoPOI](http://www.bournemouth.ac.uk/TomatoPOI)

## Next Steps



- ✓ Timeline | November 2022 to August 2024
- ✓ If feasible and acceptable, findings will inform the design of future larger study
- ✓ Continuous engagement with our Patient and Public Involvement Group and Project Steering Group to shape the study





## Home care Resource | *Coming Soon!*

*Keep in contact*



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**Project TOMATO WebPage:**

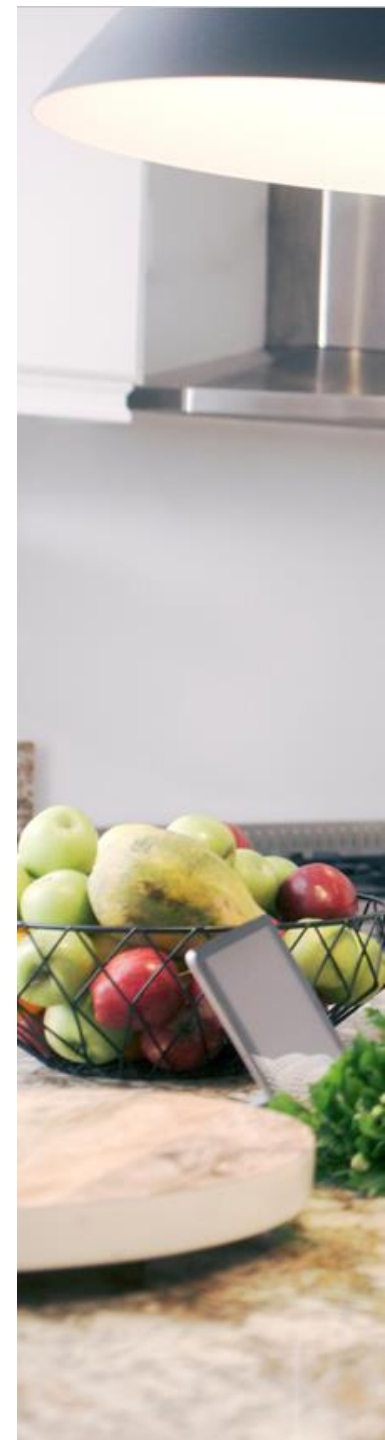
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