



Malnutrition Prevalence in the Community

Data Briefing (February 2021)



Eat Well Age Well

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Introduction

This briefing provides an overview of Eat Well Age Well's malnutrition screening prevalence data from January 2019 to end of February 2021. Data collection commenced in January 2019 when we launched our training, toolkit and awareness raising of community screening tools, including the Paperweight armband and from July 2019 the Patient Association Nutrition Checklist. Older people over the age of 65 have been screened by a range of individuals working with older people in the community who have not been trained to screen or screening is part of their day-to-day role, this includes volunteers, carers, community staff running lunch clubs, day centres, social groups for older people and working in housing and voluntary sector organisations.

General findings

1. From Jan 2019 to Feb 2021, we have screened **1494** older people and **268 (18%)** of these people had been found to be at risk or at increased risk of malnutrition (see table 1) and **have been given resources, advice and signposting to sources of help**.
2. Comparing 2019 with 2020, 566 older people were screened and **13%** (n=73) of people screened were at risk or at increased risk and this increased in 2020 to 654 screened, **23%** at risk (n=148).

Table 1. Total number of people screened and at risk in 2019, 2020 and 2021

Year	Total screened	At risk	Not At Risk
2019	566	73 (13%)	493
2020	654	149 (23%)	505
2021	274	46 (17%)	228
Total	1494	268 (18%)	1226

3. Prevalence of malnutrition ranges from setting (e.g. **17%** in community settings to **31%** in domiciliary care) (see table 2). From our prevalence data we can estimate up to 30% of older people living in the community were at risk or increased risk of malnourishment, this is higher than the current statistic of 10% of older people at risk. Prevalence appears to be higher in domiciliary care which is not surprising as these older people will have care packages and may be more frail and vulnerable.

Table 2. Results from screening Jan 19 to Jan 21 based on setting

Types of people screened	No of people screened	No of people at risk	Screening tool used
Older people identified by domiciliary care	78	24 (31%)	Paperweight Armband
Older people identified by voluntary sector, community, groups and events	1416	244 (17%)	Paperweight Armband & Nutrition Checklist

Paperweight Armband and Nutrition Checklist

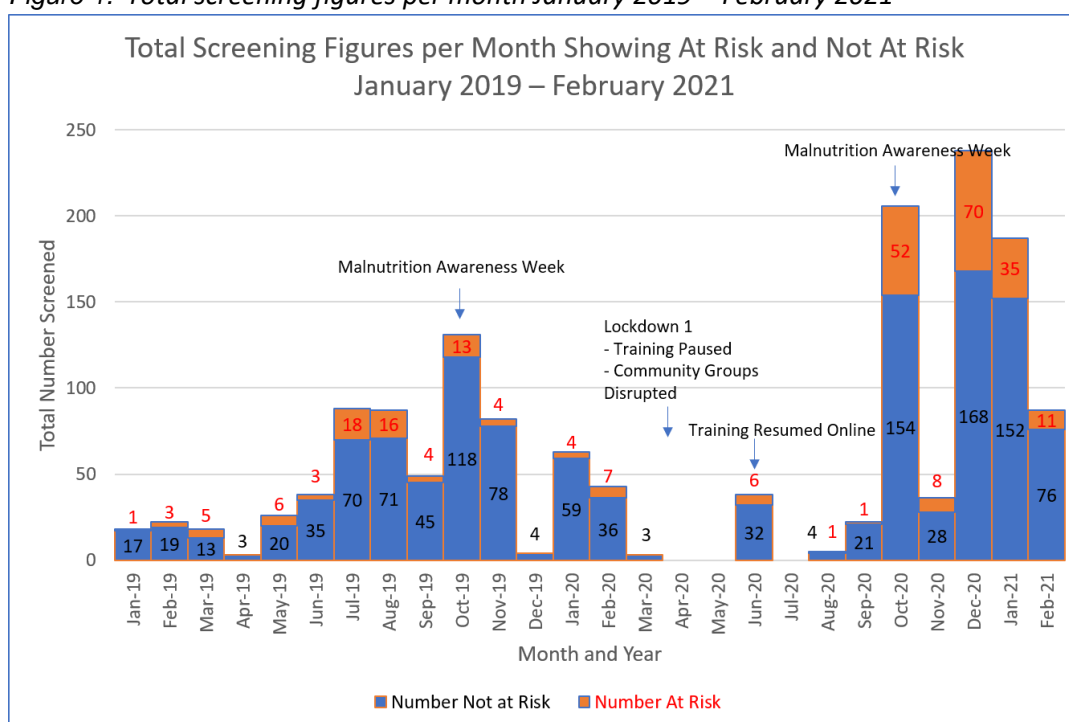
4. The total screened to date with the armband was **419** compared to **1075** with the checklist (see table 3). The checklists have been used over 2 times more than the armbands and the checklists uptake doubled in usage from 2019.

Table 3. Results from Jan 19 to Feb 21 based on screening tool used

Year	No screened with Paperweight armband	No screened with Nutrition Checklist
2019	258	308
2020	42	612
2021	119	155
Totals	419	1075

5. Figure 1 shows the total screened by month and demonstrates the impact of Covid-19 which has disrupted screening and data gathering from March 2020. It is clear Malnutrition Awareness Week held during the month of October in 2019 and 2020 has had a positive impact on individuals and partners screening in the community highlighting the value of this campaign.

Figure 1. Total screening figures per month January 2019 - February 2021



Further context with our University of Glasgow research study

In October 2020 we launched our research report on older peoples' health and wellbeing with the University of Glasgow and Food Train¹. The research found early indicators of malnutrition risk for nearly half (44.6%) of the sample reporting at least one malnutrition risk indicator from the Nutrition Checklist which were then associated with further psychosocial risk factors. This figure is high for a community sample. The research further recommended the use of community-based malnutrition screening tools such as the Paperweight armband and the Nutrition Checklist which provide accessible, straightforward screening which can be utilised by a wide range of health and social providers as well as concerned family members and friends. The research made further policy and practice recommendations which are captured in 4 calls to action².

Final conclusions

Volunteers, carers and a wide range of community staff who do not traditionally screen have reached a significant number of older people in the community (n=1494) screening for early identification of malnutrition, and have provided further resources, guidance and signposting to sources of help.

We have found the prevalence of malnutrition ranges from settings (e.g. 31% in domiciliary care and 17% in community settings) and these figures are higher than the published national statistic of 10% of over 65s³. Numbers at risk have increased from 13% in 2019 to 23% in 2020 and Covid-19 and will be making these figures worse. These statistics have added to the knowledge base on community prevalence of malnutrition

The Nutrition Checklist and the Paperweight Armband tools can be used by anyone and we have seen how easily they have been used by ordinary people without any specific training. These tools are powerful community solutions and scaling this up and applying wider could easily be achieved.

Next steps

Continue to build a picture of prevalence and risk of older age malnutrition in our communities, care at home sector engagement, continued awareness raising on use of the tools, bespoke training for other agencies/organisations, raising awareness of our calls to action around mandatory screening, case studies to gather evidence on impact on wellbeing/changes made, sharing evidence with Scottish Government to feed into policy/practice changes and disseminate to wider UK partners (e.g. British Dietetic Association Older People Specialist Interest Group, MAPN, Patients Association).

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¹ Reid and Lido (2020) Exploring Household Food Security and Malnutrition Risk with Psychosocial Indicators of Healthy Ageing in Place: The Food Train – Eat Well Age Well Partnership Project <https://osf.io/preprints/socarxiv/6fwm8/>

² Eat Well Age Well (2020) 4 Calls to Action <https://www.eatwellagewell.org.uk/callstoaction>

³ Malnutrition Task Force and International Longevity Centre (2013) A review and summary of the impact of malnutrition in older people and the reported costs and benefits of interventions https://ilcuk.org.uk/wp-content/uploads/2019/01/Costs-Benefits_Report_Jun13.pdf