

# Digital undernutrition service for care homes improves quality of care



A digital undernutrition service for care homes has improved the quality of care for residents through increased monitoring. Southern Health and Social Care Trust in Northern Ireland commissioned the service in March 2015 and it has resulted in more proactive treatment due to regular telephone reviews and the timely response of dietitians.

The service has been rolled out in 48 care homes in SHSCT, allowing for closer collaboration between the Trust and care homes through Inhealthcare's secure web-based portal. Undernourished residents are closely monitored every one to two weeks by care home staff, who input the patient's weight, appetite, and compliance to oral nutritional supplements (ONS) onto an online portal. If the patient is identified at risk of undernutrition using the Malnutrition Universal Screening Tool (MUST) or if any of the patient's data falls outside of their pre-set personal parameters, a member of the dietetic team is alerted. The dietetic team will then contact the care home to provide dietary advice.

## Regional context – the problem

- In 2014/15, oral nutrition support in the community/ domiciliary setting at Southern Health and Social Care Trust accounted for one-third of the adult Nutrition & Dietetic Service caseload.
- There was an increasing demand on the Nutrition & Dietetic Service as patients referred to the community service are more complex, often with multiple co-morbidities.
- A significant resource was required for staff consultation time, travel time and travel costs.
- Dietetic intervention entails the use of oral nutrition supplements, which can be costly.

## The solution

- Ó Inhealthcare delivered an on-line system that regularly monitors adult patients who are identified as at risk of malnutrition and prescribed an oral nutritional supplement.
- Ó Care pathways were developed with the aim being to provide a more responsive Nutrition & Dietetic Service, with a significant proportion of care provided remotely.
- Ó Patients triggering alerts would receive Nutrition & Dietetic support, whilst those patients who remain stable would continue to be monitored by the care home staff.
- Ó Patient information is made available to authorised health professionals through the patient record.

## About the service

- Ó Each patient is monitored for up to a maximum of 12 months.
- Ó 11 care homes in the Newry & Mourne locality and 3 in the Dungannon area were selected to participate in the initial pilot.
- Ó 11% of the patients in these care homes were under the care of the Nutrition and Dietetic service at commencement of the project.
- Ó The pilot ran from 3rd March 2015 to 20th June 2016.
- Ó Since the evaluation, the service has been rolled out to a further 34 care homes and has become part of the standard pathway within the Southern Health and Social Care trust

## Benefits realised by Southern Health and Social Care Trust

Improved safety	Improved quality	Improved cost effectiveness	Improved efficiency
G Improved accuracy of 'MUST' recording	G Staff/families feel better supported	G More appropriate prescribing and usage of ONS	G Improved access to dietetics
G Improved treatment compliance resulting in improved nutritional status	G Improved joined up working with care homes	G Cost savings on ONS	G Care homes only being contacted about residents that need input
G Reduced secondary outcomes e.g. falls, pressure sores	G Proactive intervention when problems identified	G Reduction in domicilliary appointments	G Reduced intervention time
G Improved outcomes e.g. quality of life	G Timely review		G Increased use of the DSW, with Dietitians able to focus on more complex work
	G Drives nutritional care		

## Southern Health and Social Care Trust next steps

Evaluation of the year-long pilot at 14 care homes shows improved patient safety and outcomes, improved cost effectiveness and improved efficiency. Since the evaluation, the service has been rolled out to a further 34 care homes across Northern Ireland.



Findings from the period of 3rd March 2015  
to 20th June 2016 across 14 care homes

### A 90% reduction in home visits

Before:	After:
95% patients reviewed face-to-face	5% patients reviewed face-to-face

### More timely reviews

Before:	After:
6 week waiting time	1-2 week waiting time

### Reduced intervention time

More than 1.75 hours saved  
per patient review

Before:	After:
266 minutes	161 minutes

### Quicker treatment for patients

Time spent on pathway (i.e.  
supplements + dietetic care) reduced  
between 2 and 5 months

Before:	After:
6-9+ month	4 months

### Travel cost savings

Before:	After:
2582 miles	555 miles

### Savings on the appropriate use of oral nutrition supplements

> **£3000** during  
evaluation

“Our service bridges the divide between health and social care and provides vital help to those at risk of undernutrition. The service has been a great success in SHSCT, helping vulnerable patients and their families, empowering care home workers and reducing pressure on the NHS.

**Bryn Sage, Chief Executive of Inhealthcare**

“The automated system offers great support to the dietitians and empowers the care home staff to take a more proactive approach to monitoring their increasing number of vulnerable residents. The residents and their families feel more supported too because the frequency of monitoring has been increased along with more timely reviews. To stop the service would be a backward step. We couldn't go back to what we did before”.

**Mandy Gilmore, Head of Dietetics at Southern Health and Social Care Trust**

## About Inhealthcare

Inhealthcare is a UK digital health specialist working with the NHS to digitise care. Inhealthcare's national digital health platform supports remote monitoring for the UK population. Importantly, its services are highly secure, cost effective and studies show consistent improved clinical outcomes.

**Please get in touch with a member of our team to discuss our undernutrition service in more detail.**

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