

Many factors play a role in putting older adults at risk of poor nutrition. Care providers who are aware of the signs and screen for nutrition risk can help older adults access resources and referrals to improve their risk and reduce consequences.

Welcome to Nutrition Screening in Your Community: A Training summary session for Nutrition Screeners.



SCREEN is a validated nutrition screening tool for use with community-dwelling older adults created by Dr. Heather Keller. It has been designed to be administered by a health professional, community volunteer, or can be done by the older adults themselves.

It is easy to do and only takes 5–10-minutes. It identifies nutrition problems early on, or "upstream".

SCREEN can be used to identify those who need nutrition education, community resources, or a comprehensive assessment to determine the extent of their nutrition concerns, and to diagnose malnutrition.

Nutrition Services recommends asking two additional questions. One question to screen for financial strain and another question to ask about for food access such as their ability to get groceries.



We recommend the following 5 steps when doing nutrition screening

Step 1: Tell the older adults that you are completing the SCREEN8 questionnaire to learn about their eating habits and factors that impact them. Explain that the results will be used to help determine if they might benefit from education about food and eating behaviors, community services, or referrals to other healthcare professionals.

Step 2: Assure the older adult that you will keep their responses and results private. Obtain verbal consent to do nutrition screening. Ask them if they have any questions or concerns before starting. Reassure them about any areas of uncertainty before beginning.



Step 3: Nutrition screening should be done by a healthcare provider, outreach worker, or trained screener rather than done by the older adult themselves. Remind the older adult to choose only one answer for each question. Read the question slowly, and provide each potential response. If there are any doubts about an answer, **choose the response that has a lower score.** Aim to complete the entire questionnaire before discussing resources/strategies.



Step 4: If using a paper copy of the SCREEN8, add up the score. Double check for accuracy. Find which category of nutrition risk their score places them in. Explain results to the older adult (there is a brief script included on questionnaire to help you).

Step 5: Using the tool Making SCREEN8 Happen: Referrals and Resources, identify appropriate resources and services based on their answers scoring≤2, prioritized by the question. Provide resources if the older adult is interested. Obtain consent before referring to outside services.

	0–21 High Risk B a a e si h	Sased on your answers today, we have identified a high nutrition risk. This means that you are ta greater risk of developing health problem related to your nutrition. I volid like to ofter you referral to a dietitian (and/or other appropriate referral) to address your specific risk factors ind help prevent mainufition. Mainufition is a health condition that comes from not getting noogh nutrition that your bady needs. Benefits of good nutrition induce: more energy, tronger muscles, lower chance of getting sick but quicker recovery if you do, and shorter cospital stays.	
	22–37 Moderate B Risk g sv m y v c	Based on your answers today, you may be at nutrition risk. This means that you are at a preater risk of developing health problems related to your nutrition. I would like to offer you one resources and supports that can address your specific risk factors and help prevent natrutrition. Mainutrition is a health condition that comes from not getting enough nutrition that our body needs. Benefits of good nutrition include: more energy, stronger muscles, lower hance of getting sick, but quicker recovery time If you do, and shorter hospital stays.	
Added	> 38 Low Risk B	ased on your answers today, you are at low nutrition risk. This means that you are at a low isk of developing health problems related to your nutrition. I would like to offer you some	Purple text
questions:	re	esources and supports to help you stay healthy.	Prompts and
Financial strain	 community supports e. How much money situation? <i>If no, g</i> Do you ever have 	or benefit programs if needed. y you have to buy food affects your nutrition. Is it ok if I ask you about your financial go to next question. ve difficulty making ends meet at the end of the month? Yes or No	nutrition
Food	10. When physical m	nobility and transports are limited, it can be hard to get healthy foods.	
access	Deferrale (check all	Interity getting your groceness. Thes of the	-
	Dietitian Primary Care Networ Physician	rkat appiy): Referral declines	1
	Home Care		
	Home Care Denturist Handouts & webpage	: links provided (if appropriate):	

The original SCREEN8 has been modified with permission with the addition of questions 9 and 10. One question to screen for financial strain and another question to ask about food access, specifically their ability to get groceries. These questions are not scored so not to invalidate the questionnaire. However, you will be coached for how to incorporate the responses into the assessment.

Several questions on SCREEN8 require judgment responses such as rarely or sometimes. These are defined for you and prompting questions have been added directly to your questionnaires (in purple).

At the bottom of the SCREEN-8 a section has been added to allow the nutrition screeners to document if a referral or resources are desired by the client, and if so, what was provided.

Now for a refresher for how to complete the questions.



As an example, let's use Question 1: Has your weight changed in the past 6 months?

This question is trying to assess any weight change that may increase the older adult's nutrition and health risk.

For this question, here are some scoring tips:

- Record the **most recent** weight change.
- If the older adult's weight fluctuates by about 3 pounds, mark "no".
- If the older adult has lost or gained a large amount of weight (like 5-10 pounds) in the past 6 months, but then re-gained or re-lost only a few (about 3 pounds), calculate the net gain or loss to help you select a response.

It may be helpful to give the client a reference time of 6 months ago. For instance, a prompting question could be, "has your weight changed since October?" and so on.

For the response: Yes, I lost more than 10 pounds – encourage a referral to dietitian. Indicate in the referral if their weight is continuing to go down or if the weight loss has been intentional. Unintentional weight loss indicates a higher risk, but is scored the same on the SCREEN.



Net weight change is the overall change in weight from the starting point.

Question 1 may require you to calculate the net weight change of the older adult. For example:

If the older adult tells you that when they were in the hospital 2 months ago, they lost 15 lbs.

Since they have been home this past month, they have regained 10 lbs.

15 lbs lost subtract 10 lbs gained equals a net or overall weight change of 5.

The net difference is 5 lbs lost. This number would be used to answer question 1.



The net difference is 5 lbs lost. This number would be used to answer question 1.

As you go through the remaining questions, continue to use the prompts and tips written in purple.



Questions 9 and 10 are unscored questions that ask about income and social circumstance, as well as food access. Like questions 1 through 8, prompts are offered, however, with these questions, slightly more descriptions are offered.

Question 9 is purposely vague to allow the older adult to answer with what it means to them. If they need some prompts, you can ask if they are able to pay their bills routinely, if they need to budget for food between pay cheques, and so on.

The more screens you complete, the more comfortable you'll get exploring the older adults' social situations in ways that feel right for each interaction.

Question 10 is about food access and allows for individual interpretation by the older adult. For some it may mean being able to get to the grocery store, bringing groceries up the stairs into their home, or for some it may mean being able to consistently afford groceries.

Each question can help you connect the older adult to community supports or to benefit programs if needed.



While you are screening the older adult, to support understanding of the question's intent, keep in mind framing the prompts and questions around "what is their **usual** behavior".

Does the older adult understand what you are asking them?

Was their response worded appropriately?

If you're unsure, ask the question again. But this time, use some prompts provided or others as you feel more confident in your skills.

Remember, the lower the score the higher the risk that is identified.



As mentioned, only the first 8 questions are scored.

As you can see on the left side of the question, there are multiple, weighted response options. The numbers to the left of each response option are the score for that question.

Lower the score, more indicative of nutrition risk.



Add up the score of the response options for all the scored questions. Repeat step 1 to ensure that it is correct. If you are using an electronic SCREEN8, the math is done for you.

How to score SCREEN-8 [©]				
		Sample script	Total Score: 0	
0–21	High Risk	Based on your answers today, we have identified a high nutrition risk. This means that you are at a greater risk of developing health problems related to your nutrition. I would like to offer you a referral to a dietitian (and/or other appropriate referral) to address your specific risk factors and help prevent malnutrition. Malnutrition is a health condition that comes from not getting enough nutrition that your body needs. Benefits of good nutrition include: more energy, stronger muscles, lower chance of getting sick but quicker recovery if you do, and shorter hospital stays.		
22–37	Moderate Risk	Based on your answers today, you may be a greater risk of developing health problems re some resources and supports that can addre malnutrition. Malnutrition is a health conditio your body needs. Benefits of good nutrition i chance of getting sick, but quicker recovery to	t nutrition risk. This means that you are at a elated to your nutrition. I would like to offer you ass your specific risk factors and help prevent n that comes from not getting enough nutrition that nclude: more energy, stronger muscles, lower time if you do, and shorter hospital stays.	
> 38	Low Risk	Based on your answers today, you are at low risk of developing health problems related to resources and supports to help you stay hea	v nutrition risk. This means that you are at a low your nutrition. I would like to offer you some lthy.	

The total score of the 8 questions indicate the level of nutrition risk. For each outcome, there is a sample script to help you communicate to the older adult what their final score means.

The lower the score, the greater the nutrition risk is. Scoring "high nutrition risk" with SCREEN8 is associated with poor health outcomes, such as reduced health-related quality of life, increased hospitalization risk, and increases risk of mortality.

The script provided beside each risk category helps you to explain to the older adult what their score means for them.



This is the Nutrition Care Pathway for Older Adults 65 and older. This pathway can help you go through the steps after completing the SCREEN-8, including suggestions for clients who score as low, moderate, or high nutrition risk. This pathway is paired with Making SCREEN-8 Happen: Referrals and Resources tool.



Making SCREEN-8 Happen: Referrals and Resources is a tool that presents the nutrition screening questions in order of risk to the patient starting with questions about weight change, appetite, and dysphagia followed by the additional poverty and food access questions.

Key messages are provided for you to offer additional information to your client about associated risk with scoring high on that question.



On the bottom of the SCREEN8 you can document which resources you have offered the older adult. This includes a drop-down list of the handouts listed in the Making SCREEN8 Happen tool, which referrals you have provided, or if they decline a referral. You can also enter any community specific resources or services in the blank text boxes.



To learn more about nutrition screening or view resources and tools available to you and your clients: visit ahs.ca/NutritionScreening or contact a public health dietitian in your area by emailing publichealthnutrition@ahs.ca