

# Investigating Capacity to Access Nutrition

## 1. Screen

### WHAT is the degree of malnutrition risk?<sup>1</sup>

Score the following questions:

Score	No	Unsure	Yes
0			
2			
1		Yes 1-5kg	
2		Yes 6-10kg	
3		Yes 11-15kg	
4		Yes >15kg	
1	Yes		
0	No		

Add scores & circle the degree of risk:

1 = Low	2 = Moderate	3-5 = High	0 = Unlikely
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Malnutrition risk exists, proceed to Step 2. Investigate

### WHAT is the potential for nutritional risk?

Score the following questions:

Score	Yes	No
2	Yes	No
0	No	Yes
1	Yes	No
0	No	Yes

Add scores & circle the degree of risk:

1 = Possible	2-3 = Likely	0 = Not Identified
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Opportunity exists for improving nutrition. If client wishes to address this, proceed to Step 2. Investigate

No further action required at this point in time

## 2. Investigate

### WHY is the client at nutritional risk?

Are weight loss, reduced food intake, changes to food access or dietary concerns due to: *(discuss with prompts)*

#### HEALTH STATUS?

<input type="checkbox"/> Chronic condition	<input type="checkbox"/> Altered nutrition needs?
<input type="checkbox"/> Acute illness	<input type="checkbox"/> Rest /recovery?
<input type="checkbox"/> Wound healing	<input type="checkbox"/> Motivation /social access?
<input type="checkbox"/> Medication change	<input type="checkbox"/> Specialist support?
<input type="checkbox"/> Pain	
<input type="checkbox"/> Mental /Emotional health	
<input type="checkbox"/> Other:	

#### PHYSICAL ACCESS TO FOOD?

<input type="checkbox"/> Disability /Impairment	<input type="checkbox"/> Kitchen access?
<input type="checkbox"/> Mobility	<input type="checkbox"/> Use of kitchen appliances?
<input type="checkbox"/> Transport	<input type="checkbox"/> Strength, balance & endurance?
<input type="checkbox"/> Cognition /Memory	<input type="checkbox"/> Planning & sequencing tasks?
<input type="checkbox"/> Communication	<input type="checkbox"/> Specialist support?
<input type="checkbox"/> Dental problems	
<input type="checkbox"/> Other:	

#### KNOWLEDGE /SKILLS DEFICIT?

<input type="checkbox"/> Special diet	<input type="checkbox"/> Expert advice in the past 12 months?
<input type="checkbox"/> Cooking	<input type="checkbox"/> Interpreting labels?
<input type="checkbox"/> Recipes	<input type="checkbox"/> Menu planning & food budgeting?
<input type="checkbox"/> Appropriate food choices	<input type="checkbox"/> Specialist support?
<input type="checkbox"/> Portion sizes	
<input type="checkbox"/> Other:	

Encourage action & proceed to Step 3. Act

If action is declined, discuss potential long term effects on health & function. Repeat ICAN monthly to monitor risk

## 3. Act

### HOW will the client be best supported?

To address nutritional risk, strategies will be: *(use prompts to guide referral)*

- Restorative (goal-directed & time-limited)
- Supporting maintenance (ongoing)
- Other (e.g. monitoring, respite)

Consider referral(s) to Allied Health for restorative intervention(s) particularly for functional gain or after a setback or in order to avoid preventable injury<sup>2</sup>

### WHO can support the client to achieve this?

<input type="checkbox"/> Dietitian	<input type="checkbox"/> GP
<input type="checkbox"/> Speech Pathologist	<input type="checkbox"/> Pharmacist
<input type="checkbox"/> Occupational Therapist	<input type="checkbox"/> Counselor
<input type="checkbox"/> Physiotherapist	<input type="checkbox"/> Domestic Carer
<input type="checkbox"/> Dentist	<input type="checkbox"/> Personal Carer
<input type="checkbox"/> Education program	<input type="checkbox"/> Meals -home /social
<input type="checkbox"/> Exercise program	<input type="checkbox"/> Other:

### WHEN will the ICAN be repeated?

<input type="checkbox"/> ≤ 1 month	<input type="checkbox"/> 6 months
<input type="checkbox"/> 1-2 months	<input type="checkbox"/> 12 months
<input type="checkbox"/> ≥ 2 months	<input type="checkbox"/> Not needed

Who will this be assigned to?

<input type="checkbox"/> DNS	<input type="checkbox"/> GP /Practice nurse
<input type="checkbox"/> Carer	<input type="checkbox"/> Key Worker
<input type="checkbox"/> Other:	

Use the SCTT Nutritional Risk Summary for referral & care coordination purposes