



## Higher National Unit specification: general information

**Unit title:** Promoting Nutrition and Hydration

**Unit code:** FN65 35

**Superclass:** NH

**Publication date:** July 2011

**Source:** Scottish Qualifications Authority

**Version:** 01

### Unit purpose

This Unit is designed to enable the candidate to gain a knowledge and understanding of a balanced diet and develop the skills to advise and support individuals in their nutrition and hydration needs. The candidate will also be able to identify those who are at risk of malnutrition and to select appropriate intervention strategies to reduce this risk.

On completion of the Unit the candidate should be able to:

- 1 Explain the contribution of diet, nutrition and hydration to health.
- 2 Promote hydration and nutrition.
- 3 Demonstrate effective interventions to reduce an individual's risk of malnutrition or dehydration.

### Recommended prior knowledge and skills

Candidates should have good communication skills, both written and oral preferably demonstrated through a communication Unit at SCQF level 6 or equivalent. Ideally the candidate should have achieved a relevant qualification equivalent to SCQF level 7 to ensure they have the underpinning knowledge to work at SCQF level 8. Exemplary candidates may still be considered through the completion of a pre-course interview part of which could take the form of a written assignment. The skills to undertake this Unit could be demonstrated through an employer's reference or the process of application and interview in the absence of certificated learning.

## **General information (cont)**

### **Credit points and level**

1 Higher National Unit credit at SCQF level 8: (8 SCQF credit points at SCQF level 8\*)

*\*SCQF credit points are used to allocate credit to qualifications in the Scottish Credit and Qualifications Framework (SCQF). Each qualification in the Framework is allocated a number of SCQF credit points at an SCQF level. There are 12 SCQF levels, ranging from Access 1 to Doctorates.*

### **Core Skills**

Opportunities to develop aspects of Core Skills are highlighted in the Support Notes of this Unit specification.

There is no automatic certification of Core Skills or Core Skill components in this Unit.

### **Context for delivery**

If this Unit is delivered as part of a Group Award, it is recommended that it should be taught and assessed within the subject area of the Group Award to which it contributes.

This Unit is part of the Group Award HNC/HND Care and Administrative Practice. However it may also be used as a standalone Unit and could be useful as part of a continuing professional development programme.

### **Assessment**

The assessment of Outcome 1 and 2 could take the form of an open-book case study. The case study should be around 1,500–2,000 words or equivalent. The candidate should analyse nutritional/hydration needs for a particular individual or group. This should include evidence of relevant factors affecting diet, nutrition and hydration. Candidates should also demonstrate their ability to contribute to appropriate support in relation to nutrition and hydration. Outcome 3 is a practical assessment that could be assessed through the Record of Achievement undertaken in the candidate's workplace and supervised by a registered practitioner.

## Higher National Unit specification: statement of standards

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The sections of the Unit stating the Outcomes, Knowledge and/or Skills, and Evidence Requirements are mandatory.

Where evidence for Outcomes is assessed on a sample basis, the whole of the content listed in the Knowledge and/or Skills section must be taught and available for assessment. Candidates should not know in advance the items on which they will be assessed and different items should be sampled on each assessment occasion.

### Outcome 1

Explain the contribution of diet, nutrition and hydration to health.

#### Knowledge and/or Skills

- ◆ Function of a balanced diet
- ◆ Current theories and government guidelines in relation to diet and nutrition
- ◆ Digestion and absorption of nutrients
- ◆ Effects of an imbalanced diet and hydration on health

#### Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ explain the function of a balanced diet in relation to the main food groups
- ◆ explain the contribution of a balanced diet and hydration to health with reference to current government guidance and theories
- ◆ explain the process of digestion and absorption of nutrients
- ◆ explain how health can be affected by an imbalanced diet or dehydration.

#### Assessment Guidelines

This Outcome should be assessed holistically with Outcome 2. For information on recommend assessment for this Outcome see Outcome 2.

## Higher National Unit specification: statement of standards (cont)

**Unit title:** Promoting Nutrition and Hydration

### Outcome 2

Promote hydration and nutrition.

#### Knowledge and/or Skills

- ◆ Social and economic factors that influence a healthy diet and nutrition
- ◆ Environmental and cultural factors that influence a healthy diet and nutrition
- ◆ Physical and psychological factors that affect nutrition and hydration
- ◆ Support individuals by promoting healthy diet and nutrition

#### Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ demonstrate an awareness of social, cultural economic and environmental factors that influence the health of an individual
- ◆ discuss physical and psychological factors that may affect nutrition and hydration
- ◆ investigate the promotion of healthy diet and nutrition.

#### Assessment Guidelines

It is recommended that assessment of this Outcome is integrated with Outcome 1 and should take the form of a case study of around 1,500–2,000 words or equivalent. The candidate could analyse nutritional/hydration needs for a particular individual or group. This should include evidence of relevant factors affecting diet, nutrition and hydration. Candidates should also demonstrate their ability to contribute to appropriate support in relation to nutrition and hydration for that individual or group.

## Higher National Unit specification: statement of standards (cont)

**Unit title:** Promoting Nutrition and Hydration

### Outcome 3

Demonstrate effective interventions to reduce an individual's risk of malnutrition or dehydration.

#### Knowledge and/or Skills

- ◆ Importance of good nutritional assessment and support in the maintenance of an individual's health
- ◆ Recognition of 'at risk' individuals in a care setting
- ◆ Referral Process for individuals at risk
- ◆ Roles of the multidisciplinary team in the area of eating, drinking and nutritional care
- ◆ Policies, pathways and strategies within a chosen clinical area

#### Evidence Requirements

Candidates will need to provide evidence to demonstrate their Knowledge and/or Skills by showing that they can:

- ◆ explain the increased risk of malnutrition and hydration in a care setting
- ◆ explain the relevance of good nutritional assessment and support during altered health status
- ◆ perform nutritional screening and develop a nutritional care plan
- ◆ explain roles of the multidisciplinary team within the area of nutritional care
- ◆ recognise and refer individuals at risk of malnutrition or dehydration to the appropriate team member
- ◆ identify current protocols, pathways or strategies within your area of practice
- ◆ demonstrate the management of a dehydrated or malnourished individual.

#### Assessment Guidelines

The assessment of this Outcome should be a practical assessment which is evidenced through a Record of Achievement. The Record of Achievement should be used for recording evidence of the candidate's competence by a registered practitioner at the workplace. At this stage in the candidate's development and practice is judged as sufficient to pass Outcome 3 when the skills are demonstrated under direct supervision. Evidence could also be generated in the form of reflective accounts.

## Higher National Unit specification: support notes

### Unit title: Promoting Nutrition and Hydration

This part of the Unit specification is offered as guidance. The support notes are not mandatory.

While the exact time allocated to this Unit is at the discretion of the centre, the notional design length is 40 hours.

### Guidance on the content and context for this Unit

This Unit is primarily intended to help candidates working in a health or social care setting to contribute to their clients' care by providing information on dietary choices in line with current research and guidelines. The candidate will also gain the necessary knowledge and skills to identify those at risk of malnutrition or hydration and how to manage their care needs.

#### Outcome 1

A balanced diet acts to provide appropriate types and adequate amounts of food and drink to supply nutrition and energy for maintenance of body cells, tissues and organs and to support normal growth and development. The following sources should be included:

- ◆ Bread and cereals, including rice and potatoes (complex carbohydrates)
- ◆ Meat, fish, poultry and alternatives (proteins)
- ◆ Milk and dairy products
- ◆ Fats and sugars
- ◆ Fruit and vegetables.

Candidates should also explore the meaning of fluid, electrolyte and acid base balance. Tutorials should include normal fluid and electrolyte balance and the factors that regulate it.

Current theories and government guideline in relation to diet and nutrition should be explored for example, to reduce the intake of fats, sugars and salt, to increase dietary fibre such as fruit and vegetables as well as the use of wholegrain products.

Current theories should include the link between diet and health in relation to health problems for example: heart and circulatory disease, hypertension, obesity, diabetes, dental caries and digestive tract disorders.

Guidelines taken from:

- ◆ Committee on Medical Aspects of Food and Nutrition Policy
- ◆ Improving Health in Scotland: The Challenge (2003)
- ◆ Eating for Health: A Diet Action Plan for Scotland (1996)
- ◆ Better Health Better Care: Action Plan (2007)
- ◆ Healthy Eating, Active Living: An action plan to improve diet, increase physical activity and tackle obesity (2008–2011)

Candidates should have fundamental information about digestion and absorption of nutrients as well as associated organs, for example, the brain, liver, gall bladder and pancreas. There should be an appreciation that there is damage or disease this could affect absorption and consequently health. Examples could include: anaemia, coeliac disease, diabetes etc.

## Higher National Unit specification: support notes (cont)

### Unit title: Promoting Nutrition and Hydration

Some of the affects of an imbalance in diet and nutrition are listed below:

- ◆ Increased fat intake — incidence of coronary heart disease and obesity
- ◆ Increased salt intake — incidence of hypertension, renal disease and obesity
- ◆ Increased sugar intake — incidence of dental disease
- ◆ Low fibre intake – incidence of bowel disorders including bowel cancer
- ◆ Obesity — incidence of diabetes, joint problems, heart disease and hypertension
- ◆ Decreased fluid intake — electrolyte imbalance, UTI.

The meaning of malnutrition should be explored and candidates examine under-nourishment, over nourishment and nutrient deficiency and how they relate to health. ie longer hospital stays and impaired immune response.

### Outcome 2

Family history — the type of diet people have been exposed to as children, how was the food prepared for example will have an effect on the choices individuals make in relation to their diet.

Culture will also have an impact, including the 24 hour availability of fast foods. Families on low incomes may buy foods, which are cheaper and have lower nutritional value because of financial restrictions. Research suggests families with higher incomes tend to have more balanced diets as they do not have the same financial restrictions placed upon them. Candidates should also explore specific cultural and religious requirements in relation to diet and nutrition and how to meet the individual's diet needs.

Availability of food - for example is there a wide variety of food on offer locally at affordable prices.

Transport — for example do they have access to a large supermarket or do they rely on smaller local shops as they perhaps do not have their own transport or there may be a lack of reliable public transport.

Unable to access cooking facilities — for example living in a B&B or being hospitalised where there may be interruptions at mealtimes and noise should also be explore.

The candidate should explore physical problems that affect eating and drinking, for example dysphagia, immobility, lack of dexterity and ill fitting dentures. The candidate should also explore how dementia, depression, schizophrenia and anorexia may affect nutrition and hydration. Client groups who may be at risk of malnutrition or dehydration, eg older adults, young children, vulnerable adults or individuals who have acute or chronic disease.

The candidate should examine factors that can lead to fluid and electrolyte imbalance, eg fasting, vomiting and diarrhoea, hypovolaemia renal and heart failure. The signs and symptoms of dehydration and fluid overload should be examined including interpreting blood results, physical examination and clinical assessment.

## Higher National Unit specification: support notes (cont)

### Unit title: Promoting Nutrition and Hydration

Candidates must examine the ways in which a healthy diet and hydration can be promoted. Tutorials should include advice on diet and nutrition, ie healthy eating and infant feeding. Protective mealtime's policies, red tray system identifying adults at risk could be examined.

Candidates should explore the use of aids and special equipment and the necessity of fluid balance and food charts. Tutorials should include examining special diets including weight reduction, high calorie and modified diets and the use of supplements. Candidates may look at best practice within their clinical area. Candidates must also ensure the involvement of the patient and significant other in the care plan at all times.

### Outcome 3

Candidates must examine why individuals are at risk of malnutrition in a care environment, ie lack of choice, timing of meals and access to snacks outside of mealtimes, altered health status, effects of treatment.

Candidates must explore screening tools and in particular the Malnutrition universal screening tool. Candidates could undertake the MUST e-learning modules available at NES. Candidates must be aware that nutritional assessment is an essential component of the admission process and must be undertaken within 24 hours of admission. Tutorials should include examining the purpose and use of nutritional screening tools. Candidate must examine the 5 steps of the MUST screening tool. Candidates should demonstrate in a classroom setting simulation of carrying out a nutritional assessment and devise a plan of care.

Members of multidisciplinary team and their role in helping individuals to meet their need must be examined. The role of the dietician, medical staff, OT, SALT, nurses, nutritional nurse specialists, nutrition champions, care assistants, health promotion nurses and family should be examined. The importance of a multidisciplinary approach to improving nutritional care should be explored and candidates must be aware that close liaison between team members will be required. Candidates should examine the referral process to team members if a patient requires further assessment. Referrals to the appropriate specialist in a timely manner must be demonstrated. The candidate may explore how to collaborate and identify needs of the individual into another care setting or on discharge into primary care.

Candidates must also explore the management of malnutrition including food fortification and weight reduction diets. Tutorials should include enteral feeding – the use of NG and PEG tube feeding, also parental feeding could be examined. Tutorials should examine nutritional supplements and texture modification diets. The role of the care practitioner in relation to the management and the accurate documentation of food charts and care plans should be examined.

Recognising patients who have fluid imbalance must be explored, ie urine amount and concentration, breathlessness and increased confusion.



## Higher National Unit specification: support notes (cont)

### Unit title: Promoting Nutrition and Hydration

The management of hydration must also be explored including fluid charts and their correct completion to allow accurate analysis of data. Assisting and aiding individuals to drink, ie special equipment, providing fresh water jugs will be examined. Tutorials should include sub cut and IV fluid monitoring and in relation to fluid overload daily weights and fluid restrictions. Candidates must be aware that once individuals have been assessed of being at risk of fluid imbalance that close monitoring is vital, and tutorials could include indications for commencing or discounting fluid charts. Cumulative totals and the rationale behind this must be discussed.

The implementation and monitoring of a personalised nutritional care plan could be carried out in practice placement under supervision of a registered practitioner.

Current policies, pathways and strategies within the candidate's clinical area must be examined. This could include:

- ◆ HIS/QIS Food, Fluid and Nutritional care in Hospitals Standards (2003)
- ◆ Clinical Quality Indicators on nutrition and senior charge nurse review examining the nutritional champions.
- ◆ Candidate's local health board action plan
- ◆ Core nutritional pathway framework
- ◆ Protocols within area of practice for recording meals
- ◆ Nutritional multidisciplinary action groups
- ◆ Nutrition and hydration policy
- ◆ Right patient right meal time
- ◆ Protected mealtimes policy

### Guidance on the delivery and assessment of this Unit

This Unit is one of the optional Units in the HNC/HND Care and Administrative Practice.

### Open learning

This Unit could be delivered by distance learning. However it would require collaboration with an appropriate local care centre to ensure the competences in the Record of Achievement were achieved and planning by education provider to ensure the sufficiency and the authenticity of the candidate's evidence.

### Opportunities for the use of e-assessment

E-assessment may be appropriate for some assessments in this Unit. By e-assessment we mean assessment which is supported by Information and Communication Technology (ICT), such as e-testing or the use of e-portfolios or e-checklists. Centres which wish to use e-assessment must ensure that the national standard is applied to all candidate evidence and that conditions of assessment as specified in the Evidence Requirements are met, regardless of the mode of gathering evidence. Further advice is available in *SQA Guidelines on Online Assessment for Further Education (AA1641, March 2003)*, *SQA Guidelines on e-assessment for Schools (BD2625, June 2005)*.

## Higher National Unit specification: support notes (cont)

**Unit title:** Promoting Nutrition and Hydration

### Opportunities for developing Core Skills

There are opportunities to develop Core Skills and Core Skill components of *Communication* — Oral Communication and Written Communication (Writing) at SCQF level 6; *Information and Communication Technology (ICT)* at SCQF level 6; *Problem Solving* — Critical Thinking, Planning and Organising and Reviewing and Evaluating at SCQF level 6 and *Working with Others* at SCQF level 6 in this Unit, although there is no automatic certification of Core Skills components.

**Communication** — this will be developed through communicating at a professional level with peers, colleagues and partnerships as well as producing reports, presentation, portfolios, essays and literature reviews.

**Working with Others** — this will be developed through the use of group discussions, group research and presentation as part of the formative and summative assessment process.

**Problem Solving** — this will be developed through collation and interpretation of data and also through the practical elements for this Unit. It could be evidenced through case discussion with clinical supervisor about most appropriate courses of action for care delivery. It also will be developed as candidates identify and evaluate a range of diet and nutrition choices available and their effects on an individual or client group.

**Information and Communication Technology (ICT)** — this will be developed by the use of software packages to present and manipulate data collected.

### Disabled candidates and/or those with additional support needs

The additional support needs of individual candidates should be taken into account when planning learning experiences, selecting assessment instruments, or considering whether any reasonable adjustments may be required. Further advice can be found on our website [www.sqa.org.uk/assessmentarrangements](http://www.sqa.org.uk/assessmentarrangements).

## History of changes to Unit

Version	Description of change	Date

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## **General information for candidates**

### **Unit title:** Promoting Nutrition and Hydration

In undertaking this Unit you will learn about what constitutes a balanced diet and how diet and hydration can affect the health of the individual. It will also give you knowledge of factors, which affect dietary choices including psychical, social and environmental factors and how to support and advise individuals to make healthy choices in relation to their diet, using current guidelines. You will also learn how to undertake a nutritional assessment and assist in the management of nutritional and fluid needs that an individual may require.

To complete the Unit successfully, you will have to achieve a satisfactory level of performance in two pieces of assessed work. Outcome 1 and 2 will be in the form of a case study which will be around 1,500–2,000 words or equivalent. You will be required to integrate all of the learning for Outcomes 1 and 2 within this case study. Outcome 3 will be a Record of Achievement undertaken within your clinical place of practice.