Improving the hydration status of care home residents in the NE Hants and Farnham Locality

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Inadequate Hydration

• At risk groups - the elderly and those reliant on carers.

• Analysis of locality care home acute admissions estimates 40% related to inadequate hydration

• NHS Institute for Innovation and Improvement 2010—Proper hydration would give annual savings of 0.95 BN
Evidence on Impact of Inadequate Hydration

- **National AKI Campaign** April 2014 - 100,000 deaths/yr > lung + breast + kidney cancer.
- 1/3 preventable – **Dehydration major contributor**
- Prevention in community potentially huge.
- **Unofficial** figures suggest the combination of AKI + Dehydration = High mortality.
Further Evidence

• **Univ Nottingham** - early results on hydration status and outcomes among >65 acute medical admissions.

• **40% dehydrated on admission** – Significant increase in mortality 4 months post admission

• 48hrs later- 44 % dehydrated (42% new diagnosis)

• **NHS England Patient Safety Lead 2013** - Hydration is the missing link in Nutrition.

• ‘Dehydration must be recognised and treated early in the community to avoid admission’.
Key Points on Hydration in the Elderly

• Reduced awareness to thirst.
• Polypharmacy - poor hydration increases interactions and side effects
• Belief that increased fluid intake worsens frequency and incontinence in the long term.
• 2x Mortality in CVAs
• 10% reduction in cognitive ability when thirsty (0.8-2% dehydrated in elderly).

CHALLENGE TO INCREASE INTAKE
HYDRATE Project

- 4 local care homes focused on hydration after an informal presentation
- 6 months later outcomes showed significant reductions in UTI’s, Falls and admissions.
- HYDRATE Project developed by NE Hants and Farnham CCG.
HYDRATE in Care Homes

• Mission statement:
  • ‘We aim to reduce illness and unnecessary hospital attendance amongst our care home residents by supporting residential and nursing homes to establish accessible regular individual drinking regimes’.

• 31 out of 35 homes signed the HYDRATE charter
HYDRATE Charter

• Improve hydration awareness for staff and residents
• Encourage optimum hydration by meeting the hydration needs of all residents
• Ensure there is access to clean drinking water and hot drinks 24 hours a day
• Reassure residents that prompt assistance with all toilet needs will be provided.
Project Details

• Small group training sessions for **Hydration champions**
• Bespoke **Resource Pack** and **Promotional materials**.
• **Follow up** visit from project manager with champion and care home manager.
• **Ongoing** motivational **support**.
Evaluation by Surrey University of Farnham Pilot

• ‘The role of a hydration champion is a fast, practical, inexpensive first step towards improving hydration in a care home. There is potential for profound and long lasting benefits.’

• Successful elements-
  • Training and Follow up visits
  • Use of sections of resource pack
  • Encouragement of hydration related activities.
  • Opportunity to discuss hydration issues among all champions, staff and project manager.
Evaluation

Recommendations

• Staff to be ‘offered’ hydration champion role and backed up by managers. **2 champions** per home to offer mutual support.

• **In house training** to be offered widely in homes.

• Resource pack is a flexible toolkit but could have further development to become a long standing reference guide.

• **Web Forum** for the champions to share experiences and tips.

• **Supportive follow up visits** from project manager.
Outcomes

• **Outcomes** incidence of falls /UTIs and acute admissions - Too early to have clear data but promising.

• **Additional Outcomes:**
  - 14 Hydration policies updated so far
  - Empowerment of care home staff
  - Open and supportive relationships developing between care homes, project manager (community dietitian) and the CCG
• **NO NATIONAL HYDRATION POLICY.**
• Forum aims to develop an **action plan** for improving hydration nationally especially among the elderly.
• **Dehydration** needs standardised **definition**
• Incidence and screening requires **validated assessment tool** applicable to all care settings
• **Education** on hydration awareness and management.
• Appreciation of **financial implications** for health and social care.
ROC (Reliance on a carer to drink) Dehydration Risk Assessment Tool.

- Combines **2 critical factors** in traffic light system.
- **Level of assistance** to safely hold a drink to the mouth
- **Level of encouragement** to drink.
- This uses what staff are doing already but **formalises this assessment**.
- Assessment and validation through NHS England.
HYDRATE aims to improve hydration in our locality,
THEN THE WORLD!