



The National Aged Care Quality Indicator Program

Helping combat unplanned weight loss

Valentina Giannelli

The National Aged Care Quality Indicator Program (QI Program) is a federal government initiative in which aged-care facilities report on three quality indicators for clinical care.

The voluntary program supports continuous quality improvement in aged-care facilities by providing a framework, tools and information to help improve clinical care as well as national figures to use as a benchmark for reporting purposes. The program also helps potential residents compare the quality of care provided when choosing aged-care facilities.

There are currently three quality-of-care indicators that measure clinical areas.

1. Pressure injuries.
2. Use of physical restraint.
3. Unplanned weight loss.

These indicators have been chosen after a similar system was implemented successfully in Victoria.

Quality indicator — unplanned weight loss

Unplanned weight loss is defined as “weight loss that occurs involuntarily over a period of time, that is, weight loss that occurs as a result of circumstances beyond the voluntary control of the individual”¹.

Unintentional weight loss over a period of time is the strongest indicator of nutrition risk and malnutrition for older adults. Residents experiencing weight loss have an increased risk of falls, fractures and pressure injuries

FAST FACTS

- ▶ Unintentional weight loss over a period of time is the strongest indicator of nutrition risk and malnutrition for older adults.
- ▶ Malnutrition is associated with a range of poor health outcomes.
- ▶ The prevalence of malnutrition in the residential aged-care setting ranges from 40–70%².
- ▶ The QI program enables early identification and rectification of unintentional weight loss.

processes in place, such as those outlined in the QI Program, enables early identification and rectification. This ultimately improves the quality of care and quality of life.

How an Accredited Practising Dietitian (APD) can help

APDs have in-depth knowledge of clinical nutrition and food services, making them well placed to support aged-care facilities in implementing systems for proactively managing weight loss and improving patient care and satisfaction.

APDs can participate in the screening process or provide a management plan once unintentional weight loss is identified. If appropriate, APDs can provide dietary advice directly with the resident and cooperate in multidisciplinary team care with GPs, nurses, care staff and other allied health professionals.

Working with staff, APDs can design nutrition strategies and action plans. These may include the review or development of food policies and procedures or implementation of nutrition processes such as weight monitoring, nutrition risk screening and APD referral pathways. APDs can undertake menu reviews and help facilities to create a dining environment that promotes good nutrition and adequate fluid consumption.

APDs can be involved in educating staff on nutrition topics such as nutrition risk screening, accurate weight measurement, oral intake monitoring and correct mealtime assistance technique, to ensure that everyone involved can provide optimal quality of care to residents.

An APD can support residential care facilities to deliver high-quality nutrition services incorporating the new quality indicator for unplanned weight loss. To find an APD in your area, visit www.daa.asn.au and look under 'Find an Accredited Practising Dietitian'.

related to muscle mass loss. Malnutrition is associated with poor health outcomes such as poor wound healing, frequent infections and a decline in mental and physical function, severely impacting a resident's quality of life.

It is well recognised that residents of aged-care facilities are at high risk of weight loss, with the prevalence of malnutrition in the residential aged-care setting ranging from 40–70%². Dementia, swallowing difficulties, poor dental health and polypharmacy are among the most common causes of unintentional weight loss for residential aged-care patients.

Other factors also play an important role, such as the quality of food provided, the dining environment and the assistance provided by staff. Monitoring prevalence of unplanned weight loss gives some indication of how providers are managing these important aspects. It also gives aged-care facilities useful information about how their processes are working and can highlight areas that require improvement.

It is important to regularly monitor residents' weight, and to take early action if unintentional weight loss is identified. Weight loss may be the result of circumstances beyond the control of an aged-care facility, such as a period of illness or a hospital admission. However, having systems and



Valentina Giannelli is an Accredited Practising Dietitian and works as Consultant Dietitian at Leading Nutrition, the largest private practice of professional aged-care dietitians in Australia. Valentina conducts individual consultations, completes menu reviews, provides staff nutrition training and education and co-presents aged-care nutrition and food service seminars. She also has experience in the private practice sector, particularly in the nutritional manager of cardiovascular disease and diabetes. Valentina is passionate about providing high-quality nutritional services to improve the nutrition and the quality of life of residents of aged-care facilities.

References

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3. Submission from the Dietitians Association of Australia to the Productivity Commission: Caring for Older Australians. August 2010. DAA available at <http://www.pc.gov.au/inquiries/completed/aged-care/submissions/sub371.pdf>.

