

(NAME OF AGENCY)

Procedures Manual

Title:	ASSISTING SERVICE USERS WITH EATING AND DRINKING (KLOE)
1.0	Scope
1.1	Assistance for Service Users with eating and drinking.
2.0	Aims and Values
2.1	To ensure appropriate assistance to Service Users who require help with eating and drinking whilst promoting independence.
2.2	To ensure that the dignity of Service Users is respected when staff are assisting Service Users with eating and drinking.
3.0	Contents
6.0	Assessment.
7.0	Preparation.
8.0	Giving Service Users assistance with eating and drinking.
9.0	Healthy eating.
10.0	Special Dietary Requirements.
11.0	Blood Glucose Monitoring.
12.0	What Home Care Staff should do if problems arise?
4.0	Referenced Documents
DC-009	Communication Record Sheet.
DC-054	Person Centred Care Plan.
DC-086	Fluid Balance Chart.
DC-087	Nutritional Intake Chart.
DC-104	Blood Glucose Monitoring form.
QP-14	Nutrition and Hydration. MUST (Malnutrition Universal Screening Tool).
5.0	Responsibilities
5.1	Management, all Home Care Staff and the Service User.

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This is the procedure to be followed:

This procedure must be read in conjunction with the service's Nutrition and Hydration Policy, QP-14.

6.0 ASSESSMENT

- 6.1 Service Users who are experiencing difficulties with eating and drinking should have their needs assessed using the Daily Living and Needs Assessment Form, DC-054.
- 6.2 The assessment should include the personal likes and dislikes, cultural and religious preferences and any assessed risks that have been identified with eating and drinking. Any need and risk should be recorded in the Person Centred Care Plan, DC-054.
- 6.3 The assessment should also cover the level of assistance required, and any cutlery, crockery utensils or other equipment that is required to help the Service User.
- 6.4 Where possible, the level of assistance to be given should be discussed and agreed with the Service User and staff should encourage and enable the Service User to be as independent as possible.

7.0 PREPARATION

- 7.1 Home Care Staff should check the Person Centred Care Plan, DC-054, to be aware of the level of assistance required and the Service User's likes, dislikes and any special dietary requirements. Meals are appropriately spaced and flexible to meet people's needs.
- 7.2 At the commencement of the service, our staff will undertake a nutritional assessment to identify individual needs, likes and dislike of food and who potentially is at risk of malnourishment. This assessment will include the MUST (Malnutrition Universal Screening Tool) and will form part of the Service User's Person Centred Care Plan and ongoing review. This should involve the Service User and if appropriate, supporters or relatives. The nutritional assessment should also include how Service User's needs relating to culture and religion are identified, monitored and managed.
- 7.3 If the assessment shows the Service User is at risk in accordance with the BMI (Body Mass Index), e.g. has a score of 18.5 or less, the Service User should be referred immediately to the GP or a nutritional specialist for a full nutritional assessment and advice. Also, where staff are concerned about the lack of a Service User's appetite, the Service User should be monitored closely and referred to the GP or a nutritional specialist if needed.
- 7.4 Staff are aware from the nutritional assessment how to provide a nutritious and balanced diet.

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- 7.5 The manager should ensure that staff offer Service Users a meal in line with their assessed needs and Person Centred Care Plan, DC-054.
- 7.6 The manager should ensure that appropriate consultation takes place with Service Users' during the assessment of their needs and preferences to establish choice of what they wish to eat and drink and a record is retained in their person centred care plan.
- 7.7 Establish with the Service User where they wish to eat or drink in accordance with any assessed risk.
- 7.8 Ensure that your hands are clean before you handle food and that you are wearing protective clothing as appropriate to the individual Service User.
- 7.9 Ask the Service User if they would like to wash their hands before eating.
- 7.10 Check with the Service User that their preferred cutlery / crockery is used.
- 7.11 Staff should ensure that the meal is well presented and appetising and served at the correct temperature. Service Users should be allowed sufficient time to enjoy their meals and not be hurried.
- 7.12 Where possible, the preparation of meals should be evenly spaced out for the service user. Service Users should never feel rushed when staff prepare a meal for them.

8.0 GIVING SERVICE USERS ASSISTANCE WITH EATING AND DRINKING

- 8.1 Home care staff must be aware of the need for sensitivity when assisting Service Users who require help with eating and drinking.
- 8.2 Home care staff must ensure that the Service User is in the most appropriate position for eating and is comfortable before assisting the Service User with eating and drinking.
- 8.3 Home care staff should sit down with the Service User whom they are going to help with eating and drinking, and not stand over them. The person should be encouraged and helped to wipe their hands and mouth whenever necessary and enabled to retain as much independence as possible.
- 8.4 The Service User's clothing should be protected with a napkin or cloth if required.
- 8.5 Service Users should be given the appropriate utensils and other equipment which will enable them to eat satisfactorily.
- 8.6 Service Users should be supported to eat and drink in manageable quantities at their own pace. Food should be cut up where required.

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- 8.7 For someone who is visually impaired, Home Care Staff should arrange the food around the plate and inform the Service User where the food is positioned.
- 8.8 Where Service Users are unable to eat independently, staff should ensure that Service Users actually eat the food and drink they want.
- 8.9 Where possible, the level of assistance to be given should be discussed and agreed with the Service User and staff should encourage and enable the Service User to be as independent as possible.
- 8.10 The manager should ensure that Home Care Staff are aware of nutrition and hydration matters and comply with QP-14 Nutrition and Hydration. Where appropriate, staff should complete the Fluid Balance Chart, DC-086 and Nutritional Intake Chart, DC-087.

9.0 HEALTHY EATING

- 9.1 Home care staff should encourage Service Users to eat healthy nutritious food as part of their everyday diet.
- 9.2 Home care staff responsible for carrying out shopping for the Service User as part of person centred Care plan, should discuss with the Service User the value of healthy eating options when shopping for food.
- 9.3 Home care staff should discuss with families and supporters healthy eating options as part of the Service Users diet with the Service users consent.
- 9.4 Staff should make older people aware of the benefits of a varied diet that should contain:
- Plenty of fruit and vegetables.
 - Some fortified foods such as bread or fat spreads, which are often voluntarily fortified by manufacturers.
 - Breakfast cereals which contain added vitamins and minerals such as iron, some B vitamins and calcium.
 - Some functional for example probiotic drinks and yogurts, and foods with added fibre or prebiotics for gut health; and cholesterol-lowering spreads, and soya containing products for heart health.
- 9.5 Home care staff should record what the Service User has eaten in the Service User's Person Centred Care Plan, DC-054.

10.0 SPECIAL DIETARY REQUIREMENTS

- 10.1 The manager will ensure that the Service Users with special dietary requirements is monitored and managed in line with any changes in Service User's needs.

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11.0 BLOOD GLUCOSE MONITORING

- 11.1 Those Service Users who have been diagnosed with a diabetic condition may experience extreme metabolic changes and subsequent illness if their diet and medication is not managed correctly. Staff must ensure that prescribed medication is administered and the diet which has been advised by the GP or Diabetic Specialist is provided.
- 11.2 On the advice of the GP or Diabetic Specialist, staff should take and record blood glucose levels using the appropriate equipment. Levels are usually taken before meal times or on the advice of the Service Users GP to determine if the Service User's blood glucose is operating within safe parameters. Staff should keep a record of Service Users Blood Glucose levels on the Blood Glucose Monitoring form, DC-104.
- 11.3 Staff who have any concerns about the blood glucose level of Service Users should consult urgently with the Home Care Co-ordinator, Service Users GP and carry out any actions as advised.

12.0 WHAT HOME CARE STAFF SHOULD DO IF PROBLEMS ARISE

- The Service User is having difficulty with eating and drinking.
Establish the reason why. Contact the Home Care Co-ordinator and inform family or supporters.
- The Service User is choking.
*If trained administer first aid to the Service User.
If the problem persists contact the emergency services then inform the Home Care Co-ordinator. Inform family or supporters about the incident.*
- The Service User requests food that may be detrimental to their health.
Check the Person Centred Care Plan, DC-054. Do not assist with food that is detrimental to the Service User's health and explain the risk. Contact the Home Care Co-ordinator and await further instructions. Inform family or supporters.

Remember to record all actions undertaken on the Communication Record Sheet, DC-009, within the Person Centred Care Plan, DC-054.

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Guidance for managers

What the Care Quality Commission requires

Key Lines of Enquiry 2018 - **Effective E3: How are people supported to eat and drink enough to maintain a balanced diet?**

Prompt	Compliance Evidence
E3.1 How are people involved in decisions about what they eat and drink and how are their cultural and religious preferences met?	Section 6.0 of this procedure addresses the prompt.
E3.2 How are people supported to have a balanced diet that promotes healthy eating and the correct nutrition?	Para 7.4 of this procedure addresses the prompt.
E3.3 Are meals appropriately spaced and flexible to meet people's needs, and do people enjoy mealtimes and not feel rushed?	Para 7.12 of this procedure addresses the prompt.
E3.4 How are risks to people with complex needs identified and managed in relation to their eating and drinking?	Para 6.2 of this procedure addresses the prompt.

Managers will need to demonstrate to CQC that they are complying with the regulation and Fundamental Standard by following this procedure that provides the evidence.

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