



Queen Margaret University College



# Executive Summary of Practice Development Phase for Recipe for Life

August 2006



## 1.0 EXECUTIVE SUMMARY

Recipe for Life was a three year project which aimed to find better ways to support older people to eat well. The project was undertaken by the Royal Bank of Scotland Centre for the Older Person's Agenda at Queen Margaret University College, Edinburgh in partnership with the Dementia Services Development Centre at Stirling University and Age Concern Scotland. It was funded by Zurich Financial Services Community Trust under their 'Zurich Cares Older People Programme'.

The primary aim of the project was to identify action that can be taken to improve the physical and social wellbeing of older people who live alone and have difficulty leaving home, in relation to their nutritional and food-related needs, from the perspective of older people, family members, friends and social work staff.

The project has been undertaken in two phases, a research phase and a practice development phase. During the research phase, which ran from April 2003 to September 2005, the project worked with two Scottish local authorities to gather data on people's views and experiences about factors that help and hinder older people's ability to eat well.

Some of the main findings that emerged from the research phase were:

- Low appetite was common among frail older participants, putting them at risk of malnutrition.
- Home care workers play an important role in encouraging older people to eat well.
- Home care workers are in a position to develop trusting relationships with clients, suggesting new foods or recipes to them and bringing new or favourite foods into the person's home.
- It is important that workers have specific knowledge of the nutritional needs of frail older people, as well as skills in eliciting the preferences of older people and the social, psychological and cultural meaning of food in older people's lives.
- All staff members could benefit from having more knowledge and skills in the area of food and nutrition.

- There is a need for close co-operation between health and social work colleagues about the food and nutrition of older people, and more joint work specifically on food and nutrition issues at a local level would be welcomed by home care service providers.
- Many older people were eating bland and unexciting diets, perhaps because of a lack of motivation on the part of the older person or their service provider, or maybe because changes in older people's tastes and digestion have led them to reduce the range of foods they are willing to eat and find acceptable.
- Older people and workers could valuably work together to develop ways that better support older people to eat well that are acceptable to older people and achievable within service limitations.

A full report and executive summary of the research phase is available from the RBS Centre for the Older Person's Agenda website [www.qmuc.ac.uk/copa](http://www.qmuc.ac.uk/copa) or can be requested via telephone on 0131 317 3770.

## **1.1 Practice development phase**

The primary aim of the practice development phase of the Recipe for Life project was to utilise the key themes identified from the research phase to develop and explore interventions, which were designed to optimise the nutritional and food related well-being of older people who live alone and have difficulty leaving home.

Key themes identified by the research team

- Difficulties experienced by frail older people
- Assessing older people's food related needs
- The meaning of 'eating well'
- The importance of appetite or motivation to eat
- Ways in which older people are supported to eat well
- Barriers to older people eating well

Three interventions were identified that addressed the themes listed above. These interventions were piloted during the practice development phase (October 2005 to June 2006). The interventions were:

- Developing a community kitchen,
- The 'Good Practice Booklet' for home care workers,
- The 'Nutrition in Later Life' training resource.

These interventions were decided upon through consultation with the participating local authorities and advice from the project steering group.

## **1.2 Intervention 1: Developing a community kitchen**

This intervention addressed the following key research themes:

- Difficulties experienced by frail older people.
- The meaning of 'eating well'.
- The importance of appetite or motivation to eat.
- Ways in which older people are supported to eat well.
- Barriers to older people eating well.

For the purposes of the practice development phase, a community kitchen was conceptualised as a group of older and younger people within the local community meeting together with the shared purpose of cooking.

### ***An intergenerational approach***

For the purposes of this pilot project the research team decided that an intergenerational approach would be valuable, as it would provide opportunities to challenge stereotypes and attitudes regarding older and younger people, and in doing so act as a vehicle to promote a greater understanding and respect between the generations.

## ***Aims***

The main aim of the community kitchen was to address barriers to older people eating the foods that they used to enjoy but are now unable to. In addition, it was intended to facilitate older and younger people to work together within the local community to share skills and knowledge about food and eating.

### ***The potential benefits of the community kitchen intervention project***

#### **Reconnecting older people to food**

The community kitchen offers a way for older people to be supported to 'reconnect' with food and food production.

#### **An educational medium**

The community kitchen represents an educational package that high schools can utilise for younger people to explore and develop a diverse range of skills.

#### **Challenging attitudes and beliefs**

The community kitchen offers a platform for opportunities to challenge attitudes and beliefs held by each generational group involved in the project.

### ***The future of the community kitchen***

The project was viewed positively by all involved. The day centre was already in the process of developing a communal kitchen for their members prior to being involved in this project. Participation in the intervention has served to further confirm the importance and potential of their planned facility.

The day centre was keen to continue the link with the school and will now be in a position to offer the younger people the opportunity to join members in the day centre to share skills, knowledge and experience in the day centre community kitchen.

The high school was also positive about their involvement with the project. The senior teacher from the Health and Food Technology department saw a future for the project, and hopes to offer it as an option again to other young people at the school.

### **1.3 Intervention 2: Good practice booklet**

The primary aim of the good practice booklet was to support frontline social work staff in a home care team to share good practice and to develop ways of working that meet the needs of frail older clients who live alone and have difficulty leaving home to eat well.

#### ***Rationale***

The idea of developing a good practice guide arose for two reasons. Firstly, examples of good practice were identified in research data from phase one of the project. Secondly, the research findings further indicated that there is a lack of good practice guides relating specifically to the provision of nutritional meals by home care workers to frail older people living in their own home.

#### ***Method***

##### **Research phase data**

Data gathered from the interviews, focus groups and workshops held during the research phase were examined to identify incidences that represent good practice.

##### **Workshops**

In order to explore good practice further, a workshop was organised with relevant staff in each local authority site. The workshop was attended by staff from home care teams, staff from the shopping services and staff responsible for coordinating services and making needs assessments.

#### ***Future direction***

In the longer term there would be value in evaluating the usefulness of the 'Good Practice Booklet' and exploring the impact on working practice from the perspective of both the older person and staff supporting frail older people to eat well.

### **1.4 Intervention 3: Nutrition in Later Life training resource**

The third intervention involved the development and initial assessment of a training resource for home care workers on aspects of nutrition in later life. This intervention addressed one of the key themes arising from the research phase, namely the importance of assessing older people's food related needs.

## ***Why a nutrition in later life training resource intervention?***

During the research phase, many participants, including older people, families, and care workers, commented that there was a need for more knowledge about food and eating for frail older people. The research findings further established that there is a need for more training and knowledge regarding nutrition in later life, concluding that:

- all staff members could benefit from having more knowledge and skills in the area of food and nutrition,
- there is a need for specialist courses for all workers to enable them to identify risk factors and helpful interventions,
- there is a need for an established induction programme and training course for home care workers,
- there would be value in providing information to ‘well’ older people and family members to empower them to take responsibility for their own health.

## ***Aim and objectives***

The aim of the intervention was to develop and conduct an initial assessment of the Nutrition in Later Life training resource, a course and accompanying training materials, which are intended to address the concerns raised in the research findings.

## ***Project design***

The project involved the development of the ‘Nutrition in later life’ training resource. This resource consists of three elements:

- a three-hour training course on food and nutrition for home carers;
- an accompanying loose-leaf resource pack on nutrition in later life for home carers, covering the material contained in the course;
- a leaflet giving information about nutrition in later life, intended for older people and their carers.

The project involved an initial assessment of the training resource. There were four aspects to the assessment:

- interviews with a home care manager and the course co-ordinator to collect contextual information on current training with regard to food and nutrition for older people;
- observation of two training sessions to capture reactions and interaction of the training team and home carers;
- observation of six home care workers and the older people to whom they deliver a service, which provided both an opportunity to talk with course participants in a service delivery setting;
- final interviews with training providers to gain their views about the experience of developing and delivering the course.

The 'Nutrition in Later Life Resource Pack' was devised and developed with partners from the South Lanarkshire Council and Lanarkshire NHS.

### ***Carers' views on the influence of the course***

The carers clearly saw that the content of the course was relevant to some, but not all, of their clients. Carers found the course interesting, stimulating and relevant. It reinforced much of the learning they had gained through many years practical experience, legitimised some of their current practice and encouraged them to reflect on how to improve service to their clients. All the carers stated that they had enjoyed the course and felt they had learned a lot or now understood the reasons for experiences they had previously had. Several commented how much it had been of benefit in their caring responsibilities for their own older relatives.

The feedback from the home visits was similar to that gained from the course observations. The comments from carers demonstrated how the course reinforced current good practice, how it highlighted areas where they could improve care, how important it was to disseminate knowledge to older people and their families or carers, and how vital it is to have sufficient time to implement some practices advocated in the course.

### ***Future direction***

Two recommendations have arisen from this intervention. Firstly, home care clients are allocated time based on an assessment by a social worker. The course should be offered to all social workers doing these assessments. If a client has nutritional needs, then longer home care time slots could be allocated to ensure that food is not only prepared, but also eaten.

Secondly, very few clients have absolutely no family members who take an interest in them. Family members are often present when assessments are completed. When an older person is assessed to have nutritional needs, the leaflet or resource pack should be given to family members. This would provide for mutual understanding between the older person, their family or carer, and the home carer regarding best practice.

## **1.5 Conclusion**

The aim of the practice development phase of the Recipe for Life project was to develop and explore possible interventions to optimise the nutritional and food related well being of older people who live alone and have difficulty leaving home. We approached this through the piloting of three interlinked project interventions:

- Developing a community kitchen,
- The 'Good Practice Booklet' for home care workers,
- The 'Nutrition in Later Life' training resource.

The need for a variety of interventions to help older people who live alone and have difficulty leaving home was borne out by this project. The project established the importance of disseminating information to not just home care workers, but also families and older people themselves.

A suggested way forward for the piloted interventions is to combine the information gained from the three projects into a single resource. The recipes developed in the community kitchen and the 'Good Practice Booklet' could potentially form new sections of the 'Nutrition in Later Life' resource pack. There would be value in revisiting these projects at a later date to conduct an evaluation to determine their impact prior to their further development.



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Full Report is available from  
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