

Mealtime companions- Adopt & Adapt Programme

Tuesday 28th February, 11am – 12pm

Mealtime Companions Overview



The Volunteer role

Volunteers support patients by feeding them directly or helping them to feed themselves through positioning trays and utensils in the right places, encouraging independence



They make mealtimes more sociable, offering companionship and encouragement. They also provide other support, such as offering alternative food options



At the beginning of the shift, the volunteer then checks all details with the nurse/housekeeper before supporting the patient. This may include level of support needed – red tray, companionship, assisting and understanding feeding and fluid restrictions – is there a limit to how much the patient should drink?



At the end of their shift they complete the 'Food and Fluid Chart' and the dining companion checklist

Ultimate aims



Support the **wellbeing** of patients



Reduce the risk of **malnutrition/ dehydration**



Support **independence** at mealtimes



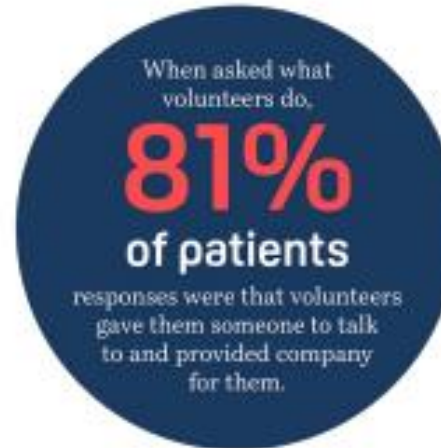
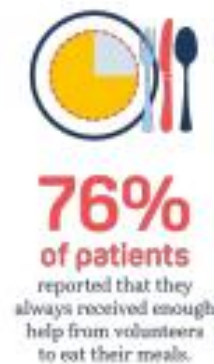
Develop an **impactful** volunteer role

Salford Findings

The Salford Care Organisations project Dining Companions started delivering across six wards with a group of 15 volunteers and scaled within an eight-month period to support eight wards, utilising 80 volunteers.

The project supported 2,639 patients of which 79% were encouraged to eat and 21% received full feeding support.

Salford Care Organisation Data (2):



““
*“I wasn't only made to feel
better by the healthcare I
received from the staff but
I also felt better as a
person who was valued
and looked after by the
Dining Companions.”*
NEDD

Salford Findings

Total number of patients fed: 563 patients fed

Total number of patients given encouragement: 2088 patients encouraged

Volunteer frequency: 79% of volunteers report this as once a week

Across an average 1-month period the active volunteers deliver an average of 185 hours of support to 330 patients.

The outcomes include:

- Reduced demand on clinical staff on the wards
- Enhanced patient experience and mood
- Reduced anxiety levels in patients
- Companionship for our most vulnerable older patients on our wards
- Positive influence on patient's nutrition
- Better patient outcomes due to improved nutritional status

The data suggests that 70% of staff felt that volunteers saved them time (58% of staff reporting that volunteers saved them 20-30 minutes or more).

This meant that staff were able to spend more time on care planning and organising medicines (47%) and supporting more patients (47%). As a result staff feel less stressed at work.

BMJ Open Can trained volunteers improve the mealtime care of older hospital patients? An implementation study in one English hospital

Results

65 volunteers helped at 846 meals.

The mix of ages (17–77 years) and employment status enabled lunch and evening mealtimes to be covered.

Patients and nurses universally valued the volunteers, who were skilled at encouraging reluctant eaters. Training was seen as essential by volunteers, patients and staff.

The volunteers released potential costs of clinical time equivalent to a saving of £27.04/patient/day of healthcare assistant time or £45.04 of newly qualified nurse time above their training costs during the study

Conclusions

Patients in all departments had a high level of need for mealtime assistance. Trained volunteers were highly valued by patients and staff. The programme was cost-saving releasing valuable nursing time.

Reflections from Salford & Harrogate

- Tailor service to needs of each ward
- Test and fine tune the service
- Wear a different uniform
- Online booking system
- Create a supportive environment
- Provide specialist training

Adopt & Adapt Overview

What do we mean by adopt & adapt?

A programme to grow your volunteer service models

Takes a 'project management approach' to developing and delivering a new 'volunteer service.'

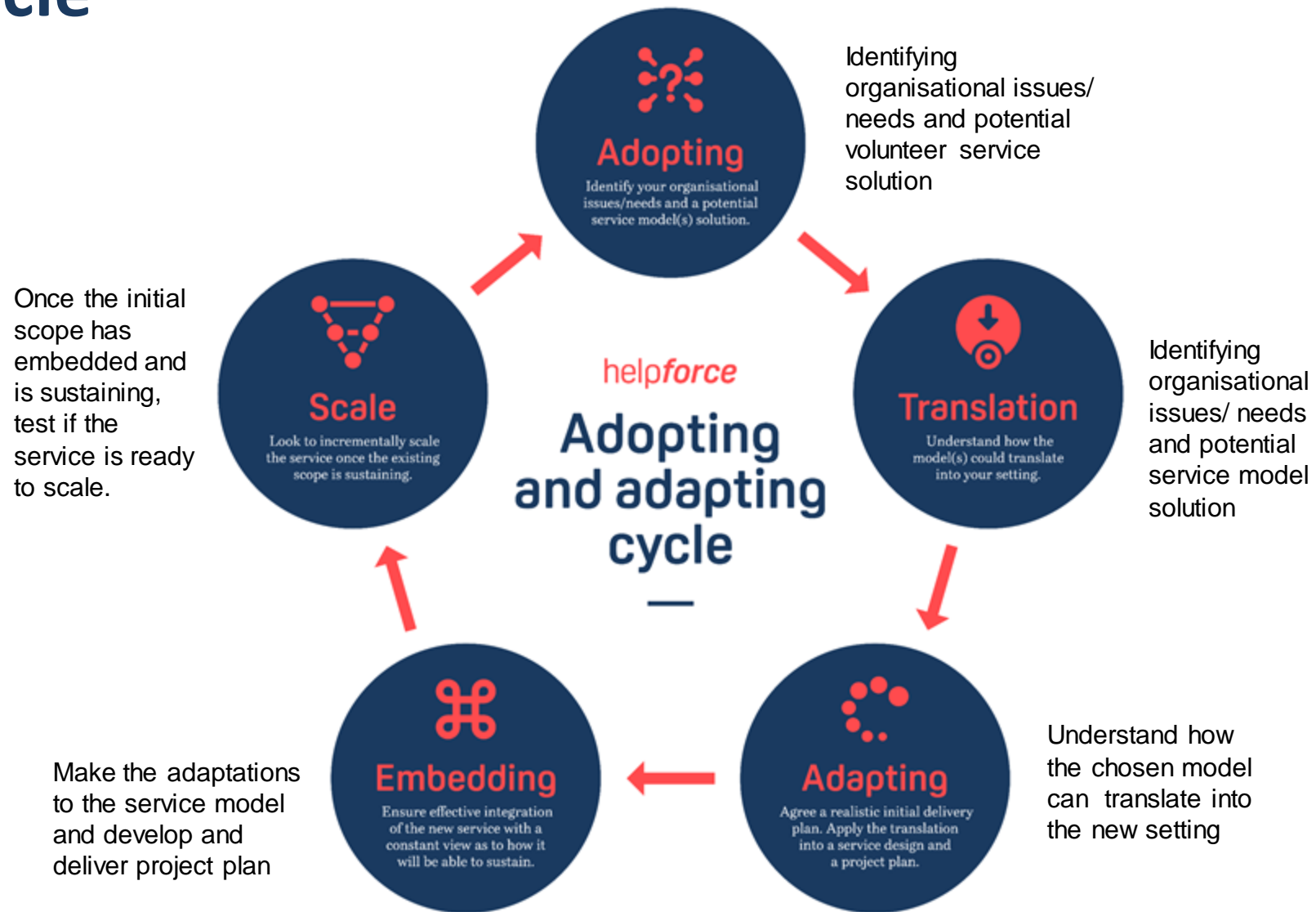
Supports to develop, diversify and improve volunteering capabilities.

We have produced a range of Service Guides which provide tried and tested volunteer service models to help build confidence in considering '**adopting**' a new volunteer role and '**adapting**' the new role to match Trust's needs

Aim is to accelerates organisational capability to deliver a *sustainable* service as learning has already been achieved by other Trusts and good practice established.

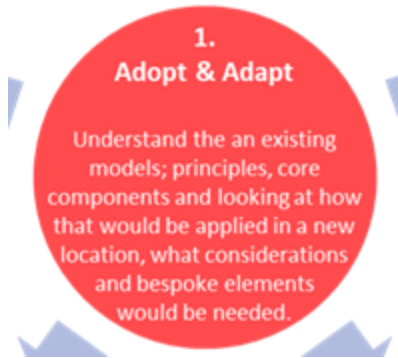
The service will assist in gaining organisational 'buy in' and reduces the risks associated with developing a new service/volunteer intervention as impact (the benefits) have been assessed and demonstrated

A&A Cycle



How to...

1. Adopt & Adapt - Making it work in your location



Understand the existing Mealtime Companions model; principles and core components and look at how they would be applied in your location, what considerations and bespoke elements would be needed?

Considering the strategic and operational priorities and selecting a volunteer service that can positively impact those priorities can help to lock in the support of senior stakeholders and in turn improve organisational buy in.

Projects with senior buy in are more likely to sustain.

Sustainment is often not thought about until at a point when further funding is needed or the service is struggling. Defining at an early stage what measures (**sustainment markers**) will support a growing business case for continued investment and future scaling of the service.

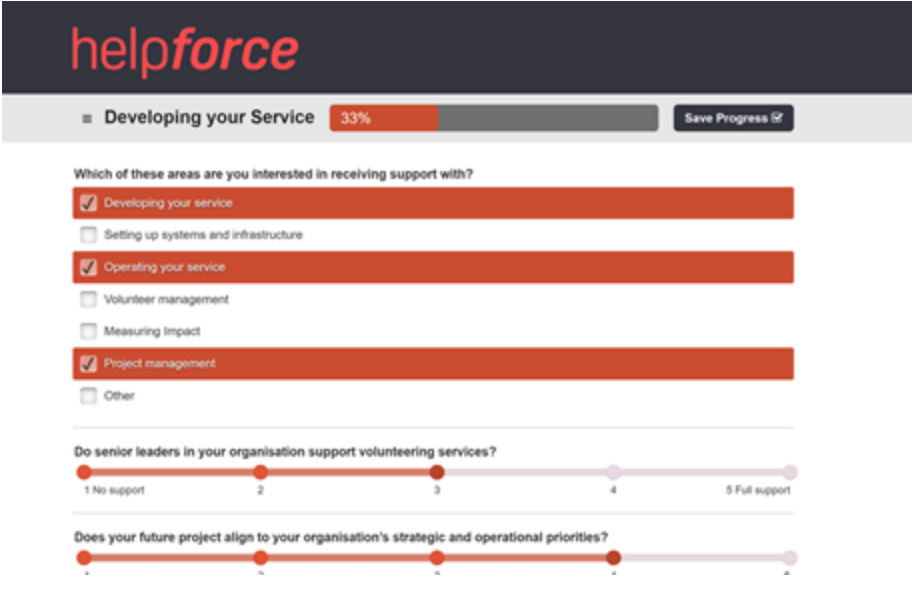
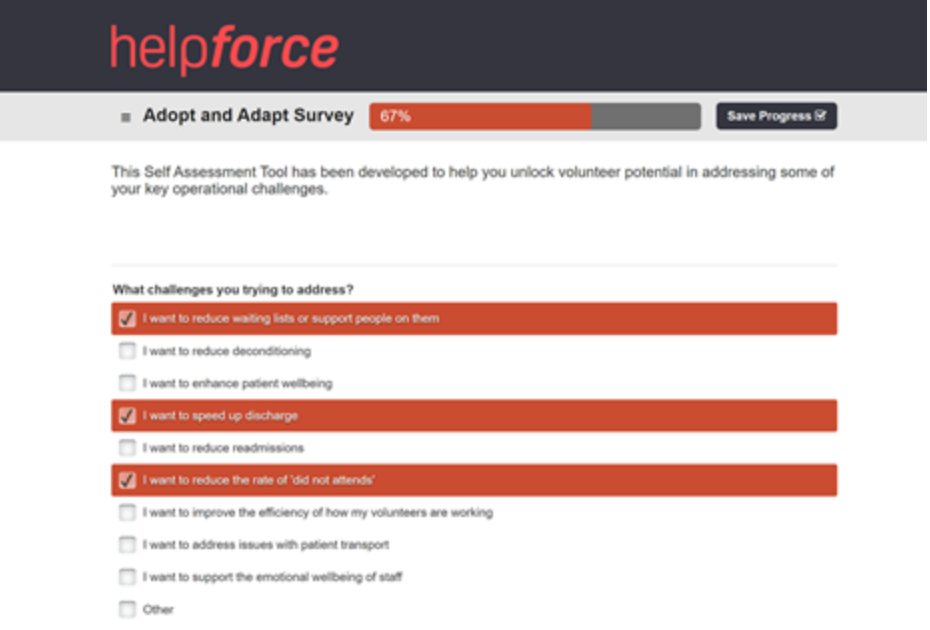
Check List: Adopt & Adapt

- Identify key strategic and operational priorities
- Research potential Mealtime Companions opportunities
- Identify key stakeholders and set up Steering Group
- Understand existing volunteering context
- Develop solutions through workshops and co-design
- Embed data collection
- Agree service responding to strategic and operational priorities
- Identify key priorities and objectives for service sustainment

Self Assessment tool (SAT)

The SAT will identify the support needed for both the organisation and the individual leading on an A&A project and is an essential part of the process.

A SAT will be completed in March before the A&A programme starts in April.



Programme Managers will ensure the right support if provided based on the SAT results.

You will also receive a report providing you with supplementary information, guidance and resources based on your specific needs.

You will also be asked to complete a SAT at the end of the programme to measure progress.

What elements will you need to translate?

- Identification of your patient cohort? Which wards? Any patients who would be out of scope?
- Volunteer role profile
- Volunteer training
- Monitoring and feedback
- Developing a steering group
- How do volunteers book a shift
- What outcomes you want to measure - insight & impact

4 main criteria for A&A sign up:

1. Your or your teams capacity to deliver a project

- ✓ Embedding stage reached by 4 months (approx) of starting project

2. Senior buy in, you are being supported at a senior level

- ✓ Someone helping you to overcome barriers, championing project at a senior level

3. Willing to share your data

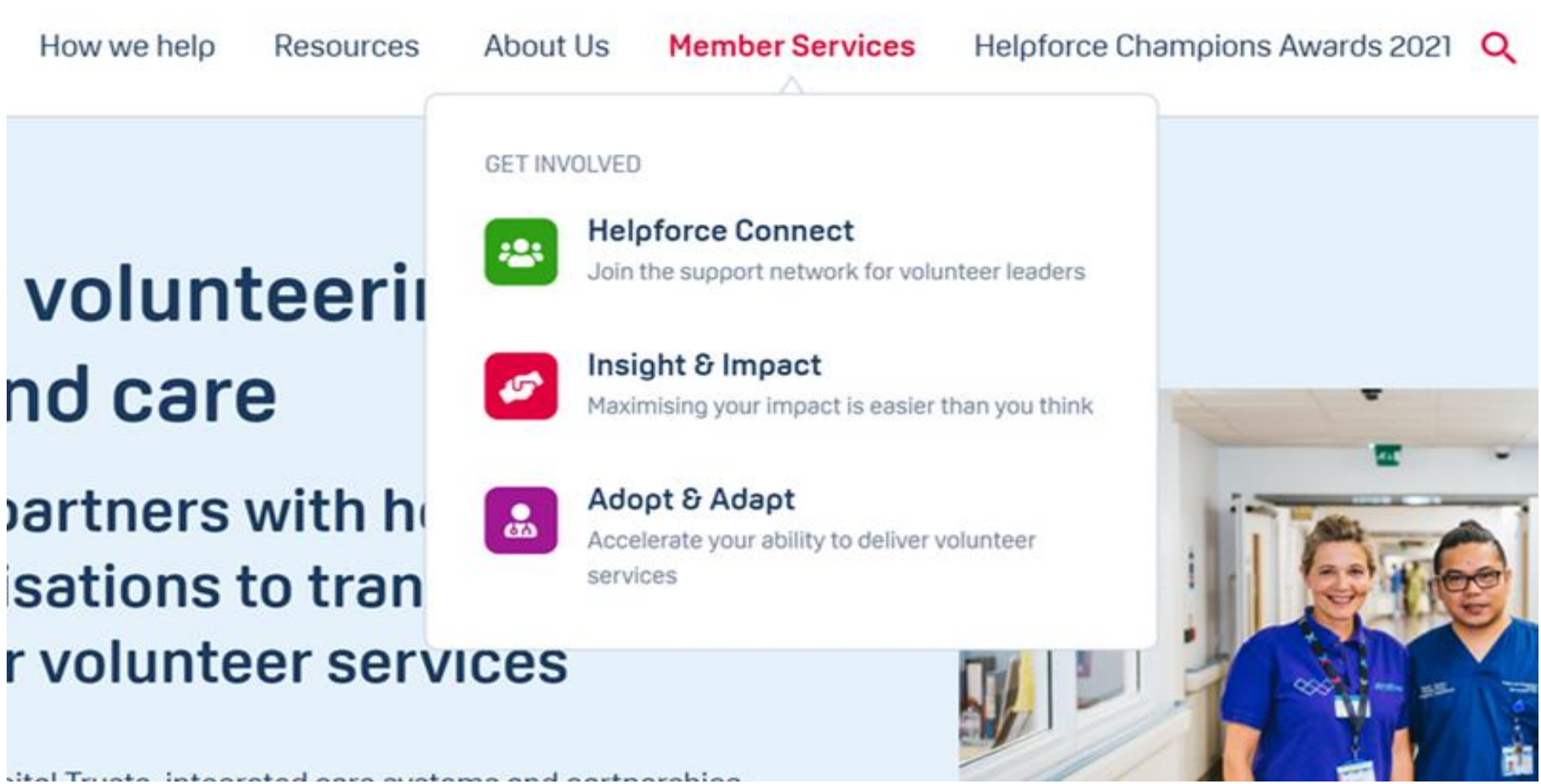
- ✓ Your data will identify impact and future service design / scaling
- ✓ Your data helps us achieve our mission, which keeps us funded

4. Completing of the Self Assessment Tool (SAT)

Programme Timeline

- **Introductory webinar – Tuesday 28th February**
- Introduction session and start of Adopt & Adapt programme and peer support sessions - **Monday 17th April 2023**
- **Volunteers in role by end August 2023**

Online support, guidance, information and resources



click on the image to go through to the website

helpforce

Thank you

www.helpforce.community