Food and drink-related needs/outcomes of older people who use community-based social care

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Images are from the Centre for Better Ageing's library of age-positive images.

Further information about ASCOT is available here: www.pssru.ac.uk/ascot











Background

- An estimated 1.3 million UK older adults, aged 65+, are undernourished
 - Malnutrition and dehydration are major causes of health deterioration
- People using community social care (incl. homecare) are at particular risk
- Complex inter-related risk factors:
 - Health and care-related needs (e.g. limited mobility, cognitive impairment, changes to taste or appetite)
 - Social isolation and loneliness including impact of bereavement
 - Accessibility of local area, including transport to/from shops
 - Low or reduced household income
- Also, how do we understand food and drink-related needs/outcomes...?
 - Thinking beyond (risk of) dehydration and malnutrition to consider quality of life...
 - What role do community-based services play in addressing needs/improving outcomes?

Aims and Objectives

- To scope existing evidence on food and drink-related needs/outcomes* of older adults using homecare
- To identify unmet need/outcomes related to Food and drink among older adults using publicly-funded services in England
- To understand the factors related to unmet need and outcomes







^{*} Defined broadly, as 'food and drink care-related quality of life'

Methods

- Scoping literature review
- Analysis of the 'Adult Social Care Survey' (ASCS) in England data
- Developing a guide to findings and recommendations







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Food provision for older people receiving home care from the perspectives of home-care workers

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The Nutritional Status of 250 Older Australian Recipients of Domiciliary Care Services and Its Association with Outcomes at 12 Months

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Nutrition in Patients Receiving Home Care in Finland

Tackling the Multifactorial Problem

Home-dwelling older adults, even those receiving assistance, are at risk for malnutrition. The Mini Nutritional Assessment is a valuable tool nurses can use to assess for nutritional problems in this population.

Helena Soini, MNSc, RN, Pirkko Routasalo, PhD, RN, and Sirkka Lauri, PhD, RN

Work Package (WP) 1 - Scoping Literature Review

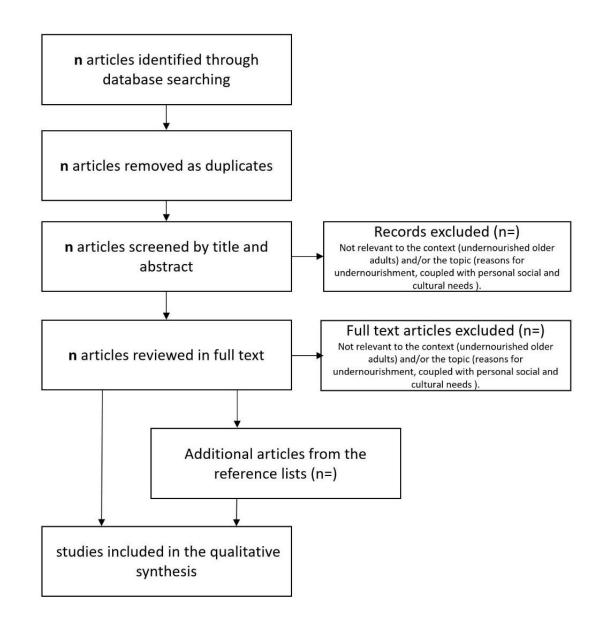
Objectives

- Conduct a systematic search of published works and grey literature
- To gain an overview of the international literature on food and drink-related needs and outcomes of older adults using homecare
 - Establish the type and range of methods, measures and theoretical frameworks applied
 - Identify the conceptual understanding(s) of 'food and drink-related needs/outcomes'
 - Identify evidence of effectiveness of direct care, service delivery or policy interventions where are the gaps?
 - Identify implications for policy and practice

Work Package (WP) 1 - Scoping Literature Review

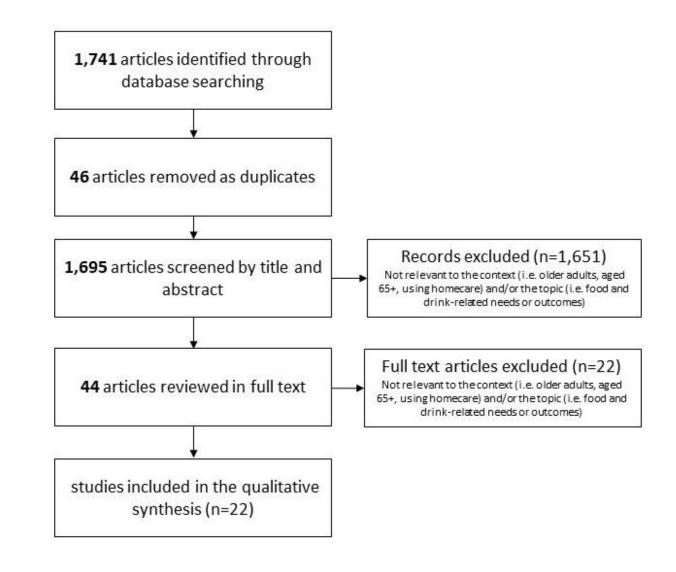
Eligibility criteria:

- Published journal articles or grey literature that report a research study (or studies)
- Relates to:
 - Older adults, aged 65 or over, using homecare
 - Food and drink-related needs or outcomes, including: nutrition, hydration and/or quality of life
- Published in English language, after 2000



Progress so far:

- Database searches (Nov 2022)
 - Web of Science
 - Psycinfo
 - SCIE Online
 - ProQuest Politics Collection
- Screening by title/abstract (Dec 2022 to Feb 2023)
- Review of full-text (Feb-Mar 2023)
 - Summary of each item ('charting')
- Qualitative analysis (*In progress*)
 - Managed in Nvivo
 - Thematic analysis using framework approach



- Annual survey of adults using publicly-funded social care services in England
- Adult Social Care Outcomes Toolkit (ASCOT) to collect care-related QoL data





food & drink care-related quality of life

Based on **capability approach** (i.e. the ability to **do** and **be**, as you wish...)

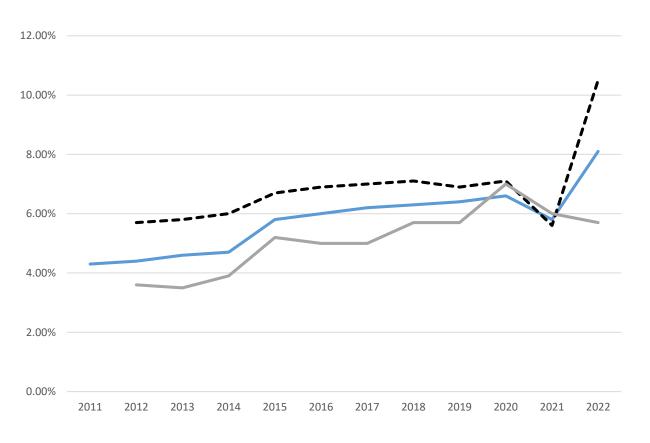
3. Thinking about the food and drink you get, which of the following statements best describes your situation?

Please tick () one box

I get all the food and drink I like when I want	= Ideal state Needs met
I get adequate food and drink at OK times	= No needs
I don't always get adequate or timely food and drink	= Some needs Unme
I don't always get adequate or timely food and drink, and I think there is a risk to my health	= High-level needs I needs



Preliminary descriptive analysis ...



---- % unmet need (with formal help to eat & drink)

% overall unmet need

____ % unmet need (no formal help to eat & drink)



- What are the factors* related to unmet need?
 - Ethnicity
 - Sex/gender
 - Health and care needs (difficulty with everyday activities, anxiety & depression)
 - Informal help from family & friends
 - Suitability of home design
 - Financial contribution towards cost of care
 - By the person, their family or person & family (combined)
 - Survey year
 - Type of local authority

^{*}These are limited by data available in the ASCS dataset or linked data.



	В	SE	OR
Gender: male	115***	.021	.891
Ethnicity: categories other than white	.148***	.030	1.160
Local authority †			
Unitary	014	.026	.986
Shire county	052	.027	.949
Inner London	.202***	.034	1.224
Outer London	.082**	.030	1.085
I/ADLs with difficulty	.121***	.005	1.128
Eating and drinking with difficulty	.498***	.025	1.646
Suitability of home †			
Meets most needs	.657***	.024	1.929
Meets some needs	1.429***	.026	4.176
Totally inappropriate	1.842***	.040	6.310
Informal care / Practical help			
Outside home	1.347***	.027	3.845
Inside and outside home †	.286***	.047	1.332
None	1.665***	.033	5.283
Privately purchased care ('top up') †			
Yes, family money	047	.038	.954
Yes, own & family money	.078	.058	1.081
None	164***	.020	.849
Response by proxy report	.096**	.030	1.101

Preliminary analysis

Analysis is still ongoing

† Base category

Local authority - metropolitan Suitability of home - meets all needs Informal care - inside home Privately purchased care - own money

^{**} p<0.01

^{***} p<0.001

	В	SE	OR
Survey year †			
2012	.008	.047	1.008
2013	.025	.046	1.025
2014	.036	.046	1.037
2015	.136**	.044	1.146
2016	.179***	.044	1.196
2017	.199***	.044	1.221
2018	.179***	.046	1.196
2019	.213***	.045	1.238
2020	.230***	.046	1.259
2021	.080	.107	1.084
2022	.449***	.044	1.567
Constant	-5.300***	.053	.005
McFadden's pseudo r ²			12.0%
χ^2			12,366, df =
K			29, p<.001

† Base category

Survey year (2011)

** p<0.01 *** p<0.001

Food and drink care-related QoL ('outcome') = care intensity + care quality + functional care needs + individual characteristics

- ASCS dataset does not include individual-level care intensity
- Estimate of average care intensity per older person using services per LA
 - From 2015 to 2022 only, due to data availability
- Results are similar except....
 - Ethnicity no longer significant
 - Privately purchased care with own and family money significant (higher likelihood of unmet need)
 - Survey year, 2021 significant (lower likelihood of unmet need) *
 - Survey year, 2022 significant (higher likelihood of unmet need)
 - Average care intensity per person, by LA significant (lower likelihood of unmet need)

^{*} Survey conducted on a voluntary basis vs mandatory, due to the pandemic.

Summary and Conclusions

- Estimated 4% to 8% of older adults living at home using community-based social care have unmet food and drink care-related needs
 - % increased between 2011 and 2022
- Factors related to unmet need....
 - After controlling for other factors (including average care intensity per person per LA), survey year is significant...
 - Does this reflect wider sector impacts (e.g. workforce shortages, chronic underfunding) or context (e.g. pandemic, cost of living increases)?
- Further analysis...
 - Data linkage but a challenge with current data collection and reporting
 - New possibilities based on changes to social care data collection in England...?

WP3 – Brief guide to key findings and Recommendations Development, Dissemination and Implementation

- Share preliminary findings from WP1/2 with the ARC KSS Homecare Community of Experience (June 2023) and other networks:
 - Identify the different audiences and key stakeholders and reason for interest
 - Explore how the findings could be used to inform, engage, influence
 - Development of a brief guide summarising key findings and recommendations, tailored to the different audiences
 - Consider contextual issues, in relation to implementation
 - Facilitate discussion and commitment to further research
- Blog post(s)
- Final guide hosted on PSSRU website
- On-line event (spring 2024)

Informed by the Knowledge Exchange, Impact and Engagement (KEIE) Plan

Any questions?



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